This report was produced by independent experts, and should not be taken to represent the views of the European Commission.
This report has been prepared for the EC Commission (DGV) with the cooperation of dr. Nicola Negri and dr. Manuela Olagnero, of the Department of Social Sciences, University of Turin. The author thanks the Istituto per la Ricerca Sociale (IRS), Milan, and the IRES/CGIL, Rome, for their cooperation.
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PART I. THE INSTITUTIONAL FRAMEWORK

1. GENERAL FEATURES OF THE ITALIAN WELFARE STATE AS COMPARED TO OTHER EUROPEAN COUNTRIES

a) Social rights in the Italian society

According to the Italian Constitution, Italy is a republic based on labour. Furthermore, it also protects the right of workers to live according to their previous standard of living when old or disabled, while grants to the non workers the minimum necessary for survival.

Full citizenship, therefore, is reached through paid work, but it is not clear if having a job is a citizenship right, particularly, but not only, for women.

The different rights between workers and non workers set in the Constitution find detailed application not only in the different pension rights of the elderly even at the minimum level, but in the fragmented, discretionary protection granted to the non workers. At the same time, the Constitution protects the family as both a "natural society" and as a natural right - so much so, that successive legislation has established the principle that children have a right to an adequate family, through adoption if they have none, or through fostering if they have a more or less temporarily inadequate one. But the unity of this family, the caring it must provide in the "republic grounded on work" is constitutionally based on a potential inequality between husbands and wives (see art. 32, which stipulates that husbands and wives are equal in the family, "once the unity of the family is granted) and de facto on restrictions and discouragement women-wives-mothers from full participation in paid work, therefore in citizenship through paid work (Saraceno 1990).

We do not intend to develop further this kind of reasoning here, also because many different laws and practices have partly modified the constitutional script. But it was important to indicate the constitutional framework of social rights in Italy. As in most countries, for the most part they are strictly linked to the working status: both to the fact of working for pay and to the specific location of the specific job held within the occupational structure and within the social security system. Not having a, regular, job at the same time constitutes de facto a barrier to access to other rights: to public or subsidized housing, to emergency lodging when evicted, to low cost loans and so forth.
Only two social rights were up to now granted on an universal, not work-linked and not-categorical basis: health care and basic/compulsory schooling. We will see below how access to these two rights might be limited due both to social inequality and to geographical location. But the real and worrying novelty is that the Government Decree approved in September 1992, if approved by Parliament, will restrict universal health care to hospital care, excluding a large quota of the population (about 20 millions, depending on the income threshold which will be definitively set) from all other services in the national health system.

Differences are even greater in locally distributed public resources, i.e. in locally defined social rights: childcare services, at home help for the handicapped and the frail elderly, social services in general and social assistance services in particular, vital minima and so forth.

At the same time, one should point out that much Italian social legislation is from many points of view very progressive, at least on paper. Principles are forcefully set out in legislation (I just mention here the law n. 180 which opened up psychiatric hospitals, giving back to the mentally ill their citizenship rights; the recent law on immigration and that on the handicapped). What is particularly lacking in this national context is a focus on, and attention for, both the organizational structures and personnel which are responsible for the implementation, and on the implementation process itself. From this lack of attention, which is probably a specific feature of Italian administrative and political culture, comes much of the fragmentation and dishomogeneity of policies,

b) The Italian welfare state as a variant of the corporatist welfare regime

The Italian welfare state developed mostly during the seventies and beginning of the eighties, approaching European average levels of protection (during the fifties the degree of social insurance coverage in Italy was the lowest in Western Europe, due to the reduced pension and unemployment coverage) (Ferrera 1984, Flora and Alber 1981, Ascoli 1986). Also most social services developed during the same period.

Social analysts agree in defining the Italian welfare state as a "clientelistic" variant of the "particularistic-meritocratic", or corporatist, social state which is typical of Continental Europe (see for instance Paci 1984 and 1989, Ferrera 1985, Ascoli 1986, Esping-Andersen 1990). In so called "particularistic-meritocratic systems" the distribution of cash incomes is privileged over the public provision of social services, and benefits are granted mainly on the basis of the occupational status of recipients, with a strong emphasis on their contributive and work history. There is also a relative financial autonomy of the different institutions, in whose boards beneficiaries are represented. Therefore, there is fragmentation and heterogeneity in provisions, together with a degree of control by different categories. Within this
institutional particularism, however, tendentially impartial and standardized criteria operate: the public allocation of social protection resources, although differentiated on the basis of existing occupational and social inequalities, is certain and based on objective criteria. Institutional particularism is not, on principle, accompanied by discretionary power or by dependency of beneficiaries on the favours of politicians.

In Italy, on the contrary, categorical particularism and fragmentation are neither based on financial autonomy nor on real control by representatives of the beneficiaries. Rather, they are based on control and negotiation by political parties, who use social expenditures as a means to gain consensus. Social analysts have defined the lack of autonomy of civil society with regard to the state in Italy as “clientelistic dependency” (Farneti 1978, Graziano 1979, Tarrow 1979, Paci 1989), and the Italian case as one of “party government” (see also Rusconi and Scamuzzi 1981). In the words of Ferrera (1985: 271-72), “Nowhere else (not even in countries characterized by a high institutional fragmentation of provisions and policies) one can detect such an intense diffusion of particularistic patterns of providing benefits... The party-clientelistic manipulation of social security provisions is an almost unique phenomenon of our country”.

This does not mean that there are no universalistic measures. As mentioned above, compulsory education and, to a large extent, also high school education (which in Italy is not compulsory) are free in Italy. Even university education is cheap, and this is by some analyst interpreted as perverse kind of re-distribution, in so far the costs of university education are supported by all tax payers - even by those, who are the large majority, whose children do not attend the university. Public (state or local government organized) and non profit, publicly subsidized kindergartens for 3-5 years olds cover about 80% of children in this age bracket. With the institution of the National Health Service in 1978 health services (financed through workers' and employers' contributions and through general taxation) had become universal, although in recent years tickets had been introduced for most of its provisions.

Yet, given the fact that the provision and organization of these services is left to local authorities there may be a great variation locally, both in the quality and in the quantity of services available. This is particularly true of personal social services such as nursery schools for children under three, at home help for the elderly and handicapped, school cafeterias, family clinics and so forth. Moreover, the clientelistic distortion of many welfare state provisions has transformed the planned control by users in political parties' control. This has been the case, for instance, of local health boards, as it is now acknowledged by trade unions, political parties and the Ministry of Health itself.

It must be noted, moreover, that the distinction between social assistance and social security - that is, between provisions which are residual, ad hoc, for particular categories of the needy, and
provisions which are based on contributions - as well as the distinction between social assistance and universalistic measures are not always clear cut in Italy, given the piecemeal development of the welfare state. Sometime measures are defined - in budget terms - as pertaining to social assistance only because they first developed within a social assistance department. This is the case, for instance, of nursery schools for children under three (aimed mostly at children of working mothers), but not of kindergartens, which pertain to the school department even if they are not compulsory. Supplementary benefits paid to old age pensioners who would otherwise not reach the minimum pension are defined as social security expenditure, while social pensions paid to elderly people with no economic means are defined as social assistance. At home help for the handicapped is defined as social assistance, hospital long term care of the same is defined as health service. And so on and so forth.

Different analysts have proposed different ways of grouping social assistance expenditure and there is no consensus, although generally social analysts agree that existent distinctions are inadequate (see for instance Commissione Povertà 1985, Artoni and Ranci Ortigosa 1989). It is not only a question of terminology, of course, since social assistance measures are usually more disposable of and more likely to be clientelistically manipulated than those defined as labor or social rights. It becomes also a methodological and data problem, in so far it determines how budgets are prepared and where (and if) the different items can be found.

As a consequence of its clientelistic-particularistic characteristics, five specific features of the Italian system of social protection may be detected:

a) The continued - from the postwar years up to now, even if with the notable exception of the seventies, when most of the system of public social services was developed - privileging of different measures of income support, against not only the provision of services but also of a full employment policy (Paci 1986, Ascoli 1986, Artoni and Ranci Ortigosa 1989).

b) A wide differentiation not only of provisions between workers and not workers, but for different categories of workers as well as for different categories of needy. Among workers there are differences in rights and coverage between state employees and private sector employees, and, within the latter, between those employed in large industries and those employed in small firms. Differences concern not only coverage in the case of unemployment and redundancies, but also regulations concerning pensions (Castellino 1976, Commissione per l’Analisi dell’Impatto Sociale, 1990).

c) A strong reliance on the family and on kin networks (as well as on their gender structure) to provide both caring services and income support to family members not present in the labor market. This, in turn, while it renders the young dependent on their...
parents for a long time, renders it difficult for women with family responsibilities to become economically self-sufficient.

d) A wide differentiation of social assistance measures: there are as many poverty lines, vital minima and the like as there are means tested measures and providing actors.

e) A wide differentiation of welfare state measures across the country, particularly on a Center-North/South basis, but also among different provinces. Within an overall constant privileging of income support, as against social services provisions, in fact, not only there is a great difference in the kind of income support measures distributed in the different regional areas, but also in the availability and quality of public social services.

Territorial differentiation in Italy, as a matter of fact, makes it difficult to delineate any "average" description of processes and situations. Many social analysts maintain that the interplay of local political and social traditions, economic development and formal and informal systems of social protection give rise to distinctive social formations, which cannot be analyzed along a continuum, but must be understood both in their specificity and in their interplay. After the fortunate and brilliant book on Three Italies by Bagnasco (1977), many analyses have been developed on this subject, even if they have privileged more the economic sub-systems than the social welfare ones. No Italian social analyst, however, would address any general question - from labor market dynamics to demography - in an "average" or global way, without addressing the issue of territorial diversities and inequalities. This does not mean that these differences and inequalities remain the same over time and also that the general regional divisions which are used in routine presentation of data (North, Center and South, or North-West, North-East, Center, South and Isles) are internally homogeneous. On the contrary, on the one hand inside a geographical division there may be as many economic as well social policy differentiations as among different geographical divisions; on the other hand, the "South" (il Mezzogiorno) in recent years has become increasingly differentiated - so much so that many observers are debating the usefulness of such a category in economic and social policy analysis. Although in presenting the available data I will use these rough geographical divisions, these conceptual and analytical problems should be kept in mind.
2. WHO DOES WHAT? THE ACTORS

a) Institutional public actors: ministries, local governments, local departments

The fragmented and particularistic nature of social policies in Italy has both as its cause and its effect a fragmentation not only of laws and regulations, but also of institutional actors that have some kind of responsibility in the field of social security and social assistance (see also Dente 1985).

The first distinction is between state level ministries and institutions (with their laws and regulations) and local governments, which are further articulated in regional, provincial and municipal, with different competences. In general, we might say that education and social security (unemployment benefits, including earning integration and special unemployment indemnity, seniority and old age pensions and pensions for the disabled, sickness benefits, maternity leaves, health services) are state regulated and provided, while social assistance is delegated, by law, to local governments. This is only partly true, however, since within the pension system totally or partially social assistance provisions are administered as well, such as social pensions, invalidity pensions, and supplemented old age pensions. These are administered directly at the central level as well. At the same time, local governments administer and provide services which can be defined "social assistance" only in so far this is a residual category with regard to social security: not only home help for the elderly poor and Vital minimum for individuals and families with inadequate economic means, but also childcare services, school cafeterias, after school activities, the provision and maintenance of school and of health services buildings - i.e. services for citizens in general. They are also responsible for the organization of the health services (from public hospitals to family doctors) themselves (and while school and university teachers are state employees, workers within the public health system have a, albeit state regulated, different contract). Local governments also organize job training and implement national legislation in the area of employment policy.

Within this state and local government distinction, further distinctions (and fragmentations) may be found at each level.

At the state level, there are the different laws and regulations promoted by the different ministries to address the problems of various categories of citizens and/or need - e.g. the Ministry of Labor and the Ministry of Social Security for what concerns labor security, unemployment benefits, different measures such as Earning Integration, Special unemployment indemnity, sickness and maternity benefits, old age or seniority pensions and other kinds of pensions; the Ministry of Agriculture for measures concerning benefits to rural workers and families; the Ministry of Health for regulations concerning the organization of health services and the definition of what should be included within them; the Ministry of the Interior for what concerns the disabled, minors, vagrants, as
well as immigrants. In the second half of the eighties a ministry for Social Affairs, without portfolio (that is without a budget of its own and depending directly from the Prime Minister office), was created, which too should concern itself with a wide range of problems which overlap with those traditionally allocated to the Ministry of the Interior: from minors to drug addicts to social emargination. And in 1991 a new Ministry, again without portfolio, was created specifically for Migration, not to be renewed with the new government after the April 1992 elections.

Moreover, each Ministry has particular regulations concerning the social security rights (or privileges) of its own employees. And all them compete and negotiate with the economic Ministries (Finances, Budget and Treasury) to obtain benefits for the interests they represent. As a consequence, different protections from lay off and firing exist not only between the private and the public sector (civil servants and state employees may almost never be fired or laid of and even made redundant with recourse to earning integration), but also both within the public sector and within the private sector, in the kinds of protection granted, in the level of contributions to be paid, in the degree of intergenerational and intercategorical solidarity which is asked for, and so forth. For instance, it has been calculated that the institutions which administer compulsory social security schemes are about 30 and the categorical regulations on which public control exists are 43 (P. Saraceno 1989: 193). A reform of the pension system which has been a standing issue - with many bill proposals - in the past few legislatures, is now again under discussion and will probably be approved, under the threat of state bankruptcy, by the end of 1992.

Thus, even at the national level the fragmentation of competences and the prevalence of a categorical and clientelistic approach give way to a fragmentation of actors and of policies. In turn, this frames a legal and social lexicon by which different categories of “entitled” and “needy” are acknowledged and labelled.

Particularly, official, regular workers, through state legislation and provisions, are entitled to different kinds of income support when in need, while not being labelled “poor”, “welfare recipients”, nor “socially excluded”, nor “marginal”. The elderly too, as a social group, although with great differences according to their past work history and category, in the past decades have increasingly entered the group of the entitled (see also data in OECD 1988: ch.3). Unofficial, irregular workers, long term unemployed, unemployed youth, poor lone mothers of minors, together with drug addicts, mentally ill, vagrant homeless, on the contrary, are more likely to be addressed by policies which have these kinds of labels. This in turn involves that a) these groups are more often left to local initiatives and measures; b) the measures addressed to them are more often “means-tested” and discretionary; c) these measures do not so much grant rights as ask for tasks to be fulfilled in order to obtain the benefit (standard of cleanliness and orderliness must be kept in the house, training classes must be attended, jobs must be accepted
with little choice, and so forth), with a high degree of control and discretionality on the part of social services and social workers. At the same time, one must also keep in mind that locally based and provided measures may be more sensitive to the special needs, resources, and circumstances both of clients and of the community they live in.

At the local level the actors, and the policies, are multiple as well. First, as already mentioned, the local level must be distinguished in regional, provincial and municipal. Each level has different competences, in legislative as well as in concrete intervention terms. Law n. 142, 1990 has definitively established that all "administrative functions in the area of social services concerning people living in the municipality should be allocated to the municipality". Provinces, therefore, have lost their competence in the area of services for minors and the handicapped. This, while allowing a greater nearness to where needs arise, may cause a greater fragmentation and dishomogeneity among municipalities within the same region. At the same time, there has been a redefinition of competences between state and municipalities, through a redefinition of services provided by each: for instance, while special, supporting teachers for the handicapped, formerly a municipal responsibility, are now a state responsibility within the framework of the handicapped's right to education, measures and services targeted to students with irregular school curricula and behaviors are now defined a municipal responsibility, falling within social assistance and not within education. Also within the health system national, regional and municipal responsibilities are in the process of being redefined, with more power (including that of raising taxes to finance excess expenditure) and responsibility given to the regions, and less power of control and decision (for instance concerning where the services should be located) left to the municipalities. Only the large cities will maintain a degree of control on the organization of the health services located on their territory.

Second, since local actors act as well as the local branch of state policies and of centrally regulated policies, there may be great variation in the actual implementation of national policies: through different criteria and degrees of efficiency and management (this is particularly clear in the case of health care services, where the cost per unit can vary widely), as well as through the setting of different priority criteria, therefore through a different - local - balance of acknowledged social rights and/or needs. This is clear, for instance, wherever a "queue" towards a benefit is created (access to public housing, access to childcare services and so forth).

In any case, the range of competences and interventions at the local - regional, provincial, municipal - level is wide: A part from the organization of health services, it includes a) direct income support to individuals and families, b) indirect income support through temporary employment in public works; c) indirect
income support through the provision of social services such as at home help, community centers, shelter (in old people homes, institutions for minors or the handicapped), childcare centers either targeted only to those in economic need or defining fees on the basis of an income-linked sliding scale, first hospitality centers for immigrants and so forth. Moreover, local governments are responsible for professional training. They also are the main actors in the area of measures aimed at the job insertion of the most disadvantaged and socially emarginated groups and individuals: handicapped, long term unemployed, school drop outs, children and youth coming from families at risk, people out of prison and so forth.

Different local governments offer various combinations of these, and other, measures, which are administered not only by different levels of government, but also by different departments within them. They may also sign contracts with non profit institutions (volunteer associations or social cooperatives) in order to have specific social services organized, or activities (e.g. job insertion of socially emarginated persons) performed.

Distinction, as well as fragmentation, between state and local government responsibilities and policies exist also, and even more, in policies addressed specifically to the most "marginal and not socially integrated groups", which include homeless people, gypsies, incarcerated people, mentally handicapped persons, and "deviant minors". On the one hand, at the national level, able bodied homeless people are defined as socially dangerous (therefore liable to be imprisoned); on the other hand, measures are taken to insert "marginal groups" into the social fabric; health care is extended to gypsies, who may also ask for vending licences and for camping permits; gypsy children are expected to attend compulsory education, with the support of special teachers; the handicapped are entitled to support services in the school, to help in trasportation, and are the target of special job-insertion projects; immigrants who legalize their presence in the national territory may receive health services and apply for unemployment idemnity, as well as for the - scarce - public housing; insertion measures must be taken for incarcerated people, and so forth.

b) Non profit and volunteer agencies at the national and at the local level

Both at the national and at the local level other actors are present as well, particularly in the area of solidarity towards the most marginal groups.

Trade unions are such actors, although they are usually not perceived as volunteer or non profit associations. Beside protecting the workers's rights, trade unions as a matter of fact are vocal in a number of fields, from housing to health services, although they often (as in the latter case and generally when public services are involved) may represent within themselves divergent interests: those of citizens and those of the workers in
that particular sector. To different degrees unions sometime try to act as “citizens’ associations” and one of them in particular - UIL (socialist by inspiration) - has recently defined itself a “citizens’ union”. Trade unions, and particularly the CGIL (communist and socialist by inspiration), are active also in the area of immigration, both advocating a better protection for the immigrant workers, and offering them legal advice, literacy classes, opportunities for organizing at the local level.

Apart from trade unions, there is a number of institutions and organizations with a more or less long history which organize volunteer activities and advocacy initiatives in the area of social emargination. First of all, there is the Catholic church (as well as other confessions, although they are largely minoritarian in Italy). Particularly, the parishes have a long tradition of helping “their” poor either through specific associations (such as the S. Vincenzo), or directly. Recently, their focus is mainly on the isolated elderly and Third world immigrants.

Alongside the Church, national religious institutions such as the Caritas, as well as more locally based religious groups, develop initiatives aimed to the poorest and most marginal, with the help of volunteers and sometime being financed by the state and/or local governments, in addition to receiving benevolent donations. Besides offering meals and garments, they increasingly offer training and insertion services, often in cooperation with local public social services, and act as advocates of the groups they “protect”, lobbying for (or against) legislation. A recent survey, commissioned by Caritas Italy, on social assistance services which have some kind of linkage with the Catholic church found about 8,808 different active units, whose activities are targeted to about 18 different categories of recipients. Among the 4,099 units which have completed a questionnaire, 42.4% of all activities are targeted to the elderly (mostly in institutions), 39% to children and youth at risk (mostly in institutions), 24% to the handicapped (heavily concentrated in the North), 15% to unwed mothers and to families with problems, 12% to drug abusers, alcoholists, AIDS bearers, 10% to homeless and foreigners. The remaining activities are variously targeted to incarcerated and formerly incarcerated people, to the sick, to gypsies (Sarpellon 1991, Caritas 1991).

In the specific area of drug addiction a number of different associations have developed, usually around a particular method and/or leader. Some of them, like the S. Patrignano community directed by Muccioli, are large, but located only in one place; others, such as the Gruppo Abele, although they developed in one specific town (in this case Turin), have set up networks in different parts of Italy. In the case of the Gruppo Abele, moreover, although drug addicts are the main target, social emargination is the general focus. Therefore, there may be small homes for terminal AIDS children nobody wants, supervision and hospitality for vagrant adolescents and so forth. They also have a publishing house and organize training classes both for volunteers
and for social workers.

With regard to multi-problem families and particularly to children in them, there is a number of volunteer associations which act both in support of public services and in alternative to them, often with a crucial advocacy role. For instance the ANFAA (The association of adoptive and foster families) had a crucial role in lobbying for the law on adoption and on fostering, as well as in inducing public authorities in setting up services to find and support foster families. It is also highly vocal in denouncing any abuse they perceive is being perpetrated on children and their families by public authorities, in some cases taking very controversial sides. Telefono azzurro (blue phone) is another volunteer service (children, but also adults may call denouncing possible abuses), acting at the national level which, in cooperation with local social services, aims at giving help to children in violent families and to their parents.

As a matter of fact, non profit and volunteer associations and groups are the main providers both of services of any kind (income, legal, home, training) and of advocacy to four specific groups of potentially fragile and socially emarginated groups: drug addicts, the homeless, children at risk, and Third World immigrants. Therefore, they are often the main national and local government interlocutors both in preparing bills (even with divisive consequences, as in the case of the law against drug use) and in offering services, more or less financed by the state or local governments. A distinction, however, should be made (see also “Editors’ note”, Prospettive assistenziali, 96, ottobre-dicembre 1991), among a) volunteer associations and activities who work for the socially excluded, yet refraining from intervening in the social, legal, political conditions within which social exclusion is created; b) volunteer associations who are also active in the social and political sphere; c) volunteer associations who mainly act in legal and social defense of the weakest and most marginal groups, sometime against public services and institutions themselves, in so far these are perceived as being responsible of malpractice or of denying rights.

Many local laws explicitly regulate the relationship between the public sector and the so called voluntary or non profit sector. Law n. 266, approved in August 1991, now sets the legal framework for such relationship, defining what is a volunteer association (therefore being entitled to special fiscal treatment) and which kind of financial arrangements may be developed with local governments towards specific aims. Another law, n. 381, approved in November 1991, regulates the relationships with the non profit sector, particularly with the so called “social cooperatives”. These two laws will be analysed in the third part of this Report.

The presence and activities of all these non profit actors in the various local contexts is even more differentiated than that of the institutional, public, actors. The availability, therefore, of the services they offer can make a crucial difference for the
people involved, in the absence of a real public policy in these problem areas (although, here too, there are local differences) (On the different features, activities, dislocation of non profit actors see Bassanini, Ranci 1990).
3. POVERTY AND SOCIAL EXCLUSION IN THE PUBLIC DEBATE

a) social exclusion in the political debate

Poverty has no great legitimization in the Italian political debate (see also Saraceno 1986). One might suggest that this is so because, on the one hand, the Left perceives it as a potential attempt at separating the question of poverty from that of unequality and even injustice: focusing all redistributive measures on the “needy”, therefore dismantling that little universalistic welfare state that exists (see for instance the debate in Artoni and Bettinelli 1987). Moreover, the Left has traditionally focused on the protection of workers’ rights and on demands for a full employment policy. It can, therefore, address the question of poverty linked to the lack of employment or to low wages; but it lacks an adequate theoretical and political framework to address the question of poverty, and even more social exclusion, deriving from family composition and life cycle events, from the gender division of labor and so forth. On the other hand, the somewhat surprising lack of attention in the Center parties and particularly within the Christian Democrats for an issue which is a traditional one in Catholic platforms in other countries, can be explained with the social structure of the electoral consensus and strength of Christian Democracy: with its many and fragmented clienteles whose interests would be more or less severely touched if that fiscal reform and justice needed to develop a social assistance based on objective and universalistic criteria were seriously implemented. It is easier, and politically more convenient, to pass piecemeal measures, to add further categories to be benefitted, than to radically reform the existing system, with its many stratifications of vested interests.

The political impossibility of a fiscal reform (together with that of public administration) seems to be the permanent stumbling block against which any proposal to reform social assistance or to develop an anti-poverty policy is likely to fall in Italy. It is no chance that, although pending since many years in Parliament, the national social assistance law, which should give a framework to local laws and regulations, has yet to be discussed. As a matter of fact, regions developed their own social legislation in the lack of an unitary framework.

It is interesting to note that after the Parliamentary Inquiry on Misery in Italy in the fifties, poverty became again a matter of political interest with the first Socialist in government in 1984, when a Poverty Commission composed by experts was instituted and wrote a report advancing also a few policy proposals. That Report and those proposals, however, were never publicly discussed in Parliament or in parliamentary Commissions, but only in newspapers, experts’ seminars and in political meetings mostly organized by trade unions and by the PCI. The findings (an estimated 11% of people living below half the average income) were received with surprise and uneasiness, although they corresponded to data found in other EEC countries; and the proposed
rationalization of policies was dismissed without discussion. The Commission itself was first put aside, then, after a somewhat confusing period re-instiuted - with its name changed to Commission for the Study of Poverty and Social Exclusion in 1990. In 1992 it published a second Report on Poverty in Italy, which, although adjourning the data presented in the first, it does not add any new substantial analytic dimension. Its main methodological contribution is the construction of a social emergency index, which cumulates both the informations on how poverty is distributed among the various social groups and the informations on how numerous are the different groups of poors (see Commissione d’indagine, 1992, ch. 2). In the words of its chair in the Presentation of the Report, the limitations of the second Report are mostly due to the lack of financial and organizational support, which has compelled the Commission’s members to use their own and their institutions’ resources.

Another Commission, instituted in 1989, the Commission for the analysis of the social impact of legislative measures, which should have had in part the task of the present Observatory, had an even worse destiny: it worked for only one year, with virtually no funding and was not renovated. It presented a first report on the (perverse) redistributive effects of the present pension system, but others had been planned: on the impact on families with different sizes and incomes of the fiscal measures taken with the financial law of 1988; on the availability of social services for children and the old in different regions, selected on the basis of their demographic and economic structure; on the feasibility of introducing a universal basic pension for all the elderly. The preliminary work of this Commission has in any case been useful not only for an inventory of sources of data and their possible integration, but also for an evaluation of their limitations for a social impact analysis.

Even the inter-ministries network which had been created, following the launching of the Third EC program against poverty, at the office of the Ministry for European Community policies, with the purpose of monitoring and connecting all the activities and actors in the field, was short lived: functionaires change or die, Ministers change and Ministries disappear - there is no guarantee nor interest, apparently, for a sustained support to research and monitoring, with the result of a continuous wastage of expertises and knowledge.

We cannot but agree with the words of the former Minister for Social Affairs, Hon. Rosa Russo Jervolino, in the foreword to the Second Report on Poverty: “The problem of poverty is little present to the attention of public opinion and of social and political actors. Others are the issues debated at the national level: the efforts to maintain the productive and economic system efficient on the one hand, the traditional issues of il Mezzogiorno, unemployment, and, more recently, drug abuse, youth maladjustment, non EC immigration” (Commissione d’Indagine sulla povertà e l’emarginazione, 1992, p. 7).
The great migratory processes from non EC countries, together with a worsening of many inner-city, as well peripheral neighborhoods in the metropolitan areas, as a matter of fact, in the past two years have both spurred and focused attention to the gravest phenomena of social emargination. Third world and, to a lower degree, East European immigrants and refugees, are now the visible and ambiguous target of social attention and policies (Furcht 1990). Urban revolts have already exploded both by them and against them, as in Milan and Turin, when Italian workers’ families resisted the worsening of their neighborhood (in terms of prices, but also of security and general pollution) through the settling of groups of Third World immigrants.

Undoubtedly, together with the long standing inefficiency of Italian administration, with the phenomenon which has been called “occupation of the state by political parties”, with the persistent incapacity to tackle mafia and its spreading outside the traditional areas of the South, the migratory flux from Third world countries has encouraged the development of the Leghe in many Northern regions: social and political anti-party, anti-state, “anti-Rome” movements which find consensus not only in traditional reactionary groups, but also in many working class people coming from a Left tradition.

Immigrants, although their number, according to all estimates, does not go beyond the million individuals, about 20 per thousand of the Italian population (down to 1.7 per thousand if one takes only the non EC immigrants, compared to the estimated 10-15% of the Italian population living in economic poverty) seem to have taken the symbolic forefront as the potentially “socially excluded”, with the invalid elderly following suit. At the same time, together with the young, homeless drug addicts, immigrants typically embody the ambivalent interpretation attached to social exclusion: as needy, but also (differently from the elderly) potentially dangerous. As a matter of fact, they are often pointed to, in public opinion, as the villains of situations of which they are viceversa the victims: homelessness and vagrancy, moonlighting and working in the black or illegal labor market. They are also perceived as using up resources, while little attention is paid to the fact that they bring their labor to our country, therefore they are a resource for it (see also CESPE 1990).

At the same time, the issue of Third World Immigrants puts to test the meaning of social integration as a policy goal. As a matter of fact, social integration may mean different things for different target groups. If we look at legislation, as well as to shared values implicit in public discourse, social integration, seems to imply, together with holding a job and showing an attitude of work attachment, entitlement to basic rights such as health services and housing, and insertion, or re-insertion in meaningful social networks. This last dimension is apparent in such diverse cases as that of the elderly, where many volunteer and self help groups, together with public services, work at maintaining or constructing a social network; of the handicapped, for whom a wide array of measures is developed, in order to allow them to take part in everyday life without excluding them in
special places and activities; of drug addicts, for whom some kind of community - be it a live-in one, or a day one - appears to be the main instrument of support; of abused children and their families, which are re-inserted in a different, supposedly healing, social network; of immigrants, whose organization in self help ethnic groups is encouraged, together with attempts at interethnic cooperation.

But the case of the immigrants indicates how these concepts of social integration are still far from being adequate: first, because they are often only on paper, given the lack of adequate housing, of language classes, the legal and material constraints on the rights and ability to re-construct one’s own household; second, because these concepts do not really deal with the dilemma posed by the tension between cultural identity and integration, as well as by the conflicts between different authorities (the state, the school, community elders or representatives, parents, husbands...) concerning the power to control and decide for the weakest or most dependent members of the immigrant community: children, the young, women.

b) the socially excluded in research and in the scientific debate

Research on poverty is very scattered and “unpopular” in the academy as it is in politics (and this is probably not purely coincidental). Both the project completed within the EC project in 1979-80 (Sarpellon 1982) and the Reports published by the Poverty Commission in 1985 and in 1992 spurred little scientific attention and debate. Particularly, there is no real scientific debate in Italy both on concepts such as poverty, emargination, social exclusion and so forth, and on methodological questions concerning research on these issues. Also the question of “measurements” remains circumscribed as a purely technical one.

To be sure, the few social analysts who concern themselves with these questions seem well aware of the international literature and debate (for instance Sarpellon 1984; for a most recent review see Negri 1990), but it would be improper to say that there is an Italian debate.

That scattered research that exists - apart from the two official reports on poverty which too are the product of experts' work - tend to focus on issues perceived (and constructed) as “emergencies” through the media and the political debate - thus also obtaining more easily research funds. Therefore, today most research focuses on Third world immigrants and on vagrant (often drug addict) youth, while in the middle eighties the long term unemployed and the cassintegrati (workers benefitting from earning integration) would be the most focused on (for instance Barbano 1987), and in the late seventies the mentally ill.

Some research exists at the local level on social assistance clients - i.e. on institutional poverty - usually commissioned by local governments (for instance in some cities in the Emilia Romagna region, see Guidicini and Pieretti 1988, 1989, Vassura and Verdini 1986, Scivoletto and Zani 1989, Melotti 1988). There are
also studies on the homeless (see for instance Labos 1987). Many such studies offer interesting and useful data; but they are too fragmented and somewhat occasional to offer both a systematic approach to the study of poverty and social exclusion and an adequate theoretical framework. Moreover, these studies are mostly focused on the situations which may be found in clearly localized areas: e. g. towns of a rich Central region, a large city like Turin or Rome and so forth. These are also the areas in which the feasibility of setting up of an observatory on poverty (in Lombardy), or more generally on social dynamics and problems (Emilia Romagna) is being studied. Lacking is comparative research on southern cities or in less rich towns. Also lacking is research on rural poverty.

As for research on immigrants, it has been pointed out that empirical research is still too fragmentary and too concerned with "counting", rather than with understanding differences in approach, experiences, processes (e. g. Reyneri 1991). Moreover, not all those who are concerned with immigration research are concerned with poverty and social exclusion research and viceversa: with the result of sometime using the same concepts (e.g social exclusion, or social emargination) with different meanings or from different theoretical backgrounds.

Notwithstanding all the above mentioned limitations, in recent years there has been an increasing body of local research and theoretical reflection both on immigration (which certainly cannot be reduced to a question of social emargination -see Reyneri 1991, Livi Bacci 1990) and on poverty: its subjects, its definitions, the methodological issues involved in this kind of research and the linkages with social policy. With regard to immigration, which continues to be the object of many conferences and publications, here we recall only the collections edited by Cocchi (1990), by Maccheroni and Mauri (1989), by Favaro and Tognetti (1990). With regard to poverty, we just mention here two volumes, one published at the end of 1990 and the other at the end of 1991, which well represent this increasing attention. The first is an edited book by N. Negri (1990), whose acute introduction, after assessing the different merits and limitations of absolute versus relative poverty, of multidimensional versus sectoral poverty approaches and so forth, delineates a framework in which, recoursing to the concept of extended social citizenship, poverty (or social exclusion) is interpreted as a rupture in one's biography and in one's capacity to function as a citizen. The cause may be economic poverty, but may also be some kind of biographical break up - emigration, divorce, a severe illness in the family and so forth. The second is as well an edited book, by P. Guidicini (1991), which delineates the status of poverty studies in Italy: their results, methodological developments and so forth. Particularly useful in this collection is the annotated critical bibliography of all research on poverty in Italy, by Pieretti and Bosi. Of informative as well as theoretical value in the same collection also the article by P. Zajczick on the methodological history of poverty research in Italy, where she detects three types of
research; 1) research on the "institutionally" or "officially" poor, that is on social assistance clients (mostly in urban areas); 2) studies, still in a beginning phase, which are interested in detecting the processes by which individual and families enter or non enter in an exclusionary circuit when faced by particular biographical emergencies. These studies, which use a longitudinal approach, are focused on individual and family strategies in specific geographical and social contexts; 3) research on the quality of life, particularly useful in this context for its contribution in the area of social indicators.

It might be added that during 1989 and 1990 a debate developed in Italy, both at the political and at the scientific level, on the feasibility of some kind of basic income measure. Journals in between research and politics, such as Politica e Economia, MondoOperaio, Democrazia e Diritto devoted space to this question (see also Inchiesta 1989), with explicit references and linkages with the international and European debate. This interest seems to have been fading out (and apparently no notice has been taken both at the political and at the scientific level of the approval of the May 15th EC Council's recommendation on the basic right to sufficient resources). The difficulties in developing an adequate theoretical and financial framework in a situation where the number of potential beneficiaries cannot be foreseen with reasonable adequacy appear too great. On the one hand there is the long standing question of our inefficient fiscal system, on the other hand there is the question of the difficulty to monitor the number of possible beneficiaries: not only the "fake poor" (tax evaders), but the growing number of immigrants. On the political side, there is also the fear of an increasing unpopularity of measures which appear as "taking the money away from the honest and hard working North to give it to the delinquent and not working South and even to alien people who spoil our cities and rob us" - to say it with the Leghe.
PART II. GENERAL POLICIES

1. RIGHT TO INCOME: SOCIAL SECURITY AND SOCIAL ASSISTANCE

a) The distribution of economic poverty in Italy

According to the Second Poverty Report (Commissione d'indagine sulla povertà e l'emarginazione sociale, 1992), in 1988 15.3% of all Italian households and 15.4% of all Italian residents were poor, that is had a mean expenditure half or less than the average one - a percentage higher than that (13%) estimated for 1983. The incidence of poverty was however quite different in the various geographical areas: 9% in the Center-North but 26.4% in the South. At the same time, the poor living in the South were 62.9% of all the poor, indicating that it is in this region that poverty is a real social emergency. Using the social emergency index, in fact, indicates that the rank high in poverty families who live in the South or Isles, have a family head with little schooling (not even the middle school degree), where there is only one income. Many of these conditions, of course, cumulate, particularly in the South.

An analysis by SVIMEZ, the Institute for the Development of Industry in the Mezzogiorno, on the basis of 1988 and 1989 ISTAT Household Consumptions Surveys and its own data (SVIMEZ 1990: 40-42), indicates that in 1989 there has been a slowing down in the increasing trend in family consumptions at the national level: from a 4.1% increase in 1988 to a 3.8% one in 1989. But in the South the 1989 increase was only 3.1%. The pro-capite consumption in the South in 1989 was about 70% of that of the Center-North (a differential which is about 15% lower than that exhibited in pro capite productivity - a gap covered by income transfers, i.e. pensions and other benefits, according to the SVIMEZ study). The difference is almost totally due to the Southern lag in the consumption of goods and services other than food, garments and housing, therefore in transportation, health and hygiene, culture and leisure consumptions.

The incidence of poverty varies also according the family size and the age of individuals, with different consequences in the geographical areas: in the Center-North the most exposed to poverty are one person households and households comprising six or more people. In the South, to these one must add two and five persons households (see tab. 1). It should be pointed out that if the incidence of poverty is higher in the families with five or more members, the percentage of poor persons living in these families is lower (16.3%) in these families than in those with four members (28.4%), given the lower number of five persons households in Italy.
TAB. 1: PERCENTAGE POOR ON THE TOTAL HOUSEHOLDS, BY SIZE OF HOUSEHOLD

<table>
<thead>
<tr>
<th>households</th>
<th>Center-North total poor</th>
<th>South total poor</th>
<th>Italy total poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 person</td>
<td>8.4 12.2</td>
<td>5.9 6.1</td>
<td>7.5 8.4</td>
</tr>
<tr>
<td>2 persons</td>
<td>19.1 22.3</td>
<td>13.8 15.8</td>
<td>17.1 18.2</td>
</tr>
<tr>
<td>3 persons</td>
<td>26.6 20.0</td>
<td>18.8 14.9</td>
<td>23.7 16.8</td>
</tr>
<tr>
<td>4 persons</td>
<td>30.8 28.6</td>
<td>32.5 28.3</td>
<td>31.4 28.4</td>
</tr>
<tr>
<td>5 persons</td>
<td>10.0 9.7</td>
<td>18.2 20.1</td>
<td>13.0 16.2</td>
</tr>
<tr>
<td>6 and more</td>
<td>9.9 7.1</td>
<td>10.8 14.6</td>
<td>7.1 11.8</td>
</tr>
<tr>
<td>total</td>
<td>100 100</td>
<td>100 100</td>
<td>100 100</td>
</tr>
</tbody>
</table>

Source: ISTAT and Commissione d’Indagine, 1992, p. 34

This phenomenon points to two distinct causes of economic poverty: lack of an adequate pension in the case of households composed of old people, lack of an adequate work income (and/or of an adequate number of income providers) in the case of numerous families. The incidence of poverty is 37.2% in the families whose family head is unemployed (although they constitute “only” 4.9% of all families in poverty). On the other hand, the incidence of poverty is respectively “only” 12.9% and 13.6% if the family head has a job and has a wage job; but the poor living in these families make up respectively 58.1% and 42.6% of all the poor.

Although the incidence of the elderly poor on the total poor population is higher in the North, the risk of being poor when old is much higher in the South (see tab. 2), indicating how the poverty incurred when young and adult due to one’s position in the labor market, aggravates when one becomes old.

TAB. 2: PERCENTAGE POOR IN DIFFERENT AGE BRACKETS

<table>
<thead>
<tr>
<th>Age group</th>
<th>North-Center</th>
<th>South</th>
<th>Italy</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5 years</td>
<td>9.9</td>
<td>29.1</td>
<td>19.5</td>
</tr>
<tr>
<td>6-13 years</td>
<td>7.7</td>
<td>26.9</td>
<td>16.3</td>
</tr>
<tr>
<td>14-24 years</td>
<td>8.7</td>
<td>26.1</td>
<td>15.3</td>
</tr>
<tr>
<td>25-65 years</td>
<td>7.3</td>
<td>23.6</td>
<td>12.8</td>
</tr>
<tr>
<td>66-75 years</td>
<td>14.9</td>
<td>34.1</td>
<td>20.8</td>
</tr>
<tr>
<td>over 75</td>
<td>22.6</td>
<td>41.5</td>
<td>28.4</td>
</tr>
<tr>
<td>total</td>
<td>9.0</td>
<td>26.3</td>
<td>15.4</td>
</tr>
</tbody>
</table>

Source: Istat and Commissione d’Indagine, 1992, p. 37

Among the elderly, women are more likely to be exposed to the
risk of poverty when alone. A study performed on Banca d’Italia data referring to family incomes in 1987 (Cannari e Franco 1990), indicates that women pensioners are more likely than men pensioners to be exposed to the risk of poverty, if they can count only on their pension, benefitting of an annual pension on average over 2 millions lower than that of men (7.200.000 liras compared to 9.900.000). This is due not only to the fact that women on average have a shorter paid work (and contributive) history than men, therefore earning lower old age pensions, but also to the fact that, given the prevalent gender division of labor, they are more likely not to earn any right to an old age pension on their own, benefitting only of survival pensions, or of social assistance pensions (see below). Southern older women, the most excluded from employment, are the worst off, since their pensions are little more than 50% those of Northern men. As a consequence of this gender differential, the incidence of poverty is 10.2% for families with a pensioner male head, but it is 17.9% for families with a pensioner female head (where dependent children are also more likely to be found).

Finally, the incidence of poverty among the pensioners increases with age: it is 8.8% in the 65-69 age bracket, 18.7% among those 85 and over. A different cohort history, in terms of labor force participation, pension rights earned and so forth, as well as a different ability to supplement one’s pension with other kinds of income, may explain this phenomenon.

b) income support measures

The internal composition of social expenditure in Italy shows that income support measures constitute by and large its main element (Ascoli 1986: 120, P. Saraceno 1989). This is even truer for social assistance expenditure, which for 90% is constituted by income transferrals mostly administered directly by central institutions on the basis of national laws and for three fourths directly by the INPS (the National Social Security Institute), that is through social security mechanisms. To these, indirect income support measure should be added, ranging from the offering of free services to all citizens irrespective of their contribution (through taxes or other), or on the basis of means-tested criteria, as in the case of exemption from health services’ tickets, of free or partially free childcare services, of free at home help for the elderly poor and so forth.

Detecting what is a social assistance (means-tested) measure, what is a social security right and what is a social citizenship right is however not always clear as already mentioned, since criteria vary over time (and also, in the case of some services, among different towns or regions). For instance, the introduction of so called health tickets has rendered some part of the health service “social assistance” for some of its clients (those who are exempted from the payment of the tickets). The same is true for family allowances, which have been transformed only recently from a general allocation given to all wage workers into a social assistance measure (see below).
Analysts usually distinguish between direct income support measures which are defined by legislation as social assistance (and are financed through income revenue) - which include social pensions for the elderly poor, pensions or allowances for the handicapped below 65 years of age, accompanying persons allowances for the handicapped, family allowances for specific categories (small famers, social assistance pensioners), **Vital minimum** paid at the local level - from direct income support measures which, although they might too be termed as social assistance, since they are not based on a contributive history, yet have their origin and funding in the social security system. They include supplemented old age pensions for those who would otherwise not reach the minimum social security pension and family allowances for low income wage workers. Tabb. A and B show the distribution of state expenditure in these different categories, in different years and by geographical area.

In the field of **social security**, one can point to four kinds of measures targeted to unadequacy or loss of income of workers and their families:

- **Family allowances**: A means-tested measure, they are paid, in the paycheck, to households of wage workers and employees and of farmers, on the basis of total family income, of the number of household members, and of particularly stressful conditions: the income threshold is higher for one parent families and for families with a handicapped or invalid person.

  Totally financed by workers' contributions, this measure is limited to households of wage workers and employees, of pensioners and of those enrolled in unemployed lists, not to the entire population. Excluded, in particular, are the households of the self employed and of those who have no labor force attachment.

- **Unemployment indemnities**: In Italy there is still no general, universal, unemployment indemnity: only people who have lost a job (therefore not those looking for their first job, or entering for the first time the labor market) are entitled to an unemployment benefit, which is a social security, contributory measure, which further varies according to the cause of unemployment and the bargaining power both of the firm and of the unions.

  The main existing unemployment indemnities are the following:

  **Ordinary unemployment indemnity**, paid to all those out of job for "individual" reasons, i. e. to those who are fired or loose a job individually. The daily amount paid, formerly a flat rate benefit of 800 liras a day for a maximum of 180 days, is now a percentage (at present 15%) of the past average dayly wage. Given the absurd smallness of the indemnity, contributions amply cover it and finance other indemnities as well (Artoni and Ranci Ortigosa 1989: 109-13). Beneficiaries are mostly former workers of small workshops and rural workers, particularly numerous in the South. Tab. 3 indicates the total number of hours (not of unemployed) over a four year period and the average dayly allowance paid. Beneficiaries are mostly ex workers of small workshops and
enterprises, and rural workers. They are particularly numerous in the South.

TAB.3 : TRENDS IN THE NUMBER OF DAYS OUT OF WORK WHICH HAVE BEEN COVERED BY ORDINARY UNEMPLOYMENT IDENNITY AND IN THE AVERAGE DAYLY ALLOWANCE

<table>
<thead>
<tr>
<th>Year</th>
<th>Days</th>
<th>Average Daily Allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1983</td>
<td>48281</td>
<td>813.5</td>
</tr>
<tr>
<td>1985</td>
<td>41924</td>
<td>810.7</td>
</tr>
<tr>
<td>1987</td>
<td>33028</td>
<td>806.1</td>
</tr>
<tr>
<td>1988</td>
<td>30138</td>
<td>3212.4+</td>
</tr>
<tr>
<td>1989</td>
<td>27071</td>
<td>8273.9+</td>
</tr>
<tr>
<td>1990</td>
<td>30071</td>
<td>12522.0</td>
</tr>
<tr>
<td>1991</td>
<td>32634</td>
<td>13732.0</td>
</tr>
</tbody>
</table>

+ in September 1987 the regulation was changed from a flat rate benefit to a percentage (7.50%) of the daily wage, raised to 15% in 1989.


Special unemployment indemnity, paid to those who are subjected to a collective lay off. The indemnity covers 80% of lost pay for periods of 180 days, renewable. Entitled are industrial workers with at least three months of work within the same company with an unlimited work contract. Similar measures, with somewhat stricter and less generous regulations, exist also for rural workers and for workers in the building industry.

To these two indemnities two other measures should be added:

Earning Integration Fund (CIG): In July 1991, with the full consent of trade unions, law n. 223 reformed the Special Earning Integration Fund (CIGS) which had been one of the main social devices to face the heavy occupational crisis of the early eighties, constituting a kind of protected social moratoria, at least for particular groups of workers (see for instance Bonazzi et al. 1987). CIGS, or better its utilization by companies and its being limited only to particular kinds of workers, in the past years had been increasingly attacked both by companies and by trade unions for its abuses (for an analysis of the functioning of earning integration and its use as a means of financing enterprises and flexibilizing the labor force see Garonna 1989, Shenkel 1989). With law n. 223 the length of the Special Earning Integration has been strictly regulated and shortened, while the scope of ordinary Earning Integration has been extended to cover also employees and functionaries (previously it was restricted to blue collar workers). Particularly, the special earning integration may not be paid for more than two years in case of restructuring processes. Two renewals of one year each may be approved for restructuring
processes of high complexity. When the recourse to special earning integration is motivated by a company crisis, the period cannot be longer than one year. A renewal may be asked only after an interval. In any case, the total period of earning integration allowed to a company for any reason cannot be longer than 36 months, differently from the past when it might be renewed with no time limitations. The costs to companies for each renewal are also higher than before (the contributions they must pay for each worker receiving CIGS are higher), therefore they are discouraged from asking them. At the end of the CIGS period, or before, if the company judges that it cannot guarantee the workers’ re-employment, the company can start the procedure for creating so called “mobility lists”: workers are fired and receive an indemnity equivalent to 100% of CIG for up to 18 months and to 80% of CIG afterwards. The length of time they are entitled to this varies according to age: from one year for those under 40 to 36 months for those over 50. Periods allowed are longer in the South (see tab. 4). Companies which hire workers from the mobility lists receive particular incentives and workers in mobility lists are favoured in hiring. The new occupational crisis started in the Fall 1991, particularly in the automobile and in the computer industry, is causing concern within trade unions after few months of application of this new law. Unions have in fact calculated that by February 7th 1992 about 40,000 workers lost the CIGS protection to enter the mobility lists: these workers, who belonged to 442 enterprises under economic crisis (271 in the Center-North, 171 in the South) were already under CIGS when the new law was implemented and the transitory rules allowed only for a further 180 days of extension.

This reform of the CIGS has further encouraged the recourse to early retirement as a measure against unemployment. It is targeted to workers too old to be easily re-employable: 55 or over years old men and 50 or over years old women with at least 15 years of contributions. Again, this measure is applicable only in the case of collective, not individual, redundancy and it de facto either substitutes for GIGS, or moves people from CIGS to straightforward retirement as soon as the minimum age for early retirement is reached. The longer CIGS period granted to those over 50 is clearly aimed at covering them till when they can be “early retired”. Of course, this exposes older workers to the risk of being made redundant more easily and to have access to a lower pension than that to which they might expect if they remained in their job till the normal retirement age.

The reform of the CIGS has opened up a potential new sector for local initiatives. The Regional Employment Commissions, in fact, should coordinate themselves with local employment offices in order to promote the job re-insertion of workers in mobility lists.
Supplemented old age pensions are paid when at retirement age a worker, having been enrolled in the INPS (social security fund) for at least 15 years, has not reached the minimum old age pension, if his/her income is lower than the double of that minimum. The supplement can cover up to almost 100% of the total pension, as in the case of the invalid elderly, but on average it covers about 70% of the minimum pension. About 30% of all old age pensions paid by INPS are supplemented ones (Artoni and Ranci Ortigosa 1989: 96-98). Almost all pensions paid to small farmers and to the self-employed are supplemented. Since 1985 a further supplement is paid on the basis of the household income.

Invalidity pensions, paid to workers who have become partially or totally invalid, have risen sharply till the mid-eighties when some forms of control were introduced. In 1985, for instance, invalidity pensions were between 32% and 54% of all pensions paid by the different regimes administered by the INPS (the National Institute for Social Security), which cover about 75% of all workers. They still are about 80% of all pensions paid to small farmers (P. Saraceno 1989: 193-94; Artoni and Ranci Ortigosa 1989: 98).

In the absence of an universalistic and reasonable unemployment benefit, in a situation of high, structural unemployment, the invalidity pension up to the early eighties was the main income maintenance measure offered and asked for in the most disadvantaged regions, although in recent years this "improper" route to income maintenance has been greatly reduced for new applicants.

Among the explicitly social assistance kind of measures which yet can be defined as deriving from the constitutional framework, therefore having somewhat the status of social rights (the right to receive the minimum means of subsistence) we can indicate:

Social pensions: They are paid to 65 and over years old persons who are not entitled even to a supplemented old age pension, as well as to widows with dependent children and no income who are not entitled to a survivor pension. Their amount is a little over half the minimum old age pension. It is a means-tested measure: in order to be entitled to it, the individual must have an income not higher than the pension itself, the couple not higher than three times the pension. Since 1985, a supplement is paid on the basis of the total household income.

Social pensions are the last resort of most marginalized old people, particularly women (see tabb.5-6). The meagerness of the
amount granted certainly is inadequate to cover the subsistence needs of the elderly, particularly so if they are disabled. Even if periodically doubts are raised concerning the real "need" of some social pensioner (but the same might be said of supplemented pensions, which on the contrary are more clearly defined as rights), the absolute inadequacy of this income support measure for those who are defined as needy by the legislator is apparent.

TAB. 5: SOCIAL PENSIONS PAID TO CITIZENS 65 YEAR OLD OR OVER, BY SEX. SELECTED YEARS

<table>
<thead>
<tr>
<th></th>
<th>males</th>
<th>females</th>
<th>total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1983</td>
<td>96 742</td>
<td>580 709</td>
<td>677 451</td>
</tr>
<tr>
<td>1985</td>
<td>98 895</td>
<td>562 594</td>
<td>661 489</td>
</tr>
<tr>
<td>1987</td>
<td>127 086</td>
<td>632 853</td>
<td>759 939</td>
</tr>
</tbody>
</table>

source: INPS, various years

TAB. 6 RECIPIENTS OF SOCIAL PENSIONS BY AGE BRAKET AND SEX. 1987*

<table>
<thead>
<tr>
<th></th>
<th>males</th>
<th>females</th>
<th>total</th>
</tr>
</thead>
<tbody>
<tr>
<td>65-69</td>
<td>25 980</td>
<td>162 350</td>
<td>188 330</td>
</tr>
<tr>
<td>70-74</td>
<td>28 221</td>
<td>148 854</td>
<td>177 075</td>
</tr>
<tr>
<td>75-79</td>
<td>31 856</td>
<td>141 273</td>
<td>173 129</td>
</tr>
<tr>
<td>80-84</td>
<td>23 116</td>
<td>95 394</td>
<td>118 510</td>
</tr>
<tr>
<td>85-89</td>
<td>12 537</td>
<td>55 521</td>
<td>68 058</td>
</tr>
<tr>
<td>90-94</td>
<td>4 362</td>
<td>23 735</td>
<td>28 097</td>
</tr>
<tr>
<td>95+</td>
<td>1 014</td>
<td>5 726</td>
<td>6 740</td>
</tr>
</tbody>
</table>

*these data help to understand not only the gender differential in being exposed to the risk of having to recourse to social pension (due to work history), but also a cohort differential: people over 75 represent a higher share of social pensioners than it would be expected on the basis of the incidence of this age group on the population.

- **Income supports for handicapped people** (the blind, the deaf, other suffering various physical disabilities, the mentally ill). They were described in the 1990 Report and are roughly equivalent to the social pension, although they may vary according to the degree and kind of handicap.

- **Vital Minimum**: They are granted at the municipality level and both their amount (which varies from the equivalent of the social pension to a little over the minimum pension) and the categories entitled to it may vary greatly among regions and within regions (see Annex for a few local examples). In any case, in most regions
there is a sharp differentiation between measures addressed to the old and the handicapped and measures addressed to able bodied adults and their households. The first two groups receive, on the basis of a means test, whichever integration is needed to make up the difference between the social pension level and the Vital Minimum level when the latter is higher. For the others, both the entitlement and the amount of the Vital Minimum may be much more discretionary; moreover, it may also be subject to an evaluation of the "merits" of the applicants. Particularly, applicants of working age who are not disabled must accept to take any job is offered to them or to be employed in a public works project.

Looking at these measures, one can suggest that in Italy, alongside protections granted, and differentiated, through the workers' status, there is some kind of basic minimum granted to two categories of people: the elderly and the handicapped. Individuals and families who do not belong to these two categories, nor to the best protected sectors of the workers (or have exhausted all their work-attached rights without being able to reinsert in the labor market), are less well and less surely protected. If one thinks of all the various figures of workers who are now present in the labor market - those working in so called a-typical jobs, those working in the informal economy, those who are too young to have built up seniority rights - as well to all the persons, particularly women, who do not have a working status, it is apparent that these income protections are not only very fragmented, but somewhat inadequate. Moreover, the more a measure, irrespective of financing sources, is defined as a social security measure, the more it grants individual entitlements and the less it is means-tested. On the contrary, the more it is labelled as social assistance, the more it is means-tested on a household basis. This gives rise to a wide differentiation of entitlements both with regard to similar income needs and with regard to causes of income inadequacy (e.g. old age, or unemployment, or widowhood). At the same time, it does not impede perverse redistributive mechanisms.
2. RIGHT TO WORK

a) employment, underemployment, unemployment

A study on cohort, sex and regional variation in labor force composition in the 1978-87 period on the basis of the ISTAT Labor Force Surveys (Gesano 1990) indicates how old patterns of disadvantage intersecate with new ones, sometimes reinforcing existing disadvantages (as in the case of young people of both sexes, but particularly women, in the South), but sometimes changing balances and shifting boundaries (as in the case of the rising employment rate of women in the central ages in the Center-North).

According to this study, in fact, the gap between the Center-North and South labor markets has increased and, while in the past it involved particularly males in the central ages, now it involves both sexes of the younger generations.

The main cohort changes are in fact the following: a) a dramatic increase in the activity rates of women in the 20-39 age bracket, particularly in the Center-North regions, where the rate is now over 60%; b) a decrease in the activity rates of both male and female 14-19 years old. This is due to a lengthening of school attendance (which in Italy is compulsory only up to middle school, or eighth grade), which is testified also by the different distribution of higher school degrees in the decade under analysis. But it is also due, c) to an increasing youth unemployment rate which involves also the 20-30 age bracket. Particularly, men are now finding their main difficulties in the labor market during the entrance period, as compared to older cohorts. As a consequence of this dual phenomenon, the modal ages at which they exhibit the highest activity and occupation rates have both increased. In Italy the age of maximum involvement in labor market is higher and the rates lower than in other countries: men in the Center-North reach both their highest activity (98.5%) and highest occupation (96.9) rate at 40; in the South the ages have remained fairly stable in the decade (38 and 40, respectively), and the same is true for the activity rate (now 97.8), but the occupation rate is sensibly lower, 93.3, down from 97.4 in 1978 (Gesano 1990: 22-23).

Unemployment is increasingly involving young people looking for their first job and less people losing their job (see also Accornero and Carmignani 1986).

The increase in youth unemployment concerns also women, but in this case the explanation of the inter-cohort differences is in the differential rates in the increase of labor offer and demand. In fact, d) all the increase in occupation in the period is due to female occupation (+8.2% in the period, compared to -0.73% for males). Within a general increase in the time required to find a job, however, women take about one and half time longer than men today; they take more time even than women at the end of the seventies (it takes an average of more than 3 years now for a woman in the Center-North to find a job, compared to two years in
the late seventies).

Young men and women tend to have a different pattern of entrance in the labor market: particularly in the youngest (14-19) age bracket and with the minimum compulsory school degree, men are more likely than women to hold a full time, stable job with no regular contract, while women, when employed, are more likely to work under a regular contract: 60% compared to 44% of young men (ISFOL 1988: 296-98). At the same time, they are more often unemployed (looking for a job) than men.

The fact that unemployment in Italy concerns increasingly young people looking for their first job, is often used to downplay its gravity in terms of the welfare of families and more generally the impact of unemployment on processes of impoverishment. It is true that unemployed youth are not always poor, in so far they can count on their parents' economic means and their consumption patterns are not very dissimilar from those of the employed. Yet, the increase in youth unemployment, the lengthening of the entrance period in the labor market and the increase in the age of entrance, lengthen the period during which young people live as dependents in their families, putting stress on lower family incomes. Moreover, the increase in the average schooling years renders those who complete only the compulsory middle school, as well as those who drop out before completing it, a particularly fragile portion of the labor force.

The picture is, furthermore, dramatically differentiated, between Center-North and South (see fig. 1). In the South, the gap between the activity and occupation rates of men belonging to the younger cohorts is much sharper than in the North, involving in unemployment also a substantial quota of men in their thirties. Even greater is the gap for Southern women, compared to Center-North ones, notwithstanding the much lower activity rates. The fact that young women in the South continue to enter the labor force irrespective of the perspective of remaining unemployed testifies a change in attitude and expectations which might result in a mass experience of feelings of social exclusion and of failed emancipative attempts.

On the basis of these Center-North/South dynamics Gesano suggests that over the decade there has been a shift in occupation from the South to the Center-North, mostly to the "benefit" of Center-North women, and a reverse shift in "job search" from the Center-North to the South, again involving first of all women, but also a substantial quota of men. Tab. C indicates the structure of explicit unemployment in the two geographical areas, on the basis of kind of unemployment, sex, age and schooling (1988 and 1989 data). Persons looking for their first job are about 50% of the total, but 43% in the Center-North and 53% in the South. Therefore, also the incidence of the youngest ages (14-29) is higher in the South (71%, compared to 68% in the Center-North). This means that Southern families, which are
on average more numerous than in other regions, find it more
difficult to launch their children in the labor market and have to
support them longer.
Men are 47% of the unemployed in the South, 36% in the rest of
Italy. Finally, among the unemployed there is a higher incidence
of those who have a middle or a high school degree, compared to
those who have a college degree or, on the contrary, only an
elementary school or no school degree.

It is, however, worthwhile noticing that in Italy as a whole in
the 14-19, as well as in the 20-24 age brackets there continues
to be a quota of the labor force - respectively around 10% and
7.4% in all Italy in 1988 for both sexes, but 13% among males,
raising to 15.9% and 10.6% among those who are looking for a job
- that has not even obtained the compulsory school degree (tab.
D). Together with those having only a middle school degree, these
youth with little or no schooling are the most likely to have
difficulties in the labor market, both with regard to entrance and
with regard to stability. The labor demand focused to this group,
in fact, has became increasingly characterized by lack of
contractual guarantees. They may be employed, but with no social
security coverage nor with some right with regard to firing. This,
in turn, "privileges" young little educated men over young women
with the same school degree (ISFOL 1988: 298). The latter, in
fact, are unemployed to a higher degree than the former.
Among the high school graduated, the young who have completed a
technical or professional five years high school are usually
better off than those who have completed a licee (which is
designed for those who go on to the university), a shorter
professional high school, or have obtained an elementary school
teacher certificate (ISFOL 1988).

The latest data on unemployment (January 1992) collected in the
three-monthly survey by ISTAT on the Labor Force indicate an
unemployment rate of 11.3%: 8% for males, 16.8% for females.
The cited SVIMEZ study presents also an estimate of the
incidence of irregular employment on total employment in the
different sectors and geographical areas. The index is 0.225 for
Italy as a whole, but 0.341 in the South and 0.178 in the Center-
North (the higher the incidence, the higher the presence of
precarious situations). Broken down by sector, the incidence is
highest in agriculture in both geographical areas (0.714 in the
South, 0.525 in the North), followed by building (0.580 in the
South, 0.215 in the Center-North). With regard specifically to the
young, 2/3 of jobs are of the guaranteed, contractual type in the
North, only 1/3 in the South (ISFOL 1988: 299; see also Mingione
1983).

These data on geographical differentiation should be read with
some caution. A debate is developing in fact at present concerning
not only internal differentiation within the South, but also the
way of looking at the South itself and at its development. Some
analysts, in fact, are suggesting that the South has known a
tumultuous development in the past ten years, although most of it is in the illegal sector of the economy. Illegal does not mean necessarily criminal (mafia, camorra and the like), to be sure, but outside the national and international regulations. They, furthermore, suggest that this illegality is not specific to the Italian Mezzogiorno, but it is present throughout all capitalist countries and capitalist history. What is specific of the Italian Mezzogiorno is the fact that all or most of its development is in the illegal (industrial, building, service) sector. In any case, they suggest, instead of focusing on South/North gap, analysts (and politicians) should focus on South specific patterns of development and South specific labor market structures. There are not systematic analyses. But, if this hypothesis should be at least partly verified, data on labor market participation and options should be partly modified, and the focus should shift to conditions of work, patterns of social security and workers' rights and so forth.

A particular group of workers is that represented by immigrants. Official data are lacking and local data scattered and not always reliable (for an overview see Pugliese 1990). ISTAT and the Ministry of Labor estimated their number in 850,000 in 1988, oscillating however in a 650,000-1,000,000 range (see also Natale 1990). Their average age is low - 25-35 - and their composition by sex varies according to the country of provenience and their occupation: mostly women are the house-servants coming from the Philippines, Eritrea an Etiopia, India and Sri-Lanka as well as from Green Cape and from some Latin America country. Mostly men are the travelling street vendors, coming from North African countries, as well as rural workers (concentrated in the South and in Central Italy) and workers in the heaviest blue collar jobs in factories in the North. Men and women, usually with a high education, may be found in the tertiary service sector (restaurants, cleaning, and so forth). Only a small quota of these jobs is official and social security covered, notwithstanding the encouragement offered by the recent law on immigration (n. 983, 1990): it is more likely for housemaids and blue collar workers, less so for rural workers, street vendors, service workers.

b) policies addressing the lack of job

There is no active labor policy in Italy. National policies in this field consist mainly of laws delegating to local governments, and partly financing, the implementation of measures and projects aimed at particular social groups.

Leaving aside the laws concerning specifically the South, here we mention two specific national laws concerning support to employment:

Law n. 49/1985 on financial support to be given to workers' cooperatives in order to encourage employment. In order to receive financial support cooperatives must either be constituted of at least 50% of unemployed youth or long term unemployed, or employ workers coming from these same categories.
Law n. 863/1984 (with successive modifications), introducing temporary training and work contracts for 14-29 years olds. This particular law gives to the state the responsibility for paying social security contributions usually charged to employers (it is the so called “fiscalization”) and allows temporary contracts (up to two years) at an “entrance wage”, in exchange for training. This measure has been apparently the most successful in inserting the unemployed in the labor market (ISFOL 1989:330-68): the number of young who have benefitted from this kind of contracts, in fact, has constantly increased over the years and among them there is a prevalence of people having only the middle or high school degree (respectively 62% and 36%), that is, those most exposed to unemployment. Yet, some of the features of the beneficiaries of these contracts and of the jobs offered to them suggest a more problematic picture. They are mostly male (60%), concentrated in the 19-24 age bracket (64%), and are hired mainly for blue collar, manual, jobs (66%) in industrial enterprises. Even the recent increased presence of the service sector has not changed the prevalent blue collar destination of these workers. They are also a typically Northern measure: in 1987 the North absorbed 74% of these contracts, compared to 18% in the Center and 8% in the South. Within the North, the most industrialized regions Lombardia and Piemonte cover 20% of all contracts. As a matter of fact, the fiscalization of social security contribution, together with the lower wages of these workers, is particularly vantageous for Northern industries, which are also attracted by the flexibility (in hiring and firing) these contracts allow them. In the South a large part of the enterprises benefits already from fiscalization for all workers. Moreover, in the South, a large offer of irregular, “black” work competes strongly with this kind of contracts.

With regard to the success over time of this kind of insertion, a follow up study (ISFOL 1988:336-43) indicates that around 70% of these contracts terminates with the stable hiring of the young worker, and another 15% ish with his/her finding a better job. The most exposed to being fired during the contract or to terminate it without being hired, are those with little education, whose contract has been shortest and with little actual training content, who are female: i.e. those who are most disadvantaged in the labor market.

The training content in general is very scarce and the period during the contract seems to be used by the company more to test a prospective worker than to train him/her. If this is a cost for all the young involved, it is particularly so for those who, not having received from the school an adequate training, do not find it even in this experience, therefore continue to present the same characteristics of fragility and marginalization.

As mentioned before, most measures aimed at reducing the area of employment are locally based and regulated, although often within a national framework (in terms of rules concerning wages, social security contributions, kinds of contracts and so forth). These measures are usually targeted to specific groups, either in
terms of age - as in the case of youth - or in terms of other specific work "handicap": long term unemployed, CIGS workers, Third World immigrants, and so forth. On the basis of a survey performed in 1987, ISFOL researchers suggest that in recent years local governments have increasingly tailored their programs, to meet specific needs and skills of the persons involved, as well as local labor market opportunities (ISFOL 1988).

These measures, in kind and in extension, vary from one region to the next and also within a specific region, in so far some of them (e.g. public works) are implemented at the provincial or municipal level. They also appear highly fragmented both in typology and in the departments which are responsible for their management (the labor force or the social assistance department, for instance).

According to the ISFOL survey, local government intervention in this field has the following features:  
a) The focus is on support to self employment: about 70% of the total 374 billions appropriated at the time of survey by regions had been destined to promote self employment and cooperatives. This is particularly true in the South. 
b) Yet, looking at the ratio between amounts appropriated and amounts spent, the balance shifts. Regions have spent about 61% of the total money appropriated, but 58% of that destined to self employment and 68% of that destined to wage work. 
c) the number of persons involved was 60.000: 24.000 in the South (mostly in cooperatives and self employment) and 31.000 in the North (only one third of which in self employment). 
d) the North had spent less, but involved a larger number of persons. These, however, have been mostly inserted in temporary jobs.

The analysis of the provincial and municipal measures offers a similar picture. (see Part III and the Annex for some examples of local employment policies).

ISFOL concluded its analysis underlining the increasing fragmentation of interventions, accompanied by superpositions among the different governmental levels, which renders integration of policies increasingly difficult. At the same time, the many, often overlapping options offered both to the unemployed and to enterprises in this situation, does not become a real resource particularly for the former, because informations are lacking. The same study indicates that a systematic monitoring of implementation and its results is lacking.

3. RIGHT TO EDUCATION AND TRAINING

a) disadvantages and risks

The schooling rate in the compulsory elementary and middle school by 1989-90 had apparently reached 100% in Italy. This percentage, however, includes those who must repeat some grade, since they have failed to pass. Therefore, the actual rate is somewhat lower ( a 1983 ISTAT survey on families estimated that it
Since the second half of the seventies the, incomplete, process of offsetting class and social differences in negative school selection and emargination, which had initiated in the late sixties, has been slowing down and even partially reversing (for an overview of long term processes see Saraceno 1990). This phenomenon suggests that the previous reverting of social selection had been based more on a willingness not to flunk children, than on active measures focused on eliminating social and cultural disadvantages. When the overall political climate changed, the school resumed its selective and emarginating processes. Even compulsory school (which includes five years of elementary school and three years of middle school) was involved in this reverse trend, although to a lesser degree than higher grades, and with an accentuation of the phenomenon in the South, where 14.6% of children had to repeat the first year of middle school in 1987 compared to 10.4% in the North and 12.4% for all Italy (ISTAT 1989b). In addition to a higher repetitions rate, in the South there is also a higher dropping out rate before completing the compulsory schooling: 23 every thousand children do not even complete the elementary school in the Southern regions, compared to a national 13. Among those who go on to the middle school, those who drop out before completing are almost double in the South than the national average: 7.3% dropped out in the first year of middle school in 1983-84 in these areas and 7.1% in the second year, against the national 3.8% and 4.2% , which is already an indicator of the school failure to keep and support the most disadvantaged children (Bentivegna 1988, Gentile 1989). In an interview in September 1990 the Minister of Education declared that in the South a new record of school evasion has been set, with percentages as high as 35% in regions like Campania.

In high school the situation is somewhat less sharply differentiated by geographical areas, within the general trend towards an increased schooling (about 80% of all those who complete the middle school enroll into a high school and the rate of enrollment in high schools in the age bracket concerned is 65.3% - 1989-90 data, see ISTAT 1990). Yet, on the one hand one must keep in mind that the high school system in Italy is highly differentiated. The choice of which kind of high school to attend (the licée or different professional high schools, which include about 70% of all high school students) represents a crucial decision for the future. This choice is mostly based not only on social class and parents’ education, but also on local availability. Living in small rural areas, or where only one kind of high school is available, can greatly reduce options. Before than in the labor market, social selection is operated through the school system itself. An ISPES study on the basis of ISTAT data indicates that less than half of those who enter a high school complete it, but the quota of the graduated is much higher in the licée (16 every 21 pupils who enroll eventually graduate) than in professional high schools, where only 5 out of 20 who enroll eventually complete the school.
It must be noticed that in the very areas where the phenomena of school evasion and of school failure are higher, the school offer is still far from being adequate. Attendance in shifts, which virtually disappeared in the rest of Italy, in 1985-86 still involved 13.7% and 10.4% of elementary school pupils, and 5.3% and 3.5% middle school children respectively in the Isles and in the South (Bentivegna 1988).

Those who do not go on to a high school may attend professional training classes, which are organized by local governments, directly or in collaboration with private agencies. These too vary in length, quality and distribution on the national territory. Tab.E gives an idea of the distribution of that kind of classes by region, although data are too aggregate to account for rural/urban and other diversities and say nothing both on the quality of those classes and on the impact they make on the chances in the labor market of those who attend them.

b) policies to combat disadvantage and exclusion in education

Much of what has been said above on formal schooling and training gives an idea of existing national policies with regard to preventing or remedying exclusionary processes. As a matter of fact, there is not such a general policy in Italy, but for specific groups (the gypsies, the handicapped) within the compulsory school. There are no statutory remedial classes, no support activities; even integrated services such as canteens or after school activities and supervision are left to local government initiative and resources and to the willingness of single schools/teachers to organize them. So much so, that in certain situations parents may maintain that sending their children to work in after-school hours is a way to keep them off the streets (data on child labor are scattered and unreliable).

These initiatives are even more lacking in the non compulsory high school. And the data offered on dropping out and failing by kind of school are illuminating enough on the perverse effects of a school systems which streams its perspective pupils without being able to offer them that education and support which should be the counterpart of such an operation. A reform of the high school which involves the unification of all existing kinds of high school in a common, compulsionary, two years period offering a common cultural background, to be followed either by three years of specialized academic curricula or by professional training curricula of various length to be organized by the regions, has been pending in Parliament for some year, and its approval does not seem near.

In the field of training outside the official school system, the regions are the main actors, directly or in collaboration with other agencies.

Regional training classes are of three levels, with three different targets: 1) training towards work, distinguished in a) basic training for youth who need a first qualification; b)
advanced training classes for youth who already have a high school degree and/or professional prerequisites; 2) on the job training for adults needing to update or reconvert their professional qualifications; 3) special interventions aimed at specific subjects such as the handicapped or incarcerated people.

The first kind of training in 1986-87 made up 82.7% of all classes (with an increased, albeit minoritarian, incidence of advanced training classes), compared to 11% for the second and 6.3% for the third. Basic training is focused mainly on traditional male and female jobs, while advanced training appears to be more innovative and particularly liable to open up to young women options for a redefinition of their professional outlook and chances (ISFOL 1988).

Literacy and middle school classes are offered to those workers who did not complete the compulsory schooling. Particularly, in the early seventies workers conquered the contractual right to participate to classes during their working time - up to 150 hours during the year, to which they must add a comparable number of their free hours - in order to obtain the middle school degree. Special classes are organized for them by local school boards, in collaboration with trade unions. Also unemployed and housewives can enroll. Within the same contractual right, also so called "monographic" classes are organized on particular issues for people who already have the middle school degree, often with the collaboration of local universities.

The cited ISFOL study offers also some data on the utilization of the European Social Fund in Italy. Particularly, it points out that, given the different rules in the different regions, there is no homogeneity in the format of (and control on) the projects presented. This in turn provokes the non acceptance of many of them. In recent years most projects approved have been focused on the young and on adult women, with a de-privileging of adult males - i.e long term unemployed - particularly in the South.

Two additional observations may be useful. The first, is that only the handicapped and, for different reasons, the gyspy children seem to be perceived as structurally in need of support in order to be helped to have access to the right/duty to basic education. Special teachers, who do no susbstitute for the regular teacher, but integrate his/her work, are provided by law for these two categories of children within the public school system. Particularly, a Supreme Court sentence in 1987 (n. 215) declared illegitimate a previous law (n. 118, 1971, art. 28) which stipulated that the school insertion of the handicapped was "facilitated" (i. e. not granted). The Supreme Court stated that the right to education must be granted to all, including the handicapped. The just recently approved law on the handicap (see below) further reinforces this. Transportation to and from school should also be provided for handicapped children who have problems in walking.

Many criticism have ben levelled in the past years to the often inadequate training of the supporting teachers, to the lack of
transportation services, to the fact that in some case an handicapped child's integration in a normal classroom is only on paper, since he/she may spend most of the time outside the class, alone with the special teacher. Yet, the principle is stated, and a policy should be implemented. On the contrary, children who are not physically or psychically handicapped, but have some kind of social, relational, handicap are acknowledged neither any special need nor right to receive support. As a matter of fact, in some instance the only means for a teacher to receive help with a "troublesome", or "difficult" child is to try to have him/her defined as psychically handicapped by the local mental hygiene office - which is a heavy way of targeting. In the past, this practice has been strongly denounced and now there is less recourse to it, without there being any more neutral alternative support system. While families with cultural and economic means may try to give support to their "difficult" children selecting the most adequate setting within the private school system, this option is not open to those with less informations and less financial means.

The second observation is that the nearing of the 1993 deadline, together with a certain scarcity of workers having a university degree, particularly in the technical professions, and a high drop out rate among university students, has motivated the introduction, within the university system, of a shorter curriculum offering an intermediate degree (diploma universitario). It has also spurred some kind of rethinking of all the university curricula (e.g. in medicine, engineering) in order to make them more equivalent with those of other European countries. But the high school reform is still pending and the compulsory schooling still stops with middle school (eighth grade). What is more of interest here, no general measure is yet taken concerning children who drop out before completing the middle school curriculum and children who do not go on to, or drop out from, high school. As a matter of fact, legislation is not totally lacking in this field. At least since 1974, Presidential decrees and Ministerial regulations have been approved pointing to the schools' and teachers' duty to develop means in order to help children with learning difficulties and to detect school evasion within the compulsory schooling age. But no systematical implementation has followed. In 1988 a project by the Ministry of education was approved for a "National programme in the area of failure and evasion within the compulsory school system". But up to now nothing has followed, although in some regions some agreements are being signed among different institutional bodies in order to promote initiatives in this field. Particular school districts and even particular single schools may develop very creative and interesting initiatives, even trying to build a supporting network among the school, the neighborhood social services, the health an social assistance services (at least one example of this kind has been going on in an inner city school district in Turin for some years now). But they are volunteer initiatives, left to the good will of single individuals and single institutions, which, however, are not obliged to
cooperate.

Paradoxically, therefore, attention and intervention are focused on those who drop out of the university, but not on those who do not obtain the basic education: no universal and (for the school) compulsory system of support for students at risk is being devised, notwithstanding the many local and individual experiments. Also the emerging question of immigrant children apparently is not yet provoking some kind of support system within the elementary school. As a matter of fact, it is surprising that while the new attention for the tradition of multiculturality and multilingualism within Italy (with its many long standing ethnic and linguistic minorities) helped the approval of a controversial law on the teaching of local languages in the public school in the Fall 1991, no such attention is given yet to those who are not bi- or multi-lingual with regard to Italian, but have to start learning how to speak it.

Nor is it planned or even debated a system for re-inserting into education those who have dropped out. As a matter of fact, the mass experiment of the so called 150 hours is slowly fading out not for lack of potential clients, but for lack of that educational and organizational innovation needed in order to attract the new potential clients: no longer the middle aged working class who had not completed school, but the younger cohorts who have dropped out of school and are at the margin of the labor force, and the immigrants. The only means which are open to those who want to go back to school are night classes, organized both by the public school system and by market institutions (the same market which offers private lessons to those who have difficulty in school, of course at a cost which is not affordable to the most disadvantaged families and also to those having only modest economic means). Only market institutions provide classes where one can try to make up, in a concentrated way, lost school years.
4. RIGHT TO HEALTH

a) disadvantages and risks

Data on social inequalities in the distribution of health risks are lacking in Italy, notwithstanding the annual publication by ISTAT of a volume of health statistics and its having performed three national surveys between 1980 and 1986. These data, in fact, are almost never disaggregated and analyzed by relevant socio-economic indicators. Also the periodical *Relazione sullo stato sanitario del Paese*, prepared by the National Health Council (Consiglio Sanitaria Nazionale) is only partially useful, given the dishomogeneity of sources and issues. A recent study (Geddes and Buiatti 1990), however, has attempted a first systematization of available data on the relationship between social class and health conditions. In this paragraph the main results of this study are synthetized.

Infant mortality in Italy was 9.8 per thousand births in 1986, but as high as 17.1 (estimated 14.9 in 1988) if we include both still births and deaths within the first year (Pinnelli 1990). From the sixties on, there has been an improvement in still births and in neo-natal mortality within the first week. More recently the improvement concerns mortality within the first month and in still births. Regional differences continue to remain, but their content is changing. At present, living in a geographical area with good economic conditions reduces the risks of still births (probably due to better care during pregnancy), but increases the risks of premature births, due to the higher environmental risks women are exposed to during pregnancy (environmental pollution, work hazards). The very better pregnancy care which favors the reduction of still births, might also be responsible for a quota of premature births in these areas, in so far in different (worse) health care situations they would result in still births or abortions.

Unemployment, particularly that caused by having lost a job, represents a health hazard, particularly for males. They commit suicide two and a half times more than the employed (15.6 per one hundred thousand, compared to 6.5, in 1984 - see Florenzano 1986). And a longitudinal study performed in Turin on the basis of 1971 and 1981 censuses indicated that also the incidence of mortality in general is double among the unemployed. The same study (Costa and Segnan 1988) indicated that also the housewives with an unemployed husband have a higher mortality risks compared to those whose husband is employed.

Mortality rates by professional status and sector of employment indicate that in the early eighties the risk of dying, for any cause, at 45-49 (that is prematurely) was 65% higher for manual wage workers than for managers and white collar employees, and almost double that of entrepreneurs and professionals (see tab. 7). The highest risk was however incurred by self employed in
agriculture (Pagnanelli 1989). Manual workers, in general, died more than non manual ones and this is particularly true in the younger age groups. This phenomenon was confirmed also by the cited longitudinal research in Turin. Also education was inversely correlated to mortality: in the ages under 64, the less the years of schooling, the highest the mortality, for both men and women (although the women’s data are less reliable, given their overall lower mortality in these ages). The correlation was inverse also with the size of the habitation, which could be used as an indicator of social condition. According to the Turin data, mortality is higher among those who rented their apartment than among those who owned it.

TAB. 7: MORTALITY RATES PER THOUSAND PERSONS, BY PROFESSIONAL STATUS AND ECONOMIC SECTOR. ITALY, 1980-81, MALES, AGE 45-49

<table>
<thead>
<tr>
<th>Professional Status</th>
<th>All productive sectors</th>
<th>Agriculture Industry</th>
<th>Other Activit.</th>
</tr>
</thead>
<tbody>
<tr>
<td>entrepreneurs and professionals</td>
<td>2.67</td>
<td>1.12</td>
<td>3.44</td>
</tr>
<tr>
<td>self employed</td>
<td>4.08</td>
<td>4.08</td>
<td>2.69</td>
</tr>
<tr>
<td>managers and clerks</td>
<td>2.76</td>
<td>1.39</td>
<td>1.99</td>
</tr>
<tr>
<td>workers</td>
<td>4.4</td>
<td>3.34</td>
<td>3.36</td>
</tr>
</tbody>
</table>

source: Pagnanelli 1986, Geddes and Buiatti 1990

TAB. 8: MORTALITY FOR ALL CAUSES BY APARTMENT SIZE. ITALY, MEN AND WOMEN, AGE 18-54 (1981)

<table>
<thead>
<tr>
<th>Apartment size (in square meters)</th>
<th>Mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;50</td>
<td>132.5</td>
</tr>
<tr>
<td>51-74</td>
<td>106.1</td>
</tr>
<tr>
<td>75-99</td>
<td>96.9</td>
</tr>
<tr>
<td>100-149</td>
<td>89.9</td>
</tr>
<tr>
<td>&gt;150</td>
<td>85.6</td>
</tr>
<tr>
<td>total</td>
<td>100.0</td>
</tr>
</tbody>
</table>

source: Pagnanelli 1986

From the point of view of regional differentiation, however, the picture is somewhat different: the risk of dying is higher in Italy in the economically most advantaged regions and this is due mostly to cancer and heart diseases. On the contrary, in the
poorest regions there is a higher incidence of diseases such as cancer of the uterus and lung and breathing diseases, that in other regions have been rendered less lethal by therapeutic progresses.

A correlation between education and good health resulted in the 1983 ISTAT survey on family structures and behaviors, which also showed that the higher the school degree the lower the recourse to hospitals and general practitioners, but the higher the use of the most sophisticated health services (ISTAT 1985). Also partial elaborations of the most recent, 1986, ISTAT survey on the health of the Italian population, suggest the existence of a correlation between higher education and good health.

A few data on the health of immigrants are available, although their reliability is limited, on the one hand, by the lack of a sure estimate on their number, given the illegality of their immigration in many cases, on the other hand by the scattered and locally circumscribed character of most sources. Their mortality appears lower than for the rest of the population (a phenomenon which in other countries is called the "healthy immigrant effect"), but the pathologies they exhibit are different: there seems to be a higher infant and mother mortality, a higher incidence of accidental and violent deaths. Among diseases, there is a higher incidence of those affecting the breathing and digestive apparatus. All these phenomena may be explained with the living conditions of many (particularly Third World) immigrants: poor housing, poor diet, exposure to (for them) unusual weather conditions from which they are not materially protected enough, and so forth (Lemma, Costa, Bandera and Borgia 1990, Maffioli and Sonnino 1990).

b) policies to support the right to health

The Health reform envisaged with DPR 616 and L. 833 in 1978 had a twofold objective: 1) to grant universal health services to all, irrespective of their contributions and position in the labor force; 2) to integrate health and social services, through a local agency for health and social services, in order to develop measures of social, and not only medical prevention.

The scope of the first of the two aims had been progressively reduced in the past few years with the introduction of so called health tickets. It has now been cancelled with the cited decree of September 1992, which introduces an upper income threshold (still to be precisely defined) for access to most of the health services: family doctor, specialists' visits, prescriptions, lab. exams. The second aim has never really been implemented and was cancelled by decree in 1985.

For these, and other, reasons the affirmation that the right to health is one of the few clearly spelled out social rights in Italy should be qualified on a few grounds. First, even for the period preceeding the most recent developments, it would be more accurate to speak of right to health care, since little is done in
the field of prevention (the little prevention there is, is through routine medical controls during the compulsory school years). Albeit with a certain delay if compared with other countries, also in Italy in the past few years a growing awareness of the ill effects of pollution and of the dangers disguised in many ways of growing and preserving food has given rise to consumers' associations, ecological movements, and even to TV informative series. Yet, these movements and controls are still far from having a wide range practical impact.

A second qualification concerns the fact that health services are distributed and organized unevenly - by quantity and quality - across the country (see also Formez/Labos 1990). All through 1991 a number of sobering events - people dying because they could not find a place in a hospital, or because the hospital was not adequately equipped, or because there was no helicopter to take them to a more equipped hospital - made these disparities an issue of public debate; but they also showed that the Center-North as well might be fraught with dangerous disfunctions. It is not clear if the health system has really worsened, or if citizens and public opinon are becoming less acquiescent and patient, or just more attentive. The fact is that the public health system is now increasingly under attack by different groups and political positions -and probably for different aims as well. A law approved in the beginning of 1991, partially "reforming" that which had instituted the National Health Service, tried to undermine the growing politicization, or partitization, of its administrative body (an unforeseen outcome of a reform intended to enlarge citizens' participation and control), giving it back to managers and administrators. Its effect is at least dubious, since most newly appointed managers were already part of the preceeding administrative boards, according to sample analyses.

Third, the costs for citizens of the National Health Service is increasing: with the financial law approved in December 1991, medicines now have to be paid up to 50% of their cost, and the ticket on clinical analyses and on specialists' visits has been increased. At the same time, many services (dentist and oculist care, for instance) are often gravely understaffed, forcing individuals and families to buy them in the private market. According to the 1986 ISTAT survey over 40% of those who had gone to a specialist had opted for the private market, out of choice or out of lack of alternative in the public service (ISTAT 1987). At the same time, the criteria for being exempted from the payment of tickets had been restricted - practically only "survival" medicines will not be paid for and only the officially poor had been exempted from any other payment. As mentioned, starting in 1993 the scope of public health services will be reduced as a means of reducing the public debt. A large quota of the population will be excluded from most of it, although it is still unclear if the actual rate of contributions paid towards it will be maintained.

Certainly, the large and somewhat uncontrolled exemptions which existed before (due also to fiscal inefficiency) created unjust
disparities. And Italians are among the heaviest consumers of medicines in the world: to cut this unhealthy consumption is only for the best. But the means is at best problematic: instead of upgrading health services (see also La Rosa 1990, Ardigò 1990), medicines are just made more costly. Paradoxically, this might encourage hospitalization, which will remain universal and free in public hospitals, every time costly exams are involved, this in turn will result in overcrowding and raising costs. In any case, the government’s proposed income threshold (40 millions a year) has been already criticized because it does not take into account the family size. Even if, as it is likely, some sort of equivalence scale will be introduced, however, families with little children and/or frail elderly with a household income above the fixed threshold are likely to bear a disproportionate cost.

Fourth, the increasing separation between health and social assistance services promoted by a 1985 Decree (see David 1989) is having troublesome consequences on chronically ill and disabled people and their families, who find it difficult to be acknowledged as in need of health care. Chronically illness and disability, particularly in old age, is increasingly becoming a path into impoverishment and social exclusion not only for the disabled themselves, but for their families, since these have to exhaust all their personal resources before receiving any help by public services and authorities (e.g., Friziero, Rocco, Scarafiotti 1991). While there is an increasing flourishing market of very expensive old people homes which accept also the non self-sufficient, publicly funded homes have long waiting lists. Moreover, the service they offer to the disabled is often so inadequate, due to insufficient staffing, that families have often to provide integrative care through their own means. At the same time, the creation of ad hoc homes for the chronically ill and the handicapped risks to create ghettos where all kinds of marginal, handicapped, non self-sufficient people are dumped both by families and by health and social services. This risk has been denounced (see the editors’ note, Prospettive assistenziali, 93, gennaio-marzo 1991), for instance, with regard to the funding, by the Italian Parliament, of 140.000 new places in “social assistance health homes” for: “the elderly, particularly those who are not self-sufficient, the mentally ill, drug addicts, psychically and physically handicapped children and adults, AIDS sufferers”.

Recently, in a few cities some initiative has been taken, also through the advocacy of volunteer associations, not only in the well known area of day hospitals, but also in the area of “hospital at home”: gravely disabled and ill people are being taken care of at home by hospital equipes: with a cut on costs for hospitals, but also with general psychological and relational advantage for the persons involved (see Fabris, Pernigotti, 1990).

The above mentioned geographical differences in the distribution of health services are apparent also in strictu sensu pro capite health expenditure by the regions: in 1988 it ranged between 1.342.000 liras in Emilia Romagna and 941.000 liras in
Basilicata. These differences might partly be imputed to demographic structures (an older population needs on average more health services), of course, but this accounts only in part for the variations. As a matter of fact, an analysis of the composition of the expenditure indicates that in the South there is a lower incidence of expenditure for services and personnel, compared to the North, and on the contrary a higher incidence for expenditure for prescription medicines. This in turn is due to the fact that the number of citizens exempted from the payment of tickets is higher in the South: in Italy as a whole the exempted population is 18% of those entitled to health services, but in all Southern regions it is over 24%, touching 41% in Basilicata, while in Lombardy, the Aosta Valley and in the province of Bolzano is under 8% (Formez/Labos 1990). On the contrary, in the South there is a lower presence of such preventive services as family clinics and day hospitals. There is also a lower number of beds in public hospitals in relation to the population. This is particularly visible for the subgroup of the elderly: although the incidence of the elderly is lower in the South than in the North, there are 35 old persons for every hospital bed in the Center-North, 94 in the South. And in the South there is only 20.4% of all day hospitals for the elderly (further informations are offered on Sicily in the Annex ). Old people dismissed by the hospital in the South return to their families more often than in the North, even when they have some kind of disability. This may appear and be a positive phenomenon, but it should be kept in mind that these families have to face the needs of the disabled old all by themselves, with no at home help, often with lack of space, with the collectivity generously providing only for medicines.

Informations on the distribution of health services by geographical areas, and by demographic and social structure of the population are too rough in Italy to offer a clear picture of the availability of these services and of their impact on the standard of living of different population groups. Informations on the use of different services by various population sub-groups only recently started being collected on a more regular basis. Only these informations might allow an evaluation of the redistributive effects of social policies through the provision of social services. As some analysts suggest, in fact, some services can be better used by particular groups of the population, who are often already privileged, while deprived groups are often excluded or have difficulty in using them (Tosi 1989).

The most representative national data in this field come from the 1983 ISTAT survey on households’ structures and behaviors which collected informations on the use of social and health services. Tabb.9-10 show the distribution of use of various health services by demographic size of the commune and by social economic status of the family. The usage rates of four major health services - general pratictioner, specialist, diagnostic tests, hospitalization - are systematically lower in the Southern areas than in the North. Moreover, the use of second level services (specialists and diagnostic services) is higher in the most urbanized areas. The contrary is true for hospitalization,
with people living in small communes being admitted to hospitals more often than those living in large ones. Data on Lombardy, where a Social Survey was conducted in 1986 on a representative sample of households (IRER 1988, Tosi 1988) indicate that the same differences may be found intraregionally: people living in Milan has a use rate of diagnostic services 15-20% higher than the regional average, while they have recourse to specialists 30% more. Viceversa, people living in the small communes are admitted to an hospital 40% more, and use the hospital emergency service 22% more, than those living in Milan.

TAB. 9: USERS' PERCENTAGE OF HEALTH SERVICES IN ITALIAN CITIES BY POPULATION SIZE (1983)

<table>
<thead>
<tr>
<th>Population Size</th>
<th>General Practitioner</th>
<th>Specialist</th>
<th>Hospital Admission</th>
<th>Diagnostic Bureau</th>
<th>Advisory Bureau</th>
</tr>
</thead>
<tbody>
<tr>
<td>North-middle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 100.000</td>
<td>17.4</td>
<td>7.9</td>
<td>1.8</td>
<td>6.1</td>
<td>0.7</td>
</tr>
<tr>
<td>&gt; 100.00</td>
<td>17.1</td>
<td>10.8</td>
<td>1.5</td>
<td>7.4</td>
<td>0.6</td>
</tr>
<tr>
<td>South</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 100.000</td>
<td>15.0</td>
<td>6.0</td>
<td>2.2</td>
<td>5.0</td>
<td>0.8</td>
</tr>
<tr>
<td>&gt; 100.00</td>
<td>14.5</td>
<td>5.1</td>
<td>1.0</td>
<td>5.2</td>
<td>0.2</td>
</tr>
<tr>
<td>Total</td>
<td>16.4</td>
<td>7.8</td>
<td>1.8</td>
<td>6.0</td>
<td>0.7</td>
</tr>
</tbody>
</table>

Source: ISTAT 1985

TAB. 10: USERS' PERCENTAGE OF HEALTH SERVICES BY FAMILY SOCIAL STATUS. ITALY, 1983

<table>
<thead>
<tr>
<th>Family Status</th>
<th>General Practitioner</th>
<th>Specialist</th>
<th>Hospital Admission</th>
<th>Diagnostic Tests</th>
<th>Advisory Bureau</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>High income</td>
<td>9.1</td>
<td>11.8</td>
<td>14.6</td>
<td>23.5</td>
<td>9.3</td>
<td>16.5</td>
</tr>
<tr>
<td>Medium/low</td>
<td>7.9</td>
<td>8.5</td>
<td>7.4</td>
<td>8.2</td>
<td>6.0</td>
<td>15.5</td>
</tr>
<tr>
<td>Low income</td>
<td>0.9</td>
<td>1.4</td>
<td>1.6</td>
<td>2.5</td>
<td>2.0</td>
<td>3.6</td>
</tr>
<tr>
<td>No income</td>
<td>4.6</td>
<td>4.7</td>
<td>5.5</td>
<td>7.7</td>
<td>3.7</td>
<td>6.0</td>
</tr>
<tr>
<td>Total</td>
<td>0.6</td>
<td>0.8</td>
<td>0.7</td>
<td>0.5</td>
<td>0.8</td>
<td>0.7</td>
</tr>
</tbody>
</table>

Source: ISTAT 1985

It looks as if people living in small communes, particularly in the South, has recourse only to the general pratictioner and to emergency services, while people living in large urban areas, particularly in the Center-North, have a more selective use of health services, also in a preventive perspective. Particularly excluded from the use of health services appear individual and families living in the large urban area in the South. The same differences may be found within the social stratification, with the highest social strata using the most specialized services and
the lowest strata using the most basic services as well as the emergency ones.
5. RIGHT TO DECENT HOUSING

a) situations under stress

In the 1971-81 decade in Italy there was a substantial growth of the lodgings available; but in 1981 (Census data) there were still 4.5 millions families (25% of the total) who lived in difficult housing conditions, due to overcrowding (about 2 millions families), improper housing (barracks, cellars and so forth), forced cohabitation. Usually, stressful conditions cumulate: the most crowded lodgings are those where more and more numerous families cohabit and which have more inadequate hygienic services. They are often publicly owned (Zajczyck 1988).

According to ISTAT data, later confirmed by the White Book on Housing by a Commission of the Ministry for Public Works (1988), housing built in the past thirty years only in part satisfied the need for primary housing: the number of lodgings allocated to primary (first) housing increased less than the number of families, while 12% of Italian families own a second lodging. Also the restructuring of old buildings has aimed more to restore prestige buildings than to restore old popular housing.

During this period, builders (usually private enterprises, with only 19% of cooperatives) have preferred to build large apartments. Only 10% of new apartments have 2 rooms and 1.5% has one. This renders even more difficult the matching of offer and demand in the area of housing, since young families and the elderly cannot afford, and do not need, large apartments.

Owner-occupied housing is quite widespread in Italy, although it does not always indicate economic well-being, since part of these owner-occupied apartments are in run-down buildings with inadequate facilities. This is the case, for instance, of many apartments of the most economically modest elderly, who often live in old apartments with no inside hygienic facilities, no central heating, no elevator. Apartment ownership, moreover, is often a forced choice given the scarcity of apartments to let offered on the market at affordable prices, particularly in the cities. As a matter of fact, it has been suggested (e.g. Garonna 1984) that "forced" apartment ownership, with costly mortgages, might have become a cause of family impoverishment since the eighties. In any case, 70% of families owned their apartment in 1987 also a quota of low income families. The percentage was lower (around 58%) in towns with over 50.000 inhabitants (ISTAT 1989). These towns, particularly the largest ones and the province and region capitals, are also those where the difference between the official (given the rent control regulations) and actual rent paid is greater, therefore in which housing costs may weight more heavily on family budgets. Owner-occupied dwellings are on average larger, have more rooms, and their economic value is higher (see also Banca d'Italia 1989). 61% of one room apartments were rented in 1988; respectively 72.7% and 82.9% of 4 and 5 rooms apartments were owner-occupied (see tab. 11). Male headed families own their apartment more often than female headed ones. The latter are
also found more often among those who have redeem-rent contracts as well as among those who have their dwelling for free - a situation particularly frequent in rural areas and often involving sub-standard housing (Banca d'Italia 1989).

TAB. 11: HOUSEHOLDS BY KIND OF HOUSING CONTRACT ACCORDING TO THE NUMBER OF ROOMS. 1988 (%)

<table>
<thead>
<tr>
<th>number of rooms</th>
<th>rent and sub-let</th>
<th>owner-occupied</th>
<th>total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 room</td>
<td>61.4</td>
<td>38.6</td>
<td>100.0</td>
</tr>
<tr>
<td>2 rooms</td>
<td>46.9</td>
<td>53.1</td>
<td>100.0</td>
</tr>
<tr>
<td>3 rooms</td>
<td>39.5</td>
<td>60.5</td>
<td>100.0</td>
</tr>
<tr>
<td>4 rooms</td>
<td>27.3</td>
<td>72.7</td>
<td>100.0</td>
</tr>
<tr>
<td>5 rooms</td>
<td>17.4</td>
<td>82.6</td>
<td>100.0</td>
</tr>
<tr>
<td>&gt; 5 rooms</td>
<td>8.9</td>
<td>91.1</td>
<td>100.0</td>
</tr>
</tbody>
</table>

source: ISTAT 1989

Inadequate housing is becoming a burning issue in such diverse situations as the dilapidated inner city areas of Milan, Rome, Turin, Naples, Palermo, and the "temporary" caravan camps formerly set up as emergency hostels for people whose house had been ruined by some ecological disaster, such as the earthquake in Naples some years ago. These in time have become more or less stable settlements and often host - at the boundary of illegality - permanently homeless families.

Once in a while, forced eviction from dilapidated buildings has rendered public the existence of a numerous and mixed population of immigrants, drug addicts, but also elderly poor and poor lower working class families living in conditions of physical insecurity with the more or less implicit connivence of local authorities. Till some tragedy, or some public protest, renders it impossible "not to see" and people are evicted: some of them being rehoused to a little less dilapidated buildings, others to temporary housing, till the next emergency, the next eviction. One such instance occurred during the fall 1991 in Turin, in a building located in the old center. A recent (January 1992) tragedy in a "temporary" caravan camp near Naples, when three children where burned to death, suddenly rendered visible the existence of such camps, and the unhuman conditions of life they sustain, both at the hygiene level and at the level of social relations, making known the existence of permanent homeless people, who go from one temporary, and often illegal, housing to the next.

b) housing policies

The right to a decent housing in Italy is supported through different measures, which depend on the economic means of the citizens themselves. Briefly, there are 1) supports for those buying the house in which they live, which must also be their first house; 2) rent controls; 3) the provision of publicly owned
housing to be offered, on the basis of an evaluation of entitlements, to families with an income below a certain level, for the elderly with inadequate economic means, for the handicapped; 4) temporary lodgements for people evicted from their former apartment; 5) rent subsidies for those who pay a controlled rent in the housing market and are entitled to social assistance.

In the first case, the buying taxes are lower than in all other cases of such transaction; moreover, the costs for obtaining a mortgage loan are tax deductible. Also, for families whose income is below a given threshold, but higher than that required to apply for public housing, local governments may provide particularly convenient mortgage loans or no cost loans. The latter is, for instance, the case of the "housing bonus" granted by the Piedmont region which gives up to 20 millions at no interest for buying, building or restoring an apartment.

In the second case, since 1978 law n. 392 regulates the amount of rent which may be asked, on the basis of quality of the building, geographical location and so forth. It is called _equo canone_ (equitable rent) and contracts may be made for no less than four years. Given the rigidities of the system in a situation where there is a scarcity of lodgements in large cities, it is well known that the _equo canone_ is increasingly a mere fiction: many owners and lodgers make private agreements which often more than double the value of the official _equo canone_. Moreover, since it is difficult to free one's apartment from one's lodgers, many owners prefer to let apartments only as furnished temporary residences, possibly not to individuals, but to companies. In these cases, in fact, the _equo canone_ is legally not in effect. A further consequence of _equo canone_ has been the discouragement of private investments in the construction area, therefore reducing the number of apartments available for rent. As a matter of fact, many families are forced to save and to indebt themselves in order to buy a house (often that in which they are already living), since they cannot find one for rent. The emergency economic measures approved by the new cabinet in the summer 1992 rent control is gradually being eliminated, starting with new rent contracts and with contracts involving recent buildings. The consequences of this measure on low income families renting apartments on the free housing market under the former rent control system will be seen as the old contracts come to their conclusion.

A few corporate institutions, such as the ENPAS for civil servants, INA, and the like, either own buildings which they let at _equo canone_ to their affiliates, or grant mortgage loans at a very low cost (less then half the usual bank price).

In the third case, the housing is publicly owned or publicly subsidized (law 457/78). In the former instance, the state (using also a special contributions by the employees) finances totally buildings which are owned by the municipalities and by the IACP (The Autonomous Institute for Popular Housing) to be let to
families with low income. In the latter instance a contribution is
granted out of public funds to cooperatives, enterprises, public
institutions, toward the obtaining of a bank mortgage for building
or buying, but also restoring.

Since the early eighties many new "extraordinary" laws have been
approved in this field, under an "emergency logic" and often with
contradictory results. Particularly, law n. 92, 1984, stipulates
that 70% of all newly constructed public building must be
allocated to evicted families and 30% to the elderly and to newly
formed families. Law 118, 1985, contrary to the previous laws,
rules that, in order to meet the housing emergency, the
municipalities receiving public funding should use 80% of it to
buy buildings, and no more than 20% to build new ones.

It must be pointed out that, in the face of a growing demand
for housing, public intervention in this sector is diminishing, as
it is indicated in tab.12

TAB.12: EXPENDITURE FOR PUBLICLY OWNED RESIDENTIAL HOUSING
(YEARLY EXPENDITURE IN BILLIONS)

<table>
<thead>
<tr>
<th>Year</th>
<th>Publicly Funded Building</th>
<th>Publicly Subsidized Building</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ordinary</td>
<td>Stradday</td>
<td>Ordinary</td>
</tr>
<tr>
<td>1982</td>
<td>1.236</td>
<td>387</td>
<td>99</td>
</tr>
<tr>
<td>1983</td>
<td>1.305</td>
<td>212</td>
<td>72</td>
</tr>
<tr>
<td>1984</td>
<td>2.266</td>
<td>313</td>
<td>139</td>
</tr>
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<td>1985</td>
<td>1.725</td>
<td>615</td>
<td>574</td>
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<td>1986</td>
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<td>1987</td>
<td>1.284</td>
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<td>832</td>
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<td>1988</td>
<td>1.156</td>
<td>512</td>
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Source: elaboration by IRES/CGIL, on the basis of CER-Ministri
dei Lavori Pubblici, 1989

According to ISTAT estimates, the number of publicly owned
apartments in 1988 was 1.198.000, making up about 20% of all
apartments let for rent in the country (ISTAT 1988). 800.000 are
administered by IACP, 200.000isch are owned by the municipalities
(see also CRESME/Credito Fondiario, 1988).

Publicly owned housing is let at rents set on the basis of income
on the basis of income to individuals and families who
fulfill specific criteria of need, first of all in terms of low
income (in 1990 the threshold defined at the state level was
around 11 millions a year, but different regions set slightly
different thresholds. In Piedmont, for instance, it was 13,5
millions). Priority (the highest number of credits - 4) is given
to those who are evicted from the apartment they lived in;
therefore individuals and families who have a low income and live
in unsuitable or overcrowded conditions may be bypassed by
families with a higher income, but who are evicted. The number of evictions which has been constantly increasing in the larger cities (there were 8,000 such cases in Turin in the summer 1992) has therefore pushed to the bottom of the queue the so called “social cases”: those who do not have a lodging from which they may be evicted, since they live in so called improper housing or in cohabitation with other families, or are newly married and are looking for their first apartment. To be old or handicapped gives credit, but does not increase the income threshold below which one is entitled to such housing. Particularly in the case of the handicapped, who usually live within their family, the income threshold may be too low and unrealistic, given the higher costs usually born by a family with an handicapped member. Moreover, since most public housing is old and with architectural barriers (no elevator, steps and so forth), de facto many handicapped and elderly people are prevented from making use of this resource. Immigrants are excluded by the state law, but a few regional laws include them if they have been legally living in Italy for at least one year.

In synthesis, the same number of credits (2) is acknowledged to such diverse situations as: living in overcrowded housing inhabited by more than one family nucleus; having a 71% to 80% handicap; having been married for less than two years; being over 60, not working and with dependent children; being returning immigrants wage workers who wish to resume residence in Italy.

Public housing is a means tested measure, targeted to families with modest economic means, although not to the neediest (since lodgers must be able to pay regularly their rent). The fourth and fifth kind of measure are more clearly targeted to the neediest, including the psychically handicapped who are let out from the hospital and do not have a family to go back to. We will describe these two measures in the Third part of this report.

The present system of publicly owned housing is heavily criticized not only because it is largely inadequate, but because controls on the actual entitlements of the lodgers are not always very accurate. Moreover, while families whose income grows above the income threshold are not turned out, but only their rent is adjusted, there is a large quota of lodgers who do not pay, or pay erratically. And a quota of lodgings is even abusively occupied. As a consequence of all this, in quite a few cases the upkeeping of the buildings and even the physical security for those who live there is not always granted.

Law 412, approved at the end of 1991, has opened the possibility to lodgers in publicly owned and built apartments to buy them, if they have been living there for at least ten years and have paid their rent regularly. About 660,000 such apartments will be involved. If the occupants do not want to buy them, they will be granted another apartment. The specific conditions for such an operation are still to be defined. The aim is, on the one hand, to obtain fresh money, since all these institutes have more
or less heavy deficits; on the other hand, to be able to get new funds to build new apartments, given the growing demand which at present cannot be satisfied.

Of course, if this offer, with its formula rent-towards-buying - certainly meets the needs and the resources of a large quota of families who could never buy an apartment on the free market, it leaves out those who have difficulty even in paying modest rents and can offer little assets towards a mortgage.

To synthetically summarize the options opened (or closed) to those who have a housing problem, we might indicate the following possible paths:
* renting an apartment→being evicted→housing need→public housing
* handicap→housing need→inadequate income→public housing
* handicap→housing need→income above the threshold→no public housing
* handicap→housing need→inadequate income→unavailability of adequate public housing→no housing.
6. THE CONTRIBUTION OF OTHER GENERAL POLICIES TO COMBATING SOCIAL EXCLUSION

a) Positive actions concerning women

Specific attention should be given to measures aimed at encouraging women’s paid work and at eliminating labor market discriminations, in so far these, together with the gender division of labor in the family, are responsible for the specific risk women incur of falling into poverty. The measures may be of three kinds: measures within the school and training curriculum and in labor market orientation; “indirect” support measures, taking account of the specific women’s needs and life course events (pregnancy, maternity), as well as of the responsibilities usually allocated to women in the family; measures aimed at supporting women within the labor market and in their careers. Here I will briefly mention the second and third kind of measures.

Working mothers are entitled to a compulsory leave two month before and three months after delivery, with 70% of pay and right to seniority guaranteed. They can also extend this period up to the first birthday of their baby with a decreasing pay. This further optional period can be taken by the father instead than the mother. Up to the third year of the child, mothers (or fathers) can take days off at no pay if the child is sick. All women employed within the official labor market are entitled to this right and the entitlement is extended to adoptive mothers. A measure granting a flat rate benefit to self employed new mothers has been approved in 1987, and a similar measure has been approved for mothers in the professions in 1990.

Children of (officially) working mothers are the privileged target of nursery schools for children under three (which cover only a fraction of children in this age bracket - from under 5% to over 30%, depending on locality) and are entitled to longer kindergarten schedules (kindergartens in Italy cover about 80% of children). Although nursery schools are certainly targeted on working mothers, however, while they do not cover even all children of officially working mothers, they mostly exclude children of women working in the informal economy. Moreover, the linkage of the offering of the service to the status of worker can create a vicious circle for those women who wish to enter the labor market but cannot do so because of the caring needs of their children.

In Italy there are two national commissions for equality between men and women (one at the Prime Minister Office, the other at the Ministry of Labor), and there are commissions at the regional and municipal level. In many places the figure of the “equality counselor” has been created. Moreover, in 1977 law 903 introduced the principle of equal opportunities and treatment between the sexes in the workplace. Yet, there are no many positive actions initiatives going on in Italy at present - ISFOL calculates they are just a few tens, only one of which has been completed. All of
them have been promoted by trade unions and they are mostly located either in private industries (textile, food processing, building and electronics) or in the public service sector (local administrations, banks, services). Their numeric incidence is very low.

In a few local situations (e.g. in the Emilia Romagna region), the equal opportunity commission sponsors services aimed at counseling and training middle age women having or wishing to return to work. Women using these services are often separated or divorced ones, or else women having completed their childbearing years. The evaluation of the impact of these services is difficult, not only because data are lacking, but also because they may have different focuses - aims - to begin with. In any case, an accurate evaluation would need a focused monitoring of specific projects and programs.

On April 10, 1991 the Italian Parliament has approved the law on "Positive actions for the obtaining of equality between men and women", which is also the fulfillment of recommendation 63574 of the EC Council and takes into account the priorities indicated in the 1991-95 EC Programme. In art. 1, par. 1, this law declares: "The dispositions contained in this law aim to encourage women's employment and to realize effective equality between men and women with regard to paid work, even through measures, called positive actions for women, aimed at removing the obstacles which impede the realization of equal opportunities". Syntetically (see also the comments by Ballestrero 1992), there may be: a) positive actions aimed at removing existing discriminations; b) positive actions aimed at encouraging, through focused training, more diversified choices by women; c) positive actions aimed at favoring, through a different organization of paid work, a balance between paid work and family responsibilities and a better division of the latters between the sexes (see lett. e); d) positive actions aimed at favoring self employment and cooperatives. Actions may be taken by public institutions, employers, trade unions. A National Committee for equality between the sexes has been created at the Ministry for Employment, with the responsibility of evaluating and funding all the proposals of positive actions. An equality counselor, with power of intervention, will be nominated at the regional and municipality level. Regions must draw their own laws, in application of the national one.

From the point of view of its impact on social emargination it is too early to offer evaluations. The first projects have been approved in mid-December 1991. A first reading of the law, and some of the regional bills now under discussion, suggests the possible risk that a focus on adult women and on training (and not also on orientation and support in school), might leave out the younger women with little schooling and no qualification, who are liable to be at the margin of the labor market. These run the higher risks of falling into poverty because they cannot manage to marry a breadwinner, or because they loose him through death or separation.
b) measures for the handicapped

In January 1992 a so called "framework law" was approved unifying all pre-existing laws concerning the rights of the handicapped and the duties of the collectivity towards them. It is too early to evaluate its effect, since the regions must approve their own implementation laws and regulations and take the needed initiatives, although many cases (such as that of education, or of training and job insertion) specific laws existed already. The law defines the right to health care since pregnancy; to support to social integration through various measures to be taken by local governments, including at home help, the elimination of architectural barriers, transportation and so forth; to education and school with no limitation due to the school or to the gravity of the handicap itself (Schools therefore must fit themselves to receive handicapped students and teachers must be specifically trained); to professional training and to job insertion; to sport and leisure activities; to housing, in so far a quota of public housing should be built according to the special needs of the handicapped. The family member who cares continuously for a seriously handicapped person can have his/her social pension increased from 50 to 100%. Apparently no analogous provision (i.e. pension rights) is made for those who are not entitled to a social pension because of income, even if their income has been kept low due to their caring for the handicapped. If a wage worker decides to take care full time of a handicapped family member she/he has the right to an unpaid leave, maintaining his/her job place, and having the leave period counted toward his/her pension. No provision is made for those who reduce their working time, therefore their income, in order to take care of a handicapped person.

c) measures concerning the immigrants

Since 1986 there have been subsequent attempts to normalize the presence of non EC and particularly Third World immigrants in Italy. First law 943, 1986, then law 81,1988, tried to legalize the presence of those who had entered without permission. They were not very efficacious, due to the little knowledge of the law by the immigrants themselves, the fear they had to loose that little they had obtained (a job in the black labor market, a lodging), the fear to be sent back if for some reason they did not meet the law’s requirements. Only 118.709 persons had legalized their residence by 1989 on the basis of those two laws over a period of three years. In 1990 a more comprehensive law, n. 39 - the so called Martelli law, by the name of the Minister who proposed it - was approved. It aimed first at, once again, legalizing the presence of those who were already here, while granting them clear rights: to be protected under social security if they had a job and if the employer denounced it, receiving in exchange the guarantee not to be denounced for the former illegality; to register in the unemployment office; to register to the local registry office and therefore in the National Health Service; to be reached by one’s own family (but only if one has a
legal and regular job and an adequate income). At the same time, it set rules concerning those who in the future might apply for a sojourn permit and introduced the need to have a visa if coming from countries from where the immigration fluxes were greater: Tunisia, Morocco, Senegal. The law was greatly publicized, in all languages, including those of the immigrants. Immigrants' associations were asked for collaboration in order to persuade their countrymen to register. In a few months, 204,000 persons were legalized (there are now about 695,000 non E.C. immigrants in Italy with a regular sojourn permit) (on the different implementations of this law at the local level see Forti 1990).

Within a general consensus, the debate around this law developed on art. 2, par. 3, which rules that the planning of the entrance of non EC immigrants in the country must take into account: a) the needs of demand, therefore of nationally economy; b) the availability of financial resources and administrative structures aimed at granting an adequate reception to foreign citizens; c) the needs of "offer", i.e. the requests by non EC citizens already present in the national territory, either irregularly, or with a student or tourist permit; d) international relations and obligations. The most critic against the law were particularly concerned with point c), since it allowed a generalized legalization-on-demand to those who were already in Italy, irrespective of the availability both of jobs and of adequate reception resources. They were also concerned lest the non EC immigrants enter in competition for jobs with the unemployed Italians. As a matter of fact, with regard to the measures granting adequate reception and integration, the law is very evasive on the specific standards, requirements, measures that should be taken and granted and also on the possible conflicts which might arise.

Critics from opposite perspectives pointed out that the law leaves too much discretionality to local police offices in determining the concrete criteria for giving the sojourn permit and particularly to renew it. Art. 4, par. 8 of the law says that the first renewal of the permit (the first permit lasts at most two years) is conditioned to the having an income at least equivalent to the amount of the social pension. Yet, many local police office require that this be certified for the past two years and do not admit that a person might have been just fired. Of course, all the immigrants who work at the boundaries of the official labor market, or only within the black labor market (analogously to many Italian youth and middle aged women), cannot easily demonstrate their income and are bound either to be expelled or to remain permanently clandestine, therefore losing all their social rights (health services and so forth). These difficulties for the first renewal, make it difficult for the immigrant to reach the minimum five year of continuous legal sojourn which are required to be able to ask for citizenship, therefore to be protected by the constant threat of expulsion.

Also the right to health assistance is less secure than it appears, since those who are not automatically registered through their employer must ask for it themselves and are not always
informed about this requirements and the whole procedure. They are therefore more liable to use emergency services, such as the hospitals’ first aid stations, than the family doctor.

Also housing continues to be difficult to find for immigrants, which in turn prevents them from re-uniting their families and generally to have a minimum decent standard of life. A 1989 study by CENSIS in Rome indicated that only 2.7% of non EC immigrants rented an apartment for themselves. The others were in much more precarious situations, including 18.5% who were totally homeless. More generally, no real infrastructure for receiving and supporting the immigrants has been prepared at the local level in any systematic way, although fragmented measures are now in the making. The bulk of the work is still on the shoulders of volunteer associations and of self help groups.

The law, therefore, risks to fail exactly where it is more promising: in granting social rights and therefore in rendering the immigrants more similar to Italian citizens (Nascimbene 1990). It might even increment the area of exclusion and social marginality, in so far it encourages some to remain, or drop, in clandestinity and other to keep commuting between Italy and their country, remaining for a while, being expelled, coming back, and so forth, without being able to cumulate the required "credentials".
PART III: AD HOC POLICIES FOR COMBATING SOCIAL EXCLUSION

1. NATIONAL POLICIES

Most ad hoc policies, outside those provided for within general policies, are provided at the local level in so far local governments are specifically responsible for social assistance. This is true for vital minimum, una tantum income subsidies, rent allowances, temporary housing, as well as help at home for the invalid elderly, transportation services for handicapped people, protected housing and workshops for the handicapped, job insertion for the most marginal groups, and so forth. Moreover, as already mentioned, most national legislation in the area of social policy requires that each region implements it through a specific regional law of its own. This passage can take a different time (in months, but also in years) in different regions, with consequences on the implementation of national laws themselves. Even more locally based are, of course the actions by non profit or volunteer associations.

Two national laws, however, approved in the second half of 1991 and already mentioned in part I have somewhat changed the framework for public/private cooperation in this area at the local level and deserve a synthetic presentation, since they redesign the Italian “welfare mix”.


This law provides a legal framework within which volunteer associations may be acknowledged as interlocutors of the state and local governments in performing social services and social interventions (see art. 1, par. 2), therefore may be allocated funds as reimbursement for the cost in performing services. Therefore, it defines the criteria by which an association may be defined as volunteer: it must be based on the unpaid volunteer work of its members, although it may, with some limitations hire paid personnel; and it must be oriented by a solidaristic perspective. In order to be acknowledged as a possible partner by local authorities and also to be admitted to fiscal facilitations it must have a clear organizational structure and must be registered. Local governments may stipulate contracts with one of these association for the performing of specific activities in the area of social solidarity - from work with drug addicts to work with the invalid elderly, children and families in difficulty, immigrants and so forth, depending on the specialization of that particular association and its granting continuity in the performing of the activity itself (art. 7, par.2).

Within a general consensus, some critiques have been already levelled against this law, which has been approved after a long and conflictual process. Individuals, for instance, are excluded and also small, informal groups might find some difficulty in being registered and therefore in being acknowledged as possible partners by local governments. This means that informal voluntarism
might de facto be discouraged and only large, powerful and potentially bureaucratic associations favoured (see for instance Preite and Rossi 1991). Also, there is the risk that only those activities which offer some kind of gratification to the volunteers, as well as a high social visibility to the associations, will see such an intervention, while those phenomena which cannot offer this kind of exchange value might be left aside: drug addicts and, now, immigrants certainly receive more attention than the general homeless, the drunkards, the chronically ill, the violent families and so forth. Finally, there may be the risk that the state and local governments totally delegate the definition of problems and methods to volunteer associations, without de facto defining their own priorities. A different kind of critique points out that since this law encourages cooperation with the state and local government, through financing by the latter, it is liable to deny the status of volunteer association to those groups which are critical of existing social policies, or which denounce mispractice and abuse by public services and powers. Therefore it might discourage, or at the very least ignore, those groups which are more active in defense of the rights of the weakest and most marginal subjects (see "editor's note", Prospettive assistenziali, 96, ottobre-dicembre 1991).

Yet for the first time with this law there is a public acknowledgment of the relevance of volunteer activities -as human resources of a specific kind- particularly in the area of potential or effective social emargination (for a detailed analysis of this law and of its potentialities, see Rei 1992).

-Law n 381, November 8, 1991: Regulation of social cooperatives

Art. 1, par. 1 of this law explicitly states that social cooperatives “aim to fulfill the general interest of the community in relation to human development and to social integration of citizens through: a) the organization and management of social and educational services; b) the performing of different activities - in agriculture, industry, the tertiary sector - aimed at the work insertion of disadvantaged people”.

Point a) defines a second way in which public and private partnership may be framed in the area of social services. The state and local governments may recourse to social cooperatives instead of organizing social services (of various kinds, not only with regard to social exclusion) on their own. Point b), instead, specifically addresses the issue of social emargination. Social cooperatives which have this second aim, in fact, must be made up for at least 30% by “disadvantaged people”, whose status as such must be documented. The law defines as “disadvantaged”, for the purpose of this law, the physically disabled, persons out of mental hospitals and being treated for psychical troubles, drug addicts, alcool dependents, children of working age in difficult family situations, incarcerated people who have the permit to work out of prison during the day, ex incarcerated persons, plus a number of other persons who may be declared so by an ad hoc commission. These cooperatives have a specially favourable fiscal treatment and may receive subsidies by the state and local governments. They must be registered and can stipulate contracts
with local governments.

The regions have a year time to approve their own regulations for its implementation.

- **Provisions concerning drug addicts**

Another area in which national legislation sets the framework for intervention in an area of potential social exclusion is that of drug addiction.

According to experts, the experience of drug dependence in Italy has polarized in a phenomenon of semi-normality on the one hand, when the drug users continue to live in their families, try to keep their job and refuse radical therapeutic approaches, such as entrance in a community; in an increasing health risk on the other hand. The number of drug users who prove positive at the AIDS test is increasing: a recent estimate calculates that 28.7% of drug addicts who use public health services are in this situation (at present 7 out of 10 public health services which cater to drug users have instituted a routine screening for AIDS).

Italian legislation in this area is now gathered in T.U. 309, 1990. There is a National Fund, at the prime Minister office, for interventions in the cure and rehabilitation of drug addicts. Both public and private actors can apply for a share, on the basis of a specific project. In 1990 the fund comprised 176 milliard liras. The presence of volunteer and non profit actors in this field is very high, often within some kind of convention with local or state government. Particularly, in private non residential structures volunteers constitute up to 70% of the personnel (Labos 1989).

Measures available to drug addicts who accept to enter a therapy are, together with different kinds of therapy, income support measures (up to the Vital Minimum, particularly in the Center-North) and the payment of cost of a place in a community. They may also receive training and be inserted in a job-insertion project. If they have a regular job, they are entitled to maintain it up to three years, if they are in therapy.
2. LOCAL POLICIES BY LOCAL GOVERNMENTS AND NON PROFIT AGENCIES

We will now synthetically present the main measures which at the local level are aimed at the groups at risk of social exclusion or which are de facto experiencing social exclusion. Given the variety not only of policies, but of groups at risks, this cannot but be a partial list.

a) income support

We already mentioned that local governments are responsible both for defining and for granting vital minima. Usually, the social categories which are the main targets of this are the elderly social pensioners, the handicapped poor and, lone pregnant women, female headed families with minor children, families whose head is a drug addict, or mentally ill, or just out of prison, minors who are awaiting to be fostered or who, due to their family situation, must live on their own, young adults who, having been previously fostered or hosted in children’s homes, must complete their training and are not yet self sufficient, and so forth. Except in the case of the elderly and the handicapped, all these measures are usually of an extraordinary and temporary (from three months to a year, with longer periods only for minors) character and are usually linked to a social insertion project developed by the local social assistance office.

In addition to this, local, municipal, governments usually may grant - on a more or less discretionary basis - una tantum income allowances, rent, heating and clothing subsidies and so forth.

Able bodied adults with no dependent children usually receive the shorter and less generous kind of these measures, if they receive anything at all.

b) job insertion and employment policies concerning the socially disadvantaged and excluded

Long term unemployed are offered temporary (up to six months) jobs with minimum pay in so called cantieri di lavoro: public works programs. Originally developed in the most economically depressed rural areas, since the eighties they have encountered an unprecedented development also in industrial Northern towns. The little qualified are favoured with respect to the better qualified applicants and the older over the younger. Only one person per family may be hired in this kind of jobs, and those who have been so employed one year generally cannot apply the next year.

The first social category to be institutionally perceived as “disadvantaged” and therefore in need of special support for job insertion has been that of the physically disabled. Law 482, 1968 compelled all companies who had more than 35 employees to hire a
quota (15% of the total labor force) of disabled workers. This law has been heavily criticized over the years, in so far it has created a bureaucratic apparatus without granting really a job insertion to the physically (but also socially - war orphans and war widows, orphans and widows of workers died because of their job, refugees) handicapped, who are hired not on the basis of their specific training and professional competence, but on the basis of a quota to be filled. A reform of this law has been pending, without success, for many years. Four reasons for its failure have been detected: 1) changes in the labor market with a reduction of the employees within large companies, therefore of the number of places theoretically available for the disabled; 2) the increasing recourse to the Earning integration Fund; 3) the increasing focus on specific training and competences by employers, who resist the obligation to hire from lists on the basis of the list order (see also Buzzi 1991), which in turn impedes a proper fitting between the disabled's capacities and the job offered; 4) changes in the composition of the weak sectors of the labor force: while some categories - war orphans and widows - are disappearing, others - physically as well as psychically handicapped, drug abusers and so forth - are increasing or appearing for the first time, due to changes in social policies (schooling offered to the handicapped, the closing down of psychiatric hospitals) and in personal behaviors (drug abuse) (see also Frisanco 1991).

While the state does not succeed in changing its law (but for its enlargement to cover, together with the physically disabled, the psychically disabled, on the basis of a sentence by the Supreme Court, n. 50, 2.2.1990), regions have been approving their owns, trying to overcome those limitations, often in cooperation with actors and groups of the civil society (for a synthetical presentation of the problems posed by this law and of the measures taken at the local level see Borzaga 1991).

Since regions have no specific competence in the area of employment policy, however, they have tried to support the job insertion of so called "weak subjects" by using their social assistance competences. As a consequence, the management of these initiatives has usually been allocated to social assistance institutions and social services, with obvious shortcomings and distortion of aims. Generally, regional interventions have tried to favour the linkage between demand and offer, taking into account the needs and constraints both of subjects and of employers. At first, regions have tried to facilitate the implementation of law 482. Particularly, a number of "focused insertions" have been tried, encouraging not the hiring on the basis of position in the special list, but on the basis of the specific qualities of prospective (disabled or disadvantaged) workers and of the jobs offered, also monitoring the job insertion process during the initial phase (this is particularly true for the handicapped); moreover, a greater attention has been given to training, both in specific classes and on the job (a bill is
pending for approval, for instance, in the Piedmont region, asking for preparatory-to-work classes for psychically handicapped people); finally, financial supports and exemptions have been granted to companies which hired this kind of workers. In a second phase, particularly from the eighties on, the categories of "weak subjects" to be supported through specific job insertion measures were widened to include also "socially disadvantaged individuals" (school drop-outs, drug addicts following a re-habilitation program and so forth).

Regions have increasingly entered partnerships in this field with social actors different from "traditional" enterprises and employers: particularly cooperatives have become an increasingly privileged partner both in training and in job inserting the weakest groups.

Also at the level of civil society there has been a change in outlook and policy. There are, in fact at least three kinds of initiatives which have been present to a different degree in different periods:

a) Protected workshops for the physical and psychical handicapped were developed mostly in the sixties and early seventies. They aim at offering the handicapped the opportunity to have a work activity in a setting of their own, without aiming either to develop their professional skills, or to subsequently insert them in a "normal" work setting. This initiative has no aim of economic self-sufficiency and it is mostly a social assistance measure.

b) The "integrated work and production cooperatives" were developed mostly as a consequence of the de-institutionalization of psychiatric patients in the seventies. They aim at inserting these persons in work activities in cooperatives together with "normal" workers. Their productivity should be high enough to cover at least the costs.

c) "Social cooperatives" are similar to integrated cooperatives in the organizational framework, but differ from them in the aim, in so far they tend to temporarily employ so called weak subject in order to train or re-train them and render them capable to insert themselves in the "normal" labor market.

The latter two cooperative forms developed quickly in the past few years, particularly in the Northern regions, where the highest quota of long term unemployed is made up of "weak subjects". They appear particularly efficacious in the area of integration and recovery of this kind of subjects and the regions have been quick in acknowledging this through financial contributions or through demand for their services (for example, hiring these cooperatives for the upkeeping of parks or for the performance of different services). The above mentioned law on social cooperatives should stabilize the normative framework of this partnership.

c) housing

As we wrote above, precariousness of physical, psychical or family conditions gives credit toward one's own position in the
queue, but is not considered a high priority in the allocation of public housing. Housing emergencies are met by local (regional and municipal) regulations, one of which is to reserve each year a quota of public housing for so called "social cases". In Piedmont, this quota has been raised from 15 to 25% of available lodgings, to be temporarily allocated to people out of psychiatric hospitals, out of prison, out of children's homes, to unwed mothers, to the poor elderly. A municipal commission evaluates the cases which are signalled by social assistance services. Its decisions must be confirmed by a regional commission. There is also a number of lodgings which may be provisionally allocated directly by the (elected) municipal officer him/herself. Citizens must apply directly and the officer evaluates the gravity of the situation and decides with no further authorization by any commission. Without considering the abuses and clientelisms which might arise from such a procedure, it must be pointed out that this last resource is open only to those who know that such an opportunity exist, or to those who can activate a lobby which can offer some kind of "political exchange" to the officer.

In absence of available lodgings in publicly owned buildings and in presence of emergency needs, people and families may be temporarily lodged in low cost/low class pensions and hotels. This is the case for many persons out of psychiatric hospitals who do not have a family who can host them and cannot find a place either in a community or in a protected housing. It is a very costly solution, and at the same time a very unsatisfactory one, since it prevents a really structured everyday life.

Homeless individuals may find temporary hostel in public or private (volunteer staffed) dormitories, where they sometime may also receive a meal. There are often ad hoc institutions for women, particularly for young women, for young males, for immigrants (often on the basis of the country of origin). Each such institution has its own rules concerning those who may be accepted and for how long. The period covered oscillates from 15 days to six months and it varies not only among institutions, but also according to the citizenship and the working status of the applicant: The unemployed are allowed a shorter time than the employed, immigrants are allowed a shorter time than Italians (see also Pellegrino, Verzieri, 1991).

d) immigrants

Immigrants make up the army of the improperly or inadequately lodged, more than that of the homeless. They are more numerous among those living in overcrowded settings, often paying an illegal rent, often only for a bed they might use on a rotating basis, than among those asking for hospitality in Centers (according to a Caritas' evaluation, 14.5% of African immigrants is hosted in such centers). This might be also because, although the setting up of centers to give first hospitality to immigrants is stipulated in the Martelli law, little has been made at the local level and those which exist depend from volunteer
associations (see also Città di Torino 1991). When they are hosted in a Center, immigrants may or not have to pay something, depending on the Center’s policy but also on the municipality’s policy. For instance, in a particular center in Turin (Sermig) entrance and the bed place are free, since the municipality pays a daily fee of 18,500 liras. In some centers the guests have only a castle bed, in others they have the use of the kitchen, where they may prepare their own meals as a family or as a group.

With regard to health, all the immigrants who for some reason (illegality of presence in the country, or lack of informations) are not registered in the National Health Service, make use of the hospitals’ first aid station, where they receive free treatment. In some cities they use also the family clinics and receive inoculations. Women particularly make use of family clinics and receive help with the health of their children. Social workers denounce the difficulties they meet both in explaining to physicians the particular diets and uses of the different ethnic groups, for instance during pregnancy, and in managing the problems they encounter with immigrants drug addicts (who are bound to be imprisoned more easily than the Italians) and with psychically suffering or mentally ill immigrants (all informations are taken from interviews with social workers in different towns and particularly in Turin).

With regard to school and cultural insertion, according to the law only the children of legally present immigrants could attend day care centers and kindergartens. The same should be true also for elementary and middle school. Yet, in many towns with a high presence of immigrants many (elementary and middle) school heads accept non resident immigrant children. Ministerial letter n. 205, 1990 (“Compulsory school and foreign students”), aimed at implementing the Martelli law in this field, stipulated a number of provisions to be developed such as language support, the presence in the school of experts in the children’s mother-language, the use of the 150 hours instrument to teach adult and youth immigrants our language and culture. Yet, they are still at a very starting and experimental stage.

Finally, legal but particularly illegal immigrants who cannot find an adequate lodging and cannot take care of their children may, with the help of social assistance services, send them to those very children’s institutions which in the past years have been gradually emptied due to the new law on adoption and on fostering. These institutes, which are considered inadequate or risky for Italian children (see Pavone et al. 1985, AA.V.V. 1990), are apparently filling up again with Third World children as a last resort solution. This solution may also be used to avoid sending back to their country the children of those immigrants who have not succeeded in meeting the requirements for being allowed to re-unite their family. In this case, the national and international regulations on the rights of children (to education and assistance) may be used to counter the strictures of the law
on immigration. In any case, this is mostly left to the decision of social workers and to negotiations with police and immigration offices.
e) ...etcetera

Many other different policies exist at the local level for particular categories of the population at risk: support services in education for children living in deprived or stressful family situations, shelters for battered women and children, at home help and hospitalization at home for frail or invalid elderly and the handicapped, self help groups organized by families with members suffering for various kinds of handicaps or by suffering handicapped themselves, fostering services which find foster families for children in stressful situations and help foster families to deal with the problems they meet, and so on and so forth. These services are either organized by local government themselves, or by non profit or volunteer organizations or social cooperatives, often in cooperation with local government themselves.

Both gathering informations on all the different initiatives and measures available and describing them in detail would be impossible here, not to mention offering evaluations on their efficacy. Yet, provisions existing at the local level are of crucial importance not only for the everyday life of people with adequate means, but even more for people having less than adequate means or in stressful situations. Given the budget constrains which will increasingly characterize social spending in the next years due to the size of the Italian public debt and the EC requirements, local provisions will at the same time become more fragile and more crucial for an increasing portion of the population.

Further informations on local policies in the area of social exclusion, with particular regard to social services as well as to specific categories of potentially excluded, may be found in the Social Services Report prepared for the Observatory in the Spring 1992.
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