



# Italian Observatory on Healthcare Report 2016

*Health status and quality of care in the Italian Regions*

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Our country is gradually coming out of the economic crisis, the events of the past years have pointed out that all the social welfare and economic achievements cannot be taken for granted, but have to be defended with the power of ideas and political tools, and preserved through a proactive attitude both by the Institutions and its citizens.

The specter of the past economic crisis and the new scenarios introduced by economic globalization have shaken confidence in many ideas, including welfare sustainability and, in particular, Public Health Service, undermined by the lack of economic resources and a frequently inefficient management.

Spending efficiency and resource allocation were the focus of all reforms since 1992 until the fiscal federalism in 2001. The first reforms acted on health decentralization, through corporatization, of Local Health Authorities and hospitals, and established the fiscal responsibility of General Directors. The decentralization process was refined with the federal health reform, according to the principle of subsidiarity of the Italian Constitution.

The intention of the legislator was to bring the system governance closer to the citizens through concurrent legislative competences for State and Regions on Public Health, define the basic/essential healthcare needs (LEA, Livelli Essenziali di Assistenza) to be granted for the whole Italian country, establish coherence between regional economic resources (tax revenue) and health spending and activate an equalization fund according to the solidarity principle to rebalance the economic differentials among the Regions.

About fifteen years after the federal health reform, it could be helpful to undertake an assessment of the consequences. There is no doubt that Italian National Health Service (NHS - SSN, Servizio Sanitario Nazionale) has had good results and promoted a clear improvement in the population health status. At the same time, some failures cannot be denied: the “Southern question” has not been resolved yet and social disparities have widened.

To mention just some numbers, in 2015 the health expenditure per capita was on average 1.838 €, much higher in the Autonomous Province of Bolzano (2.255 €) and significantly lower in Southern Italy, especially in Calabria where it was 1.725 €. Analyzing one of the indicators, the under-70 mortality, which links survival to the effectiveness of healthcare services, it should be noted that territorial disparities are not only persistent, but also show a growing trend. In fact, from 1995 to 2013, if compared to national data, it can be observed that in the North under-70 years old mortality declined in almost all regions; in the central Regions it remained the same under the average value; in Southern Italy it increased noticeably, making the citizens of this area waste the health benefits that had been gained after the second World War.

Finally, as regards social disparities, in 2013 in the age group 25-44 the global prevalence of chronic patients was 4%, fell to 3,4% among graduates and increased to 5,7% among the poorly educated.

Osservasalute Report has contributed to these issues for years, bringing into focus some key points, through which we believe that it will be possible to shape the future, especially on the ability to sustain the current health status in the population and on the political stability of our NHS.

180 Authors, who have discussed an increasing number of issues and problematic aspects, have contributed to the creation of this Report.

The Report is structured as follows:

- **90 Core Indicators**, through which the essential health aspects of the Italian population and the health services in all the Regions of our country are described, also with the help of graphs, tables and cartograms;
- **23 Boxes**, focusing on some innovative experiences in some particular topics;

- **3 Analyses**, in which some key problems are discussed and possible solutions are presented (available on [www.osservatoriosullasalute.it](http://www.osservatoriosullasalute.it))

The recommendations of all the researches and experts who have contributed to the editing of this Report are aimed, on the one hand, to improve the system performance and, on the other hand, not to undermine all the efforts and results achieved over the years.

Most of the suggestions are based on the firm observation that population ageing will inevitably increase chronic diseases' prevalence and the need for social and healthcare assistance in the population. In response to this, experts hope for a shift from a "one-service" to a patient "take-charge" clinical approach. In this context, community care will play a fundamental role, to be implemented through an efficient system based on Primary Care.

Another decisive factor for the future of our Public Health, stressed by the contributors of this Report, is the importance of prevention and promotion of the healthy lifestyles. In fact, incidence rates of some forms of cancer point out some critical issues and depict a worrying picture for the future in absence of effective policies. Between 2003 and 2013 there was a substantial increase in tumors related to preventable diseases, and this shows how much work remains to be done to increase the efficiency of prevention, both to improve health conditions and preserve all the good that has been done in the past.

Finally, a major concern not to be disregarded is related to the political sustainability of our NHS, because resource allocation disparities and persistent social gaps are not only an ethical issue. Lower standards of quality in the offered services could undermine the principle of solidarity on which our welfare is based, subordinating the needs of population groups frustrated with tax burden to the weaker sections of society who experiment worse health conditions and difficult access to public healthcare.

For all these reasons, it would be desirable to revise the exemption criteria for the health expenditure contribution and to increase the efforts to fight the high tax evasion which affects our country and undermines the sustainability of the whole welfare state system.