

Covid-19 and Politics in Italy: Solidarity between health and non-health sector

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ABSTRACT

The first European country was Italy to witness a big coronavirus spread and remains one of the countries that is most affected by disasters, and this is the country where the most extreme lockdown steps have been forced. It faced significant well-being and socio-economic problems. The government of Italy has introduced a broad range of measures at the national level, despite the varying incidences of the virus across the region. Results indicate that the strictness of containment and alleviation initiatives has performed an important part in combating the Covid pandemic from an economic and health perspective. Technological arbitration has played a key role due to the insufficiency of the arrangements and the hold up in their enactment. The purpose of this research paper is to investigate the different policies of the Italian government and its effect on health as well as non-health outcome, taking note of the impacts on families impacted by poverty and racism. Political leaders are the most portrayed participants, indicating a high degree of crisis activism. For executing this paper, I used a liberal approach to understand the analysis.

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INTRODUCTION

Novel coronavirus outbreak was announced on 11 March 2020 by the World Health Organization (WHO) (WHO, 2019). Governments have adopted several measures to acknowledge the quick rise in death and infection that have had major bleak impacts on society. Without the availability of the COVID-19 vaccine, countries depended on the health measures of non-pharmaceutical companies. The mixed experience of using technologies like contact chasing, Robots, and drones have performed a critical role in handling the situation but still, overall effectiveness is unresolved. The first case of coronavirus was announced in Italy on 31 January 2020 when two visitors from china staying in Rome tested Covid positive. After a week from this incident, an Italian man returned to his country from the city of Wuhan, China, was immediately hospitalized due to harsh symptoms and recognized as the third case in the country (Elisa Anzolin, 2020). Italy overtook China on 19th March 2020 in terms of deaths and the spiral of infections. Immediately after this, rigid restrictions were placed on industrial and commercial activities. The effect of the virus is more severe in the regions of the north, mild in central and south regions of Italy. In the initial phases of the Pandemic, the Government of Italy has implemented special measures for the most vulnerable regions. Being despite the varying magnitude of the spread, the policy measures were applied homogeneously to all areas. To understand the problem of COVID-19 and Politics in Italy, I would like to take a liberal approach.

The remainder of this research paper is arranged in the following manner. In Section-2, I describe the Economic and Demographic profile of Italy's population. Section-3 addresses the study of virus observational trends at provincial and national levels. Policies for the health sector and poor families are analyzed in Section-4.

ECONOMIC AND DEMOGRAPHIC PROFILE

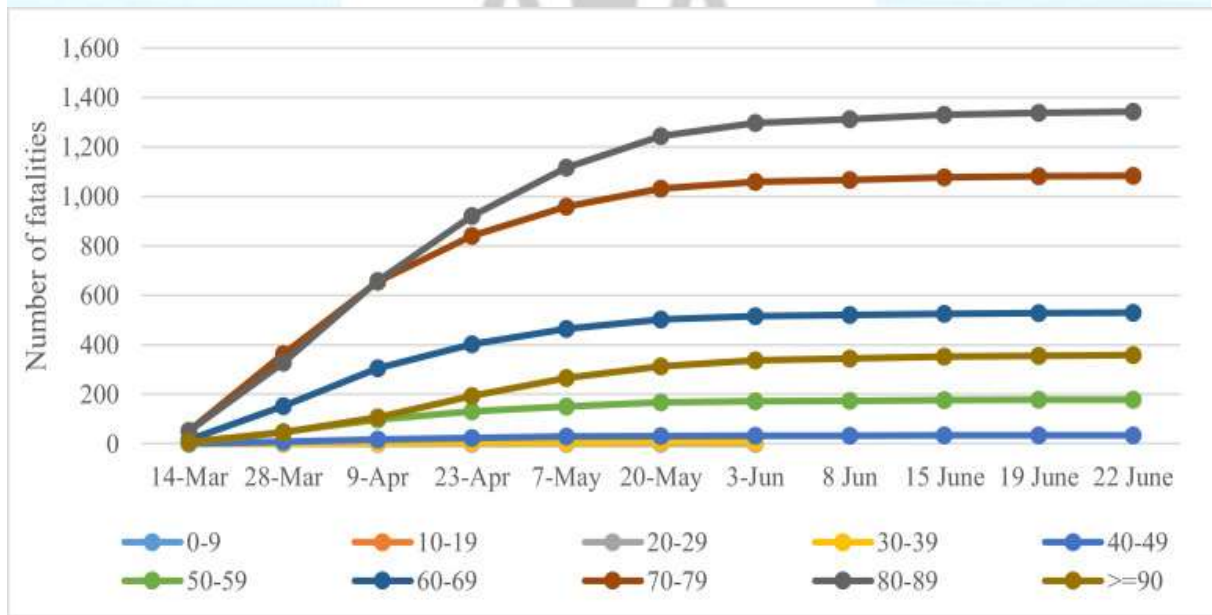
The most populous and one of the largest countries in Europe is Italy with a population of 60 million and 300,000 km². This parliamentary republic country is the eighth largest economy in the world which has a multi-level governing structure with 107 provinces, 20 administrative regions, and metropolitan cities. The constitution of Italy considers health as a universal right that should also be given to vulnerable citizens. Healthcare spending amounts to 8.8% of GDP (OECD Trento, 2020). The life expectancy of Italy is 83.6 years which is second highest among European countries and eight in the world (European Commission, 2020). Due to this reason, Italy has the second oldest population. Moreover, the longevity of Italy is connected with the Morbidity rate which is 40% of the total residents who have a long-standing disease. The main

factors associated with covid-19 is age and morbidity. Of the deaths reported during the study period, 96.0% of the population were older than 60 years and 96.0% had at least one serious condition (EpiCentro, 2020).

Considering the effect of non-pharmaceutical treatments on life-loss years, I measure the contrast between the Italian population's life expectancy (83.6 years) (Life expectancy at birth, total (years) Data, 2020) and the estimated pre-lockdown age (80 years) of 3.6 years (end of first quarter) and the difference between the Italian population's life expectancy (83.6 years) and the average pre-lockdown age (82 years) of 1.6 years (EpiCentro, 2020). This finding indicates that as a result of the lockdown, the years of life lost are declining.

Diagram-1

The proportion of people dying in the lockdown due to COVID-19 (14 March 2020 – 23 June 2020)



Distribution of deaths by age, (14 March 2020 – 23 June 2020) (Berardi et al., 2020)

REVIEWING THE COVID-19 POLITICAL EFFECTS

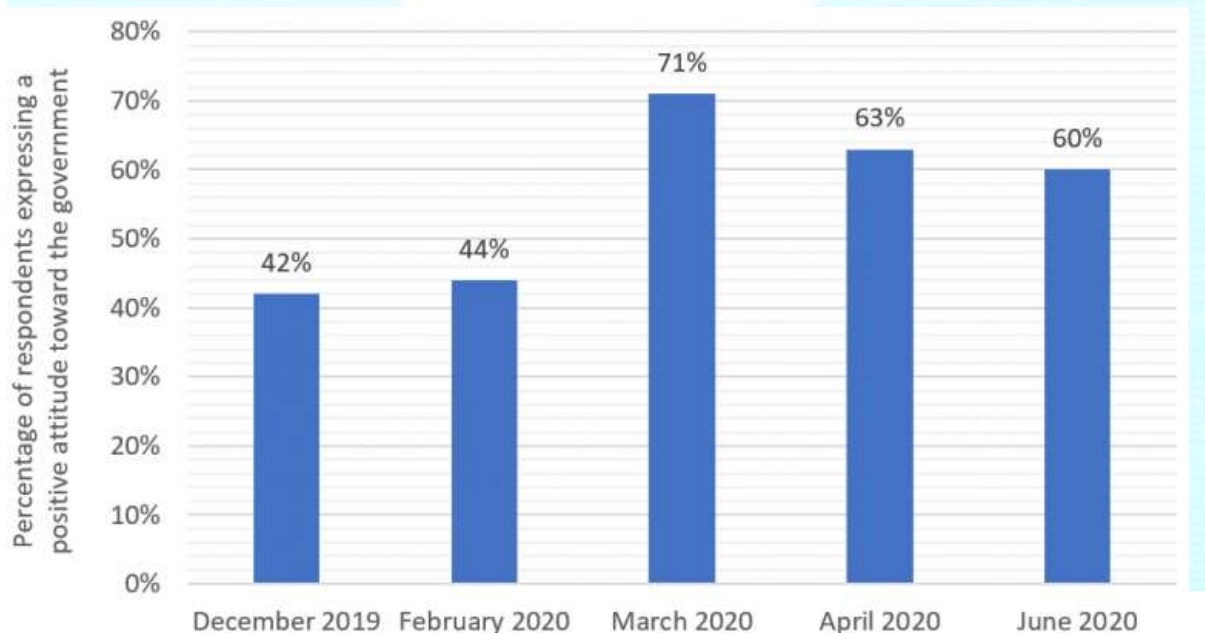
For various forms of groups, Coronavirus was the biggest topic on the political agenda. Co-ordination between the center and the regions was partly successful. There were many differences between the central government and the state government, as well as ambiguity over the conflicting central and local government. There were many instances in which we can

see the impact of COVID-19. There is no defined legislative structure regulating emergencies in Italy. The Italian Constitution of 1948 does not include any specific clauses concerning neutral (epidemics), technological (financial collapse), or political crises other than war in its conventional sense, upholding the liberal tradition and bearing in mind the serious consequence of fascism.

Initially, COVID-19 successfully raised confidence in the administration. 42 percent of Italians had a good view of the administration in December 2019. This percentage increased to 71 percent in February 2020 (EpiCentro, 2020). The trend exchanged in April, the number of those who used to see the government in a good view declined favorably to 60 percent. Despite this, the government's valuation has to stand much higher than in the pre-crisis era. The pandemic reminds liberals of the contrast between limited government and ineffective government, so it should strengthen our conviction that liberal democracy is superior to totalitarianism and that free markets are supreme to state monopolies.

Diagram-2

The proportion of people who have a good government attitude in Italy (December 2019 to June 2020)



Source: Demos & Pi

COVID-19 has made an effective view of the Italians on the way they see government. Though this caused some changes that are of less importance. Lega Nord introduced no such vote

against Conte after the 2019 European Parliament referendum, where Lega Nord surpassed the Five Star Movement, and the spike in tensions within political parties, so the Prime Minister withdrew. In a minority government between the Five Star Movement and the Democratic Party, headed by the current Secretary, Nicola Zingaretti, President Mattarella reelected Conte as Prime Minister after the latest meetings. Now, there are two important aspects. First, Italy's domestic politics, and second, the relation of Italy with the European Union.

Domestic Governance

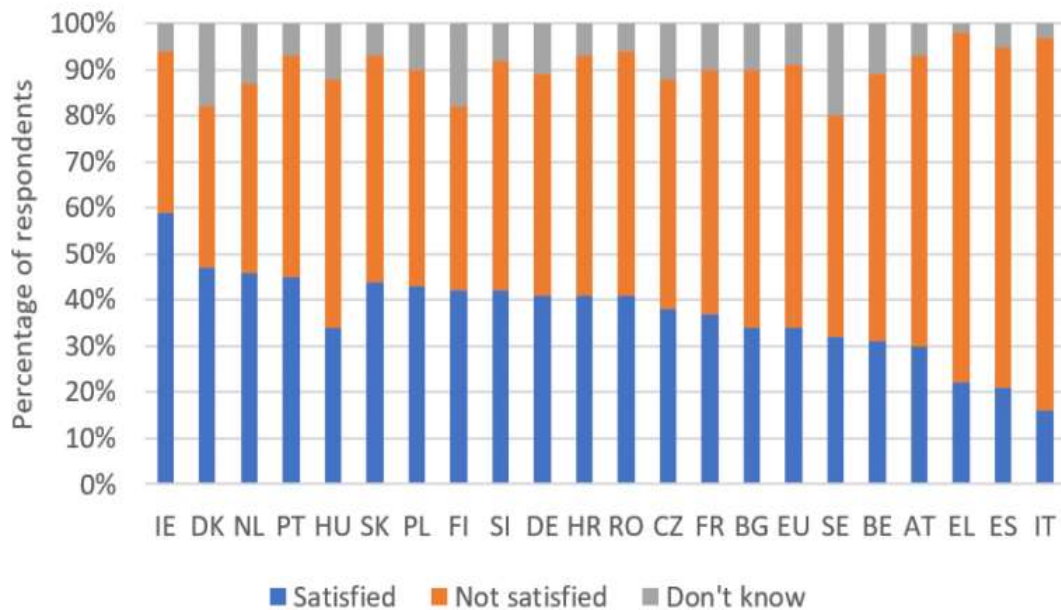
From December 2019 to June 2020, there are some important observations in the opinions of the people of Italy in respect of political leaders of the moment. Not unexpectedly, Prime Minister Giuseppe Conte has consolidated his status as the most admired head. Giorgia Meloni, the head of the neo-nationalist Fratelli d'Italia, who took her party from 7 percent in the polls of 2019 to 14 percent by June in 2020, suffered drop-in support and was succeeded by Matteo Salvini, who for the past two years has been one of the main players in politics of Italy. In addition, thanks to his role in the pandemic, Luca Zaia, a significant member of the Salvini Lega and Veneto region's president, significantly enhanced his position.

Connection of Italians with EU

The views of Italians towards the EU were negatively affected by COVID-19. Italy has been the least interesting European country in terms of 'cooperation,' according to data from the European Parliament published in June. Only 1-6% of Italians assumed that the EU Member States had given each other sufficient cooperation during the crisis (European Parliament, 2020). Likewise, with regard to the EU's concrete reaction to the crisis, Italy was the least respected country. The number of Italians who appreciated the measures that the EU had taken is very less.

Diagram-3

How happy or disappointed are you with the EU Member States' unity in the fight against the coronavirus pandemic?



Source- European Parliament (June 2020)

INITIATIVES IN POLICY AND INNOVATIONS

Due to the lack of availability of the vaccine, the country has to adopt certain measures and policies like lockdown and isolation to stop the outbreak. Coupled with the complex observational occurrence at the national level, the distributed existence of the Italian health care system has generated the need for such a varied collection of policies that adapt to changing trends rather than each solution. Categorization of different policies are listed below:

- Measures to restrict the transmission of the COVID-19 (conduct, isolation, mitigation).
- Involvement of technology for Rapid testing, finding, and treating.
- Drone action by the city cops to check compliance with the applicable legislation of lockdown.
- In such a situation, the appropriate decisions to escape a financial crisis require a trade-off between public welfare and economic growth.

POLICY RESPONSE FROM THE HEALTH CARE SECTOR

Italy's health sector is a regional national health service identified as Servizio Sanitario Nazionale in Italy (SSN) which offers individuals and people universal coverage, with public hospitals completely free of cost. Public health initiatives are the responsibility of the central government, but the governance of the Italian healthcare sector has prevented the introduction of a uniform policy. The systems of healthcare differ in terms of the organization like Private vs Public. The administration encouraged the immediate rise in the beds of all hospitals in all areas by 50 percent in Intensive Care Units and 100 percent in respirology and contagious

infection wards after a regulation introduced on 1 February 2020. In order to decrease the problems of the healthcare sector, the initiative included the transfer of sick patients to approved institutions. The National Health System (NHS) consists of 20% beds of private and 80% of government, by major geographical disparities, varying from 21.2% of Lombardy's public beds to 97.9% in Basilicata (Italian hospital epidemiological, 2020). More such details on medical conditions do not come from the existing data. The duration, departure, and mortality rate details of patients are needed to completely assess the quality of the health center and the healthcare policy introduced by the Italian administration (Richardson et al., 2020). As of 17 March 2020, the national budget of Italy increases to 1.4 billion euros. For the execution of the Aid Distribution System, the Italian government spent 356 million euros (Sebastiani, Massa, and Riboli, 2020). The government also provided 4532 ventilators between 24 March and 19 April 2020, of that which 15 percent passed to Lombardy and 13 percent to Emilia Romagna. The government agreed to EUR 660 million to employ 20,000 medical professionals on a six-month agreement under a law enforced on 9 March 2020 (Grasselli, Pesenti, and Cecconi, 2020). If liberal democracy struggles to produce economic stability over large periods for an adequately significant portion of the population, it ends together with its financial and economic institutions.

POLICIES TO SUPPORT POVERTY-RISK FAMILIES, WORKERS, AND BUSINESSES

The purpose of such a series of initiatives was to encourage local, small, and medium-sized businesses, in particular, through the financial sector, access to funds, and credit exposure (OECD Trento, 2020). The huge length of the banks and tough administration procedures made the difficult for the Italians in accessing the money. Postponement of reimbursement obligations for taxes and penalties, and occupational sanitation benefits and compensation for workers staying in service have been given (OECD Trento, 2020). Mother and father with kids under the age of 12 have been approved to take a vacation for up to 15 days, earning 50% of the state's income. A €25 billion package provided funding for private-sector employees to support babysitters by a childcare discount coupon of up to €600 for workers with infants under 12 years of age who do not want to get approval for maternity leave (Gentilini et al., 2020). For staff in the health sector, the coupons may reach up to €1,000. Psychological support like the toll-free number has been made available in the month of April to help in the difficulties. That number is basically targeted for people who were suffering from distress, fears, tension due to

grief, economic challenges, an abrupt shift in everyday behaviors connected to COVID-19, including for deaf persons.

On 29 March, based on population and financial requirements, the National Civil Protection (NCP) distributed €400 million to the townships to buy groceries coupons, and some basic food requirements. It was open for local councils to decide how to choose recipients and how to buy goods. Some had given the money directly to the families, some other care providers, with high geographical variation, with the goal of evaluating the applicant's desires or their spending power. No provision of funding has been declared for the municipality human service market.

RACISM AND COVID-19

As a consequence of being infected with the coronavirus, citizens of Chinese origin are mistreated. Italy, which is experiencing the biggest infection of COVID-19 outside of Asia, has a Chinese workforce of more than 300,000. The country's unstable situation increased when racially intolerant remarks against Chinese citizens were made by a far governor of the northern Veneto region. Italy and China are shoulder to shoulder against the epidemic," the Chinese ambassador in Rome replied, "and many of our Italian friends do not agree with and even condemn, those comments.

CONCLUSION

Italy was greatly impacted by the spread of COVID-19, with substantial health and socioeconomic effects. This paper analyzed the government's collection of policy measures and their impact on health and other effects. The graphical analysis presented in the paper shows the cooperation by Italians with the government in handling the situation. In Italy, the ideas of liberalism are characterized as a progressive ideology because people support the government even in the most difficult times. There was a mind-set of liberals that private and social behaviour should not be regulated by the government. As in the ideology of liberalism (Acharya, 2020), John Rawls suggested that the presence of people is stronger and more real than the whole system of society, but that is not true since individuals live before the community and thus their interests come before the community's rights and that resolve the issue of the allocation of resources in society after the lockout. The financial sector helped the poor people in accessing funds and exposure to credit in difficult times and providing people with equality, individuality, and equal justice in handling the situation (Political Theory, 2020).

In Italy, COVID-19 did not spark a constitutional crisis because Italy is a liberal State which responded to every difficult situation in a successful way. However, the pandemic has the power to have long-term adverse effects on the relation between Italy and the EU. Does Italy recognize a constitutional reform aiming at the implementation of an "emergency constitution"? This moment may not be the most suitable time to give a clear response, but after the crisis is over, this matter can surely be answered. As far as the healthcare system's stability is worried, representatives should work on upgrading infrastructure for development, treatment, and early action to avoid suicide and reduce the lengthy impact on the social wellbeing of individuals due to loneliness, social distance, and increased anxiety.



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