Italy and the pandemic

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In late April, ever since 1945, the word on the lips of Italians has always been RESISTENZA. Accompanying it is a raft of preparations to celebrate our liberation from Nazi-Fascism. More in the North than in the South of the country, which for months was divided between the area liberated by the Allies (in the Center and South), and the area waiting to be liberated in the North, where the action of the partisans made possible the liberation, the birth of the Republic, and finally full democracy.

This year the words on the lips and in the minds of everyone are virus, pandemic, lockdown. Two situations have been intertwined: the official ceremonies, which were for the most part virtual, accompanied by the solitary rites of the civilian authorities before the monuments and graves of the partisans, conjugated the anti-fascist Resistance with a message of resistance to the virus. The two contexts have their obvious differences: the first being an active fight of the people for freedom against a real, identifiable enemy; while the second is a passive defense against an intangible, unknown enemy. This second enemy is very hard to fight.

I am living my own resistance to the virus in Bergamo, a medium-size city by Italian standards, in the heart of a province with one of the greatest densities of manufacturing in Europe. Today Bergamo has another record: it is the city and the province in Lombardy most intensely and painfully struck by the virus; Lombardy, the richest region of Italy, and the most afflicted of the Italian regions, and Italy, the county most afflicted by the virus in Europe: a record we would have gladly done without.

What has happened in Bergamo and Lombardy is emblematic of the way the pandemic has been managed in Italy, although the virus is affecting the twenty Italian regions with varying degrees of intensity. Some regions have been affected more intensely, perhaps because they are more industrialized, more connected, more open to import-export activities, and more polluted.... So once again the country is divided, as it was in the times of the Resistance: the North is the hardest hit, while the South is mainly safe.

And Lombardy is the region that has been the hardest hit.

Despite its cutting-edge industries, thirteen universities, and an acclaimed, proven capacity to manage the most diverse situations, starting with the regional healthcare system, the virus proved much stronger than Lombardy’s boastful administrators, who have been rigorously center-right for the past quarter century. Over the course of these 25 years, two healthcare reforms were passed that failed the moment they encountered their first major test. The pandemic took everyone by surprise, of course, but emergency plans should have been prepared for situations that do not warn of their arrival. In this case the warnings were there, but they were not heeded. In some realities they were even silenced, for fear of a negative impact on the economy and industry. And the emergency plans were inadequate to the situation: there were always other priorities.
In Italy the lockdown was decreed on March 11, exactly 20 days after the discovery of the first cases of COVID-19 in Codogno, a small town in the province of Lodi, 65 km from Bergamo, although strange cases of pneumonia had been circulating for weeks, raising suspicions that the virus had arrived. The lockdown was accompanied by social distancing and the requirement that people use personal protective equipment such as surgical masks, which were unfortunately unavailable except in modest quantities, generating a rush to acquire them and consequently a disproportionate increase in prices.

We paid a heavy price in terms of the persons struck by the virus: according to the official data for the last days of April, there were 200 thousand cases in Italy. As of that date, half of these people were still infected, a third had recovered, and more than 13% (26,675) had died. But the official data is unreliable, since the criteria adopted was based on the most available means of collecting data: only hospitalized persons were counted, with all the statistical consequences that follow. According to a projection by a data analysis agency (IN.TWIG) from a sample of 39 thousand registered users of a web app* to monitor the health of the citizens, 381 thousand citizens of Bergamo – 35% of the population – had COVID-19 symptoms; 104 thousand of them were potentially contagious. The same statistical approximation is true for the dead. The official death toll of three thousand in Bergamo and the province is almost doubled if we add the individuals who died at home or in the RSAs (residenze sanitarie assistenziali), the nursing homes where one third of all residents died, a tragedy within the tragedy. The nursing homes turned into de facto COVID-19 wards, also because they were asked to admit patients discharged from the hospitals, despite the obvious risks of transferring them.

These are the human costs and the heavy suffering induced by the pandemic, which was barely alleviated by the tireless efforts of healthcare workers, who in turn were poorly protected. They are being called heroes because they continued to work beyond all human limits, at the cost even of their lives. Many, many died in the effort to resist, to defeat this intangible and unknown enemy. A new Resistance.

We will be paying the economic costs of the pandemic for months and years to come. A third of productive activities and services have been closed, unemployment has spiked, the GDP has gone down, and the public debt has gone up: a good part of all this because of and in proportion to the delay in action by the national, regional, and local authorities, their failure to coordinate their action, and the often contradictory communications they issued. Nonetheless, the Italian people, after the initial shock, were disciplined in their response. The vast majority respected the new regulations, and manifested an admirable sense of responsibility. The response of the volunteer community has also been incredibly generous, providing for home services, assistance to the elderly, and enabling the construction in ten days of a hospital with a hundred and forty intensive care beds, which helped to address the emergency at its peak.

We will certainly pay for the delays, and perhaps for the World Health Organization’s deference to China in sounding the alarm, for the egotism (borders closures), and predominance of national interests (stockpiling of personal protective equipment) by some European Union Countries during the early phase of the pandemic. If we look at our own responsibilities, however, we have to admit that in the initial phase there was a lack of strategy, clear plans of action, and coordination. The healthcare system was encumbered by too many competing authorities: we have 21 different healthcare systems, one per region, that came about through an ill-conceived decentralization of the national system that has now revealed all its shortcomings.

The different approach taken by each regional healthcare system can be interpreted through the numbers of victims. The numbers are higher where regional services and basic medical care were neglected in favor
of specialized hospitals. The quality of a service that is purportedly universal should be measured not by points of excellence but by its capacity to meet the needs of the whole population. In Lombardy, where there is a concentration of high-level hospitals and support for private clinics, people died not because of the quality of care but because of the lack of beds in intensive care units and of ventilators, which can be found predominantly in the public sector. Because of this lack, doctors and nurses were sometimes forced to decide whom to give priority to, and understandably chose patients with a higher probability of surviving.

In the first days of May the second phase will be declared, providing for a loosening of restrictions thanks to a decrease in infections. During this phase people will be allowed limited movement, with the requirement that they wear facemasks and maintain social distancing. Businesses can open provided that they guarantee internal safety procedures. Some forms of individual sports will be permitted. Private funeral rites for family members, but not the celebration of funeral masses or celebrations, will be allowed. Schools will not reopen, and classes will continue to be taught remotely, via the web, where possible.

The Italian government is an anomalous alliance between center-left parties and the populist Five-Star Movement; until a few months ago the main coalition partner was the League (formerly the Northern League), in a center-right government made up of Five-Star Movement, League and Maie (Movimento Associativo Italiani all’Estero). After some initial delays, and uncertainties that are only understandable in part, the government adopted measures that were more consistent, in coordination with the regional and local governments.

We hope that this government will last, at the moment we cannot “afford” new elections, since there are still many fronts to address: the legal front, regarding limitations on individual freedom; the social front, stemming from the psychological effects of the confinement measures; the economic front, which will require brave measures to contain poverty, unemployment, and the inequalities heightened by the crisis; and the drama of domestic violence, since the data on the lockdown has revealed a very troubling picture of the situation.

The Socialist International is the family that brings together members from many countries of the world. For us, this pandemic must drive us to build a global front for action. The virus is striking the whole world and it is an absolute priority that, as soon as a vaccine is found, it be produced and distributed on a vast scale. More than two billion dollars will be needed to distribute it to every country as soon as it has been found. For everyone’s sake, we cannot ignore this dimension: perhaps the contagion, even if it has been overcome in our respective countries, could bounce back from other countries, in particular from the poorest countries. In essence, there is no safety in solitude. Solidarity, a fundamental value for our movement, is also in our common interest.

*The web app was designed for the Municipality of Bergamo and the Agency for Safeguarding Health of the Province

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