



# Active ageing policies in Italy

## Report on the state of the art

"National multilevel co-managed coordination of active ageing policies in Italy" project

Work Package 2 – Task 1

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## List of acronyms

AA	Active Ageing		
AAI	Active Ageing Index		
AAL	Active and Assisted Living		
AFA	Attività Fisica Adattata (Adapted Physical Activity)		
ANAP	Associazione Nazionale Anziani e Pensionati (National Association of Older People and Retired		
ANBSC			
criminalità organizzata (National Association for the Administration and Allocation of Seized and Confiscated from Organised Crime Syndicates)			
		ANTEAS	Associazione Nazionale Tutte le Età Attive per la Solidarietà (National Association of All Ages
	Active for Solidarity)		
APe	Anticipo Pensionistico agevolato (Facilitated Pension Advance)		
AS	Agricoltura Sociale (Social Farming)		
ASDI	Assegno di Disoccupazione Involontaria (Involuntary Unemployment Pay)		
ASL	Aziende Sanitarie Locali (Local Health Authorities)		
AST	Ambiti Sociali Territoriali (Local Social Authorities)		
BES	Benessere Equo e Sostenibile (Sustainable and Equitable Well-being)		
CCSD	Centro di Competenza sulla Sanità Digitale (Centre of Competence on Digital Healthcare)		
CIDU	Comitato Interministeriale per i Diritti Umani (Interministerial Committee for Human Rights)		
CONI	Comitato Olimpico nazionale (National Olympic Committee)		
CPIA	Centri Provinciali per l'Istruzione degli Adulti (Provincial Centres for Adult Education)		
DGOSV			
istruzione (Directorate-General for School Systems and the Evaluation of the National Education System)			
		DIPOFAM	Dipartimento per le Politiche della Famiglia della Presidenza del Consiglio dei Ministri
	(Department for Family Policies of the Presidency of the Council of Ministers)		
DPO	Dipartimento per le Pari Opportunità - Presidenza del Consiglio dei Ministri (Department for		
	Equal Opportunities - the Presidency of the Council of Ministers)		
EIPAHA	Partenariato europeo per l'innovazione sull'Invecchiamento Attivo e in buona salute		
	(European Innovation Partnership on Active and Healthy Ageing)		
Elki	Centri genitori-bambini (parent and children centres) (AP Bolzano)		
EU	European Union		
FRA	European Union Agency for Fundamental Rights		
FSE	Fondo Sociale Europeo (European Social Fund)		
ICT	Information and Communication Technologies		
INAPP	Istituto Nazionale per l'Analisi delle Politiche Pubbliche (National Institute for Public Policy		
	Analysis)		
INRCA	Istituto Nazionale Riposo e Cura per Anziani (National Institute of Health and Science on		
	Ageing)		
IPAB	Istituzioni Pubbliche di Assistenza e Beneficenza (Public Assistance and Welfare Institutions)		
IRCCS	Istituto di Ricovero e Cura a Carattere Scientifico (Hospital and Research Institute)		
ISMEA	Istituto di Servizi per il Mercato Agricolo (Institute of Services for the Agricultural Market)		
LEA	Livelli essenziali di assistenza (Essential levels of care)		

MAECI	Ministero degli Affari Esteri e della Cooperazione Internazionale (Ministry of Foreign Affairs	
	and International Co-operation)	
MEF	Ministero dell'Economia e delle Finanze (Ministry of Economics and Finance)	
MIBACT	ACT Ministero per i Beni e le Attività Culturali e per il Turismo (Ministry for Cultural Heritage an Activities and Tourism)	
MINT	Ministero dell'Interno (Ministry of the Interior)	
MIPAA	Madrid International Plan of Action on Ageing	
MIPAA/RIS	MIPAA/Regional Implementation Strategy	
MIPAAF Ministero delle Politiche Agricole Alimentari e Forestali (Ministry of Agricultural, Food		
	Forestry Policies)	
MISE	Ministero dello Sviluppo Economico (Ministry of Economic Development)	
MI	Ministero dell'Istruzione (Ministry of Education)	
MLPS	Ministero del Lavoro e delle Politiche Sociali (Ministry of Labour and Social Policies)	
OECD	Organization for Economic Co-operation and Development	
OEWGA	United Nations Open-ended Working Group on Ageing	
NASPI	Nuova Assicurazione Sociale per l'Impiego (New Social Insurance for Employment)	
AP	Autonomous Province	
PAIDEIA Piano di Attività per l'Innovazione dell'Istruzione degli Adulti (Activity Plan for the Inno		
	of Adult Education)	
PAR	Piano di Azione Regionale per la popolazione anziana (regional plan of action for seniors)	
	(Emilia-Romagna region)	
PNP	Piano nazionale della prevenzione (National Prevention Plan)	
POR	Piano Operativo Regionale (Regional Operational Plan)	
PRISMA	Programma di Ricerca sull'Integrazionedei Servizi per il Mantenimentodell'Autonomia	
	(Research Program on the Integration of Services for the Maintaining of Autonomy)	
PRP	Piano Regionale della Prevenzione (Regional Prevention Plan)	
PSSR	Piano Sociale e Sanitario Regionale (Regional health and social Strategy)	
SDG	Sustainable Development Goals	
SNSI	Strategia Nazionale di Specializzazione Intelligente (National Strategy for Smart Specialisation)	
SSN	Servizio Sanitario Nazionale (National Health Service)	
ULSS	Aziende Unità Locali Socio-Sanitarie (Local Social-Healthcare Units) (Veneto region)	
UN	United Nations	
UNECE	United Nations Economic Commission for Europe	
UTETD	Università della terza età e del tempo disponibile (University of the Third Age and of Free Time)	
WGA	UNECE Working Group on Ageing	
WHO	World Health Organization	

## Preface

The demographic crisis is one of the most pressing matters of our time and the one that the Covid-19 health emergency risks aggravating with significant repercussions on the growth and economy of Italy. The declining birth rate is mirrored in the soaring ageing of the population with Italy ranking in fourth place, out of the 36 countries in the OECD, in terms of life expectancy, with an average of 83 years.

The fact that people are living for longer is, in itself, a positive fact. However, it is fairly evident that rapid ageing of the population requires concerted public action to support generational integration and to promote active ageing in order to combat the potentially negative consequences in terms of standards of living, welfare, employment, the benefit system and the public finances. The Department for Family Policies - in carrying out its institutional mission and in line with the mandates of the Minister for Equal Opportunities and the Family, Prof. Elena Bonetti, - is highly committed to promoting and linking Government actions aimed at ensuring and guaranteeing the policies and the protection of the rights of the family, in all areas and in all its components.

The report presented here constitutes one of the main results of this commitment and represents a momentous event to be shared as it is the culmination of the collaboration envisaged in the three-year agreement signed with the Istituto Nazionale di Riposo e Cura per Anziani – IRCCS INRCA, the main Italian scientific research institute in Ancona, and of the consequent participation of the central, regional and independent provincial administrations in the recognition of the state of the art of the policies and actions for active ageing.

The work which we are carrying out represents an important opportunity to facilitate a greater awareness of the capabilities of seniors and of their role in our communities, above all at a time when the Covid-19 pandemic has highlighted new weaknesses that require further, diverse methods to safeguard and sustain policies and strategies of promotion of active ageing to satisfy the emerging needs.

Cons. Ilaria Antonini Head of the Department for Family Policies

The active participation of seniors in society, in its various forms and facets, is one of the most important and topical themes of those posed by the challenge of an ageing population.

The resulting paradigm shift constitutes the foundations of the concept of active ageing - with the person in older age taking control of, and creating, their own future and well-being, rather than being an individual largely in need of assistance - and has also for some time now been a central focus of government policies and research activity at an international level.

The INRCA, the only recognised public scientific retirement and care institution in Italy specialising in the geriatric and gerontological field, has made it its mission to study this subject for more than 20 years, contributing, through specific projects, to the production of a new understanding of the matter at a national, European and global level.

In this context, the report presented here constitutes a particularly important step forward in the experience of our institution, as it is the result of participatory research conducted together with the main institutional actors operating in the sector - Regions, Autonomous Provinces, Ministries, Departments at the Presidency of the Council of Ministers - that has finally enabled the integration of that range of points of view, long outstanding and demanded by many parties (belonging to the scientific world and beyond), which are typical of the methodology of translational research.

This is not a foregone conclusion, nor is it easy to implement, for various reasons - including the high number of people involved, the quantity of information produced and the necessary interactions, as well as the increased time spent - but, even with the difficulties involved, the IRCCS INRCA is convinced that this is the right path to follow and that scientific research can indeed be fundamental in improving the life of the older population and of society as a whole, especially in times such as these, when the COVID-19 pandemic has revealed all the fragilities and uncertainties in our daily lives.

Dr. Fabrizia Lattanzio Scientific Director, IRCCS INRCA

#### **Executive summary**

This report is the result of research work within the scope of the "Multilevel participated national coordination of policies on active ageing" project. The project aims to promote and consolidate national coordination to facilitate a greater understanding of active ageing in Italy through the involvement of the main players (public decision-makers, civil society, the scientific community) and to improve knowledge of the phenomenon of active ageing and of the policies supporting it.

The aim of the report is to provide a timely state of the art (situation as of February 2020, that is to say, the period before the Covid-19 emergency), in relation to the public policies on active ageing in Italy. Underpinning the report is the international framework which has characterised and addressed the theme in recent years, in particular, that produced by the United Nations, namely the Madrid International Plan of Action on Ageing with its commitments and the 2030 Sustainable Development Agenda with its sustainable development goals

The (qualitative) methodology adopted has involved exchanges and interactions with contact persons in institutions at various levels of government: Regions, Autonomous Provinces, Ministries and Departments at the Presidency of the Council of Ministers. For each of these organisations, a brief report has been produced (the list of the reports produced is contained in Appendix 3; each individual report can be consulted on the project's website <a href="http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale">http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale</a>). The common structure of the reports has facilitated their analysis according to themes, with the information being channelled into this national report.

The results of the study have highlighted a vibrant, dynamic situation with regard to the policies for active ageing, both at national government level and from a regional/Autonomous Province perspective. They have, however, also shown that there is considerable scope for improvement. This concerns both the production of regulations and policies on aspects that are still particularly "lacking", such as, for example, the aspect of gender and that of ageing in the workplace, and addresses the need to put into practice and therefore implement regulations and policies which already exist but remain, for the most part, on paper, essentially translating theory into practice. Our analysis, which is also based on a comparison between policies produced in terms of documents, and policies actually implemented, has highlighted a number of such cases.

At a national level, the mapping of measures and interventions which can be ascribed to active ageing reflects the traditional model of the Italian welfare system which bears a heavy legacy of categorical fragmentation. The results, however, testify to considerable interest in, and significant commitment to, the theme of active ageing, although it continues to lack momentum towards the paradigm shift that the holistic and organic approach towards active ageing would require. Such a situation is in fact facilitated by the continued division by category of the welfare system, evidently still based on a model of life progression characterised by the rigid age-based division of its phases.

At a regional level, the analysis has highlighted positive and promising developments of new policies for active ageing in recent years in nearly all the Italian Regions and Autonomous Provinces. As of today, ten Italian Regions have in place a law dedicated to active ageing (Piedmont, Liguria, Veneto, Friuli-Venezia Giulia, Marche, Abruzzo, Campania, Apulia, Basilicata and Calabria) and there are a further two in which a law with these features does not exist, but the laws on the subject are similarly included organically in other types of provisions (Emilia-Romagna and Umbria). All the Regions and Autonomous Provinces have at least one

sectoral policy that promotes aspects of active ageing in specific areas. Within this positive panorama, there are a number of elements which could be improved. For example, various legislative interventions (in particular, the more recent ones) have so far produced limited results. It is therefore possible to affirm that, in the last 10-15 years, many of the Regions and Autonomous Provinces in Italy have initiated or continued the development of policies on active ageing that are aligned with the objectives and priorities identified by international programmes such as the Madrid International Plan of Action on Ageing and the Sustainable Development Goals of the United Nations. Furthermore, some successful cases, noteworthy because of the holistic response, the resources committed and speed of implementation of systematic policies, can constitute innovative and effective examples to replicate or from which to draw inspiration, to promote the well-being of seniors through active ageing.

A further important result of this study is that it has revealed, through the feedback and opinions of the institutional contact persons, the importance of starting a discussion and continuous multilevel coordination. This, amongst other possible outputs, would facilitate exchanges between regional and national actors, enabling a transfer of knowledge, practices and policies that have been successful or are of potential benefit.

In addition, the results of this study suggest that now is the time to develop and implement legislation within a national context on active ageing which is able, notwithstanding regional autonomy in this area, to outline a framework and to suggest the direction and limits within which to act.

## 1. Introduction

The concept of active ageing (AA) has been an important topic for several years at European level (WHO, 2002; Walker and Maltby, 2012) because it is considered to be a useful tool in contributing to resolving some of the main challenges linked to the ageing of the population, with benefits both for the individuals and for organisations, for local communities and for societies in general. AA is defined by the World Health Organization (WHO) as "the process of optimising opportunities for health, participation and security, in order to enhance quality of life as people age" (WHO, 2002). It is a broad, multi-dimensional and cross-sector concept underlining the involvement, participation and inclusion of older people in society. In this sense, AA concerns the group of activities and opportunities, in terms of social, working, training, civic engagement and entertainment to which older people can aspire to participate in, according to their needs, attitudes and desires.

With the assumption of the paradigm of AA, the vision of old age that, still today unfortunately, is often seen as a passive phase of existence, characterised by healthcare needs and social marginalisation (Cumming and Henry, 1961) is succeeded by a vision of the older person as a resource and protagonist of social life (Walker, 2011).

The concept of AA has been the object of some criticism (Boudiny, 2013) over the course of time, because it has been interpreted by some public decision-makers, mainly from an economic and productive point of view (for example, to promote through legislation the extension of the working life) and because it might lead in some way to the exclusion of those with fewer economic and social resources. Here, however, an inclusive, non-legislative approach to AA is adopted, where it is understood as the right of an older person to be able to access activities and opportunities from which they could freely benefit, to be able to enjoy their life to the full.

## 1.1. Active ageing and human rights on the international stage

## 1.1.1. The Madrid International Plan of Action on Ageing (MIPAA)

Ratification of the Madrid International Plan of Action on Ageing (MIPAA) by the General Assembly of the United Nations (UN) (Resolution 57/167; UN, 2002) and the adoption, by the Assembly, of the road map for its implementation (Resolution 58/134; UN, 2004) constitutes the moment, historically, in which ageing ceases to represent a stand-alone policy. Instead, the result of such an event, at global level, is the understanding of how the demographic transformation characterised by the ageing population, taking place gradually throughout the world, inevitably has an impact on all aspects of individual and social life, both nationally and internationally (United Nations Economic and Social Council, 2019).

While not representing a legally binding instrument at international level, the MIPAA has given the States that have underwritten it a fresh perspective from which to look at the progressive establishment of longevity, reinterpreting national policies from the standpoint of development and of a life course approach, with the objective of including all generations in society (*ibidem*).

At the end of the 1990s, the WHO had already broadened the concept of healthy ageing, introducing the expression "active ageing", to signify a more inclusive vision of health in old age, because it was able to *"recognise the factors in addition to health care that affect how populations and individuals age"* (WHO,

2002, p. 13). Providing its own contribution of reflection to the Second World Assembly of the UN on ageing and to the definition of the MIPAA, the WHO explicitly emphasised how the approach of AA should be based on the recognition of the human rights of seniors, referring to the principles of independence, participation, dignity, care and self fulfilment established by the UN. The statement marks the shift from a policy vision based on the needs of individuals considered as essentially passive recipients of care and support, to one aimed at respecting rights and achieving equal opportunities (*ibidem*).

## 1.1.2. Active ageing as a human right: legislative framework

The actual legal basis of this approach can be found in the International Covenant on Economic, Social and Cultural Rights, in turn based on the Universal Declaration of Human Rights, adopted by the General Assembly of the UN on 16 December 1966 and entered into law on 3 January 1976 (Rospi, 2018). Following this line of reflection, the WHO and the UN have encouraged Member States to approach ageing in the broadest context of basic rights, urging protection thereof irrespective of any discrimination originating from individual conditions, obviously including age (*ibidem*).

The debate on the relationship between the ageing population and the statement of human rights marked a further turning point at global level on 21 December 2010 when, with Resolution 65/182 (UN, 2010), the UN General Assembly established the Open-Ended Working Group on Ageing (OEWGA). The group, which is open to all the Member States of the UN and to observatory non-Member States, supported directly by the Secretary General, was explicitly conferred the task of contributing to the strengthening of the human rights of seniors, after considering the current legislative framework in force, identifying possible flaws in the framework and formulating proposals to overcome them. In this context, the OEWGA is also commissioned with examining the feasibility of introducing further international legal instruments and measures.

On the 13 February 2013, with Resolution 67/139 (UN, 2013), the UN General Assembly returned to the subject emphasising how, although there were various obligations for Member States contained in the different existing treaties on human rights, there were few explicit references to seniors contained in the treaties. Within this legislative framework, and taking into account the suggestions provided by the OEWGA and by the Office of the High Commissioner for Human Rights, the Assembly decided to ask the OEGWA to begin work immediately on possible proposals for a specific international legislative instrument. This instrument had to be based on the holistic approach adopted by the United Nations in the field of social development, non-discrimination and gender equality, and would need to take into account the work carried out by the Human Rights Council, the recommendations formulated by the Commission for Social Development and by the Commission on the Status of Women, as well as the outcomes of the second global assessment of the implementation of the MIPAA (*ibidem*).

In 2014, the establishing by the UN Human Rights Council, 2013 of the independent Expert on the enjoyment of all human rights by older persons added a further element intended to feed into the ongoing debate. The task of the independent Expert is to study the impact of the implementation process of the MIPAA in terms of human rights, also by collecting good practices reported by States, institutions and civil society organisations (Chainoglou, 2019). In the following years, the recommendations contained in its reports were combined with those formulated by the OEWGA, in an attempt to make Member States aware of the need to draw up a binding international legal instrument for the establishment and protection of the human rights of older people. Despite the general agreement on the fact that human rights are interdependent, indivisible and universal and hence attributed to each individual person, regardless of their characteristics, such as

colour of skin, sex, origin or age, the fact that the current international regulatory framework is insufficient in guaranteeing the enjoyment of them by older people (*ibidem*) was highlighted by increasing numbers of parties, especially civil society organisations. This is also because these people cannot be considered as one socially homogeneous group. Examples of the issues they face include social exclusion and multiple discrimination, depending on the national or local contexts taken into consideration. In addition to this, within the system of the UN, in its thinking and operation concerning older people, what seems to prevail currently is the developmental approach rather than a human rights one (*ibidem*).

In May 2016, the sixty-ninth World Health Assembly approved the Global Strategy and Action Plan on Ageing and Health 2016-2020 (UN, 2016), aligning the guiding principles for a global response to ageing with the objectives of the Sustainable Development Strategy, adopted by the General Assembly on the 25 September 2015 (UN, 2015, 2019). This strategy, encouraging the adoption of a transformative approach to global ageing, has been devised on the basis of the need to enable older people to be able to cope with the complexities and changes taking place in their life contexts. In this field, taking action on healthy ageing should mean providing them with the potential and the tools to make an active contribution to a social environment that respects their dignity and their human rights. The reference to these latter in this case includes the right progressively to achieve the best possible level of health; gender equality; nondiscrimination, in particular on the basis of age; the right to equal opportunities in the determining factors of healthy ageing (regardless of socio-economic status, place of birth, residence or other social characteristics); and intergenerational solidarity (that is, social cohesion among generations) (UN, 2016).

The 2016-2020 Strategy, which would then lead on to the inauguration of the Decade of Healthy Ageing 2020-2030, was intended as a timely response to what had been established under the Sustainable Development Strategy, as ageing was clearly understood as important, at least in 15 of the 17 Sustainable Development Goals (SDGs) (ibidem). Two years later, with Resolution 2018/6 (UN, 2018) which formally concluded the third cycle of evaluation of the state of progress of the MIPAA, the Economic and Social Council returned to encouraging Member States in their effort to introduce a continuous focus on ageing in various policy contexts, considering the need to protect the human rights of older people and to promote their social integration, preventing discrimination, including from the perspective of gender. Simultaneously, the Council asked the Secretary General of the UN to follow up the results of the evaluation of the MIPAA, devoting specific attention to the relationship between development, social policies and the human rights of older people (*ibidem*).

## 1.2. The role of the European Union in the recognition of active ageing

## 1.2.1. The Lisbon Treaty and Directive 78/2000

Over the years, the European Union (EU) has undoubtedly made a contribution to the evolution of the relationship between human rights and ageing, in its dual role of global political actor and of binding supranational legislator with regard to its national Members.

From a strictly legal point of view, the entry into force of the Lisbon Treaty in 2009 fully encompassed the Charter of Fundamental Rights within the framework of Community law, consequently giving key importance to Article 21, which prohibits discrimination on the basis of age, as well as to Article 25, which gives older people the right to live a dignified and independent life and to participate in the social and cultural life of their community (Georgantzi, 2018; Chainoglu, 2019). Despite this, the Treaty on the Functioning of the EU

does not establish the obligation, only the possibility for the Union itself, to adopt anti-discriminatory legislative measures and to promote equality, potentially also through putting in place positive actions (Article 19), given the unanimity of intent of the Member States and in respect of Community competences and the principle of subsidiarity (*ibidem*). In the opinion of some scholars, this legal framework has weakened the scope of the provisions of the Charter, resulting in a situation whereby Community anti-discriminatory legislation is largely limited to the workplace, starting from the approval of Directive 78 in 2000 (Council of the European Union, 2000), subsequently incorporated in Italy with Legislative Decree no. 216 9 July 2003 (Georgantzi, 2018).

The need to extend protection against discrimination beyond the sphere of the labour market, in a way that is comparable to how race and gender are already addressed, had already led the European Commission in 2008 to propose a specific draft Directive that introduced across the board the principle of equal treatment, irrespective of religious belief, disability, sexual orientation and indeed age. Unfortunately, the current state of the proposal remains just that, despite the decade of negotiations undertaken in an attempt to obtain accord by the Member States on the legislative provision (Council of the European Union, 2019).

More specifically, both in the case of Directive 78/2000 and in that of the draft "horizontal" Directive, numerous observations have been made on the presence of exceptions to the principle of equal treatment on the basis of age, risking the creation of stereotypes and treatment that is discriminatory and offensive to human dignity, as well as underestimating the individual capability of older persons (Georgantzi, 2018). In the framework created by the two texts, an unclear distinction between policies that enable social participation and measures that could lead to the exclusion of certain social groups could further compromise respect for the principle of equality of treatment (*ibidem*).

The approach of the European institutions was also criticised from the point of view of "soft" policies, as well as of the way the existing Community legislation is implemented. In this regard, a lack of determination was detected in seeking to direct and encourage Member States to put into effect the principle of equality for older people, giving strategic importance to ageing in an almost exclusively economic way and promoting, as a result, themes such as the "silver economy" or even AA itself in the labour market while neglecting the conditions of poverty, social exclusion and discrimination which occur in broad swathes of the older population of the EU, sometimes fuelling a dichotomous picture of old age, divided between the population that is still economically active and that requiring care and support (*ibidem*).

## 1.2.2. Moving forwards

The approval by the EU Council of the Conclusive Declaration of the European Year for Active Ageing and Solidarity between the Generations (Council of the European Union, 2012), has certainly enabled the channelling into the sphere of Community "soft law" of many of the benefits of the scientific and political debate held at national and European level before and during 2012. 2012 was also a year characterised by the development and launch of the Active Ageing Index (AAI)<sup>1</sup>, established by the European Commission and by the United Nations Economic Commission for Europe (UNECE) with the aim of measuring the level of AA in a given geographical context according to a series of selected indicators. Despite the defining of the above-mentioned conclusive declaration, there still exists a strong presence of economic and labour market issues, to the detriment of the all-encompassing vision advocated by the Charter of Rights (Georgantzi, 2018). The

<sup>&</sup>lt;sup>1</sup><u>https://statswiki.unece.org/display/AAI/Active+Ageing+Index+Home</u>

appeal to the need to intervene, among other aspects, in spheres such as lifelong learning, volunteering in old age, the involvement of older men and women in decision making (above all in subjects which directly affect them), the support for informal caregivers, the promotion of health and prevention, the adaptation and accessibility of living environments, services and transport, the development of age-friendly environments, products and services and the quest for the maximum autonomy for those in long term care, is an encouragement for Member States to review the direction of their own sectoral policies.

In 2018 the European Union Agency for Fundamental Rights (FRA)<sup>2</sup> summarised in its own report the state of progress of the legislation and policy of the Union in respect of ageing, recognising the shift under way from an approach defined as "welfare care-oriented", that tended to describe seniors as needy and requiring protection, to one where the emphasis is placed on rights and the concept of AA (FRA, 2018). As well as recapitulating the legislative evolution already mentioned, the FRA has highlighted how AA has recently become an important element in the areas of the European Strategy 2020, especially in relation to the objective of developing technologies that can enable older people to live autonomously and with dignity as active members of the community.

It is a change in strategic approach which has also characterised the approach of the European Innovation Partnership on Active and Healthy Ageing (EIPAHA)<sup>3</sup>, an initiative launched in 2011 by the European Commission also (but not only) to support innovation and digital transformation for the benefit of AA and health. It sought to modify the perception of ageing from a "burden" to an opportunity and to shift the focus of care services away from a hospital-centric vision to a more proactive one, based on care provided in their own family and social environment. The FRA has also made a point of highlighting how the regulation of the 2014-2020 programming period of the structural Funds and European investment has at least two ex-ante conditionalities that are explicitly influenced by these issues: conditionality 8.4, which requires the development of AA policies aimed at maintaining older workers in the labour market, reducing early retirement; and conditionality 9.1, which urges the development of community-based services, in order to reduce poverty and to include people excluded from the labour market, including older people (*ibidem*).

In the opinion of the FRA, the recent proclamation of the European Pillar of Social Rights (European Parliament, European Council, European Commission, 2017)<sup>4</sup>, while representing a strong political step in the direction of establishing the rights of older persons, continues to demonstrate an intrinsic weakness, as a result of its non-legally binding nature. In this context, the FRA urges Community institutions and Member States to continue along the path of adopting the "horizontal directive" and to strengthen the importance of European funds to support the implementation of rights-oriented policies and actions for older people (*ibidem*)<sup>5</sup>.

<sup>&</sup>lt;sup>2</sup> Established by EU Council Regulation no. 168 of 15 February 2007, the Agency is an independent organisation, created with the objective of providing assistance and specialist advice on fundamental rights to the institutions of the EU and to the Member States engaged in implementing Community rules.

<sup>&</sup>lt;sup>3</sup> <u>https://ec.europa.eu/eip/ageing/home\_en</u>

<sup>&</sup>lt;sup>4</sup> Solemnly proclaimed on 17 November 2017 during the Social Summit for Growth and Employment, which took place in Gothenburg in Sweden, the Pillar aims to support equitable and properly functioning labour markets and systems of social protection, with the objective of launching a new convergence process within the European Union.

<sup>&</sup>lt;sup>5</sup> Two of the recommendations formulated in the Report to the European legislator, to give concrete implementation to the principles expressed in the social Pillar, were fulfilled in 2019 with the entry into force respectively of Directive 882 on the requirements of accessibility of products and services and Directive 1158, relating to the balance between professional activity and family life for parents and healthcare providers, which repealed the Council's earlier Directive 2010/18/EU.

#### 1.3. The Italian context

#### 1.3.1. Legislative framework and recognition of active ageing

In the Italian legal context, in light of the constitutional framework and the international scenario in respect of fundamental human rights, it seems fairly clear that AA can be considered, rather than as a new social right in itself and for itself (and as such a fundamental right), as one of the possible concrete expressions of human dignity, directly correlated with the guarantee and effective respect of fundamental rights (the right to health, the right to social and democratic life etc.), as expressed in the Constitution itself (Rospi, 2018). From this point of view, the regulatory intervention and implementation of policies for the benefit of AA should find a place of specific development in the context of the definition of the essential levels of protection of civil and social rights that, in the architecture of the plan of competences of the various levels of governance set out in Article 117 of the Constitution, undoubtedly represents the obligatory and fundamental basis (ibidem). In the Italian constitutional system, in the absence of an overall national strategy, policies for ageing are currently addressed in the various sectors, each case being referred, on the basis of the content of Article 117, to the competence of the state or region. In the case of concurrent legislation, they require agreements to be concluded between State and Region. In the significant matters in this report, as is known, the State is currently responsible for the legislation on work, social protection, support for the family and for the Reddito di Cittadinanza (Citizenship Guaranteed Minimum Income), adult education and for some areas of continuous training and health. The Regions are responsible for active employment policies, training, local organisation of the Servizio Sanitario Nazionale (SSN) (national health service) and social policies.

In the current regulatory framework, Italian legislation does not provide any overall definition of older person/population, nor even of AA or mature workforce. It leaves to the national or regional legislator the task of determining, sector by sector, the relevant age thresholds respecting, where necessary, Community regulation. This leads us to believe that, in terms of aging, a public vision and discourse often centred on the identification of old age with non self-sufficiency, rather than a consideration of the older person as a resource for the social community still prevails (ibidem.). In reality, during recent years, especially regarding the XVII Legislature of the Italian Parliament (2013-2018), numerous laws proposed by parliamentary initiative have followed one after the other, aimed at introducing regulations and resources dedicated to enhancing the role of the older person in the community, with local Bodies entrusting them with work and socially useful activities. However, none of these has brought their procedure to fruition (Chamber of Deputies 2016).

In the same period, a certain number of Regions have acquired laws relating to the inclusion of a cross sector AA approach in the various policy areas. Others have instead approved legislation on a generally sector-specific approach, with the aim of promoting co-ordinated action for the benefit of older people and their participation in areas such as social protection and promotion, continuous training, culture and social tourism, civil commitment and volunteering, sports and free time maximising in this context the dialogue with, and participation of, the various social forces and of the Third Sector, making, in many cases, reference to the concept of AA proposed by the WHO (Chamber of Deputies, 2016; INRCA, 2016; Ministry of Labour and Social Policy, 2017).

From the perspective of the human rights-based approach, it should finally be noted that, in the absence of a binding international legal agreement, the theme of the protection of rights of older people has not yet entered into the sphere of activity of co-ordination for the various international treaties of the Inter ministerial Committee for Human Rights that, since 1978 has been tasked with co-ordinating government action on the obligations envisaged by the international agreements on Human Rights, to which Italy is a party (Ministry of Foreign Affairs and International Co-operation 2019)<sup>6</sup>.

## 1.3.2. Awareness of public decision-makers and application of the Active Ageing Index

Therefore, overall in Italy there still seems to be a lack of full and shared widespread awareness among public decision-makers and stakeholders of the importance of promoting the multi-faceted vision that constitutes the foundation of the concept of AI, and of providing adequate tools, both of a strategic and operational nature. At national level, the efforts that exist are still too limited and fragmented. For example, in the third report of the Ministry of Labour and Social Policies (MLPS) on the status of the implementation of the MIPAA around the actions on ageing and the relative regional implementation strategies, it was generally emphasised that the implementation is "currently being defined", as there is a lack of any evident action (Ministry of Labour and Social Policies). With respect to the national level, the various public and private stakeholders which operate at regional or local level for the benefit of seniors (Regions, local authorities, Third Sector organisations etc.) provide a much more promising outlook on AA, both in terms of policies and of actions; however, there continues to be a certain lack of dialogue and interaction between the various actors, for example, between Regions.

The application of the Active Ageing Index (AAI) in Italy has therefore revealed that AA in our country grew 4.1 points between 2007 and 2016 (from 30 to 34.1), despite the fact that, during the period in question, some of the activities recorded a reduction in terms of participation, such as, for example, politics and looking after grandchildren. What has contributed to this increase in particular is the considerable increase in the rate of employment in older age largely due to raising of the retirement age and to having reduced the opportunities for early retirement (Principi et al., 2019). What has become apparent is a gender gap in favour of men - a gap that, however, in the roughly 10 years under consideration, has reduced, even if only slightly (0.3 points). Another aspect concerned the relationship between AA and qualification. Higher qualifications corresponded to a higher level of AA. So mature people with a low level of education seem to have fewer opportunities to actively age. As in the case of gender, the relative gap in qualifications was reduced between 2007 and 2016. However, this was not so much due to the fact of an improvement in the situation amongst older people with lower qualifications but rather attributable to a decline among those with a higher level of education (*ibidem*).

The study just mentioned also considered geographical differences between three macro areas (the North, Centre and South), highlighting a higher score in terms of AA in northern and central Italy, with a gap that widened over time, despite a growth trend that was also recorded in southern Italy.

<sup>&</sup>lt;sup>6</sup> This is the European Convention for the Protection of Human Rights and Fundamental Liberties; the International Covenant on Civil and Political Rights; the International Covenant on Economic, Social and Cultural Rights; the Convention on the Elimination of all Forms of Racial Discrimination; the Convention on the Elimination of all Forms of Discrimination against Women; the Convention against Torture and other Cruel, Inhuman or Degrading Treatment; the Convention on the Rights of the Child and Optional Protocols; the Convention on the Rights of Persons with Disabilities and its Optional Protocol; the International Convention for the Protection of all Persons from Forced Disappearance.

## 1.4. The National Co-ordination Project

In 2019, an ambitious project was launched of "Multilevel participated national co-ordination of policies on active ageing"<sup>7</sup>. The general aim of the initiative was to promote and consolidate national co-ordination to facilitate a greater understanding of AA in Italy, through the active involvement of the main players (public decision-makers, civil society, scientific community) and to improve understanding of the phenomenon of AA and the policies on which it is based. In particular, the specific objectives of the project focus on improving the networking and exchange of experiences between Regions/Autonomous Provinces (APs) and stakeholders, conducting statistical and policy analysis on AA in the various Regions/APs and contributing to the drafting of the next Report for Italy on the fourth cycle of monitoring and evaluation of the MIPAA.

The project was launched<sup>8</sup> thanks to a three-year collaboration agreement between the Department for Family Policies of the Presidency of the Council of Ministers (DIPOFAM) and the National Institute of Health and Science on Ageing (IRCCS INRCA). The MLPS and the National Institute for Public Policy Analysis (INAPP) are also collaborating on this project, in relation to their role of national focal point of the UNECE for ageing. The activities involve all the relevant stakeholders at the various levels (national, regional and local) in order to identify a model of interventions and "good practices" for AA, through a participated and joint decision-making process.

In summary, the project includes a progression of 5 main phases. Starting from an analysis of the status of policies on AA at national and regional level (phase 1), guidelines will be developed to facilitate policy-making and the implementation of policies in this area (phase 2), based also on identified good practices. The next step will be to pinpoint one or more possible areas of intervention to improve the existing situation in the various contexts (phase 3). This will also be achieved on the basis of the results of the analysis of the state of the art, the purpose of which is to launch the implementation process of policies relating to AA, using the guidelines (phase 4), and monitoring the situation as it evolves (phase 5). One of the objectives of the project (but not of this Report), within which this Report is included, is that of also investigating the geographical differences more thoroughly, applying the AAI at regional level.

## 1.5. The Covid-19 pandemic

The outbreak of the Covid-19 pandemic, at the beginning of 2020, ruthlessly highlighted throughout the world how vulnerable the different nation states, particularly the most advanced countries, are to this type of shock, in the context of the demographic transition that is taking place. In a Policy Brief published at the beginning of May 2020, the UN Secretary General, Antonio Guterres, pointed to the ways in which the pandemic has affected older people throughout the world, endangering their lives and the respect for their rights and their dignity (UN, 2020). What has become plaintively clear is that people over the age of 65 have been those most at risk in terms of health, following the contagion. In contexts in which the pandemic has heavily overloaded health services, also due to their insufficient development, this situation may have worsened, sometimes resulting in phenomena of actual discrimination in access to life-saving treatments and therapies.

<sup>&</sup>lt;sup>7</sup> Website: <u>http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-</u> nazionale/

<sup>&</sup>lt;sup>8</sup> The project's kick off meeting took place on the 11 April 2019 in Rome.

More generally, the need for governments to adopt physical distancing measures to slow down the spread of the contagion may have exacerbated conditions of isolation for seniors, both within the community and inside care homes. Moreover, the concentration of guests and the inadequacy of the establishments led to an outbreak of dangerous sources of infection throughout the world. These are factors which, even in the most advanced countries, have increased the vulnerability of older people. As well as placing enormous burdens on professional or family caregivers, they have caused further situations of inadequate treatment and violation of the rights and dignity of seniors.

The prolonging of the lockdown measures and the consequent increase in social isolation of seniors, whether living in couples or on their own, has had a negative impact on their mental health, also due to the fact that the digital divide has often impeded them from making full use of a series of instruments that have enabled most of the younger members of society to continue working and interacting, even under the changed conditions (*ibidem*). The health emergency and the resulting restrictive measures have also made it impossible to move outside the home, exposing large sections of the Italian population to a lengthy period of physical inactivity. This has greatly affected the psycho-physical conditions of well-being, worsening the state of health in particular of seniors, a group for whom the need to constantly practise sporting activity is a high priority.

Finally, given that, especially in the advanced countries, mature workers represent an increasingly significant portion of the workforce, it is clear that some of them have been severely damaged by the economic impact of Covid-19 and will also experience great difficulties during the recovery phase, which will be risky and uncertain everywhere (*ibidem*).

The numerous analyses that have ensued on the impact of the pandemic on society and on the Italian economy have correctly included policy responses for the older population (especially the section of it most affected by problems of social integration) including the structural problems of Italian welfare, a universal reappraisal of which should be addressed as a priority (Ferrera, 2020; Saraceno, 2020). In this regard, it can be stated that if, on the one hand, the almost automatic trend towards juxtaposition of old age, fragility and lack of self sufficiency persists (perfectly understandable given the effects that the pandemic has had on certain categories of the population), on the other, a vision appears to be consolidating, calling for an integrated rethink on the economy, social relationships, welfare and man-environment interaction, focusing, as a priority, on the Objectives of Agenda 2030.

These are questions that this Report does not address directly, being based on an investigation of the state of the art on the commitment to AA, carried out entirely in a "pre-Covid" context. Nonetheless, in light of the latest considerations formulated, it provides useful insights to embark on that revision process, made dramatically urgent by the events of recent months.

## 1.6. The report

This Report constitutes the main result of the first phase of the project of "Multilevel participated national co-ordination of policies on active ageing" (under Work Package 2, Task 1). Its objective is to describe the state of the art of national and regional<sup>9</sup> policies on AA in Italy. Through a mixture of desk and field research,

<sup>&</sup>lt;sup>9</sup> The project and the Report focus on the 19 Regions and 2 Italian PAs. For simplicity, the term "regional" is sometimes used to refer both to the Regions and to the PAs.

the team of researchers (in collaboration with contact persons from regional and national institutions) has selected and analysed the public policies produced by regional and national institutions in the vast area of AA. The object of the analysis was the group of public policies (in particular, social policies) that, explicitly or implicitly, aim to improve the activation and social inclusion of older persons (65 years and above) in the area of: participation in the community, training and lifelong learning, work, culture and tourism, sport and free time, informal care giving (for example, caring for other people who are not self sufficient and grandparents looking after grandchildren), family and intergenerational relationships, farming and gardening, civil engagement and volunteering, co-housing, and every other sphere concerning the active citizenship of older people.

The report is structured as follows: after this introduction, the Results on the state of the art in Italy in relation to policies and measures on AA adopted at national and regional level are provided. The list of these institutions, which were taken as a basis on which to draw up this report (results section) is set out in Appendix 3<sup>10</sup>. The results have been categorised according to the 10 MIPAA commitments and to the 9 (out of a total of 17) SDG linked to it. Each paragraph begins with an introductory note on the subject in question and on the division of areas of competence in relation to it between State and Region/AP. Next, the results are given initially for the part relating to the national level, then to the regional level. This is followed by a Discussion section, where the results are analysed, highlighting points of strength and weakness as well as possible improvements, both at national and regional level. The Conclusions follow, addressed from a visionary perspective. The methodology of the research work is explained in Appendix 1, while the method adopted for the interviews is provided in Appendix 2.

<sup>&</sup>lt;sup>10</sup> The reports produced for each individual institution can be found on the project's website, on the page <a href="http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale/pubblicazioni-e-documenti/">http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-</a> <a href="http://famiglia.governo.it/">http://famiglia.governo.it/</a> <a href

#### 2. Results in relation to MIPAA and SDGs

As already indicated, the objective of the Report is to describe the updated overall state of the art of national and regional policies on AA, currently in force in Italy. Given its complex and multidimensional nature, AA involves a broad range of social policies that, explicitly or implicitly, aim to improve the participation and social inclusion of older people (65 and above) in the work, social, educational and entertainment spheres.

In this sense, the analysis presented is divided into a series of themes, each one focused on a specific dimension of AA and on the relative existing policies. The 11 themes used in the analysis (Table 1) constitute an integrated summary of the 10 commitments of the MIPAA and of the 9 SDGs, included in the 2030 Agenda for Sustainable Development, linked to AA (Strand, 2019). In order to establish the 11 themes, the MIPAA commitments and the SDGs have been grouped into conceptual areas. In some cases, the juxtaposition is self-evident (themes 5, 6 and 8). In other cases, the MIPAA commitments and the SDGs can be easily linked, at conceptual level (themes 2, 3, 7 and 9), while others continued to be addressed as individual themes (themes 1, 4, 10 and 11).

In detail, the analysis of the policy is organised into the following themes: (1) ageing in all the public policies (MIPAA 1); (2) integration and participation of seniors in society, partnership (MIPAA 2, SDG 17); (3) inequality, poverty and equitable and sustainable economic growth (MIPAA 3, SDG 1, SDG 10); (4) adapting systems of social protection (MIPAA 4); (5) preparing the labour market (MIPAA 5, SDG 8); (6) learning and education throughout life (MIPAA 6, SDG 4); (7) quality of life, health, well-being and independent living (MIPAA 7, SDG 3); (8) gender-based approach (MIPAA 8, SDG 5); (9) support for informal care of older people, intergenerational solidarity and justice (MIPAA 9, SDG 16); (10) sustainable cities (SDG 11); (11) implementation of regional strategy MIPAA (MIPAA 10).

THEMES	MIPAA commitments	SDG
1.	<ol> <li>The promotion of mainstreaming ageing in all public policies</li> </ol>	/
2.	2. Integration and participation of seniors in society	17. Partnership
3.	3. Equitable and sustainable economic growth	1. No Poverty; 10 Reduced inequalities
4.	4. Adapting systems of social security	/
5.	5. Preparing the labour market	8. Decent work and economic growth
6.	6. Lifelong learning	4. Quality education
7.	7. Quality of life and independent living	3. Good health and well-being
8.	8. Gender-equality	5. Gender equality
9.	<ol><li>Support for families providing informal care for older people and solidarity</li></ol>	16. Peace, justice and strong institutions
10.	/	10. Sustainable cities and communities
11.	10. Implementing the MIPAA Regional Strategy	/

Table 1: Reconciliation by conceptual area between MIPAA commitments and SDG

As there is no national framework law on AA, nor a formal link between national and regional policies, in each of the following sections, the analysis is divided into two competence levels: national and regional. In the first case, the focus is on policies and initiatives managed by institutions at national level, such as Ministries, Departments and Government Offices (14) with competences on the subject. In the second case, the drafting of laws on AA in all the Italian Regions and PAs was analysed. For Regions and PAs, a comparative analytical approach was adopted (highlighting similarities and differences between the policies

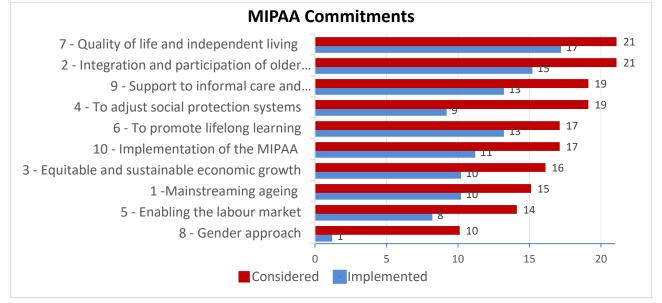
implemented) and, when possible, also longitudinal (providing a number of elements on the evolution of policies in the individual Regions).

Finally, there should be an introduction to the analysis of the results as reported in the following paragraphs. It should be emphasised that the objective of the research and of the analysis is to identify, select and describe the public policies of national institutions and Regions/APs in the context of AA. This work does not however discuss the fact that these actors have effectively developed and implemented successful policies for the general population in the various sectors considered, such as, for example, the labour market, training, social protection system and health promotion. Nevertheless, our research has selected and analysed only those policies in which a clear reference or link (explicit or implicit) exists to the conception of AA adopted here (see also the Methodology in Appendix 1), without detracting from the existing policies and measures aimed at resolving needs, problems and social challenges for other groups of recipients (or general groups of recipients).

Furthermore, the research has excluded those policies which relate to actions and measures geared towards the older person as an exclusively passive individual, in need of health care (for example, policies for those who are not independent) or social welfare (for example policies for social care or benefits).

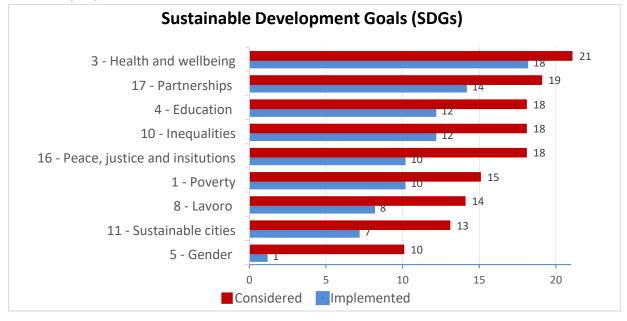
The following two figures summarise to what extent the Regions and Autonomous Provinces consider (at the political/legislative level) and implement the commitments of the MIPAA (Figure 1) and the SDGs (Figure 2) in respect of AA<sup>11</sup>. The maximum score achievable is 21 (19 Regions and the 2 APs of Trento and Bolzano). The values indicate the number of Regions/APs that consider or implement a given commitment MIPAA/SDGs.





<sup>&</sup>lt;sup>11</sup>The same type of analysis is not proposed at national level (Ministries and Departments at the Presidency of the Council of Ministers), for the somewhat specific mandates in respect of the themes addressed, which can characterise the central administrations. In these cases, other factors can assume greater importance such as, for example, the capacity and availability to work, on the themes proposed, in discussion between the central administrations, and with the regional ones.

*Figure 2 - Active ageing in the Italian Regions and Autonomous Provinces: taking into account policies and the state of implementation in relation to the SDG* 



It should be clarified that these quantitative aspects should be treated with caution as there may be significant differences between Regions/APs, both in terms of considering the policies and in the state of implementation. The same aspect may be implemented in two or more Regions but in some cases may be treated as a vast, organic programme, for example, with funding guaranteed for years. Conversely, in other cases, it may be addressed more marginally (for example, as part of an individual project). It is therefore essential that the information is subject to a qualitative study which will follow in this national Report, based on the Reports produced for each individual institution.

Figure 1 shows that, according to the definition of AA adopted, all the Regions and APs consider the MIPAA 2 commitment (integration and participation of seniors in society), which means that all the Regions and AP consider AA, as it automatically involves integration and participation of seniors in society.

Consequently, looking at Figures 1 and 2, it is fairly logical that all the Regions and AP take MIPAA 7 into account (Quality of life and independent living) and SDG 3, (Health and well-being), as these are, among other aspects, outputs that can be directly linked to AA. We can see, however, that when we examine the implementation status of the afore-mentioned aspects, what becomes apparent is that in some contexts there are difficulties, because the data is less than 21 and therefore in some cases it is not possible to implement what is considered necessary (AA therefore remains on paper without being translated into action). This can be stated in general, with regard to all the aspects under consideration. In fact, it can also be seen that there is always a gap between "Considered" and "Implemented", in relation to each of the aspects dealt with. AA therefore seems to remain a mostly theoretical notion and, in some cases, scarcely even considered in the documents analysed. Some of the weakest areas that require attention are the gender-based aspects (MIPAA 8, SDG 5) and those relating to the labour market (MIPAA 5, SDG 8).

## 2.1 The promotion of mainstreaming ageing in all public policies (MIPAA 1)

In Italy, the theme of AA is mainly addressed at the regional planning level and numerous measures are indeed enacted locally while a national framework law on active aging has been on the drawing board for years. Here are some of the most recent national law proposals.

On 18 January 2016, a Draft Law was presented, Chamber of Deputies no. 3538 "Measures to benefit the active ageing of the population through the employment of older persons in socially useful activities and lifelong learning initiatives" (Chamber of Deputies, 2016a). The above-mentioned draft law, with the participation also of businesses and trade unions, sought to promote and enhance AA as a process aimed at optimising opportunities relating to health, security and participation in social activities in order to improve quality of life and to enhance the work experience. It also sought to bolster the active role of older people in passing on knowledge to younger generations. Meanwhile, the Draft Law of 12 January 2016, Chamber of Deputies no.3528 "Dispositions for the promotion and dissemination of physical activity among older persons as an instrument of better health and active ageing" placed the emphasis on the importance of physical activity and the participation in the social, economic and cultural life of older people (Chamber of Deputies 2016b).

In 2019, AGE Platform Italia, in collaboration with representatives of the ANAP (National Association for Older People and Retired), established within Confartigianato, proposed a National Framework Law on AA. One of the main objectives of this draft Framework Law, which stemmed from a meeting of AGE Platform Europa (2019), is the dissemination of initiatives and platforms to stimulate AA and, at the same time, aims to serve as an organic link with the regional legislative initiatives (ANAP, 2019).

**Responsibilities at national and regional levels** – In the first instance, the theme of AA was given a constitutional basis in Italian law, in the protection of the right to health under Article 21 of the Constitution and, more generally, in the recognition and guarantee of the inviolable rights of the person under Article 2 of the Constitution, as well as in the definition of the principle of formal and substantive equality, without distinction of social and personal conditions between citizens such as, for example, their age.

According to the distribution criteria of legislative competences between State and Regions, under Article 117 of the Constitution, the theme of AA and of solidarity between generations falls under different areas of state and regional legislative power - exclusive and shared - sometimes resulting in consequent weaknesses in the specific identification of the effective distribution of competences.

**National level** – Commitment 1 of the MIPAA is somewhat complex and detailed, as it concerns synergies put in place by the institutional actors with respect to policies attributable to AA and relating to its many, diverse aspects, which compose the concept itself of AA, as defined earlier. The picture obtained from a cross-sector interpretation of AA becoming mainstream in all sections of policy, reintroduces the unresolved critical weakness of the failure to regulate. Despite this, it is possible, from the information collected from the individual Ministries, to identify various approaches and relevant measures (explicit or implicit) relating to the addressing of this particular theme.

The theme of AA, listed in its multiple aspects, is clearly present in the mission of the DIPOFAM of the Presidency of the Council of Ministers, or rather in the operational and organisational rules of the Department and within the operations of the Ministry with responsibility for family policies. More

specifically, AA occurs in the collaboration Agreement with the IRCCS INRCA of Ancona (at the beginning of this Report). The objective of the Department is to link all the measures relating to AA, therefore involving all the different Administrations engaged on the subject, centrally, regionally and locally, as well as the main organisations of the sections of civil society.

The Ministry of Foreign Affairs and International Co-operation (MAECI) carries out support and co-ordination activities with the relevant Departments relating to AA and, in general, on themes of human rights and development co-operation, on the various international forums. The objective is for the Italian government to reach a unified position on the theme of AA and to collaborate in the negotiations in the enunciation of international resolutions that are consistent with the dictates of national policy. The MAECI has made a notable contribution, in the context of the OEWGA, identifying measures to be adopted in order to improve the promotion and protection of the human rights and dignity of older persons. It has also indicated areas that require attention as well as problems that persist. With the aim of strengthening the protection of the human rights of older persons, the MAECI is gathering opinions from all the relevant Departments on this subject, to negotiate a unified document of recommendation that will be presented at the next meeting of the OEWGA.

Adopting the concept of Health in all the Policies, the Ministry of Health is promoting an inter-sectoral approach, consistent with the policies constructed on joint planning and collaboration between the various bodies and levels of government. This approach, which originates form the *Gaining Health* Programme, has become an actual model, based on agreements and collaboration between the various Ministries. The concept of Health in all the Policies is achieved through a series of aspects (not just health) contained in the National Prevention Programme (*ibidem*). This strategy involves the health sector collaborating with other sectors to develop more broad-based policies, such as those aimed at changing the environment and definition of the Profile of Community Health (*ibidem*).

Over the years, the MLPS has taken on the ageing of the population as a framework element for reading and interpreting phenomena connected with its sphere of action. The universal and intergenerational reforms of the system of social buffers, of the employment and social security policies and the measures in these defined areas can all be retraced to this vision. The approach used in referring to the demographic transformations into all policies is also apparent in the co-ordination function activated for social interventions and services and in the constitution of the social protection and social inclusion Network (Article 21, Legislative Decree 147/2017), as well as in the participation in the Institutional Forum on Lifelong Learning.

The attention to the socio-economic and therefore also to the demographic context is also apparent in the Ministry of Economics and Finance (MEF) in the handling of public expenditure, as well as in the Ministry of Economic Development (MISE) where a number of suggestions are identifiable, even if still lacking the necessary political structure. Noteworthy in this area is the collaboration between MISE and MEF on the Committee for the Programming and Co-ordination of Financial Education Activities (see Article 24 (a) of Law Decree 23 December 2016, no. 237 - converted with L. no.15 17 February 2017: see also point 2.3).

The Ministry of Agricultural, Food and Forestry Policies (MIPAAF) does not specifically deal with the theme of AA, even if it is recognised that social agriculture (AS) carries out an important role, holding together and linking policies including agricultural, social, employment, training, health care and justice (Pavoncello, 2018), through its varied activities such as training, work placement from the point of view of employment of disadvantaged individuals, the improvement of the quality of life and education and environmental issues

(see also point 2.2). That approach runs in a parallel with the notion of AA seen as a multi-faceted concept composed of many dimensions which is achieved through the activation of a series of integrated, multi-functional and multi-dimensional measures. The National Observatory of the AS (Article 7 of Law 141/2015) in this context assumes the role of co-ordinating and monitoring, at national level, reuniting the representatives of the central administrations (Agriculture, Employment, Education, Justice, Health Ministries), regional (State-Regions Conference), professional farming organisations and the organisations and associations operating in the area of the AS.

The initiatives put in place by the Ministry of the Interior (MINT) do not require relations with other Ministries and Departments but instead close collaboration with local administrations in tackling and preventing illegal activity to protect those in the weakest categories, such as seniors.

The Department for Youth Policies and the Universal Civil Service, part of the Presidency of the Council of Ministers, while it does not have any specific powers in relation to AA, runs the universal Civil Service (Article 3, legislative decree. 40/2017), whose spheres of action also include areas of intervention relating to support for senior citizens experiencing hardship, education and the promotion of culture and sport, through cultural initiatives with seniors. Furthermore, in the area of youth policies, the Department, promotes actions aimed at facilitating intergenerational exchanges between the young and the old.

Although there are no specific actions by the Ministry for Cultural Activities and Heritage and Tourism (MIBACT) in relation to AA, an indirect reference does appear concerning policies of social inclusion in Article 21 "Directorate-General Contemporary Creativity", para. 2, lett. Q. L. 18 November 2019, no. 132, whereby this Directorate "co-ordinates and handles, through the Ministry's regional offices, consultation with the Regions and the local Autonomies, on growth, social inclusion and territorial cohesion, in order to promote and implement programmes and plans of urban regeneration and upgrade, including environmental, of urban peripheries, within the framework of national and regional planning of the European funds". **Regions and Autonomous Provinces** - 17 Italian Regions/APs have included the theme of ageing in all public policies. Most of these Regions/APs (9) have taken forward significant initiatives in this regard.

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Valle d'Aosta	Piedmont	Lombardy
Liguria	Trento AP	Molise
Bolzano AP	Tuscany	Sicily
Veneto	Marche	Sardinia
Friuli-Venezia Giulia	Lazio	
Emilia-Romagna	Apulia	
Umbria	Calabria	
Abruzzo		
Basilicata		
Campania		

Table 2: The MIPAA commitment in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Half of the Regions (10) have adopted an organic, cross-sector regional law on AA in recent years. This process began in 2009 with Liguria (Regional Law 48/2009), the first to adopt this type of policy. The importance of approving a cross-sector policy on AA concerns not only the possibility of supporting the community and active stakeholders with high value social projects and initiatives, but also an intrinsic cultural change in the transition of the concept of an older person as a passive user of healthcare services to an active citizen to be involved and be appreciated.

All the cross-sector laws on AA constitute a legislative framework and generally provide provisions for the drafting of strategic plans (annual or multi-annual) in which the Region must establish the objectives and recipients of the interventions, as well as the resources that can be allocated for initiatives and projects put forward by local bodies, Aziende Sanitarie Locali (ASL) (Local Health Authorities), Ambiti Sociali Territoriali (AST) (Local Social Authorities), Third Sector organisations and other stakeholders. Furthermore, the cross-sector laws always include the constitution of new iterative forms of collaboration and consultation, both within the Regions (through working tables with representatives of the various councillors' offices/departments), and externally (through consultation with representatives of the stakeholders).

Among the 10 Regions with active legislation, only in the cases of Veneto (Regional Law 23/2017) and Friuli-Venezia Giulia (Regional Law 22/2014) have implementation mechanisms been successfully launched in full, leading to significant funding of local projects and initiatives (for example, with an annual allocation of EUR 1 million in Veneto), as well as working tables and councils. In many other cases, the law has been approved but not yet been fully applied from the point of view of funding (limited or no resources allocated) and/or of internal/external collaboration on the theme of AA. This is the case with Liguria (Regional Law 48/2009), Abruzzo (Regional Law 16/2016), Campania (Regional Law 2/2018), Basilicata (Regional Law 29/2017) and Calabria (Regional Law 12/2018), as well as the still more recent laws approved in 2019 by Piedmont (Regional Law 17/2019), Marche (Regional Law 1/2019) and Apulia (Regional Law 16/2019).

However, there are also a number of Regions/APs where, although there is no dedicated law, the authorities have implicitly included the theme of AA in a range of sectoral policies, with strategic objectives in line with AA. These are a varied group of social policies to promote social participation and the activation of older people through training, the promotion of health, sport, recreational and group activity. Examples of these policies include those developed by Valle d'Aosta, Bolzano AP, Trento AP, Tuscany and Lazio PAs. In some cases, such as in the Bolzano AP, the adoption of a cross-sector law on AA is on the policy agenda of the Council and may be enacted in 2020-2021.

Finally, the cases of Emilia-Romagna and Umbria should be mentioned. By 2004, Emilia-Romagna had already adopted, from a visionary perspective, a Regional Action Plan for the older population (PAR) (Regional Council Deliberation 2299/2004). The PAR is a policy guideline directed at the entire regional community (citizens, public bodies, stakeholders) to focus measures on the older population in all regional policies. This plan of action has progressively become absorbed into, and has promoted, inter-sectoral policies and measures in line with the approach of AA. In the case of Umbria, the Region had already adopted a cross-sector law on AA in 2012, whose contents, principles, aims and actions provided for were later encompassed within Regional Law 11/2015 ("Consolidated law on Health and Social Services") with a view to simplifying the law.

## BOX 1 - VENETO: the success of Regional Law 23/2017 "Promotion and enhancement of active ageing"

**Objective**: recognising and enhancing "the role of adult or older persons in the community, promoting their participation in social, civil, economic and cultural life and facilitating their independence and wellbeing in their usual living contexts (Article 1, paragraph 1).

**Instruments and mechanisms**: the cross-sector AA law in the Veneto covers a broad range of topics including the labour market, volunteering and civic engagement, training, sport, leisure activities, cultural activities, tourism, the environment, housing, health and safety. Since its approval in 2017, the law has been implemented through the drafting of the three-year Plan and annual implementation plans for 2018 and 2019, including priorities, lines of activity, allocated resources and requirements for the funding of A projects promoted by public and/or non-profit bodies. Internally, the Veneto Region has established cross-sector collaboration - permanent AA working tables - between areas and departments involved in social services, health and employment/training. The Department of Social Services has taken on the task of co-ordinating the working table for the implementation of the three-year AA Plan and of the respective annual plans. In addition, a regional council on AA has been set up as a body that favours the participation of representatives of departments, competent regional structures, voluntary associations, the third sector, social cooperation, trade unions and pensioners. The Council is operational and allows continuous interaction with civil society for the identification of priorities, activities and resources of the three-year and annual plans.

**Results achieved**: the Veneto Region has allocated an annual sum of EUR 1 million to fund AA projects, with the resources coming from both the Regional Health Fund and the National Fund for Social Policies. So far, 18 projects have been approved and funded in 2018 and 28 in 2019, submitted by the Municipalities, the Municipal Associations, Public Assistance and Welfare Institutions (IPAB), Local Social-Healthcare Units (ULSS) and associations. The response of civil society towards the opportunities offered by the cross-sector law and the annual implementation plans is encouraging.

## 2.2 Integration and participation of seniors in society, partnership (MIPAA 2, SDG 17)

According to the BES Report (ISTAT, 2019a), between 2017 and 2018, the proportion of the population which stated that it was participating in social activities (excluding volunteering) increased by 22.8% to 23.9%. Significant generational differences are evident in both civic and political social participation. Social participation is higher among young people in the 14-19 age group (32.4%), while above the average is the group up the age of 64, reaching the lowest rate among the population aged 75 and above (8.9%). Civic and political participation, meanwhile, is highest in the middle age bracket, between 45 and 74 years (more than 60%), but lowest amongst the 14-24 age bracket and the population aged 75 years and above. Regarding participation in the voluntary sector, the highest rates of participation are recorded in the 14 to 24 age bracket and between 45 to 74 years.

Law no. 106 of 6 June 2016 "Reform of the Voluntary Sector, Social Enterprise and for the governance of the universal civil service", as well as the subsequent legislative decree (Leg. Decree no. 117/2017), have given new impetus and revitalised the sector afflicted by a legislative framework lacking in homogeneity. The law redefines the categories of disadvantaged employees to be recruited by employment organisations, taking into account new forms of social exclusion, with reference also to the principles of equal opportunities and non-discrimination as applicable in current EU and national legislation. The reform improves the legislation on volunteering, social promotion activities and non-profit private bodies, as well as providing for the

establishment of co-ordinating bodies and of a more transparent system to remove everything that is not relevant to the Voluntary Sector.

**Responsibilities at national and regional level** - In Italy, the State has jurisdiction over the essential levels of performance to protect the civil and social rights that must be guaranteed throughout the country, and the fundamental principles underlying the concurrent legislation (Article 117, Constitutional Law no. 3, 18 October 2001, "Modifications to Title V of the second part of the Constitution"). With respect to social welfare, the Regions have primary legislative powers, in other words they are not limited by the fundamental principles of state legislation, but only bound in respect of the Constitution, European Community law and international obligations.

Law 106/2016 was introduced to amend the general guidelines of non-profit organisations and to link the different laws relating to the voluntary organisations (Law 266/1991), social cooperatives (Law 381/1991) and social promotion associations (Law 383/2000), in other words, regulating areas of intervention which inevitably straddles State action and regional competences. (Santuari, 2018). The law acknowledges and enhances in particular the aims which non-profit organisations should advocate, that is, it enshrines the causal link between activities/aims and legal entities. The general interest purposes, indicated in law no. 106/2016 and in the above-mentioned legislative decree no. 117/2017, are assigned to the actions of the voluntary sector bodies, giving them preferential treatment, in line with what is laid down in European law. Given the broadness of subjects, such as volunteering, there is a need for uniformity at national level in order for the State to be able to continue to improve regulatory principles within which regional laws can build local regulation, bolstering it, if needs be, with additional content (ibidem).

**National level** - The theme of participation, in the multifunctional and multidimensional logic of AI, can be traced back to the multifaceted and complex universe of the Third sector. In fact, the actions/interventions, where present in the various Ministries, are ascribable to this context, both directly and indirectly.

A central role, in the social integration and participation of seniors, is covered by the MLPS, as the enhancement of the role of seniors within local communities is especially reflected in the area of Third Sector development projects. The initiatives which originate from public notices of 2016 relating to laws 266/1991 and 383/2000 and from the initiative #Diamociunamano (give us a hand), establishing an experimental Fund arising from Legislative Decree90/2014 converted into Law 114/2014, could be grouped as follows:

- some concern forms of national association of an intergenerational type, such as ANTEAS (National association for all ages active for solidarity);
- whereas others are promoters of projects to develop services for the community in activities supporting families such as, for example "La Bottega della Fiducia" (the Trust Workshop), the project to reconcile work and life in *sandwich* families.

The centrality of the Third Sector appears for all to see when we turn our attention towards the initiatives and the projects implemented within the AS sphere of the MIPAAF. The AS, as shown by the CREA study (2018), stimulates the active participation of individuals (including older persons) who struggle to perform activities.

The Italian AS is described by various writers as "inclusive", as the interventions are mainly directed at the social and employment inclusion of persons who live in specific conditions of exclusion and difficulty, as also illustrated in Law 141/2015, which assigns to the AS, as a matter of priority, the function of social and

employment inclusion of disadvantaged individuals. Furthermore, where services are lacking, the AS offers new services or else launches innovative ways of constructing them, in line with the demands of Law 141/2015, which identifies AS as the producer of social, social health, educational, work-related and social placement services. The programming of the Plan of National Rural Development (PSRN 2014-2020) aims to involve all the interested parties, including seniors, in the dual capacity of recipients and/or beneficiaries of the intervention/activity. Among the partnership projects worth mentioning are both the generational Pact in AS (collaboration with professional farming organisations etc.) and that relating to the Promotion and support to the AS (which co-ordinates the network of bodies that are involved in AS at national and European level). The building of partnerships in AS projects is supported by the above-mentioned national AS Observatory and by the National Rural Network.

The DIPOFAM has various projects already funded and others in progress concerning the integration and participation of seniors in society. These projects are carried out in partnership with the Third Sector bodies involving, when necessary, public Administrations, Regions and Autonomous Provinces and public entities.

The theme of integration and social participation is also taken into consideration within the sphere of foreign policy and international co-operation, referred to in the Ministry of Foreign Affairs and International Co-operation (MAECI) during the 10<sup>th</sup> session of the OEWGA (April 2019) when the proposed activities were presented by three Italian non-governmental organisations: National Association of Social Centres, Older People Committees and Gardens; Giotto Movement; HelpageOnlus Italia - which are involved in initiatives aimed at the integration and participation of seniors in society.

The "Passi d'Argento" (silver steps) project of the Ministry of Health, among its various objectives, "also measures the contribution that seniors make to society, providing them with support within their own family context and community, for which aspects such as participation and psychological and social well-being of the individual are central". The "Guadagnare Salute" (gaining health) programme (ibidem) envisages collaborationbetween local Administrations, organisations, bodies, associations, institutions etc. Furthermore, in the Ministry's European projects, work in partnership with various actors, including the Third Sector, is widespread practice.

The themes of the integration and participation of seniors in society are also the object, albeit implicitly, of the interventions of the MINT. In fact, the Protocol signed by the Ministry in 2019 with the Region capitals, provides for collaboration and partnership with organisations such as banks, voluntary and Third Sector organisations. The agreement envisages the funding of projects aimed at obstructing and preventing fraud against seniors, by implementing informative/ divulgative and instructive publicity campaigns, as well as giving support, including psychological, to avert any situations of risk.

Within the universal civil service (Department for Youth Policies and Universal Civil Service of the Presidency of the Council of Ministers), there are several projects that are being funded and/or in progress with the national Fund for the Civil Service, aimed at the integration and participation of seniors in society, being carried out locally by the bodies on the Register of the Universal Civil Service (bodies of the Third Sector and public administrations). In the area of youth policies at the same Department, other initiatives include the "Time to care" project, recently developed together with the Department for Family Policies, for young people interested in supporting and caring for older people, in the area of project actions proposed by the bodies of the Third Sector in Italy. The project's aim is to support young people, promoting an intergenerational exchange and facilitating the inclusion of older people in social life, also taking into account the fact that they represent the category most at risk to Covid-19 corona virus contagion.

The contribution of the MISE is evident, albeit generically, from the initiatives carried out in collaboration with the Regions and consumer protection associations. They concern specific projects for seniors in the area of planned caring, information and education activities (see Directorial decree 17 June 2019 and Ministerial Decree 12 February 2019). In partnership with businesses, the MISE also funds the building or improvement of technology products, processes or services for AA and home care. This evidence demonstrates the attempt to engage in partnerships with the institutional world, associations and businesses to facilitate the integration and participation of seniors in society.

**Regions and Autonomous Provinces** - All the Regions/APs have taken into consideration the theme of the integration and participation of older people in society in their own policies. At least 16 of them have already put in place measures in this area.

Table 3: The MIPAA 2 commitment and SDG 17 in the Italian Regions and Autonomous Provinces: status of
consideration of the policies and implementation

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Valle d'Aosta	Piedmont	/
Liguria	Campania	
Lombardy	Apulia	
Trento AP	Calabria	
Bolzano AP	Sicily	
Veneto		
Friuli-Venezia Giulia		
Emilia-Romagna		
Tuscany		
Umbria		
Marche		
Lazio		
Abruzzo		
Molise		
Basilicata		
Sardinia		

In all the Regions/APs, there are consultation mechanisms and the involvement of representatives of older people and stakeholders (public bodies, civil society) within the permanent forums or councils dedicated to the themes of social and/or health policies. The only ones that have integrated further instruments that focus on needs and measures for AA are Veneto, Friuli-Venezia Giulia, Emilia-Romagna, Marche and Umbria (under their own, already initiated, policies on AA). These are the establishing both of internal working groups (interdepartmental) at the Region to ensure a multi-dimensional discussion of AA, and of councils that promote the representation of the main regional actors in the sector and the consideration of the social demand from local areas. In many Regions/APs, mechanisms of this type are provided for (for example, councils on AA or the third age), without, however, this resulting in any concrete implementation (institution and/or meeting) due to various types of barriers of within the regional/provincial Administrations. This is the

case with Piedmont (Regional Law 17/2019), Liguria (Regional Law 48/2009), Trento AP (Provincial Law 11/2008), Abruzzo (Regional Law 16/2016), Apulia (Regional Law 16/2019), Campania (Regional Law 2/2018), Basilicata (Regional Law 29/2017) and Calabria (Regional Law 12/2018). Therefore, there still remains considerable scope for improvement in increasing the weight and involvement of regional stakeholders in decisions on AA.

## 2.3 Inequality, poverty and equitable and sustainable economic growth (MIPAA 2, SDG 1, SDG 10).

The ageing of the population will increasingly diminish the relationship between the employed and those who are not in employment, a trend which is jeopardising the financial sustainability of social protection systems and pension schemes. The fundamental question will be that of sharing the resources in an equitable and sustainable manner between those who are employed and those who are not. However, given that the matters relating to distribution are easier to address when the available resources are increasing, it will also be necessary to increase taxes on economic growth and productivity. Growth should guarantee full employment, the elimination of poverty, stability of prices and fiscal equilibrium provided its benefits reach everyone, in particular the poor, also ensuring sustainability from an environmental and social perspective. In this context, fiscal policy should operate to stabilise the economy and improve the foundations for economic growth with a medium-term strategy of spending on infrastructure, training and education, as well as support for research and development, while monetary policy is concentrated on the rate of inflation, stabilising objectives which are credible and favourable for economic growth.

**Responsibilities at national and regional level** – In Italy national and regional competences and responsibilities relating to economic, monetary and fiscal matters allocate exclusive competence to the State on the currency, protection of savings and financial markets, protection of competition, currency system, tax and accounting system of the State itself, equalisation of financial resources and also, obviously, social security. The Constitution places, in the sphere of competing State-Region legislation, the harmonisation of public budgets and co-ordination of the public finances and the tax system as well as focussing on complementary and integrative forms of welfare and the regulation of savings banks, rural banks and regional credit institutions. The State also has jurisdiction over the essential levels of performance to protect the civil and social rights that must be guaranteed throughout the country, and the fundamental principles underlying the concurrent legislation (Article 117, Constitutional Law no. 3, 18 October 2001, "Modifications to Title V of the second part of the Constitution").

**National Level** - Activities with greater impact to promote equitable and sustainable economic growth, including in response to the ageing of the population, are carried out by the MEF which, as a central institution in charge of the management of public expenditure, is involved in all the initiatives enacted by the other Ministries to access financial coverage and to introduce all the appropriate adjustments to the Government budget.

In the more specific case of this Report, we should mention the attachment to the *Documento di Economia e Finanza* (Economic and Financial Document), relating to *Benessereequo e sostenibile (BES)* (Equitable and sustainable well-being) and the related *Rapporto sulle tendenze di medio-lungo periodo del sistema pensionistico e sociosanitario* (Report on the medium-long term trends of the pension and health and social services system). The Budget Reform law no. 163/2016 has in fact provided for the inclusion of BES indicators in the series of economic planning documents. As provided for by the same law (Article 14), a *Comitato per gli indicatori di benessere equo e sostenibile* (Committee on equitable and sustainable well-being indicators)

has been established which performs all the activities connected to the drafting of these documents, including the indicators in the budget cycle and in the forecasting assessments of the Government's policy actions. Italy is the first country in the EU and the G7 to have included the objectives of well-being in its economic planning. Among the twelve indicators selected, some are related to AA, including the hope of life in good health at birth, the rate of poverty and the rate of non-participation in the employment market<sup>12</sup>.

From the citizen's point of view, the activities of the Committee for the Programming and Co-ordination of the Activities of Financial Education should be noted, whose legal foundation is represented by Article 24-bis of decree law no. 237/2016, converted into law no. 15/2017, laying down "Urgent measures for the protection of savings in the credit sector". Article 24-bis, setting out the "General measures concerning "financial, insurance and welfare education", establishes that the MEF, in agreement with the MI, adopts a national Strategy for financial, insurance and welfare education, the implementation of which is a matter for the above-mentioned Committee, nominated by the MEF. In particular, the Committee has the task of planning and promoting initiatives to raise awareness of financial education to improve the skills of citizens in respect of savings, investments, welfare and insurance. For this purpose, an *online* portal has been activated (http://www.quellocheconta.gov.it) in order to offer an informative and authoritative source which is simple, rigorous and independent to help the citizen make informed decisions<sup>13</sup>. Access to the content is guided by the illustrative identification of six stages in life, one of which is represented by (or by the preparation for) retirement, and the financial instruments useful for ensuring independent living for longer.

Attention is also drawn to the EDUFINCPIA project of the MI14, already in its 3rd Edition 2018/2019, promoted by the General directorate for the education and evaluation of the national education system (DGOSV), to combat the deficit in the adult population of training in financial education. The project aims, not only to provide the first rudiments of economic and/or financial culture, but to launch a process of full awareness and of citizenship. In the 2018/2019 school year, around 3,440 adults took part in the project.

The theme of elimination of poverty is dealt with by the MINT, from a public safety point of view, through activities aimed at preventing and hindering frauds committed against older people, as mentioned above. Since 2019, the Ministry has made available EUR 2 million, from the Fondo Unico Giustizia (single Justice fund) and has strengthened the engagement of police forces in neighbourhood information and publicity campaigns for the older population focussing on maintaining a high level of attention and of building a safety net of social protection throughout the country (see also point 2.4)

The AS, regulated by law 141/2015, of the MIPAAF, also stands as a multi-functional practice, implemented with productive and social aims for the benefit of individuals that are vulnerable and in difficulty (persons with psychological or physical disability, psychiatric patients, alcoholics or drug addicts, convicts etc.) or else directed at particular segments of the population such as seniors, potentially improving situations of inequality and poverty. The objective of equitable and sustainable economic growth is also visible, in this

<sup>&</sup>lt;sup>12</sup> For further details, see the Ministry of Economics and Finance page, which can be found on the project website.

<sup>&</sup>lt;sup>13</sup> In the portal, *What matters*, there are: 5 simple suggestions, useful for reducing risk when facing choices on the use of personal financial resources, 7 things to know without which each choice may be unintentional and 12 practical guide lines which help to understand the risks and opportunities which occur in specific circumstances. The contents are accompanied by a continuously evolving glossary of finance, insurance and welfare and by the description of the various banking, financial, welfare and insurance instruments accessible on the market.

<sup>&</sup>lt;sup>14</sup> <u>https://www.miur.gov.it/web/guest/-/istruzione-degli-adulti-e-apprendimento-permanente-avvio-iii-annualita-del-progetto-edufincpia-trasmissione-linee-guida-iii-edizione-a-s-2018-20-1</u>

context, in the activities of the *Banca nazionale delle terre agricole* (national agricultural bank) which, through the recovery of disused land, facilitates the sustainable economic development of all those suffering as well as marginal areas, thus improving the economic impact, above all in the most vulnerable and disadvantaged areas of the population.

Finally, the Sports Office of the Presidency of the Council of Ministers, although it does not have direct competence over AA concerns, does give some emphasis to the dimension of social inclusion through both amateur and competitive sporting activities. More specifically, one of the initiatives worth mentioning is "Social inclusion through sport" of 2017. This is a funding scheme for associations and amateur sporting societies, volunteering organisations, social promotion associations and co-operatives to develop projects to stimulate, through the promotion of sport and through its civic and social values, the battle against marginalisation and all forms of discrimination, helping the integration of the disabled, ethnic minorities, immigrants and the most vulnerable social groups.

**Regions and Autonomous Provinces** - 19 Italian regions/PAs have taken the theme of inequality, poverty and equitable and sustainable economic growth into consideration in their public policies. 14 of them have implemented measures in this sphere.

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Piedmont	Valle d'Aosta	Tuscany
Liguria	Veneto	Apulia
Lombardy	Molise	
Trento AP	Calabria	
Bolzano AP	Sicily	
Friuli-Venezia Giulia		
Emilia-Romagna		
Umbria		
Marche		
Lazio		
Abruzzo		
Campania		
Basilicata		
Sardinia		

Table 4: The MIPAA 3 commitment and SDG 1 and 10 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Firstly, it should be recalled that all the Regions/APs have a framework of rules dedicated to the system of services and social interventions, as well as to the regional/provincial health system. These rules always include seniors as a potentially vulnerable group, at risk of social exclusion and fragility. Apart from policies of a purely welfare-oriented nature for older people who are not able to look after themselves or in conditions of poverty, and who do not therefore strictly fall within the accepted idea of AA, it is possible to find a range of policy initiatives that aim for a more general improvement in the social inclusion of seniors and a reduction in inequalities.

More specifically, the Regions/APs regularly use tools such as the Regional Operational Plan (POR) and the National Fund for Social Policies to fund measures to combat the social and economic exclusion of older people. The aim is to remove the barriers that may limit or impede seniors from participating in full in a cultural, economic and social life. Some examples to this effect are the projects funded by Lombardy (Regional Prevention Plan), Umbria (Regional Council Deliberation 1278/2017) and Marche (Regional Council Deliberation 475/2018). In the latter case, the financial tool of the POR was also used to manage and support seniors in critical and (post) emergency situations such as those which took place following the earthquake in central Italy in 2016. The Marche funded projects in the so-called crater (the internal area struck by the earthquake) to promote, for example, AA in terms of personalised physical activities, lifestyles and nutrition, digital skills and time banking for volunteering.

Furthermore, some Regions have also focused their attention on the struggle against social isolation in old age, such as in Liguria (Regional Council Deliberation 873/2011), Emilia-Romagna (Regional Council Deliberation 1809/2017), Molise (Regional Council Deliberation 251/2019) and Basilicata (Regional Council Deliberation 970/2017). In Molise, support clinics have been created, in partnership between AUSER and the municipalities, to attract and satisfy the primary care needs (with retired volunteer doctors) of people, including seniors, in disadvantaged socio-economic conditions. Meanwhile, in Basilicata, the Region has promoted community laboratories with the aim of offering listening and direction to citizens in socially disadvantaged conditions, and also recreational and motor activities along with social development. Emilia-Romagna has taken forward a specific programme "Bread and the Internet" to help older people to master and use new technologies through training in digital skills. A similar programme has been implemented by Umbria that, with POR-FSE 2014-2020 resources, has launched projects for digital inclusion and the improvement of the quality of life for seniors, such as the "#Gemma project".

In the area of economic support, the Regions/APs usually provide allowances and financial contributions to people in difficulty. Some Regions have established direct financial contributions for older people in difficulty in the Regional Social Plan (e.g. Campania: Regional Council Deliberation 897/2018), as well as care allowances to support the family caregivers in their situation (e.g., Emilia-Romagna: Regional Law 2/2014; Abruzzo: Regional Law 43/2016).

A further area of intervention in inequality and poverty concerns the active monitoring and prevention of poor health, which is a factor widely associated with situations of socio-economic disadvantage. Policies of prevention and health promotion can act and have an influence on health inequalities and, indirectly, on socio-economic ones (assuming, for example, that older people who enjoy better health can be more active in society). Side-stepping the need to report here the main policies of health promotion and of quality of life (already the subject of a dedicated paragraph 2.7), it is however worth mentioning the measures to monitor fragility such as the Research Programme on the Integration of Services for the Maintenance of Autonomy (PRISMA), set up by the Friuli-Venezia Giulia Region. This programme seeks to monitor and reveal situations of fragility which are undervalued or not yet identified by the health and social services in relation to residents aged 75 above, in order to be able to intervene and involve the new users in the welfare network.

## BOX 2 – BASILICATA: Innovation of community laboratories (Regional Council Deliberation 970/2017)

**Objective:** "to support voluntary work to encourage the implementation of programmes and activities to guarantee a stronger and broader cohesion of the community and of more complete integration and inclusion of the citizens at greater risk of exclusion" (art. 1, Regional Council Deliberation 970/2017).

**Instruments and mechanisms:** the Resolution establishes schemes to fund community laboratories, defined as spaces that are self-managed by voluntary associations, based on the values of solidarity, sharing and promotion of the inclusion of disadvantaged individuals. The laboratories are projects, promoted by non-profit associations, for all persons experiencing situations of social fragility, including seniors at risk of poverty, exclusion and isolation. The activities offered by the laboratories range from the promotion of intergenerational relationships to involvement in cultural initiatives, such as the rediscovery of places, traditions and knowledge.

Results achieved: for the three-year period 2017-2019, the community laboratories received Euro 340,000 in funding (covered by the 2014-2020 Cohesion and Development fund). The first 20 projects were approved in 2018 (6 of which were specifically geared towards seniors thanks to the involvement of local AUSER), with average funding of around Euro 12,000 each.

## 2.4 Adapting social security systems (MIPAA 4)

The social changes connected to the demographic transition<sup>15</sup> elicit reflections on the sustainability, including financial, of the welfare system, so that it is able to promote quality of life and co-existence and to support people throughout their entire lives. From the point of view of the public services and policies involved, the devices for treating social security have varied over the years, in relation also to the assumptions of development which have influenced the choices of public expenditure and the expected reciprocal interventions between State and civil society, resulting in different groups of measures of support, assurance and security, designed to protect citizens from what are deemed to be social and economic risks - poverty, hardship, marginalisation - in the process of developing productive systems, and in the introduction of specific social rights and obligations of financial contribution.

**Responsibilities at national and regional level** - From the point of view of regulatory powers, in Italian law, social security and the determination of the essential levels of benefits concerning the civil and social rights that must be guaranteed throughout the country are the exclusive responsibility of the State (Article 117, Constitutional Law no.3 18 October 2001 "Modifications to title V of the second part of the Constitution"), expressed through the functions of guidance and management of the central government administrations. However, there is joint responsibility with the regional Administrations for the planning and development of the measures and policies relating to the complementary and integrative welfare services and measures, as well as those that help to ensure economic and social security in the various local areas.

**National level** - Considering this distribution of functions, the policies of greatest relevance for AA in terms of adapting systems of social protection, have been put in place directly by the MLPS - which has

<sup>&</sup>lt;sup>15</sup> Among these we find the consistent increase in the incidence of older age groups among the long-term unemployed and in the population of working age, the transformations of households and the redefinition of the function of care, the progressive spread of chronic illnesses and the condition of dependency which is a consequence thereof, the transformation of the employment market with employment paths characterised by discontinuity and new social risks and poverty linked to the loss of job and social inequalities.

responsibility for social security - and the MEF, accompanied by a group of complementary policy initiatives put in place by the MAECI and by the DIPOFAM<sup>16</sup>.

Regarding the aim of the measures introduced between 2016 and 2019, the main interventions concerned: expanding towards a universal approach to the protections from the risks of poverty; the studying of policy solutions to facilitate adjustment of the social security measures to changes in the socio-economic environment and to the transformations of families and local communities.

*The introduction of a national measure to combat poverty* - With a group of interventions first referred to in Legislative Decree no. 147/2017 "Provisions for the introduction of a national measure to combat poverty", and later in Legislative Decree no. 4/2019 "Urgent provisions in respect of Citizenship Guaranteed Minimum Income and Pensions" (Law no. 26, 28 March 2019), Italy adopted a law and a national measure to combat poverty. Further to the measure of Income of integration, to the earlier trials of the Shopping Card (Legislative Decree no. 112/2008) and the Support for Active Inclusion, from 1st March 2019, the measures of the Citizenship Guaranteed Minimum Income and Pension came into force. These are measures of support and integration for family incomes up to the poverty line, established on a means-tested basis<sup>17</sup>, to broaden the cover from the risk of marginalisation of those who, including the oldest or those closest to retirement age, find themselves excluded from the employment market and in situations of hardship - while receiving pension benefits (social security benefit and old age pension). Final themes are the conditions of extreme poverty and homelessness which concern a growing number of persons over the age of 45 years (MLPS, Fio.PSD, Caritas Italiana and ISTAT, 2015).

The development of these measures has been accompanied by the reorganisation of the governance of the system of social policies and the creation of the conditions of economic sustainability essential for the development of services and the relative allowances, in keeping with the lines of action already promoted by law 328/2000. To address territorial fragmentation and for a target which has marked over time the division of expenditure and development of social services in the context of new and complex social demands, as has been explained, the Social Protection and Inclusion Network was established at the MLPS, as a multi-level co-ordination mechanism of the programming processes. Through the Network, with the introduction of structural funding of the main Funds - (Poverty Fund, National Fund for Social Policies and Fund for Non-Self-Sufficiency) - the three-year Plans for National Programming were galvanised to cover and implement services for the most at-risk social situations: infancy, adolescence and family responsibilities; disability and non-self-sufficiency, poverty and social exclusion.

Although specific details for the eldest population group have not yet been identified, it was an important intervention to help developing a group of parameters within which to organise a minimum range of services

<sup>&</sup>lt;sup>16</sup> For the details of the specifics of the relative organisational functions and the relative policy proposals, see the specific sections published on the project website.

<sup>&</sup>lt;sup>17</sup> The amount of both measures is calculated on the basis of capital and income requirements which describe the socioeconomic conditions of cohabitation and family household composition, in relation to the poverty line established by ISTAT. The subsidy therefore offers support to cover living expenses and for the acquisition of essential subsistence services (household utilities and general consumer goods). Up to the age of 67 years, the Citizenship Guaranteed Minimum Income is tied to the underwriting of a Labour Agreement, or an Inclusion Agreement, corresponding to a personalised support path for work placement and social inclusion which can involve community service activity, professional re-qualification or the completion of studies as well as participation initiatives useful for pursuing the same objectives.

for sufficiently homogeneous care addressing the fragilities at the root of poverty situations throughout the lives of local people and communities.

Through the different national programming Plans, the guidelines contained in the Network have moved in the direction of promoting the development of basic local services, with a territorial approach to meeting the demand for assistance, in relation to the problematic areas which cause it (social isolation, poverty and extreme poverty and marginalisation), within organisational integration processes, with the health system, policies of employment, education and training and housing policies.

*Policies for the development of active ageing in terms of sustainability* - With reference to the aspects of sustainability of the social protection system throughout life, at a national level, there are a number of initiatives that are oriented towards the study and verification, on the one hand, of the social changes which are the basis for the demand for social protection in old age and, on the other, of the capacity of the available institutional mechanisms to effectively address them.

The Treasury Department of the MEF, in collaboration with the "G. Brodolini" Foundation, firstly with the project *Treasury Dynamic Microsimulation Model*<sup>18</sup>, and, in 2019, with the Project *MOSPI – Modernizing Social Protection System in Italy*<sup>19</sup>, both sponsored by the European Commission, has put in place models of dynamic micro-simulation to analyse the employment market and the Italian pension system and distribution aspects linked to them, to verify the appropriateness of pension benefits to the development features of work pathways, in the context of structural changes which affect the employment market and the institutional mechanisms which contribute to it. Both initiatives take their cue from the consideration that most European welfare systems are designed for the protection of permanent workers and do not take into account the specifics of a growing number of workers with transient careers. Amongst these workers considered atypical are the new job profiles which have arisen with digitalisation and the platform economies, broadening their risk of vulnerability in terms of social protection. To address this problem, the projects have therefore developed policy-making mechanisms, aimed at providing practicable analyses of sustainability over a long period, which take into account the ageing of the population and public financial constraints.

Furthermore, with a view to developing a reflection on the function of the social protection systems in promoting the human rights of seniors, the MAECI, as part of the 10th working session of the OEWGA, which, as already mentioned, took place in April 2019, has contributed to the studies, suggesting the importance of the development of integrative programmes and social support policies for the income of the poorest over 65s, relating them to the universality criteria which have guided the establishment in Italy of free healthcare and social support programmes such as the Shopping Card, the Social Allowance and Citizenship Guaranteed Minimum Pension.

The study of the issues of co-existence which intersect the development of social protection systems was ultimately one of the central aspects of the interventions promoted by the Department for Family Policies of the Presidency of the Council of Ministers, both in terms of the initiatives co-ordinated for the European Year of Active Ageing and Solidarity between the Generations of 2012, and in the organisation, in 2017, of the

<sup>&</sup>lt;sup>18</sup> www.dt.mef.gov.it/it/attivita\_istituzionali/analisi\_programmazione\_economico\_finanziaria/modellistica/t\_dymm.html
<sup>19</sup> www.dt.mef.gov.it/it/attivita\_istituzionali/analisi\_programmazione\_economico\_finanziaria/attivita\_ricerca/progetti
\_europei/mospi.html

Third National Conference on the Family. In these contexts, which have seen the active participation of the institutions of all levels of government, of social parties and representative organisations of civil society, different aspects which relate to the development of the systems of social protection have been addressed:

- the relationship between fiscal policies, demographic crises and the conditions for developing welfare systems;
- the transformations in the demands for care of dependent older persons and the function of the policies for the work-life balance in facilitating the long-term sustainability of the social welfare mechanisms;
- the transformations of the cultural models of family and social relations and the relationship that these changes have in the perception, access and use of the services and mechanisms of social protection;
- the effectiveness of the investment in community welfare measures, in the development of local social and productive capital and in the reduction of social inequalities.

**Regions and Autonomous Provinces** - 19 Italian regions/PAs have considered the theme of adaptation of social protection measures in their own public policies. Around half (9) of these have taken concrete steps in this regard.

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Valle d'Aosta	Piedmont	Tuscany
Liguria	Trento AP	Sicily
Lombardy	Bolzano AP	
Veneto	Marche	
Friuli-Venezia Giulia	Molise	
Emilia-Romagna	Campania	
Umbria	Apulia	
Lazio	Basilicata	
Abruzzo	Calabria	
	Sardinia	

Table 5: The MIPAA 4 commitment in the Italian Regions and Autonomous Provinces: status of considerationof the policies and implementation

The central point for this theme is that of adapting the social protection systems towards supporting AA in the population. Although AA is not a new concept, its adoption in Italy at the level of social policies has been rather slow, including at regional/provincial level. The social protection systems were traditionally constructed with the objective of helping the weakest and most disadvantaged categories of the population, including seniors (defined as a group of persons over the age of 65). This approach has been called into question by the paradigm of AA, which is focused on the potential of older people, on their contribution to society and on their active role in satisfying social, training, cultural and recreational needs.

On the basis of the degree of adaptation of regional/provincial systems of social protection towards AA objectives, three categories of Region/AP can be defined:

 Advanced adaptation: the Regions, Friuli-Venezia Giulia, Emilia-Romagna and Umbria have been the innovators in respect of AA in the Italian panorama, thanks to their legal framework or dedicated initiatives (respectively Regional Law 22/2014, Regional Council Deliberation 2299/2004 and Regional Law 14/2012 - this last later merged into Regional Law 11/2015) and a series of laws and sectoral social policies, pursuing a co-ordinated and integrated programme in the field of AA. The consistency and influence of the AA policies adopted on the respective social protection systems have enabled the progressive consideration and integration of aspects of AA in the evolution of social policies in the field of volunteering, associations, lifelong learning, informal care, social programming and health;

- starter or intermediate adaptation: the majority of Regions/APs have initiated in the last few years a starter course of new policies for AA, which may include: only cross-sector laws on the subject (Calabria); cross-sector laws and other sectoral policies (Piedmont, Liguria, Veneto, Marche, Abruzzo, Apulia, Campania, Basilicata); only some sectoral policies, especially in the field of volunteering, associations, employment, lifelong learning, social and health programming, sport, social farming, culture, intergenerational solidarity (Valle d'Aosta, Lombardy, Trento AP, Bolzano AP, Lazio, Molise, Sardinia). For these Regions/APs, there exist substantial margins of improvement of AA policies in terms of consistency, programming and implementation;
- adaptation not started: in Tuscany and Sicily, there is no record of any systematic or substantial attempt to adapt their social protection system towards AA. In Tuscany, the policies identified linked to AA only concern the area of health promotion within health care planning. In Sicily, no significant recent policies have been identified, while those less recent (1980s-1990s) have not in fact been applied. In both cases, no framework laws have been approved in this field. For Tuscany and Sicily, a cultural change is needed by the regional Administrations and a greater promotion of the values of AA in society in order to overcome the traditional paradigm of seniors as a passive category of recipients of purely assistance policies.

#### 2.5 Preparing the labour market (MIPAA 5, SDG 8)

Both in the MIPAA and under the Sustainable Development Strategy of Agenda 2030, work is regarded as a key dimension for the development of life and human relations. It is recognised both as the expressive, creative and productive function of individuals throughout life, and as the central aspect of the adaptation process between economy, environment and society, as organiser of the possibilities of development, innovation and sustainable mobilisation of resources, and a key element for the protection and promotion of the quality of life and systems of co-existence. In this setting, the goal of preparing the labour market, with reference to ageing, is promoted, also examining the development of the skills of each generation in the construction of the meanings of historical experience, connecting personal resources with living environment conditions and constraints. From the point of view of the intervention, preparing the labour market thus corresponds to a number of priorities which concern the development of opportunities and quality of employment in older age, to combating the aspects of discrimination and prejudice towards older people, to the development of their resources and skills to facilitate their employability and professional development under different conditions of context and branches of life paths, to the diffusion of forms of regulation and organisation of work helpful for integrating the diversity and distinctiveness of younger and older people in the processes of productive development.

**Responsibilities at national and regional level** – In Italian law, labour market policies are divided between the shared responsibilities of State and Region, listed in Article 117 of Title V of the Constitution, as well as the constraints arising from Community law. Meanwhile, it is the role of the State, through central government institutions, to determine the essential levels of performance of civil and social rights that should be ensured throughout the country and that contribute to the preconditions of development of the labour market (for example, money, protection of financial markets, competition, public order, environmental

protection etc.); the aspects that define the specific context conditions within which work is carried out (such as the protection and security of work, professions, professional education and training, scientific and technological research and support for innovation for the productive sectors, health protection etc.) are the result of regulation shared with the regional institutions.

**National Level** - Considering this distribution of functions, the most important policies for AA in this field have been put in place: by the MLPS, as the Ministry of reference for the co-ordination of employment policies, the development of employment, and of training as an active employment policy; by the MI, in relation to the increase in qualifications and development and consolidation of the skills of the adult population, with particular reference to digital skills; by the MIPAAF for matters concerning the integrative and sustainable development function of the welfare system promoted in terms of AS; by the MAECI for the aspects of negotiations of international importance at the OEWGA; and, finally, by a group of policies for the development of relations between generations put in place by the Department for Family Policies and by the Department for Youth Policy and the Universal Civil Service of the Presidency of the Council of Ministers. Overall, there have been three main areas of policy development:

- combating unemployment and the development of new areas of employment in older age;
- the strategic reinforcement of processes to develop skills throughout life;
- the development of contexts and forms of organisation of work appropriate for integrating diversity within the productive development processes.

*Policies to combat unemployment and the development of quality of employment in later life* - Following the deep-rooted crisis of 2008, regulation of the Italian employment market underwent extensive reform with Decree Law no. 112, 25 June 2008 "Urgent provisions for the economic development, simplification, competitiveness, stabilising of public finances and equal distribution of taxes", Law no. 92, 28 June 2012 "Provisions relating to reform of the employment market from the perspective of growth" (Fornero reform law), and then with the Enabling Law no. 183, 10 December 2014 (Jobs Act) and subsequent implementation decrees. In the context of a widespread increase in long term unemployment, and the growing exposure to risks arising from the fragmentation of career paths, in line with the guidelines of the Europe Strategy 2020, measures were taken to reform the governance of the employment market in a number of areas:

- to reduce the barriers to entry into the employment market labour costs, mismatch of skills, gaps in employment, and to extend the protection measures in case of job loss;
- to support the development of the supply of skilled employment, to enable the production system to identify new resources with which to tackle the dynamics of international competition;
- To strengthen the function of collective bargaining, in the development of flexible forms of work organisation and initiatives to support the work-life balance.

From the point of view of the target of intervention, this first area of development of employment policies has focused particular attention on socio-economic factors that expose individuals, even before the age of 65, to a risk of marginalisation in the participation in the production system and the life of the community, with knock-on effects in terms of social protection.

These employment policies are also naturally linked to retirement and pre-retirement policies. For this purpose, it is helpful to remember that, in Italian law, there is the possibility of cumulating employment income and pension income, in other words to continue working even after retirement. In the specific measures, with Legislative Decree 112/2008, the possibility was introduced of full cumulation between early retirement and the income from self employment and employed work in all three regimes (remunerative,

mixed and contributory). The same decree has reorganised the rules on the cumulation of pension and employment income in the contributory system, bringing it into line with that of the remunerative and mixed regimes. It should also be remembered that, in the last decade, pension policies have introduced the principle of adjustment of the age requirement for access to the pension system to the increase in life expectancy determined by ISTAT (Legislative Decree 78/2009, Law 201/2011 and subsequent provisions). This principle therefore links eligibility to the old age pension (not to the early retirement pension and to other pension treatments subsidised by social protection) to the reaching of a variable age threshold, which increases progressively over the years (currently 67 years).

Since 2012, the MLPS has accompanied the development of new social welfare benefits: with the reforms referred to, incentives have been introduced to encourage recruitment of the over 50s<sup>20</sup>, and new forms of social protection have been developed such as the New Social Insurance for Employment (NASPI), the Involuntary Unemployment Benefit (ASDI), with specific requirements to the advantage of the over 50s and a direct link between the use of subsidies and the use of services to accompany professional development, at least until retirement age. Also in 2012, with the establishment of the *Bilateral solidarity funds for sectors not covered by CIG/CIGS*, the driving force of collective bargaining was restored, in the development of programmes to retrain and re-qualify workers approaching the age of retirement.

Between 2015 and 2016, a number of measures were introduced to encourage the development of flexible formulae of transition to retirement in an effort to expand, in intergenerational terms, the possibilities of prolonging working life. A first experiment in this regard was that formulated in relation to the Stability Law 2016 (Law 208/2016), with the Inter-ministerial Decree (MLPS - MEF) GU 115 of 18 May 2016 designed to regulate a facilitated form of part-time work for the three-year period 2016-2018. A second experiment involved the introduction of the facilitated Pension Advance (APe),<sup>21</sup>, designed to facilitate the attainment of the old age pension by some categories of workers most exposed to a decline in their quality of life (caregivers, workers with disabilities, people employed in heavy work etc.).

Between 2016 and 2017, also due to the lack of feedback received from the transition measures to retirement in promoting an intergenerational equilibrium in the development of employment, new measures began to redefine the path of the intervention approach, with more focus on the sustainable development of employment throughout the course of the professional career path, and, in particular, in work places.

On the one hand, with the MLPS Decree of 17 October 2017<sup>22</sup>, the unique nature of the age factor<sup>23</sup> was recognised in the area of regulation relating to the definition of the types of socio-economic conditions which characterise the condition of disadvantage in the employment market, widening the margins of intervention in terms of State Aid. On the other, a number of containment measures were proposed for the development

<sup>&</sup>lt;sup>20</sup> Similar incentives were introduced in favour of female employment.

<sup>&</sup>lt;sup>21</sup> Introduced by Article 1, para. 179 of Law 232/2016 (Budget Law 2017), it was initially planned until 31.12.2018 and subsequently extended year by year, and until 31.12.2020 by Article 1, para. 473 of Law 160/2019 (Budget Law 2020). For a detailed discussion, see the MLPSi Data Sheet which can be found on the project's website.

<sup>&</sup>lt;sup>22</sup> This is the Decree for the identification of disadvantaged and very disadvantaged workers, pursuant to Article 31, para. 2 of Legislative Decree no. 81/2015, with which under the Italian legal system has been transposed (EU) Regulation no. 651/2014 on aid compatible with the internal market. For further details, see the MLPSi Data Sheet which can be found on the project's website.

<sup>&</sup>lt;sup>23</sup> And in particular: "being between the age of 15 and 25", "being over the age of 50".

of a flexible organisation of work which could take account, in collective bargaining, the specific needs of different generations.

Of relevance to this theme are the facilitation measures promoted with Inter-Ministerial Decree MLPS and MEF of 25 March 2016 on the relaxation of productivity bonuses in relation to the development of company welfare services and with Inter-Ministerial Decree MLPS and MEF of 12 September 2017 on the tax relief for the taking of parental leave and other parental support benefits, for the adoption of flexible working hours, rather than other time-saving services in support of care commitments. An interesting point to highlight has also been the introduction of some forms of self-employment protection within Law no. 81 of 22 May 2017 and, with them, of the first formulation of *Agile Working* as a means of implementation of the employment relationship established through agreement on cycles and objectives and without precise limits of working hours or place of work.

In more recent years, taking into account the introduction of these measures in the structural regulation of the employment market, various governments have introduced into their systems a set of plans aimed at testing strategies and solutions that are able to involve, in an integrated way, communities, associations and employers, public and private, and families, in the development of "enabling" living environments, suitable for fostering and maintaining, for as long as possible, an independent life in good health, taking into consideration the set of generational components and problems. This is in view of a possible prolonging of working life, and from the perspective of offering support and assistance to those older workers who are increasingly providing care for dependent family members.

Whether under the National Prevention Plan or in the programmes and projects of the National Centre for Disease Prevention and Control, the Ministry of Health has dedicated a raft of supportive measures to the development of initiatives to promote health, adding to the measures for the security of workers provided for by Legislative Decree no.81/2008. These are plans which have involved working structures, focusing on information and awareness-raising measures, as well as stimulating company welfare actions to promote healthy lifestyles (training of occupational doctors, development of company gyms, interventions on the ergonomics of work organisation, catering services according to nutritional criteria) in order to prevent the risks associated with the development of chronic illnesses, as well as the conditions of fragility that increase exposure to the risk of accidents.

The development of corporate welfare, also from the AA perspective, has finally come to the attention of the DIPOFAM, from the work of the Third National Conference of the Family in 2017, and in the context of the plans promoted with a Public Notice in 2017. Between the month of November 2019 and 20 January 2020, the same Department, making use of the available regulatory measures, promoted the public notice #Conciliamo<sup>24</sup>, which allocates EUR 74 million from the Family Policies Fund to fund the development in businesses of forms of work-life balance that, as it improves the quality of working life, can encourage the creation of virtuous cycles for labour productivity, rebalancing care burdens, increasing female employment and combating the isolation of the most older age bracket.

The development of skills throughout life - Starting from the reforms mentioned above, a second area of policy development has been the strategic reinforcement of the processes of recognition and continuous development of knowledge, capabilities and skills throughout life, as key factors in integration in the employment market. That has evolved, firstly by linking together the use of all forms of unemployment

<sup>&</sup>lt;sup>24</sup> <u>http://www.governo.it/sites/new.governo.it/files/Allegato3-CategorieAzioni.pdf</u>

subsidy to that of the active labour market policy services, co-ordinated by the National Agency for Active Labour Policies, and, secondly, by developing lifelong learning services and a multilevel system of governance for the link between services for reintegration into the workplace and services for the development and certification of skills.

Through dialogue between the administrations concerned <sup>25</sup>, Italy has established a common definition framework on the subject: of minimum reference standards to validate and certify the skills of the national directory of educational qualifications and training and of professional qualifications; of standards of the testimonials and certificates that can be used at European level; of a monitoring and assessment system. All of these actions aim to make usable the skills acquired in all contexts (work, daily life and free time), facilitating geographical and professional mobility and increasing the integration and personalisation of educational, training and employment services throughout life, with particular reference to that part of the Italian population most at risk of disadvantage due to obsolescence of skills, low levels of qualification or to problems accessing and taking advantage of the institutionalised education system.

Active ageing and new functions for job development - Finally, a third area of development of policies for employment from the point of view of the ageing population concerns a number of policy initiatives which foreshadow new working relations between generations for the promotion of the quality of life in older age and the development of new forms of economy. The development of relations between generations is explored, for example, in a range of initiatives promoted by the Presidency of the Council of Ministers, both in the planning promoted by the Three-Year Plan 2020-2022 for the programming of the universal civil service and in the context of the initiatives promoted by the DIPOFAM with reference to the European Year for AA and the Public Notice 2017. In these areas, "intergenerationality" has been heralded as a resource for the transfer of professional skills and for the development of new forms of work.

Enhancing the exchange between generations is also one of the key aspects on which various intervention measures are planned of the MIPAAF, with reference to the development of the AS, regulated by Law 141/2015 and to the policies to support innovation by farming businesses. With respect to the objective of preparing the labour market, the AS is defined as an area of economic development which identifies a multifunctionality of agricultural enterprises in the development of interventions that, starting with objectives of socio-economic integration of the weaker sections of the population, aim at the development of coexistence contexts in which the enhancement of differences is encouraged as a resource for the development of life paths and professional development of the beneficiaries, as well as the quality of life of the community of reference. This methodological feature has also been promoted in the area of the National Rural Development Programme for the years 2014-2020.

With closer reference to the development of agricultural entrepreneurship, it is interesting to note the experimentation of the Intergenerational Pact in Agriculture. Introduced by the Budget Law of 2018<sup>26</sup>, following on from other initiatives for the development of female entrepreneurship and in the Mezzogiorno,

<sup>&</sup>lt;sup>25</sup> For further details on the development of policies for learning and training, see the dedicated paragraph 2.6, as well as the MLPS and MI data sheets which can be found on the project's website.

<sup>&</sup>lt;sup>26</sup> Law no. 205/2017 (Budget Law 2018), G.U. 29/12/2017. This initiative was preceded by various experiments proposed in 2016 to incentivise female entrepreneurship and in the Mezzogiorno, in reference also to the Inter-Ministerial Decree of the MIPAAF, together with the MEF - Measures to encourage the development of entrepreneurship in agriculture and generational exchange.

the measure provides for the possibility of concluding a mentoring contract between young people in the age bracket 18 - 40, with an entrepreneurial idea in the sector, to benefit from the skill of a farmer over the age of 65 (retired or not) for a maximum period of 3 years, to promote the growth of the business, redistributing its profits and, in future, taking over the management of the business or enjoying the right of first refusal in case of its sale.

**Regions and Autonomous Provinces** - 14 Italian regions/PAs have considered the theme of employment in their AA policies but only 9 of these are implementing concrete measures in this regard.

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Veneto	Piedmont	Valle d'Aosta
Umbria	Liguria	Lombardy
Lazio	Marche	Friuli-Venezia Giulia
Abruzzo	Campania	Tuscany
Emilia-Romagna	Sicily	Molise
Trento AP		Apulia
Bolzano AP		Calabria
Sardinia		
Basilicata		

Table 6: The MIPAA 5 commitment and the SDG 8 in the Italian Regions and Autonomous Provinces: status ofconsideration of the policies and implementation

Policies favouring the active participation of seniors in the labour market can be traced back to two main areas of intervention: professional training and a better work-life balance. The first area concerns the funding of measures to facilitate inter-generational training and to enhance the experience of older workers. The cross-sector law of the Veneto (Regional Law 23/2017) provides for the funding of projects for the transfer of skills from older workers to younger ones, including the transmission of ancient crafts and handicrafts. In Veneto, the instrument of the Regional Operational Programme (POR) has also been used to draw on the European Social Fund (ESF) to fund measures to achieve this purpose (Regional Council Deliberation 1315/2019). Three other Regions have also developed similar provisions, although within more general regulations on health and social services (in Umbria with the Regional Law 11/2015) or sectoral, on active labour market policies (in Lazio with the POR on ESF 2014-2020). In Umbria, the inter-generational training policy has also included the computer training of older workers by younger ones, by collaborating with schools. In Lazio, the Region has promoted a generational relay to increase youth employment and to prolong the working life of workers over the age of 50 from the viewpoint of AA, as well as occupational bonuses to encourage the employment of mature and older workers.

A second area of intervention covers policies that encourage a better balance between work and family caring activities. In some cases, as in Campania (Regional Law 33/2017), Abruzzo (Regional Law 43/2016) and Emilia-Romagna (Regional Law 2/2014), these policies are sectoral and aimed at supporting family care-givers, that is, all those who either look after older family members or those with disabilities. The provisions generally provide for institutions and guarantees in favour of the caregiver, such as the possibility of obtaining flexible working hours in the work place. The rules also provide for the possibility of obtaining recognition of the welfare skills acquired by the caregiver (as well as training credits to gain the qualification of social and

health professional or of other similar figures). However, it is only in Abruzzo that this provision has already been implemented.

In other cases, policies are in place that are designed for all workers, conceived in the regional welfare and employment directorates. The Bolzano AP, for example, supports a certification ("family and work" audit) that enables public and private employers to be assessed and encouraged to apply company policies that help the worker (including the older worker) to achieve a better family-work balance.

Finally, some Regions have developed and implemented the following specific measures:

- In Emilia-Romagna, a sectoral law on the promotion of health and well-being (Regional Law 19/2018) includes the objective of improving health prevention and promoting safety in the working environment. This policy, which is of course the prerogative of all workers, but useful in a life course perspective and also in older age, guarantees funds for companies for these types of intervention;
- In Trento AP, the so-called "Progettone" (Provincial Law 32/1990) was implemented, with which the AP supports the more mature disadvantaged workers (≥53 for men, ≥49 for women) who have been laid off or are unemployed. The programme involves their inclusion in public sector jobs (in particular, in the green industry, cultural services and personal services) intended to guide them until they reach the minimum pension requirements;
- In Umbria and Sardinia, sectoral policies in the agricultural sector (Regional Law 12/2015 and Regional Law 11/2015 respectively) provide support for job placement projects of socially disadvantaged older persons in social farms;
- In Basilicata, microcredit is used to combat long-term unemployment for people over the age of fifty. Management of the fund (EUR 20 million) is the responsibility of the public company Sviluppo Basilicata SpA, an *in-house* company of the Region.

The Regions, Piedmont (Regional Law 17/2019), Liguria (Regional Law 48/2009), Marche (Regional Law 1/2019), Abruzzo (Regional Law 16/2016) and Campania (Regional Law 2/2018) include the objective of preparing older people for the work market (for example, training, transmission of knowledge, gradual exit from work, better family-work balance, company age management) in their respective cross-sector laws on AA. However, these provisions have not yet been implemented nor have resources been allocated for this purpose. The Sicily Region has also adopted a sectoral regional law on the integration of older workers (Regional Law 14/1986), but it has not yet been implemented.

BOX 3 – EMILIA-ROMAGNA: a visionary law to support family caregivers and to achieve a better workcaring balance (Regional Law 2/2014).

**Objectives:** to recognise and promote "family care and solidarity as social goods, to encourage empowerment and community development in the context of welfare policies," (Article 1, para. 1). Tools and mechanisms: regional law 2/2014 was the first in Italy to recognise, enhance and support family caregivers as a *de facto* fundamental component in the network of care for dependent persons. The law was fully implemented with Regional Council Decree 858/2017 and has included specific awards and services for the caregiver. The caregiver is involved in the assessment of the dependent person and in the assistance provided by the health and social care services, as well as receiving appropriate guidance, information and training. The Region provides for care allowances and financial assistance, adapting the home environment, offering psychological support and counselling, understandings with insurance companies for preferential policies, agreements with employers to ensure flexibility and a better familywork balance. Municipalities and local healthcare units (AUSL) offer information and training, self help and mutual aid groups, as well as the customisation of health and social welfare services for the dependent person. Furthermore, the Region recognises the contribution of caregivers by formalising or certifying care skills, for the purpose also of attaining the status of healthcare professional or similar figures. The Region also acknowledges the value of the caregiver through a Caregiver Day (each year on the last Saturday of May) through targeted communication campaigns and training on the topic for health and social health professionals.

**Results achieved:** the Region allocates around EUR 50 million annually for interventions related to the caregiver law (with funds drawn principally from the Regional Health Fund and National Fund for Non-Self-Sufficiency).

### 2.6 Lifelong learning and education (MIPAA 6, SDG 4)

Poor education can have negative repercussions for everyone on life and can lead to unemployment, to difficulties in finding a skilled job, to a low wage and, as a result, to a low standard of living. As the traditional division of the life of an individual into three periods of education, work and retirement is no longer valid, the education system will therefore have to be adapted in order to support a greater flexibility during the course of life. According to the MIPAA, to achieve this commitment, it is necessary to achieve two objectives: to facilitate and encourage lifelong learning and to guarantee that the education system contributes to a better employability of all people.

The education programmes must be developed, recognised and made accessible to everyone of all ages. The educational institutions must be adapted to the needs of older people, in particular, to prepare those persons that are approaching retirement for their future changes in lifestyle and to help them find an alternative purpose through new interests and professions. New methods must be developed to teach older people the necessary skills to manage the technological tools of daily life and the new communication technologies. In addition to this, in the area of lifelong learning, political actions must be taken to increase the employability of older people, helping them to maintain and develop further their knowledge and specific skills. The informal education of older people should also be encouraged as organisations such the University of the Third Age also hold great importance.

**Responsibilities at national and regional level** – In Italy, on matters relating to the division of responsibilities for regulation and the production of policies concerning competences on education and professional training

between national and regional level, those which are the exclusive legislative competence of the State are the general laws on education, the establishment of essential levels of performance concerning civil and social rights that, also in this area, must be guaranteed throughout the entire country and the definition of the fundamental principles underlying competing legislation. The competing legislative competence of the Regions is exercised without prejudice to the autonomy of educational institutions, while in the field of professional education and training, there is exclusive legislative competence (Article 117, Constitutional Law no. 3, 18 October 2001 "Modifications to title V of the second part of the Constitution").

In our legal system, lifelong learning consists of "any activity undertaken by people in formal, non-formal and informal ways, throughout the various stages of life, in order to improve their knowledge, capability and skills, from a personal, civic, social and occupational perspective". Italian legislation on this subject follows that established at European level and has been set up and regulated with Article 4 (paragraphs 51-68) of Law 92 of 2012, the Understanding in Unified Conference of the 20 December 2012 and the Agreement in Unified Conference of 10 July 2014.

Regarding the non-formal education of older persons, such as, for example, in the case of the University of the Third Age, it may be broadly regulated by the Regions and by the PAs.

**National Level** – The more substantial policies for promoting lifelong learning and adapting the education system in order to satisfy the changeable economic, social and demographic conditions can also be traced back, obviously, to the MI. In this regard, it is worth mentioning the participation of the MI at the *Inter institutional Table on Lifelong Learning* (see point 2.5) which has the main task of developing minimum standards and strategic lines of the services for lifelong learning and management/supervision of the *local networks*. These are networks that constitute the supporting structures of the system, that include the set of education, training and employment services and that represent the institutional places assigned to take responsibility for adults, by providing support for the construction of formal, non-formal and informal learning pathways; the recognition of training credits; the certification of learning, however it is acquired; the enjoyment of guidance services throughout the course of life.

Provincial centres for adult education (CPIA) (DPR 263/12 and Decree 12 March 2015) have also been established for some years as "autonomous educational institutions" organised in local service networks, where a number of educational courses (to raise the levels of education and to obtain degrees and study certificates), interventions to expand the training offer (to strengthen the skills and employability of citizens) and research, experimentation and development activity on the subject of adult education are in place. In 2019-2020, almost 130,000 adults were involved in educational courses and another 99,000 in literacy and Italian language learning courses.

To support the commissioning and development of the CPIA, the MI promoted the Plan of Activity for the Innovation of Adult Education (PAIDEIA), whose National Working Group promotes and co-ordinates the implementation of the activities of the CPIA and of numerous projects relating to adult education, and in particular of the above-mentioned EDUFINCPIA Project, started in the school year 2016/2017 and rolled out in 2019. The project aims to redress the educational deficit of the adult population in the field of financial education and provides for the planning and provision of specific learning units for adults enrolled with Provincial centres for adult education (CPIA), and the *Three-Year National Plan of Research of the National Network of the "CPIA - regional centres of research, experimentation and development for adult education"*.

Furthermore, to support the implementation of lifelong learning, the MI has also created the National plan to guarantee the skills of the adult population which is divided into two actions. The first is focused on research, experimentation and development activities designed primarily to highlight the role of the CPIA as a "service structure" and to provide specific "system measures" (such as for example: understanding local training requirements; the creation of adult profiles based on the needs of the social and employment contexts; interpretation of the skills and knowledge needs of the adult population; welcoming and guidance; improvement in the quality and efficacy of adult education). The latter involves paths to guarantee the skills of the adult population aimed at the acquisition of basic language and digital skills, key skills for lifelong learning, citizenship skills, as well as skills envisaged by Agenda 2030 for sustainable development. The Plan has been incorporated into the document "Implementation in Italy of the Council's Recommendation of improve level of skills: for pathways to the new opportunities adults"(https://www.lavoro.gov.it/notizie/Pagine/Apprendimento-permanente-Report-Upskilling-Pathways.aspx)

Finally, to help guarantee the right of lifelong learning also for vulnerable target groups (foreigners and prisoners), the MI has carried out numerous activities in agreement with the Ministry of the Interior ("Regional plans for the civic-linguistic training of the citizens of Third Countries") and with the Ministry of Justice (Special programme for education and training in penitentiary institutions and in juvenile services).

Issues related to education, training, lifelong learning and the development of skills - including for older people - are also handled by the MAECI but only in the field of foreign policy and development co-operation, in representing Italy and the relevant departments for the subject matter.

On the subject of training, a number of interventions by the MINT are of interest, regarding awarenessraising on the topic of tackling fraud against seniors (see point 2.3). These actions are translated into seminars and meetings, aimed not specifically at seniors but essentially at the various stakeholders involved, such as banking workers and local associations connected to volunteering and the Third Sector.

In conclusion, it is worth recalling the *mentoring* and *tutoring* activity directly provided at grassroots level by entrepreneurs over the age of 65 and/or by newly-introduced young people, within the scope of the FarmLab project promoted by the MIPAAF, with the *Intergenerational Agriculture Pact*<sup>27</sup>.

In the same field, the above-mentioned intervention by the MEF should be recalled within the *Committee for the Programming and Co-ordination of Financial Education Activities,* in conjunction with the MI and MISE (see point 2.3).

**Regions and Autonomous Provinces** - 18 Italian Regions/APs have included the theme of learning and education in their policies, with the majority (13) implementing measures in this regard.

<sup>&</sup>lt;sup>27</sup> Law no. 141/2015, which, as has already been stated, regulates AS practices, includes, among its activities, the implementation of environmental education projects, also aimed at people in difficulty (social, physical, psychological). From the results of a study by CREA (2018), what becomes evident is that a substantial number of older workers are involved as recipients in these apprenticeships and learning activities.

Table 7: The MIPAA 6 commitment and the SDG 4 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Piedmont	Lombardy	Bolzano AP
Valle d'Aosta	Lazio	Tuscany
Liguria	Campania	Sicily
Trento AP	Basilicata	
Veneto	Calabria	
Friuli-Venezia Giulia		
Emilia-Romagna		
Umbria		
Marche		
Abruzzo		
Molise		
Apulia		
Sardinia		

The policies of Regions/APs on this subject mainly concern three areas of intervention: adult education at the third age universities, training to improve social inclusion and active citizenship and the training and recognition of caring activities for work purposes.

As a priority, many Regions/APs explicitly promote the activities of third age universities within their own cross-sector laws on AA (for example, Abruzzo: Regional Law 16/2016), general laws on health and social services (for example, Umbria: Regional Law 11/2015), dedicated laws (for example, Friuli-Venezia Giulia: Regional Law 41/2017) or other instruments (for example, the "Demarchi" Foundation as an *in-house* body of the Trento AP for training and social research: Provincial Law 25/2012). However, the allocation of resources for the third age universities is not always guaranteed.

A second area of intervention includes all the policies that aim to achieve better social inclusion and active citizenship by seniors. These are policies to support the education of seniors for the purposes of social participation, civil engagement, empowerment and recreation. In addition to these general subjects, more specific aspects are also covered. For example, the Veneto Region (Regional Law 23/2017) also funds AA projects for domestic and road safety, fighting dependency and fraud, and also focussing on social engagement. The Regions, Umbria (Regional Law 11/2015) and Emilia-Romagna (Regional Council Deliberation 1809/2017) support initiatives to develop the digital skills of seniors, while the Molise Region (Regional Council Deliberation 659/2012) promotes projects for the intergenerational transmission of knowledge. Some Regions, whilst considering this area in their cross-sector laws on AA, have not produced any concrete results, as in the case of Marche (Regional Law 1/2019), Abruzzo (Regional Law 16/2016) and Campania (Regional Law 2/2018).

Regarding the training and recognition of caring activities for work purposes, as already mentioned, some Regions - including Emilia-Romagna (Regional Law 2/2014), Abruzzo (Regional Law 43/2016) and Campania (Regional Law 33/2017) – have developed support policies for family caregivers or for professionals in the health and social sectors that work with older people - such as Marche (Regional Law 1/2019) and Apulia

(Regional Law 16/2019). However, the provisions have only been applied in Emilia-Romagna, while, in the other Regions, both the formal recognition of the family caregivers' experience, and the training initiatives for caregivers and operators are yet to be applied.

Some interventions on residual themes have also been conducted by Piedmont (Regional Law 11/2018) on cultural education, by Liguria (Regional Council Deliberation 400/2013) and Tuscany (Regional Council Deliberation 459/2009) on health education and by Emilia-Romagna (Regional Law 34/2002) on the training of older volunteers in social promotion associations.

The Regions Lombardy (with funds from POR and Regional Prevention Plan-PRP), Lazio (Regional Law 11/2016), Campania (Regional Law 2/2018) and Basilicata (Regional Law 30/2015, Regional Law 29/2017) include, to a limited extent, the strategic objective of promoting lifelong learning for seniors and throughout the course of life, for example, in the area of social inclusion, digital literacy and the intergenerational transmission of knowledge. However, most of these laws have yet to be implemented.

## BOX 4 - AP TRENTO: The "Franco Demarchi" Foundation as the operating arm for training and social research (Provincial Law 25/2012)

**Objective:** "To promote and carry out, directly or indirectly, training and research in the social, educational and cultural field for the benefit of local communities and to promote their development, as well as to support the skills of operators and citizens" (Article 2, Statute of the Foundation).

Tools and mechanisms: in accordance with Article 48 of the Provincial Law 25/2012), The "Franco Demarchi" Foundation (www.fdemarchi.it) operates an *in-house* body of the Trento AP for training and research. The AP, together with other institutional bodies, appoints the Chairman of the Board of Directors and the other directors. The University of the Third Age and Free Time (UTETD) is a training programme of the Foundation that receives contributions from the AP and from other bodies for these activities. The UTETD initiatives adopt the lifelong learning approach of adults and seniors, with courses offered in Trento and in various local centres distributed across the Province. The training initiatives mainly concern the acquisition of new knowledge, the transmission and sharing of cultural traditions (for example, gastronomic, artisan) and the analysis and reflection on new cultural, social and technological phenomena. The aspects of group learning and social gathering are essential elements in the training experience offered by the UTETD.

**Results achieved:** approximately 7,000 people (average age around 65 years) have been involved annually in the training activities.

## 2.7 Quality of life, health, well-being and independent living (MIPAA 7, SDG 3)

A high, overall level of health of the population is vital for the well-being, economic growth and development of society. Policies should promote psycho-physical health throughout life, reducing risk factors including environmental one, especially those associated with chronic illnesses, through promotion and prevention activities, providing quality health and social services at accessible prices. People of all ages should be encouraged to carry out physical activity, adopt healthy diets and avoid smoking and excessive alcohol consumption through a series of policies including appropriate information and education campaigns from a young age, as well as the development of new programmes that focus on healthy working conditions.

As dementia and Alzheimer's are mainly illnesses associated with old age, programmes of treatment and long-term care are of growing importance, as is the provision of palliative care. Equality of access to health

and social services, to residential accommodation and to long-term care should be guaranteed for everyone, including older people with physical and mental disabilities. Health and social services, both public and private, should be better integrated and co-ordinated, and operators should have adequate skills through continuous education and training programmes.

**Responsibilities at national and regional level** – In Italy the competences relating to prevention in terms of health (including at work), promotion of a healthy lifestyle and professional training of support workers, fall within the regulation of the ways in which the fundamental right to health is implemented, as set out in Article 32 of the Constitution. It is the specific task of the SSN to work to guarantee this right universally throughout Italy. Regarding the division of responsibilities between national and regional level, Article 117 establishes exclusive state power over the essential levels of performance and the fundamental principles underlying the concurrent legislation, even in the context of the necessary "loyal co-operation" with the regional level, in the determination of the Livelli Essenziali di Assistenza (LEA) (essential levels of care). The concurrent legislative competence of the Regions, in terms of health protection, results in autonomy in the local organisation of the SSN itself, in all its forms, as well as in the precise implementation procedures of the LEAs. It should be emphasised that, in recent years, both the needs to contain public expenditure and the specific questions regarding the whole of national society, of which the pandemic emergency is the most recent manifestation, have determined a certain compression of the space for regional manoeuvre and the decisive restatement by the Constitutional Court of the role of the State as ultimate guarantor of the right to health throughout the whole country (Taglialatela, 2020).

**National Level** - The activities of promotion and prevention considered here mainly find application within the Ministry of Health; more specifically as part of the *National Prevention Plan 2014-2018*, of the *National Silver Steps Programme* and of the *Gaining Health* Programme, briefly described here.

*National Prevention Plan (PNP)* - Lasting five years<sup>28</sup>, it represents the main planning instrument of the Ministry which establishes, through a participative process, the priorities and programmes to be implemented for health promotion and the prevention of illnesses. The most recent objective has been that of promoting healthy, AA among the over 64s, to increase by 2 years (by the end of 2020) the healthy life of citizens, in line with European objectives. The priorities outlined in the PNP are then adopted at local level by each Region. The strategies promote interventions for early diagnosis and the alteration of lifestyles, as well as interventions integrated with managed therapeutic care pathways.

*Silver Steps: health and quality of life in the third age* - A national surveillance system aimed at highlighting the health conditions and dissemination of prevention actions in the over 65s age group. With the help of social and health professionals, and in collaboration with local social services, it gathers information through a questionnaire administered over the telephone, or face to face, in order to describe all the aspects that contribute to the well-being of older people (health status, health and social care), identifying and monitoring the areas of weakness and risk and, ultimately, suggesting to decision-makers the measures that should be implemented to maintain, for as long as possible, the well-being and independence of the older population. A further innovative aspect concerns the division of the population into four sub-groups (in good health at low risk of illness, in good health but at risk of illness, at risk of disability and with disability). For each of these, a description is provided of the conditions of health, of the problematic aspects and of the guidelines for the actions to be taken.

<sup>&</sup>lt;sup>28</sup> The 2014-2018 Plan is currently in force, as extended.

*Gaining health: making healthy choices easy* - Set up in 2007 as a global strategy, implementing the guidelines of the WHO and the EU, aimed at the promotion of health as a public benefit. The objective is that of reducing, in the long term, the burden of chronic illnesses on the health system and on society. Implementation of the programme is shared with the Regions and with the local Health Services through four programmes of intervention on: nutrition, physical activity, combating smoking and alcohol abuse. In this area, a more specific sub programme is highlighted: *Encouraging physical activity for older people.* Each programme is inter-sectoral with the involvement of the Ministry of Health and of all the other Ministries, producers and operators of public services, the Regions, the Local Health Authorities, local bodies and responsible persons in the public and private sector, for the purposes of overcoming the fragmentation of interventions and the dispersal of human and economic resources.

Other activities envisaged by *Gaining in Health* worth mentioning are:

- participation in the community project JA-CHRODIS *Joint action to combat chronic illnesses and the promotion of health ageing throughout the course of life;*
- the project Support and enhancement of the Joint Action "Frailty Prevention" through the promotion of the physical activity of the over 64s(2016/2019), co-ordinated by the National Institute of Health, aimed at combating the fragility of the over 64s through a better definition of the fragility and by monitoring the level of physical activity;
- the guidelines on physical activity for the various age bands and with reference to physiological and patho-physiological situations and to specific sub groups of the population. The document is the result of work by an *ad hoc* inter-sectoral Forum established by the Directorate General of Preventive Healthcare to overcome the fragmentation of actions taken up until now to combat the lack of physical activity (with special reference to public health, to the educational, sports and environment sectors and infrastructures and to places of work).

In relation to the promotion of physical activity, also it is also worth mentioning the activity of CONI (National Olympic committee), a public body<sup>29</sup> placed under the supervision of the Presidency of the Council of Ministers that, through its Regional Committees, aims to encourage sport in every age band throughout the population. An example of this is the *Anni in Movimento 2018* project (years on the move), organised by the CONI of Molise, designed to satisfy the needs of the psycho-social sphere of persons in older age. The initiative involved around 300 older people engaged in gym activities to slow down the physiological deterioration process due to the passage of time.

Regarding more specifically the subject of independent living in the home, the MISE, under the *National strategy for smart specialisation*, funds technological innovation projects which provide for industrial research activities and the experimental development of enabling technologies, which are fundamental, amongst other aspects, for AA and home-based care. In this case, incentives to business are designed to improve the quality of life of consumers including in old age.

For the same purposes, it is worth mentioning the participation in the *Active and Assisted Living* - (AAL), *Sustainable Smart Solutions for ageing well* (2014-2020) competition, coordinated in Italy by the Ministry of the University and the Research Ministry of Health, jointly funded by the European Commission and by the

<sup>&</sup>lt;sup>29</sup> Regulated by Legislative Decree no. 242, 23 July 1999, and subsequent modifications and integrations, and by the Olympic Charter, the CONI is the regulatory and management authority of sporting activities.

Member States taking part in the initiative. The programme is designed to help older people to live in their own homes for as long as possible helped by solutions based on Information and Communication Technologies - (ICT). The objective is to fund a limited number of innovative, transnational and multi-disciplinary research projects, aimed at supporting AA<sup>30</sup>.

The quality of life of older people and of their independent lifestyle is one of the themes of the project initiatives funded in Italy by the Department for Youth Policies and the Universal Civil Service of the Presidency of the Council of Ministers. One such example that could be cited is the *If you stop learning, you start ageing* project which, in 2018, provided daily support to some of the older people in the Municipality of Empoli, who were on their own and/or in conditions of difficulty, in order to keep them independent for longer in their own homes, warding off any admission into residential care. Also, for many of the older people still in good health, it enabled them to socialise and take part in recreational activities.

Discussions on health and autonomy are also handled by the MAECI, but in the sphere of actions carried out relating to foreign policy and development co-operation, in representing Italy and the relevant departments, and have been placed on the agenda of the Council of Europe, for the attention of the Member States. Instead, regarding the MINT, these themes are handled in relation to measures to raise awareness and to provide training against fraud, as mentioned earlier. They contribute to producing a positive impact on the quality and well-being of the life of seniors, as fraud can lead to a loss of confidence which compromises the independence and ability of the citizens involved to socialise, often resulting in psychological trauma with repercussions on the style and quality of life.

It is also worth recalling law no. 141/2015 which regulates AA, under the MIPAAF. Among the activities provided for, it includes "features and services which accompany and support medical, psychological and rehabilitative therapies aimed at improving the health conditions and social, emotional and cognitive functions of disadvantaged individuals, including through the aid of farmed animals and plant cultivation".

Finally, more recently, a number of synergistic initiatives have been undertaken which would enable the health emergency relating to the Covid-19 epidemic to be better addressed and, in particular, the consequences that have arisen within the national sports movement. The Sports Office of the Presidency of the Council of Ministers has set up a special non-repayable fund for the benefit of the amateur sporting societies and associations that perform Olympic and Paralympic, as well as basic, sporting activities, for the purposes of: combating the consequences of the health emergency, encouraging initiatives and projects which support the Federations and amateur sporting societies and associations and of satisfying the needs of the individuals who operate, in one way or another, in the sports movement and that practise sporting activities at amateur and competitive level; another aim is the strengthening of social inclusion, especially in the areas which have been hardest hit by the Covid-19 pandemic and in those with fewer opportunities to access sports.

**Regions and Autonomous Provinces** - All the Regions/APs have considered the theme of quality of life and health in their policies on AA. Almost all (17) have also implemented measures in this regard.

<sup>&</sup>lt;sup>30</sup> The overall cost of the programme is EUR 700 million for 7 years (2014-2020), 25% of which comes from the EU, 25% from National Funds and 50% from businesses. The European Commission has allocated an overall figure of EUR 175 million.

Table 8: The MIPAA 7 commitment and the SDG 3 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Measures considered in regulations and	Considered in regulations, without measures	Not considered
being implemented	being implemented	,
Piedmont	Lazio	/
Valle d'Aosta	Molise	
Liguria	Calabria	
Lombardy	Sicily	
Trento AP		
Bolzano AP		
Veneto		
Friuli-Venezia Giulia		
Emilia-Romagna		
Tuscany		
Umbria		
Marche		
Abruzzo		
Campania		
Apulia		
Basilicata		
Sardinia		

The main instrument of promotion of health, well-being and independence is constituted in all the Regions/APs by the prevention, health, socio-health and area Plans and by the managements of health and/or social policies of the regional/provincial Authorities. These multi-annual, strategic programmes almost always include priorities and lines of action for older people and/or for AA, which must be adjusted locally by the interested actors, such as the ASL and the AST. The theme of AA is usually incorporated in these documents, both as a general objective and in terms of operational actions to be carried out locally. The initiatives envisaged and funded mainly concern health education and the promotion of physical and sporting activity (including group activity). For example, Adapted Physical Activity is promoted by Tuscany (Regional Council Deliberation 903/2017), Marche (Regional Council Deliberation 887/2018) and Campania (Regional Council Deliberation 860/2015) through the Local Health Authority, encouraging older people to participate in light physical activity in groups to maintain and improve their health and well-being. Some Regions/APs, such as the AP of Trento (Provincial Council Deliberation 1321/2019) and le Marche (Regional Council Deliberation 386/2019) also explicitly support the involvement of seniors in physical and sporting activities.

In some Regions/APs, group motor activity is intended not just as an instrument to maintain the health of seniors, but also as an important recreational and social occupation. In fact, several initiatives can be found which stimulate group walking and fun recreational activity. For example, in Friuli-Venezia Giulia (Regional Law 22/2014) the "10 thousand steps of health" project has been set up to develop trekking routes and group walks for seniors. The initiative has been taken forward by a broad network of Municipalities and regional stakeholders, also including a number of GPs. In the Trento AP (Provincial Council Deliberation 2412/2016), the TrentinoSalute 4.0 Programme has been created, a Digital Health Competence Centre (CCSD) which develops, tests and implements technological health solutions. Specifically, the CCSD has produced mobile apps, dedicated to group walking programmes (for example "Two steps in health with the Acli", "Footprints")

- which also include elements of individual and group competition, as well as *geocatching* and treasure hunts - and self-management of the health of seniors (for example, TrentinoSalute+).

Other cross-sector AA laws and their implementation plans generally include references to health promotion measures and projects. The Veneto (Regional Law 23/2017) annually envisages a line of funding for physical activity projects and health promotion, and also promotes operational protocols to be included in the zone plans among local Authorities, health companies and civil society stakeholders, in integration with health and social planning. In the case of Apulia (Regional Council Deliberation 2039/2019), the first application of the law on AA (Regional Law 16/2019) was that of the allocation of resources (Euro 200,000) to pilot projects of health promotion, managed by the Local Health Authority.

Another important aspect was improvement of the quality of life through interventions to promote group social and recreational activities at centres, hubs and clubs for seniors. These interventions are organised through annual funding by the Region/AP of small projects and initiatives of each interested association. This type of instrument is extremely useful, especially in the internal and mountain areas, to give effective support to the life of the communities (for example, Bolzano AP: Provincial Council Deliberation 332/2018).

## BOX 5 - TUSCANY: the effectiveness of Adapted Physical Activity (Regional Council Deliberation 1418/2016, Regional Council Deliberation 903/2017)

**Objectives:** to promote "exercise programmes for people with chronic health issues, carried out in groups and directed at acquiring active lifestyles and at preventing or mitigating disability" (Annex A, Regional Council Deliberation 903/2017).

**Mechanisms and instruments**: the AFA includes exercise programmes promoted by the Local Healthcare Units (AUSL) within the Integrated Health Plan. The regulations and protocols of the AFA have been updated over time by the Tuscan Region (Regional Council Deliberation 459/2009, Regional Council Deliberation 1418/2016, Regional Council Deliberation 903/2017), always maintaining a focus on the category of older people and explicitly assuming an AA approach. The last Resolution on the matter (Regional Council Deliberation 903/2017) provides updated guidelines on the organisation of the AFA and of other initiatives to support physical activity in the community. As well as the AFA initiatives promoted by the AUSL, an information campaign was also promoted for the population, both with regard to USL projects and to promote the AFA, motor activity and correct lifestyles (Regional Council Deliberation 903/2017).

**Results achieved**: in 2016, 30,000 older citizens were involved in AFA initiatives carried out at 876 delivery points in 237 Municipalities in the Region (covering 85% of the geographical area). Furthermore, in 2018, Euro 180,000 was allocated for three dedicated projects (one for AUSL), which are currently being monitored and evaluated by the Management and Health Laboratory of the Scuola Superiore Sant'Anna of Pisa (on the basis of an agreement with the Tuscan Region).

### 2.8 Gender equality (MIPAA 8, SDG5)

In 2018, ISTAT (2019) estimated that the average life of a man was 80.8 years, while that of a woman was 85.2 years. Women, despite living longer than men, suffer more precarious health conditions as they age. Whether for men or women, however, continued activity leads to an increase in the number of years lived. Taking into consideration the expectation of life at 65 years, men can expect on average on another 19.3

years, women on 22.4 years (ISTAT estimate in 2018). Compared to ten years ago, these values are increasing, in particular for men (a year and a half more for men, one year for women).

The numerous difficulties that older women face are mainly connected to the following aspects of gender: greater female fragility in the job market caused by interruptions to careers, part-time work and low pay, skills that are often obsolete, caring commitments, the onset of disability and loss of independence. Furthermore, as is demonstrated by the ISTAT data (2019), greater longevity exposes women to a greater risk of exclusion, social isolation and poverty.

**Responsibilities at national and regional level** - In line with the division of competences envisaged under the amendments to Title V of the Constitution, and in the evolving framework of EU legislation, national competences on Gender Equality Opportunities are mainly concentrated on supporting women's participation in the job market; on the protection of female workers, in particular with regard to the work-life balance and supporting parenthood; on the fight against various forms of job discrimination; supporting the female entrepreneur; and strengthening care-giving services to children and dependent people (Chamber of Deputies, 2020). In more detail, Legislative Decree no. 198 of 11 April 2006 "Code on equal opportunities for men and women" represented the start of an overall rationalisation of national legislation on equal opportunities, establishing a ban on discrimination between men and women in all areas, especially with regard to the world of work. The standard provided a systematic framework for action by the Commission for equal opportunities between men and women (active since 1984), the National Committee for the implementation of the principles of equal treatment and equality of opportunities, the Councillors for equality, appointed at national, regional and provincial level, of the Committee for the female entrepreneur, as well as the Regional Equality Committees constituted with regional laws since the 1990s.

The subject of equal opportunities does not find application within the scope of regulatory competence specifically and expressly indicated by Article 117 of the Constitution. However, in accordance with Article 117, para. 7, the Regions do in fact remove all the obstacles which hinder full equality between men and women in social, cultural and economic life and promote the equality of access between women and men in their elected roles. In this sense, the constitutional provision mentioned shows how equal opportunities have become a cross sector objective in respect of the regulatory competences shared between State and Regions.

**National level** -A gender-based approach to the ageing of the population should therefore take into account the factors set out above, although they are not exhaustive, in a single, interconnected and cross-sectional manner. What is shown, however, from the analysis of the initiatives/actions taken by the various Ministries, is the lack of a real understanding of the implications of gender in the strategies for AA. In fact, in most cases, they are connected to the inclusion of the most vulnerable and disadvantaged social groups. Despite this, a number of initiatives are underway, both implicit and explicit, which are sensitive to a gender-based approach in the policies to support AA.

Currently, the most relevant interventions of the MLPS with respect to the gender-based approach, are ascribable to:

- employment incentives;
- company welfare measures;
- the recognition of caring work.

The Ministerial Decree of 17 October 2017 introduced tax incentives for recruitment in favour of workers over the age of 50 and of women, including in the category of disadvantaged individuals. The Decree acknowledges both the disadvantages for people over the age of 50, and of gender, relating to employment in a profession or sectors where the gender imbalance is at least 25% higher than the average gender imbalance across all economic sectors. This provision stems from the Inter-ministerial Decree of the 13 October 2015, issued by the MLPS in collaboration with the MEF.

The Ministerial Decrees of 25 March 2016 and 12 October 2017 promote company welfare measures and, more generally, forms of work organisation designed to facilitate the reconciliation between work and living needs, putting into practice the guidelines promoted by the reforms of the jobs market (for example, Jobs Act) and then by Law no. 81/2017 for the protection of self employment and flexible organisation of times and places of employed work. Law 205/2017 dedicates special attention to the gender balance in the distribution of paid work and caring duties, and recognises the function of caregiver, establishing a Fund to support the role of care and assistance of the family caregiver.

The DIPOFAM was the promoter of a winning project in the 2012 tender, "Il rosa e il grigio (the pink and the grey). Women, active ageing and presence in decision making", which involved, between 2014 and 2016, more than 30 women managers in dialogue and awareness-raising activities on the strategies necessary for facilitating female presence on public and private Boards of Directors, ensuring solidarity between generations, the enhancement of female talents and the sustainability of family and professional commitments.

The MAECI handles this subject in the context of actions relating to foreign policy and development cooperation, representing Italy and the relevant departments on the subject. Within the OEWGA, the issue has been approached from different angles but mainly from the gender violence perspective.

The MI points to a certain terminological sensitivity in the treatment within its documents. Most European countries promote lifelong learning systems in relation to age with the aim of contributing to the integration of senior workers through appropriate training. For the success of these policies, the gender-based approach, which is absent in most countries, could prove to be decisive, as older female workers encounter greater obstacles compared to men and have fewer learning opportunities.

**Regions and Autonomous Provinces** - 10 Italian regions/PAs have taken the gender-based approach into consideration in their AA policies, but only 1 of these is implementing concrete measures in this regard: Emilia-Romagna.

Table 9: The MIPAA 8 commitment and the SDG 5 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Emilia-Romagna	Piedmont	Valle d'Aosta
	Veneto	Liguria
	Umbria	Lombardy
	Marche	Trento AP
	Lazio	Bolzano AP
	Abruzzo	Friuli-Venezia Giulia
	Campania	Tuscany
	Apulia	Molise
	Basilicata	Calabria
		Sicily
		Sardinia

In its PAR (Regional Council Deliberation 2299/2004), in which the concept of AA is expressed in line with the WHO, the Emilia-Romagna Region has established long-term strategic objectives, including gender equality. This aspect is expressed in the various Region programmes, in particular, in the Regional health and social Plan (PSSR) 2017-2019 (Regional Council Deliberation 1423/2017), in which a specific line of intervention is devoted to conducting *ad hoc* actions focused on the gender-based approach in the zone Plans.

In other Regions, this subject is taken into consideration in some policies. However, it currently remains purely symbolic with generic references to equal opportunities and gender equality, as in the cross-sector laws on AA in Piedmont (Regional Law 17/2019), Veneto (Regional Law 23/2017), Marche (Regional Law 1/2019), Abruzzo (Regional Law 16/2016), Campania (Regional Law 2/2018) and Basilicata (Regional Law 29/2017).

# 2.9 Support to families providing informal care of seniors, intergenerational solidarity and justice (MIPAA 9, SDG 16).

The ageing of the population and the increase in life expectancy are phenomena that occur in a context of robust technological development, rapid urbanisation and intense migration, and are simultaneously an indication and a product of profound transformations in social relations that have impacted on the systems of co-existence since their primary expressions: family relations and relations within the community.

If longevity is a tendency which characterises populations in different places, a growing number of older people, for a group of associated facts, from lifestyles to living conditions, to other aspects of socio-economic disadvantage, see their own independence in the management of domestic work reduced, if not specifically in one or more of the basic activities for their own care, with a particular disadvantage for those that, at a very advanced age, are increasingly living alone, or in couples without children<sup>31</sup>. For many dependent people, family and good neighbourly relations are still one of the main reference systems for meeting care

<sup>&</sup>lt;sup>31</sup>For further details on the conditions of fragility of the over 65s, reference should be made to the reports on the epidemiology portal of the Public Health Surveillance System Silver Steps 2016-2018 (<u>https://www.epicentro.iss.it/passi-argento/dati/fragili#dati</u>), by the Istituto Superiore di Sanità.

needs. Caring responsibilities are still largely assumed by women, often also when they are still working, with an important contribution from the same generations between the ages of 55 and 64 years, both in caring for children and for other dependent persons. The degrees of liberty within which family commitment is assumed as a compatible choice rather than as a necessary alternative to paid work are therefore linked to the possibility of access to support services, whether they are connected to the offer of domestic work or to the use of new technologies in the management of daily life (ISTAT, 2019b).

In the development of the coexistence systems and of the policies aimed at tackling ageing, the MIPAA and the Strategy of Sustainable Development on an equal measure propose a reflection on the development of policies in promoting and sustaining the function of family and community relations in the creation of modes of coexistence that are able to combine in their own development the possible openness to diversity - of gender, age, culture, aims, interests, desires and values, without this destroying resources and instead creating the possibility of their free expression, enhancing their creative contribution, within the shared rules of the game.

In view of this, both documents call for the promotion of interventions that explore the specific needs of families and communities in their different generational components, and accompany their transformations: reducing forms of violence, abuse, exploitation and discrimination; encouraging the development of forms of solidarity, both intra and inter generational, in the distribution of responsibilities of work and care for those who are entirely dependent on others; developing effective institutions and guaranteeing decision-making processes that are representative of the various bodies; encouraging the development of both urban planning and housing infrastructures that facilitate forms of urban and community life to meet security needs and expression of different generations and of their most vulnerable elements.

**Responsibilities at national and regional level** - Within Italian law, the primary functions of development of the policies to support the development of family and community life, especially the older members of the nuclear families, mainly fall within the competences of the DIPOFAM (Articles 3 and 4 DPCM 26 September 2019, Delegation of family policy and adoption functions and Delegation of policies for childhood and adolescence). Given the scope of the possible areas of initiative, and the need to reconcile the competence of the State with regard to the determination of the LEAs concerning civil and social rights, with that of the Regions in the development of policies in the social sphere, the Department works together with the other Administrations that contribute to the implementation of measures with a direct and indirect impact on the development of community life.

**National level** - Regarding the specific initiatives identified in central level Administrations, from 2017, these have affected: the MLPS; the Ministry of Health; the MISE; the MIPAAF; the MAECI, with regard to representative interventions at the Council of Europe on the promotion of human rights of older people. The initiatives highlighted were concentrated on two main areas: the development of support measures for caregivers, in their care for the vulnerable and for dependent older people; the role of intergenerational dialogue in developing local services to take care of dependent older people.

*Support for caregivers in taking care of the vulnerable* - More than 17.4%<sup>32</sup> of the Italian population takes care, at least once a week, of people, usually the closest family members, with health problems related to

<sup>&</sup>lt;sup>32</sup> Currently in Italy there is no officially recognised data that quantify the number of caregivers. The reference for many of the programming documents nationally are the Istat data of the Investigation into Health Conditions and use of health

ageing and chronic illnesses. This occurs against a background of changing ways of coexistence within the families themselves. To respond to new demands to take charge of complex issues relating to the management of an increasing number of vulnerable older people and those with chronic conditions, a broad national debate has been launched on developing integrated socio-health and social services, which could act as a resource for seniors and for caregivers, both in terms of domestic care and locally, in hospitals or intermediate facilities. As well as ideas proposed by a number of Italian Regions, a reorganisation has been launched at national level of the governance of the services and funds relating to social policies, to facilitate the identification of LEA, taking into account what is already foreseen by Law 328/2000<sup>33</sup>. In relation to this course of action, through specific decrees of the MLPS, there has been structural funding of the Fund for Social Policies and the Fund for the Policies for the Non-Self Sufficient, together with relevant programming plans<sup>34</sup>. Regarding the specifics of informal care, with Law 205/2017 (2018), a form of recognition in Italian law has been given for the first time to the role of caregivers and unpaid care work and, in relation to this, the Fund for the support of the role of care and assistance of the family caregiver<sup>35</sup> has been established, first at the MLPS, then at the Presidency of the Council of Ministers.

In this regard, decree law no. 86/18 assigned to the Minister with responsibility for the family and disabilities the task of defining, by decree adopted in agreement with the MLPS, after the unified Conference, the criteria and arrangements for using the Fund.

Originally, responsibility for the requirements related to the definition of the criteria and arrangements for using the Fund had been devolved to the appropriate mission Structure for policies in favour of people with disabilities, reporting directly to the Minister, *pro tempore*, for the family and disabilities.

With the decree of the Presidency of the Council of Ministers of 26 September 2019, the management and co-ordination functions for the use of the resources of the Fund for the support of the role of care and assistance of the family caregiver were delegated to the Minister for equal opportunities and the family.

Support for the independence of seniors in their everyday lives is one of the criteria underlying the development of health policies. The Ministry of Health has assumed in its definition of the concept of health the reference to people's life contexts as a criterion for determining them. In this context, health policies should be directed in a way that is consistent with people's life cycles. For this purpose, the PNP 2014-2018 has been designed to meet some of the criteria previously underlying the National Dementia Plan (2014) and

services in Italy and the EU, published with last update to 2017. What is evident from this investigation, among other aspects, is that a significant proportion of caregivers has an age range of between 55 and 64 years.

 $<sup>^{33}</sup>$  Law no. 328, 8 November 2000 - "Framework law for the implementation of an integrated system of interventions and social services" (G.U.no.265, 13 November 2000 – S.o. no.186). It had the purpose of ensuring an integrated system of services and interventions designed to guarantee quality of life, equal opportunities, non-discrimination and citizenship rights, preventing, eliminating or reducing conditions of disability, need and individual and family disadvantage, as a result of inadequacy of income, social difficulties and dependence, excluding only those covered by the social security system and by the health system.

<sup>&</sup>lt;sup>34</sup> While not containing measures specifically targeted at the eldest, instead mainly focussing on the development of uniform social assistance measures throughout the country, especially in the area of childhood-adolescence and disability, these funds constitute a starting point for the development of regional programming as well as of support for caregivers in the management of family care.

<sup>&</sup>lt;sup>35</sup> Article 1, para. 254 of Law 205/2017 established the "Fund for the support of the role of care and assistance of the family caregiver" at the MLPS. With the subsequent Decree Law 86/2018, the endowment of the fund was transferred to the budget of the Presidency of the Council of Ministers, pending further definitions. The 2019 budget law remodulated the fund, giving it an endowment equal to 25 million in 2019, 25 million in 2020 and 5 million in 2021.

the National Chronic Illnesses Plan (2016)<sup>36</sup>, with the aim of promoting the timely diagnosis and handling of conditions of fragility and socio-health vulnerability, as well as through measures implemented for older people in their own homes<sup>37</sup>. The actions outlined in the Plan also concern family members and professionals that are involved in the organisation of the care –including family care assistants and caregivers, in order to reduce discrimination, improve the quality of their lives and to facilitate an integrated network of widespread professionalism for a more effective management of dependency

An interesting area of development of policies of care for seniors is related to the use of the latest technologies to support AA and in managing home care. It is promoted under the National Strategy for Smart Specialisation, the policy framework of reference for research, development and innovation activities funded by the Development and Cohesion Fund 2014-2020. The Health Operational Plan<sup>38</sup>, which constitutes its implementation, provides a specific line of action - *Active and Healthy Ageing*: Technologies for AA and home care, for the development of assisted technologies in living spaces, to support the maintaining of independence of the most older people, also in conditions of vulnerability. The MISE, through two tenders in 2018 and 2019, therefore promoted measures to facilitate enterprises in the planning, implementation or improvement of products, processes or services organised on enabling technologies in the field of care for seniors in their own living environments<sup>39</sup>.

Again, with regard to the development of informal care for seniors, the MAECI takes part in the agenda of the Council of Europe which has followed the Recommendation of 2014 on the promotion of the human rights of seniors. In this context, Italy was considered as one of the examples of good practices in the field of "Care" due to the structure of policy development for dependent persons, and of a first approach, in the area of specific European projects towards emerging issues in the development of the approach to domiciliary care: the phenomenon of "burn out" of family care assistants in the family management of care; domestic violence.

Intergenerational dialogue in the development of services for dependent persons - if, on a strictly social and health care side, the concept of well-being of the older person has been addressed, taking into account the overlap between individual skills, cognitive capabilities that enable autonomy and control of situations, and supporting and/or inhibiting environmental conditions, over the course of the years, the focus of the policy has been on the quality of social relations as a resource for promoting AA conditions throughout the course of life, to ensure intergenerational reciprocity. Within this framework, support for informal assistance is thus promoted through a joint focus on the development of relations between caregivers, older people, families and communities (including the role of local services and, in particular, of the Third Sector) as a generator of

<sup>&</sup>lt;sup>36</sup> These are Plans which have not received stable funding, unlike the PNP, and that appear not to have been fully accepted by all the Regions for a number of reasons, including the uneven structuring of social and healthcare delivery routes in local regions, because of different existing models of care. Most of the interventions in the area of chronic illness have taken place thanks to the Pon GOV Cronicità (Government national operating programme on chronic illness), whose managing authority is Agenas.

<sup>&</sup>lt;sup>37</sup> In the prevention of domestic incidents as well as the management of taking medication.

<sup>&</sup>lt;sup>38</sup> It is the implementation plan of the National strategy for smart specialisation in the field of Health, nutrition and quality of life, and proposes a budget equal to a total of EUR 200 million for projects on health, of which 16,975 is dedicated to the specific subject of *Active and Healthy Ageing*.

<sup>&</sup>lt;sup>39</sup> Under the negotiating procedure, the projects submitted in this area have rapidly exhausted the available resources. The MISE has therefore had to suspend the submission deadlines of the projects put forward. The proposals submitted are currently being evaluated.

resources to cope with situations of fragility as these develop due to the problems that ageing brings in the specific contexts of reference.

The measures to support and sustain intergenerational dialogue, informal care for seniors and the creation of a social network, are just some of the main themes which are the subject of the project initiatives funded by the Presidency of the Council of Ministers, both in relation to the functions carried out by the DIPOFAM and to those of the Department for Youth Policies and the Universal Civil Service.

Following the Third National Conference on the Family in 2017, the Department for Family Policies published a public Notice to strengthen the intervention capacity of public and private social actors to provide an adequate response to family situations of fragility and complexity. The notice funded projects on three lines of action including: achieving a family work/life balance, intergenerationality and the promotion of familyfriendly social and economic contexts. The idea was of actively involving, in an integrated way, the community, the family, associations and employers, public and private, in supporting the creation of a widespread social network to integrate the resources of the relationship between families and public and private care services. In 2019, under the annual tenders following the three-year universal civil service programming Plan, specific projects were also promoted in the sectors of "Caring - Adults and seniors in difficult conditions" and "Education and cultural promotion of sport - Cultural entertainment with seniors".

In these contexts, initiatives were funded that promoted solidarity between generations and the enhancement of knowledge and experience of the life of seniors, including those not able to look after themselves, in the creation of educational activities or of socialising (vegetable garden classrooms, museum spaces for schools, urban gardens and projects on the development of historical and urban memory of places) to benefit young people, seniors and caregivers, as well as the local community.

A further resource for supporting families with caring responsibilities and for AA of seniors, including those not able to look after themselves, can finally be identified in the promotion of AS practices by the MIPAAF (Law 141/2015: see earlier points).

An additional reference may be finally identified in Law no. 158/2017 for the support and enhancement of small municipalities and the redevelopment and recovery of their historic centres, very often subject to depopulation and of a marked ageing of the population. With a view to a system approach to local development and welfare, the law facilitates the adoption of measures in favour of residents and established productive activities to broaden the potential of the infrastructure of essential services (civil protection, education, health, social care services, transport, roads, postal services etc.) with the aim of combating depopulation and enhancing, in terms of productive development, the natural, rural, cultural-historic and architectural heritage.

**Regions and Autonomous Provinces** - 19 Regions/APs have included the theme of informal care and intergenerational solidarity in their AA policies, of which 13 have implemented concrete measures.

Table 10: The MIPAA 9 commitment and the SDG 16 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Liguria	Piedmont	Tuscany
Lombardy	Valle d'Aosta	Sardinia
Trento AP	Campania	
Bolzano AP	Apulia	
Veneto	Calabria	
Friuli-Venezia Giulia	Sicily	
Emilia-Romagna		
Umbria		
Marche		
Lazio		
Abruzzo		
Molise		
Basilicata		

In addition, or as a supplement, to ordinary rules on interventions and social services for vulnerable groups of the population, many Regions/APs have developed policies on caring and solidarity which can be included in the definition of AA that we have adopted. In this sense, several areas of intervention can be identified:

- Education and intergenerational socialising: older people can contribute to the education and care of children of school and pre-school age at day centres (for example, the parent-child centres, Elki, in the Bolzano AP): Provincial Law 8/2013). Intergenerational exchanges of knowledge between seniors and small children or teenagers also constitute activities in line with AA and are of high social value (for example, digital education for seniors in Molise: Regional Council Deliberation 659/2012). Furthermore, social centres, senior centres and community workshops may also be aggregators of initiatives for intergenerational relational exchanges for social, cultural, educational and recreational purposes (for example, Lazio: Regional Law 11/2016; Basilicata: Regional Council Deliberation 970/2017);
- community safety: older people make themselves available to control particular contexts or environments, such as pedestrian crossings in front of schools or accompanying children on the school run (for example, Lombardy: PRP):
- support for older people with disabilities or with other social welfare needs: as volunteers, seniors lend various types of support (accompaniment, companionship etc.) to complement the activity of social services and care provider bodies (for example, Liguria: Regional Council Deliberation 431/2016; Umbria: Regional Law 11/2015; Marche: Regional Law 3/2018);
- family caregivers: as already shown, there are sectoral laws on the recognition of the role of the family caregiver and on their support in Emilia-Romagna(Regional Law 2/2014), Abruzzo (Regional Law 43/2016) and Campania (Regional Law 33/2017). However, it is only in Emilia-Romagna that the law has so far been continuously implemented and has concerned the promotion of information and training initiatives, psychological support, advice, self-help groups, relief services, care allowances and other financial contributions, reconciling work with caring activities. In other regions/PAs, the role of the family caregiver is however sometimes recognised by the PRP or by the ASL, which may

propose dedicated information and training activities (for example, Marche: Regional Council Deliberation 887/2018). The Bolzano AP also uses "family and work audit" certification as an instrument to promote business policies that support caregivers and to reconcile the work-family life balance.

Regions with a cross-sector law on AA already implemented, such as Veneto (Regional Law 23/2017) and Friuli-Venezia Giulia (Regional Law 22/2014), support various measures of social utility through dedicated objectives and funding. Of these, the ones worth mentioning include those aimed at promoting volunteering carried out by older people to support other older people or those in disadvantaged or difficult situations, as well as transmitting knowledge between the generations to improve social inclusion (for example, work, the digital world).

## BOX 6 - AP TRENTO: The potential of intergenerational relationships in the Elki centres (Provincial Council Deliberation 531/2018)

**Objective**: to promote "meeting places open to families with children of mainly pre-school age" that offer "meetings spaces, the possibility of forging new relationships and educational support" (Article 4, para.1 Provincial Council Deliberation 531/2018).

Instruments and mechanisms: the parent-child centres (Elki) are traditional meeting places run by groups of families in a voluntary, with a mutually co-operative theme. The objective is to offer services of public utility in terms of guidance and information for parents and grandparents, as well as care activities, education and recreation for children. Very often grandparents are directly involved in the activities of the Elki centres, contributing, for example, to games, telling stories, singing and manual tasks. As well as constituting an important form of volunteering by seniors to the families in the community (helping to facilitate the work/life balance of the parents), they are important initiatives for promoting intergenerational relations. With Provincial Council Deliberation 531/2018, the payment of contributions is confirmed (after previous resolutions) by the Bolzano AP to the Elki centres (as well as other types of centres and services for families) to support ordinary activities, investments or projects.

**Results achieved**: there are 20 Elki centres in Alto Adige, which benefit from annual contributions from the Bolzano AP (EUR 1.5 million in 2019). In 2019, 125 activities were funded (of which 47 were ordinary activities, 62 projects and 16 investments).

### 2.10 Sustainable cities (SDG 11)

Objective 11 of Agenda 2030 for Sustainable Development is related to urban issues or rather to the desire to "make cities and human settlements inclusive, safe, long lasting and sustainable". The cities carry out a pre-eminent role in reaching the objectives as half of the world's population and three quarters of the European population live in urban areas (ISTAT, 2020).

In more detail, the intention is to guarantee everyone access to suitable, safe and convenient accommodation, strengthening inclusive and sustainable urbanisation, also regenerating the poorest areas; reducing significantly the number of people affected by disasters, with particular regard to the protection of the most deprived and most vulnerable people; reducing negative environmental impact, paying particular attention to air quality and to the management of waste; providing universal access to safe green and public spaces, that are inclusive and accessible, especially for women, children, seniors and the disabled; ensuring

everyone has access to basic services, a safe and sustainable transport system, improving the safety of the streets, strengthening public transport, with particular attention to the needs of the most vulnerable (women, children, people with disabilities, seniors)

It is worth mentioning that more than a quarter of the Italian population live in unsatisfactory housing conditions and the proportion of families living in overcrowded housing is on the rise. More than a third of families are unsatisfied by their use of public transport and state that they have difficulty in obtaining connections to the zone in which they live. Levels of particulate air pollution are above the EU27 average. In contrast, the proportion of urban rubbish being recycled continues to increase and the incidence of usable green area is still stable compared to that of urbanised areas (on average 8.9 m<sup>2</sup> for every 100 m<sup>2</sup> of urbanised space in the 109 province capitals) (ISTAT, 2020).

**Responsibilities at national and regional level** - From the point of view of competences, in Italian law, the determination of the essential levels of benefits concerning the civil and social rights that must be guaranteed throughout the country as well as the protection of the environment and the ecosystem are the exclusive responsibility of the State (Article 117, Constitutional Law no.3 18 October 2001 "Modifications to title V of the second part of the Constitution"), expressed through the guidance and management functions of the central government administrations. On the other hand, planning choices relating to civil protection, the government of the territory, the extensive transport networks and enhancement of the environmental heritage are responsibilities that are jointly shared with the regional Administrations. Exclusive power belongs to the Regions in all other matters while the Municipalities, the Provinces and the metropolitan cities have regulatory power regarding regulation of the organisation of certain functions conferred upon them; in this case, in urban planning and housing policies, the management of public green spaces and local public transport and in the disposal of urban waste etc.

**National level** - In order to promote inclusive and protected urbanisation, since 2014, the MINT, through the Department of Public Safety - Central Directorate of Criminal Police, has promoted the national campaign *Safer Together*, together with the ANAP. The initiative, which is in its fourth edition, makes use of the Carabinieri Corps and the Guardia di Finanza, as well as the contribution of the State Police, providing information and useful advice to seniors on how to defend themselves from criminals and from dangerous situations, especially during the summer months when, statistically, the risks are higher. In particular, the campaign provides for the distribution throughout the country of vademecum and leaflets containing simple rules for people to protect themselves from scams and robbery in the domestic environment, on the street, on public transport and in open places.

With regard to the subject of access to suitable, safe accommodation, the Ministry of Health, through the *Operational Health Plan - National Strategy for Smart Specialisation (SNSI)*, has identified five thematic national areas of specialisation including: smart and sustainable industry, energy and environment, smart communities, smart mobility systems. The Operational Health Plan provides for 5 development trajectories with national priority, each with resources from the Cohesion and Development Fund (2014-2020). The first trajectory relates specifically to *Active & Healthy Ageing*, with the goal of creating residential communities with "smart" products and services for seniors by using ICT (technologies for *Healthy-Ageing-Management*, for social inclusion, for assistance) and able to take advantage of technologically-assisted living spaces (*Living Labs*). In particular, action 11 provides for the creation of urban spaces dedicated to the life of those advanced in years. In addition to this, the guidelines of the Physical Activity Plan make specific recommendations to

the community so that suitable environmental, cultural and social conditions are created that help older people, such as the planning of green spaces, the removal of architectural barriers etc.

Other Ministries do not specifically deal with this aspect in terms of AA, although the MIPAAF, in the *National Rural Development Programme 2014-2020*, one of the many different themes, also identifies urban regeneration with the creation of inclusive services and spaces for the community. We should also recall in this area Law no.158 of 6 October 2017, mentioned earlier, "Measures to support and enhance small municipalities, as well as provisions for the regeneration and recovery of the historical centres of those municipalities", which, in order to ensure sustainable development and balanced territorial government, gives incentives to the State, the Regions, the metropolitan cities and the Provinces to promote efficiency and quality of essential services in small Municipalities, with particular reference also to the environment, civil protection and to social welfare services, with an obvious knock-on effect on the most vulnerable individuals.

In the context of the regeneration of the territory the "*Bancadelle Terre Agricole*", established under Article 16, Law no. 154 of 28 July 2016 and administered by the ISMEA (Institute of services for the agricultural market), funded both with lands deriving from land-based activities managed by the institute, and from those belonging to the Regions and PAs or to other interested public stakeholders, also aims to recover abandoned agricultural areas and simultaneously to promote economic and social measures for the benefit of the communities of reference.

We should also mention the Protocol between the MIPAAF and the ANBSC (National Agency for the administration and allocation of assets seized and confiscated from organised crime syndicates)<sup>40</sup>, that aims to enhance and reintegrate, back into the civil and social circuit, assets confiscated from the mafia, turning a bad situation into a positive development.

In this case also, the subjects handled by the MAECI will only be carried out in the context of actions relating to foreign policy and development co-operation, representing Italy and the relevant departments in this regard.

The context of action linked to the "sustainable cities" objective is part of the 2020-2022 three-year Plan for the programming of the universal civil service of the Department for Youth Policies and the Universal Civil Service and it is expected that the programmes presented by the bodies during the current year may in part be focused on this theme, with an explicit reference to actions which also concern seniors.

Regions and Autonomous Provinces - 13 Italian Regions/APs have included the theme of sustainable cities, while 8 of these have implemented concrete objectives in this regard.

<sup>&</sup>lt;sup>40</sup> Established with decree-law no. 4 of 4 February 2010, converted into law, with modifications by law no. 50 of 31 March 2010, today implemented by legislative decree no. 159 of the 6 September 2011 (Antimafia Code). The Agency is a body with legal personality under public law, with organisational and accounting autonomy and placed under the supervision of the MINT. The structure has its headquarters in Rome with subsidiary branches in Reggio Calabria, Palermo, Milan and Naples.

Table 11: The SDG11 in the Italian Regions and Autonomous Provinces: status of consideration of the policies and implementation

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Valle d'Aosta	Piedmont	Veneto
Lombardy	Liguria	Tuscany
Trento AP	Lazio	Molise
Bolzano AP	Abruzzo	Campania
Friuli-Venezia Giulia	Sicily	Apulia
Emilia-Romagna		Basilicata
Umbria		Calabria
Marche		Sardinia

There are three main areas in which the Regions have intervened with actions in the local regions and communities: social assistance, the enhancement of internal and mountainous areas and the promotion of public transport.

Social assistance covers a benefit offered by the Regions/AP or bodies appointed to facilitate access for older people to health, social, educational, recreational and public utility services. Regions such as Lombardy - through the POR - and Emilia-Romagna (Regional Council Deliberation 2230/2016) have regulated and promoted this benefit among the older population. While Abruzzo (Regional Law 16/2016) has provided for similar rules without implementing them, the Marche (Regional Law 3/2018) have put in place measures whereby volunteer older people, involved in the civil service dedicated to them, can participate in activities to accompany and transport older people who need assistance in accessing the health and social-health services.

Some specific policies are also dedicated by Regions/APs to improving the conditions and accessibility of inland and mountainous areas, to help both the communities farthest form urban centres and those who wish to reach them. One such example comes from the Valle d'Aosta, with its in-land areas strategy and the "Bassa Valle in Rete" project, financed by the POR from European structural funds and which involves 23 mountain area municipalities. In this way, 27 measures are planned to develop hubs for training and assistance, the creation and maintenance of cycle paths and walking routes, as well as the adaptation of public transport and the development of artisan and food product activities.

A third area concerns direct support from Regions/APs to older citizens for access to the public transport system. They are often discounts and benefits for the over sixties for passes for buses, local trains and other means of transport. Examples are the Bolzano AP (Provincial Council Deliberation 760/2016), the Trento AP (Provincial Council Deliberation 62/2019) and in Friuli-Venezia Giulia (Regional Law 22/2014). In the case of Liguria (Regional Law 12/2006), interventions to give incentives for public transport are provided for by the legislation but have not yet implemented.

Finally, measures affecting other aspects are provided for by Umbria (Regional Law 11/2015) to encourage digitalisation in museums and libraries.

Some Regions have included references to the theme of sustainable cities in their AA policies, such as in the case of Lazio (Regional Law 11/2016, Regional Law 38/1999, RR 11/2015) for social farming or Sicily (Regional Law 87/1981) for access to community house-hotels, although actual implementation is still awaited.

# BOX 7 - VALLE D'AOSTA: The sustainable development of the "Bassa Valle in Rete" project (Regional Council Deliberation 1678/2017)

**Objectives**: to promote the development of essential citizens' services - such as education, health and mobility - and local development in 23 mountain Municipalities of the Bassa Valle.

**Instruments and mechanisms:** the in-land areas strategy of the Valle D'Aosta aims to increase the wellbeing and availability of services in the community through sustainable local development. The "Bassa Valle in Rete" project is co-ordinated by the Unione dei Comuni Valdostani Mont Rose and financed by the POR (using European structural funds) to encourage interventions in the area. It deals with the development of new infrastructure, services and opportunities for local communities including: academic centres of excellence and other training structures; the promotion of a proactive health model; diversification of the mobility provision, flexible transport services and the development of cycle paths and walking routes; revitalisation of the forest, food products and tourism sector; development of new businesses; better digital cover.

**Results achieved**: the project is funded with more than EUR 15 million and divided into 27 actions (activity starts at the end of 2018).

### 2.11 Delivering a regional strategy MIPAA (MIPAA 10)

Since the approval of the MIPAA in 2002 and the subsequent Strategy for the European region (UN, 2002), the Member States of the UNECE have attached great importance to the exchange of knowledge and good practice, with the aim of gathering useful information and developing innovative approaches to the theme of the ageing population (UN, 2017). As well as collaborating in the raft of initiatives of the WHO, such as the *Global Network of Age-friendly Cities and Communities* or the other international initiatives relating to dementia and mental health, several States have actively participated in the activities of the OEWGA and have contributed to the work of the *independent expert on the enjoyment of all human rights by older persons (ibidem*).

In 2008, to better complement the implementation of the MIPAA/RIS, the UNECE set up the *Working Group on Ageing* - (WGA). The WGA is an intergovernmental working group that gathers together the representatives of the 56 member states of the UNECE, as well as the world of research and non-governmental organisations. It represents a regional platform for international co-operation, the exchange of experiences and discussion on the public policies on ageing put in place by the various nations (*ibidem*)<sup>41</sup>.

National level - Under the WGA, the MLPS has represented Italy as a national focal point for ageing, with constant scientific and technical support from the INAPP, (formerly ISFOL), which, as well as ensuring participation in annual meetings and technical fora, has carried out, in agreement with the Office of the Diplomatic Counsellor of the Ministry, a series of activities including the drafting of three national monitoring reports of the implementation of the regional Strategy of the MIPAA (2002/2007, 2008/2011 and 2012/2017) and periodic updating of the main monitoring indicators of the Plan.

<sup>&</sup>lt;sup>41</sup> Since 24 July 2020, the WGA of the UNECE has been known as the Standing Working Group on Ageing (SWGA).

In turn, the MAECI has always been actively engaged in the objectives of the Regional Implementation Strategy of the MIPAA (MIPAA/Regional Implementation Strategy- MIPAA/RIS), providing international support and assistance through diplomatic representation at the offices and fora of the Council of Europe and of the United Nations. The Ministry in turn supports the central competent Administrations in verifying the recommendations and international commitments, providing the necessary co-ordination through inter ministerial Committees, although it is not competent in implementing the various objectives, which are entrusted to other departments.

Since 2017, the DIPOFAM has become one of the central Administrations of reference for all matters relating to the subject of AA, incorporating within its institutional strategy the aspects covered by the MIPAA/RIS and by the 2030 Agenda for Sustainable Development. On the basis of the mandate of the Presidency of the Council of Ministers, the DIPOFAM operates as a multi stakeholder and also, through the project from which this Report is derived, helps to consolidate multi-level co-ordination between all the actors involved in the implementation of sectoral policies and to craft a more integrated and coherent system of policies, actions and services.

Within the Presidency of the Council of Ministers itself, the Department for Youth Policies and the Universal Civil Service, in its programming strategy of the national civil Service for the 2020-2022 three-year period, expressly refers to the objective of the Government and of the international bodies for sustainable development, including those of Agenda 2030. No mention can be found of the MIPAA, although some of its objectives are implicitly considered. In fulfilling its institutional mandate to foster the civic and social growth of young people, the Department does in fact address AA issues providing, among the areas of intervention relating to assistance and education, specific actions for the third age to be promoted annually through the publication of notices for the presentation of projects by the Third sector bodies. In the drafting of the next annual Plan 2021, as part of the Triennial Programming of the universal civil service, the Department has also planned to factor in the MIPAA.

The Department for Equal Opportunities (DPO) is not directly involved in AA. Therefore, it does not refer to the MIPAA strategy in this context. Of all the commitments entered into by our country, the closest to the Department in question is undoubtedly that relating to the gender-based approach but despite AA being relevant to the design and implementation of equal opportunities policies, the DPO is not currently engaged in this issue.

When examining the sectoral contribution of the other government departments, the first matter of importance is how the Ministry of Health has, over time, increasingly consolidated, including with reference to WHO indications, an all-inclusive vision of taking care of the individual, considered overall in all the stages of their life, from birth (and even before) to old age, in consideration of the fact that, for AA, it is necessary to strengthen the promotion of health as well as the prevention and control of diseases, starting from infancy. Interventions put in place according to this approach include the health of the woman, of the parental couple, the safeguarding of fertility and the influence of genetics on fertility itself: all factors that may subsequently have an impact on the health of people in older age. It is a strategic approach which is increasingly becoming established both nationally and regionally. Since the action of prevention and promotion of health cannot be the sole responsibility of the National Health Service, because it cannot be based only on interventions exclusively of a health nature, growing importance is being attributed to health literacy and the involvement of the patient, as well as the promotion of health and the changes of context which require collaboration

between multiple entities in order to broaden the capacity to identify those at risk and to direct them to make lifestyle changes.

Continuing on the international side, regarding the Ministry of University and Research, together with the Ministry of Health, another matter of importance is the participation and financial support for the aforementioned International Programme "*Active and Assisted Living* – AAL- Announcement "*Sustainable Smart Solutions for ageing well*" (2014-2020). Through the contribution of ICT-based solutions, it aims to support people later in life to live in their own homes for as long as possible (MIPAA 6-7, SDG 3-4).

Within the area of competence of the MIPAAF, the potential contribution of social farming is evident in all of the 17 objectives of sustainable development, as well as in relation to the commitments of the MIPAA/RIS. The way forward for sustainable development is indeed clear to see in the models of social integration offered by social farming and by its capacity to connect the economic, social, health and environmental dimension of living in communities. In this context, it is important in the planning documents and in the allocation of resources that specific attention is given, among the other categories of entities considered, to older people,

Regions and Autonomous Provinces - 17 Italian Regions/APs have taken into consideration the MIPAA regional strategy in their public policies for AA, whilst in 11 Regions/APs, the strategy is to some extent operationally organised.

Measures considered in regulations and being implemented	Considered in regulations, without measures being implemented	Not considered
Valle d'Aosta	Piedmont	Tuscany
Liguria	Marche	Molise
Lombardy	Campania	Sicily
Trento AP	Apulia	Sardinia
Bolzano AP	Basilicata	
Veneto	Calabria	
Friuli-Venezia Giulia		
Emilia-Romagna		
Umbria		
Lazio		
Abruzzo		

Table 12: The MIPAA 10 commitment in the Italian Regions and Autonomous Provinces: status of consideration of policies and implementation

In general, the MIPAA regional strategy is fully implemented in Veneto and Friuli-Venezia Giulia, where there are a number of cross-sector laws on AA most of the MIPAA objectives which also have effective implementation mechanisms. Emilia-Romagna and Umbria, while not having a dedicated regional law, are also in a privileged position thanks to a long-standing tradition of holistic and innovative AA policies which have been running for several years.

Many Regions/APs find themselves at an intermediate level of partial implementation of the MIPAA regional strategy. In some cases, the cultural, administrative and community support progress is significant. It has

been achieved because of regional laws focused on the promotion and enhancement of AA. These are Piedmont, Liguria, Marche, Abruzzo, Campania, Apulia, Basilicata and Calabria. However, almost all these Regions finalised the legislation on AA in the 2017-2019 period and the launch of the practical and financial tools and agreements with stakeholders has encountered internal barriers, with partial or total limitations of the planned activities.

Other Regions/APs have not experienced the impetus of policy initiatives dedicated to AA and have put in place, for the most part implicitly, sectoral measures which partially contribute to the implementation of the MIPAA strategy. These measures, although useful and effective for older people and communities, are not part of an overall strategy and cannot affect and influence different sectors. Think of specific policies for learning and training, civil and social commitment, inclusion in the employment market, intergenerational solidarity and relations, assistance and care-giving, the enhancement of local areas and communities, physical activity and health promotion. In the last 10-15 years, the vast majority of the Regions have worked, at least partially, in a few social policy "silos" to overturn the traditional notion of the older person as a passive recipient of interventions of a mainly health- and welfare related nature. In this sense, the evolution of regional/provincial policies is heading in the right direction towards the objectives of the MIPAA, even if there remains some way to go before achieving a comprehensive implementation.

### 3. Discussion

As discussed in the introduction to the report, AA may well represent a new concrete way of explaining the fundamental rights of a person, as defined in the Italian Constitution, consistent with the international framework of human rights. That is undoubtedly an obvious strength in the development of policy responses to the challenges posed by the demographic transition and by the social and environmental sustainability of our society's current model of development.

Nationally, the mapping of measures and interventions relating to AA continues to reflect reasonably faithfully the traditional model of the Italian welfare system. This model, despite the progressive introduction which has taken place over recent years of universal measures to combat poverty and social exclusion (income allowance, Citizenship Guaranteed Minimum Income and Pension etc.) as well as the application of the international Convention on the rights of people with disabilities, at least until the outbreak of the Covid-19 pandemic, bears a heavy legacy of categorical fragmentation (Saraceno, 2015), combined with a marked imbalance of public expenditure on pensions (Razetti, Maino, 2019).

The measures described in the previous point are, however, evidence of great interest and significant commitment with regard to the ageing of the population that, as emphasised many times, is a constant reference point for the Government, including for the analysis of the strength of the national social model and for the focusing of guidelines on its increasingly urgent restructuring. In particular, the specifics and lines of convergence are now clearly recognizable and can be separated out into four macro-areas: In the first place, extending the working life, where the national intervention, as well as strengthening the measures for health and security, is concentrated on employment incentives for the over 50s and on boosting their employability through continuous training and adult education within the national strategy of lifelong learning. Between the labour market and care commitments, a second group of targeted interventions is then clearly revealed, intended by the decision-makers to provide support towards families, both through direct support measures and through the encouragement of corporate welfare practices.

The set of measures already mentioned that, in recent years, have sought to strengthen the tools for the fight against poverty, exclusion and marginalisation belong to the field of participation and social inclusion. Their introduction formed part of the ambitious attempt to reform the third sector, rightly considered a key element for the development of a community welfare in which seniors can systematically see their active role recognized, together with the more traditional one of service users.

Finally, but of no less importance, the area of health and of ageing independently and with dignity has seen confirmation of the commitment of the health authorities in strengthening prevention and epidemiological control measures, which have consciously adopted an approach geared to enhancing AA, intended not simply as seniors being physically active, or as being part of the work force, but also involving their continuous participation in the social, economic, cultural, spiritual and civil activities of the community.

An area that continues to warrant attention is the need to align thinking with the holistic and organic approach towards AA, a situation facilitated precisely by the continued division by category of the welfare system, evidently still based on a model of course of life characterised by the rigid age-based divisions of its phases.

Despite the consolidated approach to ageing in all the policies promoted in the field of health, explicitly inspired by WHO guidelines and by its concept of AA, Italy addressed the Covid-19 pandemic with problems presented across a whole range of indicators relating to AA itself. In 2017, life expectancy in good health at 65 years, according to ISTAT, was equal to 13.7 years for men and 14.3 for women, which was lower compared to the same EU indicator which was equal to 14.4 and 15.8 respectively. At the same age, life expectancy without functional limitations was 7.8 years for men and 7.5 for women, against an EU average of 9.4 in both cases, while the overall number of dependent older people was estimated by ISTAT to be 2 million nine hundred thousand people *(ibidem)*.

An even more precise picture in this regard can be tracked in the AAI indicators which, in Italy, show considerable scope for improvement, above all with regard to participation in the labour market and social participation (Lamura, Principi and Di Rosa, 2019). It is no coincidence that, in the clustering of EU countries based on the 2018 AAI results, Italy is included in a group composed of Mediterranean countries such as Spain, Greece, Slovenia and Croatia, together with most eastern European countries (*ibidem*). The characteristic weakness of our Mediterranean welfare model in failing to operate in a universally redistributive manner or not going the extra mile to activate all the available social resources, appears to be confirmed by the 2016 AAI, developed sub-nationally in relation to various subgroups of population (Principi et al., 2019). In this regard, significant differences emerge either in consideration of the average indicator (*Overall AAI*), or each of the four areas: work, participation in society, independent living and enabling factors. These differences involve, firstly, the gender variable, with almost constant distancing to the disadvantage of women; secondly, income and level of education, with fairly significant gaps between those at the top and those at the bottom of the respective scales of reference *ibidem*, pp. 23-64).

The comparatively better scores achieved in terms of independent living, of health and safety and of enabling environments, undoubtedly confirm the greater alignment of the health and welfare sector with the characteristics of the AA paradigm, but bring to light the split that, from an institutional and legislative point of view, reproduces the clear separation between the population still considered productive and those on the other hand who, being inactive or having retired from work, struggle to perceive the potential use of their role in the community.

The presence of what we can define as the inequalities of opportunities for AA, as also revealed by the AAI, suggest that it is no longer possible to consider sustainable a course of life model based on a rigid differentiation of age groups and of their phases, especially with regard to the relationship between work and lifelong learning and for the prevention of the occurrence of functional limitations (Leichsenring and Schmidt, 2016). This is because, as has also unfortunately been highlighted recently by the pandemic, assigning rigidly differentiated tasks and activities to different age groups in fact contributes to widening the gaps in the categorical welfare paradigm, forcing social groups to a sort of forced selection of exercising their right to self-determination and exposing them to risks of potential economic and social exclusion. In this context, a debate that seeks to include AA in the broader scope of the exercise of fundamental rights must address the issue of a reconstruction of the rights and obligations on which to restructure the mechanism of the transitions between the various phases of the citizen's existence, further enhancing the policy elements already in place at national level, aimed at promoting solidarity and intergenerational exchange (*ibidem*).

At a regional level, the analysis has, in turn, highlighted positive and encouraging developments of new policies for AA in recent years in nearly all the Italian regions and PAs. In 2016, an earlier study by the IRCCS INRCA (Principi et al., 2016) mapped, analysed and evaluated the regional laws (including legislative

proposals) on AA, highlighting that only 4 Italian Regions had already enacted a cross-sector law on AA. Among the remaining 17 Regions/APs, only in 5 was one or more legislative proposals evident with these characteristics, while the sectoral policies identified were very fragmented. Four years after the first survey, it can be stated that the general framework has shown considerable improvement. To date, 10 Italian Regions that have now enacted a cross-sector law on AA (Piedmont, Liguria, Veneto, Friuli-Venezia Giulia, Marche, Abruzzo, Campania, Apulia, Basilicata and Calabria), with a further 2 in which the rules on the issue are included in other types of provision (Emilia-Romagna and Umbria). Nearly all of the Regions and AP have at least one sectoral policy that promotes aspects of AA in specific fields such as training (e.g. universities of the third age), volunteering (e.g. civil service for older people), assistance (e.g. recognition of the family caregiver) or health promotion (e.g. sports and physical activity).

In this positive panorama, however, there is significant differentiation in the evolution of regional social policies towards completed AA models and successful practice. In reference to cross-sector laws on AA, in most cases (8/10), these are recent legislative interventions (2017-2019) which have so far produced limited results because the implementation mechanisms have not been put in motion (e.g. failure to assign powers to officials to set up working tables, consultations and other planning bodies) and/or because there are barriers to overcome (e.g. scarcity of resources to allocate). Some success stories stand out however for their holistic interventions, resources employed and the speed of implementation of systematic policies, such as Veneto, Friuli-Venezia Giulia, Emilia-Romagna and Umbria. In other cases, there are some innovative and effective examples of sectoral policies to promote the well-being of seniors through educational opportunities and digital inclusion (e.g. Trento AP, Umbria), new forms of social and intergenerational solidarity (e.g. Molise, Basilicata), physical and motor activity (e.g. Tuscany, Campania), professional training and transfer of professional know-how (e.g. Veneto, Lazio), social factors for work placement (e.g. Sardinia), support for family caregivers and work-family life balance (e.g. Emilia-Romagna, Bolzano AP), tackling inequalities and economic exclusion (e.g. Marche, Lombardy) and combating social isolation (e.g. Liguria).

These elements should also be analysed in view of further strategic developments of AA policies. Italy is in fact one of the European countries with the greatest number of Regions/APs recognised by the EIP-AHA as reference sites for AA and in good health<sup>42</sup>, 13/21. These are Piedmont, Liguria, Lombardy, Trento AP, Veneto, Friuli-Venezia Giulia, Emilia-Romagna, Tuscany, Marche, Lazio, Apulia, Campania and Sicily. Recognition as a reference site is the result of a positive evaluation by European institutions of objectives, regional policies and initiatives for seniors and for AA, which must respect certain minimum criteria. As a result, the Regions/APs recognised as reference sites are able to access networking opportunities and dedicated European funding, thus broadening their stakeholder networks and taking advantage of opportunities to exchange good practice and to forge partnerships between European Regions.

In summary, it is therefore possible to affirm that, in the last 10-15 years, many of the Regions and PAs in Italy have initiated, or continued the development of, policies on AA that are aligned with the objectives and priorities identified by international programmes such as the MIPAA and the SDG of the United Nations. There is certainly scope for further evolution and improvement of these policies, above all in relation to coordination within the individual Regions/APs where, in an analogy at national level, there are still some "silos" of non-integrated social policies. To make further progress, it is necessary to pursue a cultural, political and social change, already under way everywhere (at least partially), that aims to promote a vision of the older person as an active and informed citizen in society, and not as a mere passive recipient of health, social and

<sup>42</sup> https://ec.europa.eu/eip/ageing/reference-sites\_en

economic care. The feedback and opinions gathered in the different Regions also suggest the importance of launching continuous, multilevel dialogue and co-ordination. In particular, the needs that emerge, in many cases, concern the requirement to intensify exchanges between regional actors, enabling a transfer of knowledge, practice and policies that are successful or that are promising.

#### 4. Conclusions

This Report has delivered a positive message, which is that AA is reasonably present in the policies of Regions and AP and that, even at national level, there is profitable work being carried out on this issue. There is undoubtedly much scope for improvement, both on the policy production front and on the implementation of the interventions envisaged within the policies. Reading the results of our study, concerning the analysis of the state of art in the light of the MIPAA commitments and the objectives of sustainable development included in the 2030 Agenda for Sustainable Development, has highlighted this and it is necessary to make good use of the results in order to improve the status quo. Moving in relation to the tools that the international framework offers (MIPAA, Sustainable Development Agenda, the human rights framework), it therefore seems necessary to develop a mechanism to act simultaneously (in parallel) on the two main levels: production of the policies relating to AA; implementation, linking and co-ordinating the interventions envisaged by these policies, consolidating and/or developing adequate mechanisms and dialogue processes, communication and joint participation in the choices and implementation of policies among public decisionmakers and the vast array of civil society stakeholders.

The three-year project "Participated multi-level co-ordination of the policies for active ageing in Italy", in the context of which this study was carried out, may represent a "pilot", an opportunity to give an initial boost to this mechanism, to test and monitor it. Once it starts, after ascertaining that the system is useful and working, the latter could be self-sustaining. The key words of this mechanism are all contained in the title of the project: "co-ordination", "participated" and "multi level".

Being co-ordinated means reducing the existing territorial fragmentation on the subject (Principi and Lattanzio, 2019), sharing and learning to improve, both from positive and negative experiences. This is closely linked to the second of the key words mentioned: "participated". The steps of sharing, of the time for reflection, and also the decision-making relating both to the production of the policies and the implementation of the interventions, must all be performed together: the policy-makers in all political fields (and here the first of the MIPAA commitments is particularly enlightening), the stakeholders of the Third Sector, including the organisations of, or on behalf of, seniors, as well as experts, whether they are academic or not (the importance of working in partnership is also emphasised by SDG 17). The other key word, "multi level", tells us that this should not just be rolled out at national level. The sharing, planning and implementation aspects should be pursued with the participation of all the parties involved as just described both at national and regional level. Equally important is the additional supranational level (European/international), which fuels the debate and directs the policies in this area, as widely demonstrated in this report. A practical example of that is provided by the above-mentioned AAI, commissioned by UNECE and the European Commission: in the light of AI measuring at various geographical levels, it is possible to guide the preferences, and therefore political choices, setting measurable and concrete objectives both at national and regional/AP level, with respect to all or some of the 22 indicators that compose the index.

Efforts are therefore underway on many levels, with inputs and outputs moving in all directions depending on the levels involved. An example of the first clear input of the Regions towards the national level has emerged from this study: there is a fairly consistent pattern of requests by the Regions for the development and implementation of a national framework law on AA that is able, without affecting the regional autonomy in this area, to outline the frame and suggest the directions and boundaries within which to move. As such, opportunities for national reflection with everyone working in unison. In some cases, it could be a task force for actions such as the shared drafting of the text for the legislative proposal mentioned, with a more organic reflection than the, albeit useful, existing proposals on the subject. In other cases, it could be a think tank to address unexpected and emergency situations. The contingency invites contemplation of the example of Covid-19 and of all its implications and what it continues to mean for the older population and for AA. That, however, is but one example in a much wider and more general landscape. Above all, it could represent an important opportunity for the sharing of experiences and guidelines in this area. The stakeholder network created under this project for multi level participated co-ordination (Barbabella et al., soon to be published), that interacts regularly on-line with the research team and that meets in plenary at generally fixed intervals during the three project years could, for example, once the project is terminated, be transformed into a permanent observatory on AA, with the functions mentioned above.

There are equally important occasions for reflection at regional level, where the experiences of the national observatory may be discussed, broadened, operationalised, organised and implemented, according to the local requirements: the existing offer, socio-demographic features etc. Many Regions have already organised themselves in this way, adopting a regional law to promote AA and providing for instruments such as the "Permanent regional forum for active ageing" or similar, with the involvement of the various regional departments (in accordance with the MIPAA 1 commitment) and of the major stakeholders (in accordance with SDG 17). It is about reproducing the national observatory on a regional scale, with even more operational tasks.

All these mechanisms and apparatus would also have the important task of urging action from Italian politicians on the theme of AA. This is also a decisive step, as previous studies have already observed (Principi et al., 2016) as is putting across the importance of the issue and directing politicians' choices in this sense in terms of priority. Remaining with the results of this study and therefore with the contingency, this would be useful in those cases which unfortunately exist where a given Region has an excellent documentary and legislative apparatus relating to AA yet this apparatus remains partly, or entirely, unfulfilled. Equally disconcerting are all those cases where the apparatus is shown to be deficient.

In this overall context, the next design stage, based on the results achieved in this study, will be to draft, in a participated manner as described above, the guidelines for the production of policies on AA. With this task, what we might call the "theoretical" phase of the project, will be concluded and a more "interventionist" phase will commence. Efforts will be made, in the various contexts, to identify through participation, the "possible areas for improvement" and, once they have been identified, to attempt to put in motion a concrete strategy essentially to improve the situation. Essentially, starting from the existing state of the art as reported in this study, the aim will be to make concrete use of the guidelines that will be produced. It will undoubtedly be a tricky and challenging task but it will also be very stimulating. The idea is to provide a common model, to be filled with different content depending on the various contexts and their characteristics. An enduring model that might ultimately be finalised, without being too constrained by the envisaged timeframe of the specific project in progress (which will terminate early in 2022), but which can also be used and enhanced at a later date, given the desire, among possible future scenarios, to create an instrument such as a permanent national observatory on AA which can take on this task of participated coordination.

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Website: <u>http://invecchiamentoattivo.gov.it</u>

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#### Appendix 1: Methodology

In order to achieve the objectives of this work, that is to investigate the state of the art of overall current active ageing policies in Italy, both at national level and of regional and Autonomous Province governments, it was first necessary for us to define our field of study.

### Definition

In a perspective of active ageing, the paradigm of the decline in psycho-physical and relational faculties commonly associated with the consequences of ageing (Townsend, 2007) is rejected and the emphasis is placed on the active roles that older people occupy and perform in society. There is therefore a need to distinguish between the notions of activity and passivity, at the same time employing an approach that considers aspects such as quality of life, health and well-being, both physical and mental, and social participation (Foster and Walker, 2013; Walker, 2002). In line with Foster and Walker (2014), a general, flexible definition of active ageing has been adopted that enables stereotypical visions of old age, characterised by passivity and dependence, to be overturned, instead placing the emphasis on autonomy and participation. Policies have therefore been studied concerning: employment, social, training and entertainment activities performed by older people including in the following areas: social participation, training and lifelong learning, work, culture and tourism, sport and free time, informal care (care giving for other dependent persons and grandparenting for the care of grandchildren), farming and gardening, civil and voluntary engagement, co-housing, as well as any other field relating to the activity of older people. The general nature of the activities in question is intentional in order to leave open the discussion to any field that may be considered useful and appropriate.

To emphasise the distinction between activity and passivity as mentioned above, and in the knowledge that policies aimed at the care and assistance of seniors are obviously also essential and important for creating capacities to favour active ageing (Stenner, McFarquhar and Bowling, 2011), to complete the definition adopted, it was specified that the mapping did not concern policies related to actions and interventions aimed at seniors as passive individuals requiring health and/or social care, but rather policies and actions that mainly relate to encouragement of seniors to be more active, including those in poor or precarious health.

This definition was shared, discussed and approved on 24 June 2019 at the first plenary meeting with the stakeholder network created at the start of the project (Barbabella et al., soon to be published), including representatives of Regions, Autonomous Provinces, Ministries, Department at the Presidency of the Council of Ministers, other national public bodies, civil society national organisations involved in active ageing, academics and experts in the field. This meeting was also used to explain the project, its objectives and the planning of the various phases to the stakeholder network. The research on the state of the art was conducted in four main phases: 1) joint construction of the methodological instruments; 2) joint gathering of the documentation; 3) shared analysis of the documentation; 4) joint reporting and sharing of the results.

# Construction of the methodological tools

Part of the first plenary meeting with the stakeholder network on 24 June 2019 was dedicated to workshops conducted in parallel (three working groups) to finalise the information record to be used by the researchers, in order to conduct interviews with the national and regional AA contact persons, once the relevant documentation, according to the adopted definition, had been examined. It was deemed fundamental to plan the information gathering in such a way that clear indications could be revealed not only about which,

and how many, rules and policies on active ageing existed, but also to understand to what extent these rules and policies were related, and in line with the main international objectives The reference framework in this sense has been the United Nations Madrid International Plan of Action on Ageing-MIPAA of the United Nations, adopted by the Second World Assembly on ageing in Madrid in 2002. It represents the overall policy framework for addressing the responses of the various countries to ageing populations. In the European region, in the same year, the Member States adopted a specific regional strategy (Regional Implementation Strategy-RIS) for the effective implementation of the MIPAA. The strategy consists of ten priorities (<u>https://www.unece.org/population/mipaa.html</u>) on which the Member States have agreed to focus their action as part of the implementation of the MIPAA.

In addition to the degree of consideration and implementation of these ten MIPAA commitments on active ageing, the same type of assessment was made in relation to the nine objectives, out of the seventeen taken into consideration as a whole in the United Nations 2030 Agenda for Sustainable Development (<u>https://www.un.org/sustainabledevelopment/development-agenda</u>) (Sustainable Development Goals - SDG) more directly linked to the MIPAA (Strand, 2019). Taking all of these aspects into account, the roadmap for the draft interviews was developed. The input received on the draft by the stakeholder network during the June 2019 meeting was subsequently considered and developed by the research team which refined and finalised the data gathering tool and then shared it again. The construction and finalisation phase of the methodological tool (Appendix 2<sup>43</sup>) was concluded in August 2019.

#### Documentation gathering

In September 2019, through email communication by the DIPOFAM, the project team contacted the 19 Regions and 2 Autonomous Provinces, 10 Ministries and 4 Departments at the Presidency of the Council of Ministers, setting out the project and its objectives. They also asked for collaboration in indicating a spokesperson for the project by the organisation, attaching the draft topic guide for interviews (35 institutions).

The process of identifying the contact person was fundamental, as the role of the latter would need to be someone working in tandem with the researcher for the research activity within the organisation. The contact person needed to be the main interface of the research team with the organisation. A fact that had already become clearly evident at the plenary meeting of June 2019 was that they would need to interface with any internal contact person within the organisation relating to rules or policies on active ageing of different departments, services, or directorates, encouraging dialogue, co-operation and channelling existing experiences within the same organisation. Therefore, the motivation of the contact person towards the aims of the project and the continuity in their role were to be decisive aspects for the success of the project. The operational phase for the analysis of the state of the art has highlighted how the contact persons identified have worked together on the activities with great dedication, professionalism and competence, ingredients which have also represented great added value in team building, having achieved, with the network constructed, considerable results also in terms of solidity and mutual trust in discussing an issue recognised by all involved as being of vital importance.

<sup>&</sup>lt;sup>43</sup> Appendix 2, for example, contains the tracking method used for gathering data in the Regions. In the Autonomous Provinces, the Ministries and Departments, the same, or slightly altered, tracking system was used. The tracking has also been summarised in some slides as, in some contexts, it has been useful to provide a presentation with these characteristics by researchers, to introduce and guide the focus group and/or the interviews with policy representatives.

Identifying the contact person (with designation by the organisation) was a delicate process, as it was necessary to enlist at least 35 contact persons<sup>44</sup>, in all. While in many cases this step was straightforward as the contact person indicated was the same person who had participated in the plenary meeting of June 2019, and therefore had already been introduced to, and informed on the objectives and content of the project, in other cases, there were setbacks and delays due to bureaucratic aspects and/or to ongoing internal reorganisations so that this phase, in some cases, lasted until January 2020, and included a new overall explanation of the project to the contact persons by the research team where the contact person had not been present at the June plenary meeting. In rare cases, (for example, in the case of some Ministries), despite various attempts by email and telephone, it wasn't possible to obtain an official contact person to be the main point of personal contact.

Having identified the contact persons in the various institutions, via email and telephone, the research team initially explained the first phase of the research to them, which consisted of identifying, within their organisation, and in dialogue with other departments, services or directorate, any relevant documentation that exists to obtain as complete a mapping as possible of the offering in terms of policies supporting active ageing (see the "reference questionnaire", i.e. the introductory part of Appendix 2). The research, which was carried out jointly in each individual Region/Autonomous Province and nationally, has been categorised into five types of possible documents:

- a) specific legislation on active ageing which takes into account, organically and transversally, all areas of activation;
- b) laws on individual areas of active ageing (for example, the law on the University of the Third Age, promotion and support of volunteering in later life, etc.);
- c) articles or subparagraphs relating to active ageing in laws that do not have active ageing as their sole or primary object;
- d) documents on active ageing policies which cannot be linked to the regulations of the three categories mentioned;
- e) ongoing European projects on active ageing.

The study of this documentation was mainly performed by the contact persons of the various institutions, with constant collaboration with the research team, diversified within each organisation according to requirements. In the rare cases, as mentioned above, when it was not possible to identify an institutional contact person, the research team's task was to replace the contact person completely, searching for and procuring the material independently. In these rare cases, there was undoubtedly a failure of joint partnership and sharing of the path. However, attempts were made to rectify this at a later date. The research team began to receive material from a number of contact persons shortly afterwards, in September 2019, whilst the last set of material was received by the research team in February 2020.

# Analysis of the documentation

The analysis of the documentation took place on two levels, also separated chronologically.

Initially, and on a first level, the research team analysed the documents procured objectively and then responded, where possible, to the questions posed by the topic guide for interviews on the basis of the information in the documents.

<sup>&</sup>lt;sup>44</sup> In other contexts, there was more than one main contact person.

Subsequently, and on a second level, an analysis was performed, in each institution, with the contact persons of the regulations and the policies identified, to assess to what extent what was written in the documents procured was, or was not, concretely applied or implemented (and how), and to explore other aspects, such as the overall approach of the institution towards active ageing and the internal and external collaboration mechanisms on the subject.

This second level analysis was planned through focus groups/collective interviews, with visits to the various institutions by the researchers. However, this plan was partly revised to accommodate the specific needs of the individual organisations involved. In many instances, the collective analysis was conducted effectively, having successfully identified, with the help of the main contact person, a date when the contact persons of the various regulations identified might be available, including the main contact person and any other key figures in relation to the subject.

In some cases, however, for practical reasons and because it was not otherwise possible, again with the help and co-ordination of the main contact person, this part of the fieldwork took place through individual interviews on site or remotely (on the telephone), or else, in sporadic cases, by obtaining answers in writing from a number of contacts without any direct interaction with the research team. Alternatively it was the research team themselves that conducted the analysis independently in those cases where it was not possible to identify contact persons, resulting in a low level of participation. Apart from in very rare cases, however, there was always some form of direct interaction between the researchers and the institutional contact persons. Sometimes it was also telephone or email contact for additions to the interviews previously carried out. In other cases, it was limited to providing material or indications to the researchers by the institutional contact persons on how to find the material independently, without further in-depth interviews. Excluding these interactions, in the following two tables, we have reported the methods mainly used in the Regions/Autonomous Provinces, and in the national institutions, where the pathway involved proved to be more difficult to implement than at regional level. In some institutions, additional methods were used (for example, the absence of a person to interview in the focus group/collective interview, subsequent recovery of the interview by telephone).

			Tracked	Independent
			written	analysis by the
Focus	Individual	Individual	response	researcher
group/collective	interviews	telephone	without	without
interview	on site	interviews	interaction	interactions
			with the	with contact
			researcher	persons
10.	3.	6.	4.	1.

 Table A1: Preferred methods of fieldwork used in the Regions and Autonomous Provinces

Table A2: Preferred methods of fieldwork used in the Ministries and Departments at the Presidency of the Council of Ministers

			Tracked	Independent
			written	analysis by the
Focus	Individual	Individual	response	researcher
group/collective	interviews	telephone	without	without
interview	on site	interviews	interaction	interactions
			with the	with contact
			researcher	persons
3.	1.	2.	0.	9.

The visits and various interactions for this purpose with the contact persons (whether with the main ones or with other contacts with whom it was necessary to interface) of the various organisations were carried out between November 2019 and February 2020.

# Reporting and sharing of results

The reporting was divided into two phases. The first phase concerned the drafting of the Reports of each individual organisation visited (all of which can be found on the project website), The second phase was dedicated to the drafting of this national Report, which is based on the Reports produced in the first phase.

# Reports of Ministries, Departments, Regions, Autonomous Provinces

The drafting of these reports commenced as the fieldwork in the various organisations therefore ended when all the information required was available.

The reports (no more than 10 pages) were structured according to the following sections: 1) a brief general description of the organisation and relationship with the policies relating to active ageing; 2) sociodemographic description of the older population in the geographical zone of reference (section not present in the reports relating to institutions at national level); 3) actual laws and policies on active ageing; table with a link to the documents and a general description of the documents reported in the table in relation to active ageing; 4) relationship of the policies, identified in the previous section 3, with MIPAA and SDG commitments; a table to demonstrate graphically if any of these aspects has been taken into consideration in the documents found (appropriate column) and was actually implemented (appropriate column), and a text description of the table with general information on each section; 5) a final part on the expectations of Regions and Autonomous Provinces (only in the reports relating to these institutions) with regard to the national level, and (in all the reports) a section on "other material". With regard to this latter point, in general and where present, this is a list of material that does not directly come under active ageing policies (and therefore not considered in section 3) for various reasons (for example, laws or policies directed at the entire population rather than specifically at the older population; laws or policies mainly related to welfare aspects, etc.), but in line with the concept of active ageing and therefore useful for further study.

The preparation of these reports "in draft" began in December 2019 and the last report was completed in April 2020. As the drafts were completed, they were sent to the contact persons of the various organisations to be shared and to obtain input and general feedback. That was also the case in situations where the contact person had not been identified (by sending it to the head of the competent authority) to recover the aspect of collaboration and the sharing of the pathway. Once the feedback was received from the contact persons, it was integrated into the report and the version became final. From May 2020, as the reports were finalised,

they were published (downloadable) on line on the project website (<u>http://famiglia.governo.it/it/politiche-</u><u>e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale/</u>).</u>

The handover of the feedback was complicated because, in many cases, it took place as the Covid-19 emergency was in full swing, that is, from the second half of February 2020 onwards. Therefore, the level of attention towards this project in many institutions was momentarily rescheduled to instead focus on activities to be carried out in response to the Covid-19 emergency.

### National Report

Where it was received by the various institutions, although they were permitted to expand and put the finishing touches to each individual report, it was noted that the feedback received never resulted in a significant change to the contents of the reports. In light of this, in order to avoid delaying any further the second phase of reporting dedicated to the drafting of this national Report based on the Reports executed in the first phase, from April 2020, we began to draw up the national Report. To achieve this, the document was based on the reports already finalised after the feedback, and on all the others submitted in draft in relation to which feedback had not yet been received from the various organisations (which, in many cases, arrived during the course of the project), with the intention of reviewing and updating any information in the context of feedback gradually received from the contact persons, on the reports mentioned above. This Report was completed in draft form in July 2020. The immediate next step was to share the draft of the national Report with the entire network of institutional contact persons, for input and general feedback, which was requested by the end of the first week of September 2020. Shortly afterwards, this report was finalised, taking into account the feedback received.

### Appendix 2: Interview topic guide<sup>45</sup>

#### Interview topic guide in the Regions

The objective of this document is to provide a guide shared among researchers and the regional contact person for gathering data and information during the visit to be carried out in the various regions by the project team concerning the presence, implementation and impact of regional policies and interventions relating to active ageing.

The topic guide will be analysed and discussed beforehand with the regional contact person of the project so that, for the day of the visit of the researcher, a focus group or individual interviews with the various department contact persons can be organised. These contact persons will be informed in advance about the content of the discussion so that when the researcher visits the Region all the data and information are already available in preparation for the questions to be asked. The added value of the focus group/interviews will be the possibility of discussing the material in greater depth (data, information, documents).

# Definition of active ageing adopted by the project

Given the broad, multi-dimensional and cross sector implications of the concept, in our project we have adopted a broad and flexible definition of "active ageing". The starting point is the definition by the World Health Organization (WHO) of active ageing as "the process of optimising opportunities for health, participation and security, in order to enhance quality of life as people age". In our project, active ageing has been operationalised as a set of employment, social, training and entertainment activities carried out by older people (65 years and above) including those in the following areas: social participation, training and lifelong learning, work, culture and tourism, sport and free time, informal care (care giving for other dependent persons and grandparenting for the care of grandchildren), farming and gardening, civil and voluntary engagement, co-housing, as well as any other field relating to the activity of older people. The general nature of the activities in question is intentional in order to leave open the discussion to any field that may be considered useful and appropriate.

Cross sector elements have also been considered such as: intergenerational relationships, transport, health conditions, gender, qualifications, income etc. These aspects are also useful for an assessment of the objectives (and 10 commitments) of the *Madrid International Plan of Action on Ageing* of the United Nations - MIPAA) and the 9 Sustainable Development Goals -(SDG) related to it.

We have emphasised the importance of excluding, within this project, the mapping and analysis of policies on actions and interventions directed at the older person as an exclusively passive individual, in need of health and/or social care. The project deals with active ageing and therefore concerns the activation of older people, including those individuals in poor/precarious conditions of health.

<sup>&</sup>lt;sup>45</sup> By way of example, the topic guide used in the Regions and Autonomous Provinces is provided, specifying that, in the Ministries and Departments, an almost identical topic guide was adopted, requiring minimal adjustments.

#### **REFERENCE QUESTIONNAIRE**

0) In this Region, how many and which departments are there?

If relevant, note also any particular situations, such as, for example: replacement councillors during the legislature, receiverships, etc.

# **RECOGNITION OF THE LEGISLATION ON ACTIVE AGEING**

1a) How is the concept of active ageing interpreted in this Region? How do you think it is applied at the level of legislation and policy?

1b) In your opinion, can active ageing be addressed by a single specific law that takes into account, organically and transversally, all the areas already mentioned (for example, social participation, training and lifelong learning, employment, culture and tourism, sports and free time, informal caring, farming and gardening, civil and voluntary commitment, co-housing etc.)?

2) Has a law with these characteristics been approved and adopted in this Region?

If YES, use FORM A (interview with/the contact person/manager/official involved in implementing/monitoring the law). At the end of FORM A, continue with the following questions.

#### If NO:

3) Does a draft law with these characteristics exist? (If yes, find it and ask for any news about the contents, promoters, obstacles and/or assumptions relating to its possible approval, timings; at the end, continue with the following questions)

WARNING: Even if there is legislation dealing with active ageing from a cross-sector perspective, the following questions must in any case be asked in order to verify the existence of other laws that may a) fully or b) partially (for example, individual articles or paragraphs) affect active ageing. An example of a) could be a regional law on the universities of the third age (or on the civil service or volunteering of older people etc.). An example of b) could be a law on social services that may contain an article (or even just a paragraph) on the subject, for example, support for volunteering in old age etc.

4) Beyond the presence of legislation aimed at the cross-sectional promotion of active ageing, the individual areas of active ageing could also be addressed through dedicated laws. Do laws with these characteristics exist in this Region?

CHECK: labour market; volunteering; training; informal assistance (for example, care giving, grandparenting); sports; free time activities; cultural activities; tourism; gardening/horticulture; co-housing; every other possible area relating to the activation of older people.

If YES, use FORM B (to be used and repeated with any law of this kind that may be present - identifying each time the contact person/manager/official involved in implementing/ monitoring the law). At the end of FORM B, continue with the following questions.

*If NO, continue with the following questions.* 

5) The individual areas of active ageing may also be addressed through articles or paragraphs of laws that do not have active ageing as the main object. Do examples of laws with these characteristics exist in this Region?

If YES, use FORM C (to be used and repeated with any law of this kind that may be present - identifying each time the contact person/manager/official involved in implementing/monitoring the law). At the end of FORM C, continue with the following questions.

*If NO, continue with the following questions.* 

# **RECOGNITION OF POLICIES NOT DIRECTLY LINKED TO THE ABOVE REGULATIONS**

6) Even in the absence of specific regulations on the subject, the theme of active ageing can be dealt with through other specific policies that result in actions in this area, different to those so far addressed. Do policies of this type exist in this Region?

If YES, use FORM D (to be used and repeated with any policy of this kind that may be present - identifying each time the contact person/manager/official involved in implementing/monitoring such a policy). At the end of FORM D continue with the following questions.

*If NO, continue with the following questions.* 

7) On the theme of the promotion of active ageing, how can the national government and the various central institutions be of help to the Regions?

8) Do you think that a national framework law on active ageing could be useful? (*If yes, in what way/why/which characteristics should it have?*)

9) Do you have any further suggestions or observations on this matter?

# FORM A<sup>46</sup>

# FOR CROSS SECTOR LAWS ACROSS THE VARIOUS AREAS OF ACTIVE AGEING THAT REGULATE THE SUBJECT ORGANICALLY

Questions must be asked after a careful examination of the law. The information objectively present in the law must be discussed with the contact persons in order to examine if and how the law finds effective application.

- A.0 a) Title of the law and date of entry into force:b) What were the reasons that led to the drafting and approval of the law and which actors (for example, political figures, trade unions, voluntary organisations) have played a decisive role in this process?
- A.1. a) Is it a system law, cross sector among the different departments, or:b) is it the responsibility of one single department and, in that case, which?
  - If a) A1.1 Do you find this thing useful/effective? What are the positive and negative sides to it? A1.1.1 Is this law connected to other laws (or articles of other laws)? If yes, to which and in what way?
  - If b) A1.2 In your opinion, is it plausible that the theme involves only one department, or would it be better to address it across the board with other departments?

A.2 Which areas of active ageing does the law take into consideration?

CHECK: labour market; volunteering; training; care giving, grandparenting; sports; free time activities; cultural activities; tourism; gardening/horticulture; co-housing and every other possible area.

Where the area of the labour market is considered, ask:

A.2.1 Does the law take into consideration the role of the Comitati Unici di Garanzia (CUG) (single guarantee committees) for public bodies? If yes, in what way?

A.2.2 In what way does the law promote adaptation of the social protection system in response to demographic changes and to their socio-economic consequences?

A.3 Regarding the programming of operations, are consultation/co-ordination tools planned (such as, for example, a "permanent regional table for active ageing" or similar)?

*If YES to question A.3, continue with questions A.4-6 and then with the next ones:* 

A.4 What category of stakeholders does this table comprise? What role does each of the category of stakeholder have?

A.4.1 (if it hasn't already arisen) Does the law take into consideration the involvement of regional civil society organisations? If appropriate, which and how?

A.4.2 (if it hasn't already arisen) Does the law take into consideration the involvement of General Practitioners (GPs)? If yes, how?

<sup>&</sup>lt;sup>46</sup> As an example, only form A is provided as it is the most complete and the other forms (B, C and D) are derived from it.

- A.5 Overall, does the table work or are there any weaknesses? What are the positive and negative sides of management through a table, and which aspects could be improved?
- A.6 Do you consider a comparison between the different categories of stakeholders is useful? What is the added value of this?

If NO to question A.3, continue with the following questions.

- A.7 Does the law take into consideration the interaction with levels of local government or with regional institutions (for example, Territorial Areas, Municipalities, Local Health Authority etc.)?
- A.8 Does the law consider the link with the regional prevention plan? If yes, in what way?
- A.9 What are the mechanisms of the law? For example, are there any annual/multiannual programming plans? Are there periodic calls for projects or other mechanisms to fund the interventions?
- A.10 What resources have been dedicated so far to the law, year by year?
- A.11 To what use are the resources usually put?A.11.1 Are there areas which are funded more frequently? If yes, which and why?
- A.12 Do you believe that the resources allocated are sufficient? For example, in your experience, when planning interventions, do you have to limit them because of the scarcity of resources?
- A.13 Do you believe that the law is applied correctly? Are there any critical issues or shortcomings in its application?
- A.14 Overall, do you believe that the law is effective? What are the most positive aspects and those which could be improved?
- A.15 Does the law consider the following cross-sector aspects? If yes, how does this take place?A.15.1 Relations between different generations
  - A.15.2 Transport
  - A.15.3 Health conditions of older people
  - A.15.4 Gender and/or equal opportunity aspects
  - A.15.5 Socio-cultural aspects and/or ethnic background
  - A.15.6 Socio-economic status (level of qualifications, income)
  - A.15.7 Areas of residence (for example, differences between rural and urban areas)
  - A.15.8 Social innovation practices and interventions
  - A.15.8 Course of life
  - A.15.10 Health promotion
  - A.15.11 Physical accessibility
  - A.15.12 Other? Specify
- A.16 Within this law, is any special attention given to the elimination of stereotypes, violence and abuse against seniors?

- A.17 Does the law in some way consider the aspect of health and social integration?
- A.18 In your opinion, which actions should be put in place in the medium term to consolidate or strengthen the implementation of policies to support active ageing in your Region?

# **CONTACT INFORMATION**

The contact person of the project team for the Region\_\_\_\_\_\_ is: First Name and Surname of the researcher

The main contact person for the Region\_\_\_\_\_\_is: First Name and Surname Position Affiliation (unit/department) Address Email: \_\_\_\_\_\_ Telephone number: \_\_\_\_\_

#### Appendix 3: List of institutions investigated

In the following table, we have provided the list of the public institutions (Ministries, Departments at the Presidency of the Council of Ministers, Regions and Autonomous Provinces) into which research of active ageing policies was conducted, together with the names of the editor(s) of the individual reports (affiliated to IRCCS INRCA, DIPOFAM and INAPP). All the reports can be found on the project website, on the following web page: <a href="http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale">http://famiglia.governo.it/it/politiche-e-attivita/invecchiamento-attivo/progetto-di-coordinamento-nazionale</a>

Foreign Affairs and International Co- operation       Giovanni Damiano, IRCCS INRCA         Environment and Protection of Land and Sea       Simona Montagnino, DIPOFAM         Cultural Heritage and Activities and Tourism       Simona Montagnino, DIPOFAM         Economy and Finance       Luisa D'Agostino, INAPP         Interior       Margherita Villa, IRCCS INRCA, and Delia Amari, DIPOFAM         Education       Giuliana Scarpetti, INAPP         Labour and Social Policies       Pietro Checcucci and Roberta Fefè, INAPP         Agricultural, Food and Forestry Policies       Maria Luisa Aversa, INAPP         Health       Pietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPP         Economic Development       Giovanni Damiano, IRCCS INRCA         DEPARTMENTS PCM       REPORT RESPONSIBLE/S         Youth Policies and the Universal Civil Service       Delia Amari, DIPOFAM         Family Policies       Delia Amari, DIPOFAM         Sports Office       Delia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCA         Basilicata       Claudia Di Matteo, IRCCS INRCA         Bolzano AP       Francesco Barbabella, IRCCS INRCA         Balcata       Claudia Di Matteo, IRCCS INRCA         Emilia-Romagna       Francesco Barbabella, IRCCS INRCA         Emilia-Romagna       Francesco Barbabella, IRCCS INRCA         Liguria       Eralbace	MINISTRIES	REPORT RESPONSIBLE/S
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Education       Giuliana Scarpetti, INAPP         Labour and Social Policies       Pietro Checcucci and Roberta Fefè, INAPP         Agricultural, Food and Forestry Policies       Maria Luisa Aversa, INAPP         Health       Pietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPP         Economic Development       Giovanni Damiano, IRCCS INRCA         DEPARTMENTS PCM       REPORT RESPONSIBLE/S         Youth Policies and the Universal Civil Service       Delia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCA         Equal Opportunities       Simona Montagnino, DIPOFAM         Family Policies       Delia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCA         Sports Office       Delia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCA         Basilicata       Claudia Di Matteo, IRCCS INRCA         Bolzano AP       Francesco Barbabella, IRCCS INRCA         Campania       Francesco Barbabella, IRCCS INRCA         Eralba Cela, IRCCS INRCA       Eralba Cela, IRCCS INRCA         Caudia Di Matteo, IRCCS INRCA       Eralbacela, IRCCS INRCA         Campania       Claudia Di Matteo, IRCCS INRCA         Errilia-Romagna       Marco Socci, IRCCS INRCA         Friuli-Venezia Giulia       Claudia Di Matteo, IRCCS INRCA         Lagio       Giovanni Damiano, IRCCS INRCA         Lagio       Giovanni Damiano, IRCCS INRCA <td>Economy and Finance</td> <td>Luisa D'Agostino, INAPP</td>	Economy and Finance	Luisa D'Agostino, INAPP
Labour and Social PoliciesPietro Checcucci and Roberta Fefè, INAPPAgricultural, Food and Forestry PoliciesMaria Luisa Aversa, INAPPHealthPietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPPEconomic DevelopmentGiovanni Damiano, IRCCS INRCA <b>DEPARTMENTS PCMREPORT RESPONSIBLE/S</b> Youth Policies and the Universal Civil ServiceDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCSSports OfficeINRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALagioGiovanni Damiano, IRCCS INRCALagioClaudia Di Matteo, IRCCS INRCALagioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCA	Interior	Margherita Villa, IRCCS INRCA, and Delia Amari, DIPOFAM
Agricultural, Food and Forestry PoliciesMaria Luisa Aversa, INAPPHealthPietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPPEconomic DevelopmentGiovanni Damiano, IRCCS INRCADEPARTMENTS PCMREPORT RESPONSIBLE/SYouth Policies and the Universal Civil ServiceDelia Amari, DiPoFam, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAEmilia-RomagnaFrancesco Barbabella, IRCCS INRCALiguriaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMultaFrancesco Barbabella, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMultaFrancesco Barbabella, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASicily<	Education	Giuliana Scarpetti, INAPP
HealthPietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPPEconomic DevelopmentGiovanni Damiano, IRCCS INRCADEPARTMENTS PCMREPORT RESPONSIBLE/SYouth Policies and the Universal Civil ServiceDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCSREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALaguiaEralbaCela, IRCCS INRCALaguiaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALaguiaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMarcheFrancesco Barbabella, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseFrancesco Barbabella, IRCCS INRCASidilyEralbaCela, IRCCS INRCAMarcheMarco Socci and A	Labour and Social Policies	Pietro Checcucci and Roberta Fefè, INAPP
Economic DevelopmentGiovanni Damiano, IRCCS INRCADEPARTMENTS PCMREPORT RESPONSIBLE/SYouth Policies and the Universal Civil ServiceDelia Amari, DiPoFam, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCSREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarco Socci, IRCCS INRCAEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCASicilyEralbaCela, IRCCS INRCASicilyEralbaCela, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCAYoutinaAndrea Principi and Claudia Di Matteo, IRCCS INRCAYoutinaFrancesco Barbabella, IRCCS INRCAYoutinaAndrea Principi and Claudia Di Matteo, I	Agricultural, Food and Forestry Policies	Maria Luisa Aversa, INAPP
DEPARTMENTS PCMREPORT RESPONSIBLE/SYouth Policies and the Universal Civil ServiceDelia Amari, DiPOFam, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCSREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAErilia-RomagnaMarco Socci, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALobardyEralbaCela, IRCCS INRCAMarcheMarco Socci, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASicilyEralbaCela, IRCS INRCASicilyEralbaCela,	Health	Pietro Checcucci, Roberta Fefè and Valeria Iadevaia, INAPP
Youth Policies and the Universal Civil ServiceDelia Amari, DiPoFam, and Giovanni Damiano, IRCCS INRCAEqual OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCSINRCANRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCALiguriaClaudia Di Matteo, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaClaudia Di Matteo, IRCCS INRCAMarcheMarco Socci, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASicilyEralbaCela, IRCCS INRCATrento AP	Economic Development	Giovanni Damiano, IRCCS INRCA
Equal OpportunitiesSimona Montagnino, DIPOFAMFamily PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAErilla-RomagnaMarco Socci, IRCCS INRCALiguriaClaudia Di Matteo, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcoSocci and Andrea Principi, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	DEPARTMENTS PCM	REPORT RESPONSIBLE/S
Family PoliciesDelia Amari, DIPOFAMSports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCALiguriaClaudia Di Matteo, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcoSocci and Andrea Principi, IRCCS INRCAMorcoSocci and Andrea Principi, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Youth Policies and the Universal Civil Service	Delia Amari, DiPoFam, and Giovanni Damiano, IRCCS INRCA
Sports OfficeDelia Amari, DIPOFAM, and Giovanni Damiano, IRCCS INRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAErrilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALagioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCA	Equal Opportunities	Simona Montagnino, DIPOFAM
INRCAREGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Family Policies	Delia Amari, DIPOFAM
REGIONS AND AUTONOMOUS PROVINCESREPORT RESPONSIBLE/SAbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCANoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Sports Office	Delia Amari, DIPOFAM, and Giovanni Damiano, IRCCS
AbruzzoEralba Cela, IRCCS INRCABasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCAYFrancesco Barbabella, IRCCS INRCAMarcheMarces Obsci and Andrea Principi, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA		INRCA
BasilicataClaudia Di Matteo, IRCCS INRCABolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	<b>REGIONS AND AUTONOMOUS PROVINCES</b>	REPORT RESPONSIBLE/S
Bolzano APFrancesco Barbabella, IRCCS INRCACalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Abruzzo	Eralba Cela, IRCCS INRCA
CalabriaClaudia Di Matteo, IRCCS INRCACampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarceMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Basilicata	Claudia Di Matteo, IRCCS INRCA
CampaniaFrancesco Barbabella, IRCCS INRCAEmilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Bolzano AP	Francesco Barbabella, IRCCS INRCA
Emilia-RomagnaMarco Socci, IRCCS INRCAFriuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Calabria	Claudia Di Matteo, IRCCS INRCA
Friuli-Venezia GiuliaClaudia Di Matteo, IRCCS INRCALazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Campania	Francesco Barbabella, IRCCS INRCA
LazioGiovanni Damiano, IRCCS INRCALiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Emilia-Romagna	Marco Socci, IRCCS INRCA
LiguriaEralbaCela, IRCCS INRCALombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Friuli-Venezia Giulia	Claudia Di Matteo, IRCCS INRCA
LombardyEralbaCela, IRCCS INRCAMarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Lazio	Giovanni Damiano, IRCCS INRCA
MarcheMarco Socci and Andrea Principi, IRCCS INRCAMoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Liguria	EralbaCela, IRCCS INRCA
MoliseClaudia Di Matteo, IRCCS INRCAPiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Lombardy	EralbaCela, IRCCS INRCA
PiedmontEralbaCela, IRCCS INRCAApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Marche	Marco Socci and Andrea Principi, IRCCS INRCA
ApuliaFrancesco Barbabella, IRCCS INRCASardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Molise	Claudia Di Matteo, IRCCS INRCA
SardiniaAndrea Principi and Claudia Di Matteo, IRCCS INRCASicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Piedmont	EralbaCela, IRCCS INRCA
SicilyEralbaCela, IRCCS INRCATuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Apulia	Francesco Barbabella, IRCCS INRCA
TuscanyFrancesco Barbabella, IRCCS INRCATrento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Sardinia	Andrea Principi and Claudia Di Matteo, IRCCS INRCA
Trento APFrancesco Barbabella, IRCCS INRCAUmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Sicily	EralbaCela, IRCCS INRCA
UmbriaMarco Socci and Andrea Principi, IRCCS INRCAValle d'AostaClaudia Di Matteo, IRCCS INRCA	Tuscany	Francesco Barbabella, IRCCS INRCA
Valle d'Aosta Claudia Di Matteo, IRCCS INRCA	Trento AP	Francesco Barbabella, IRCCS INRCA
	Umbria	Marco Socci and Andrea Principi, IRCCS INRCA
	Valle d'Aosta	Claudia Di Matteo, IRCCS INRCA
		Francesco Barbabella, IRCCS INRCA