

IO R-ESISTO

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Work
in agriculture

AGAINST LABOUR EXPLOITATION

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Illegal brokering and exploitation of workers in agriculture may be stopped. Situations at risk may be unveiled through the collaboration between workers, farms, citizens and institutions. In this guide you will find the necessary information in order to understand the topic and enforce your rights.



Pay particular attention to risky situations and become aware of your rights and how to claim them.



Find useful information, institutional websites and contact details.



Follow cross-references in this guide and learn more about the topic.



Discover practical information and examples in order to better understand the topic.

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01

Work in agriculture

In agriculture you can find different types of jobs and workers. This guide is addressed to the workers who are employed by a farm or other organisation in the agricultural sector.

In particular, this guide is intended for those who perform manual labour for crop or animal farming.

Agricultural work is regulated by law and collective bargaining. In particular, trade unions (workers' representatives) and trade associations (employers' representatives) negotiate the National Collective Labour Agreement (CCNL).

This agreement defines the fundamental elements of the employment relationship between employers and workers (hours, wages, leave, holidays, relations between the parties, etc.). The agreement is usually valid for 4 years (while the agreement about salary is valid for 2 years).

There are several Agreements for agricultural workers. The most widespread agreement is the Agreement for Agricultural and Horticultural Workers for the years 2018-2021 which was agreed upon by the main trade unions (FLAI-CGIL, FAI-CISL, UILA-UIL) and by the associations of employers (Confagricoltura, Coldiretti, CIA).

Rights of the worker in agriculture

This agreement is the main reference about the employment relationship for fixed-term workers in agriculture. In this guide, any reference to the “National Collective Labour Agreement for Agricultural and Horticultural Workers” concerns this Agreement.

Agricultural workers can be hired on a fixed or permanent basis. The employment contract mentions no end date if agricultural workers are hired for an **indefinite** period of time. The employment contract mentions an end date if workers are hired for a fixed term to perform:

- **Short-term, seasonal or occasional jobs.** Workers can be hired to replace absent workers (absent workers have the right to maintain their jobs).
- **Several seasonal jobs and/or for several work phases per year.** The company is required to guarantee a number of days of employment exceeding **100 days a year**.
- **Fixed-term jobs. Hiring with a fixed-term employment contract** lasting more than **180 days** within the framework of an **ongoing employment relationship**.

Unlike in other sectors, the most frequent type of employment contract in agriculture is the fixed-term contract, it is the 'normal' or 'standard' employment contract. For this reason there are no limits on duration and extension.

In agriculture, **occasional job** (also known as **voucher-based job**) is possible for certain workers. This type of job is reserved only to workers who are:

- Holders of invalidity or old-age pensions.
- Young people under the age of 25 regularly enrolled in a cycle of upper secondary or university education.
- The unemployed (pursuant to the Legislative Decree no. 150/2015, art. 19).
- The recipients of wage supplementary benefits, inclusion income and other income support benefits.

It is important to remember that these workers must **not** have been registered in the register of agricultural workers in the previous year.

The employment contract

The employment contract is the agreement between the employer and the worker and is based on some essential elements that must be communicated to the worker before the beginning of the job.

The contract is usually a **written document** that the employer and the employee sign when a new job starts. The rights and the duties of the employer and the worker are written in the contract as well as the main elements of the employment relationship (such as, for example, salary, tasks – i.e. the type of work, such as: collection, packaging, etc. – working hours and place of work, day of rest and holidays). Specific rights and protections for the worker are established by law or collective agreements and are mentioned in the employment contract (see next chapter).



The employer is obliged to inform you about the conditions of the employment relationship and these conditions must respect your rights. Before you sign an employment contract, you may contact a trade union in order to better understand the contract and the rules of the collective agreement which apply to your contract. If you are forced to work without a contract, or the contract is not honoured, you may be in a situation where your employer is exploiting you. Violation of labour regulations is one of the indicators of labour exploitation.



For further information on labour exploitation, see chapter *Illegal employment and labour exploitation*.

The main trade unions have branch office in all the provinces, to find the closest branch office, please visit the following institutional websites:

- FLAI CGIL – <https://www.flai.it>
- FAI CISL – <https://www.faicisl.it>
- UILA UIL – <http://www.uila.eu>

Right to remuneration or salary

The worker has the right to receive remuneration for the work performed.

Right to training and safety

The employer must ensure that the work is performed in a safe place and must pay training courses on safety at work and medical examinations. The employer must provide all the necessary protections to work safely (i.e. PPE).



For more information on health and safety see chapter *Work safety*.

The weekly rest

All workers have the right to a weekly rest.

Agricultural workers have the right to a **weekly rest of 1 day (24 consecutive hours)**, if possible on Sundays (according to art. 35 of the Agreement for Agricultural and Horticultural Workers). If the worker is required to work on Sunday, the weekly rest will be allocated on another day of the week. Workers **under the age of 18** have the right to a weekly rest of at least **2 consecutive days (48 hours)** and including Sunday if possible (this period can be reduced on the basis of proven technical and organizational reasons, but cannot be less than **36 consecutive hours**).

Annual leave

All workers are entitled to paid annual rest.

Workers with a permanent employment relationship have the right to a period of paid leave of **26 working days** for each year of work performed at the same company (according to art. 36 of the Agreement for Agricultural and Horticultural Workers). For fixed-term workers, the calculation is more complex and is done on the basis of the calculation of the salary in accordance with the provisions of art. 49 of the Agreement for Agricultural and Horticultural Workers.

The employer must take into account the wishes and interests of the workers, when deciding the rest period, compatibly with the needs of the company.



If you feel that your employer does not respect your rights relating to pay, safety at work, weekly rest and annual rest, you can contact a trade union in order to understand what your rights are and what you can do. You risk being exploited by your employer.



For more information on labour exploitation, see chapter *Illegal employment and labour exploitation*.

Remuneration

The work you provide to your employer must be paid. Salary (also called “wage” or “pay”) is the amount of money your employer has to pay you each month. **The remuneration is paid the following month.**

The National Collective Labour Agreement (CCNL) regulates remuneration nationally on the basis of duties and tasks (i.e. the type of work indicated in the contract). The National Collective Labour Agreement is supplemented by a second-level Agreement, the Provincial Labour Agreement (CPL). Consequently, remuneration can vary on the basis of your location (i.e. remuneration can change according to the district where you work).

Remuneration is established in the employment contract (i.e. the contract signed by the worker and the employer) and cannot be lower than the remuneration mentioned in collective agreements. The employer is required to report the amount of the remuneration and to pay with a traceable payment method (i.e. for example by bank transfer or bank check).



The employer cannot pay in cash!

If you do not receive your remuneration, or your remuneration is below the contractual minimum or not proportionate to the work, or if the payment is done “in kind” or if room and board are deducted from your remuneration, you may be in a situation where your employer is exploiting you.



Violation of remuneration rules is one of the indicators of labour exploitation (see chapter *Illegal employment and labour exploitation*).

The pay slip is a document that the employer must give the worker every month. In this document the worker can find: the amount of money due for the work performed during the month, days of leave and permits accumulated and already used, charges and taxes paid by the employer. You receive both the pay slip and the payment the following month.

Daily and weekly working hours

The maximum limit of working hours protects the health and safety of agricultural workers. The law and collective agreements establish maximum limits of weekly working hours. **“Normal” working hours** are the hours indicated in the contract, which the employer and the employee must respect. **“Extraordinary” working hours** are hours worked beyond normal working hours and are paid with a surcharge.

The collective agreement and the employment contract regulate the number of normal working hours in agriculture for fixed-term agricultural workers. By law, working hours can never exceed the limit of **48 hours per week** (calculated over a period of 4 months).

The National Collective Labour Agreement for Agricultural and Horticultural Workers (Article 34) sets the normal working time at 39 hours per week (equal to 6.3 hours per day). This timetable can be calculated on the basis of an annual average (multi-period timetable). In periods of variability of the multi-period timetable, the worker cannot exceed the limit of 44 hours per week, while in the “normal” calculation periods the limit remains at 39 hours per week.

For workers employed in stables, aquaculture and agritourism activities, the provincial employment contracts may provide for a different organization of working hours on the basis of specific production needs. General rules apply for workers under the age of 18.

Normal working hours must be communicated to the employee and cannot be changed by the employer without the employee's agreement. However, the employer can ask the employee to work more hours and is obliged to pay them (extra payment). The employer can also change the distribution of working hours over the week. Working hours are important to calculate the

remuneration: the number of worked hours and the number of hours declared in the pay slip must be the same, and hours must be paid according to the employment contract.



If the working hours imposed by your employer are excessive and rest periods are not respected (daily pauses, weekly rest, annual leave), you risk being exploited by your employer.



Violation of the legislation on working hours is one of the indicators of labour exploitation (see chapter *Illegal employment and labour exploitation*).

Duties of the worker

Punctuality

and compliance with working hours, both at arrival and at departure.

Accuracy and diligence

in performing the work, you must comply with what you are asked to do; if you use machinery and equipment you must always use them correctly, so as not to harm yourself or others.

Collaboration

with colleagues and compliance with workplace rule.

Confidentiality

regarding some information you can obtain at the workplace.

“

For example: if you work in a farm that has a secret recipe for a dessert, you cannot reveal the ingredients of the recipe.

”



02

Social security

Social security rights help and support the worker in particular circumstances, for example when the worker can no longer work due to illness or old age.

The illness

In case of illness or accident (even outside working hours), the worker has the right not to work and stay at home; sick days are paid.

In cases of illness you must

- Immediately notify the employer of the state of discomfort and go to the doctor to request a certificate and the code to be communicated to the employer (the certificate indicates how many days you can stay at home while sick).
- Communicate the code obtained from the doctor to the employer within the first day of illness.
- Stay at home during the period of illness. INPS (National Institute for Social Security) may carry out checks.

Maternity and paternity

A worker who becomes a mother has the right to stay at home for at least **5 months**, before and after the birth of the child (usually 2 months before birth and 3 months after birth). The months of compulsory maternity leave are paid and you can choose to stay at home for another **6 months** on a lower salary.

The worker who becomes a father has the right to stay at home **7 days** after the birth of the child. The days of compulsory paternity leave are paid and you have the right to stay at home for another **6 months** with a lower salary.



Fixed-term agricultural workers have the right to sickness, maternity and paternity if they are registered in the annual lists of workers for at least 51 days of agricultural work performed in the previous year. Similarly, they are entitled to sickness, maternity and paternity if the 51 days were worked in the same year in which the event occurs, before the start of the event. This requirement allows the worker to acquire the “status” of agricultural worker to access the protections. This is why it is important that all the hours actually worked are not only paid, but that they are properly marked on the pay slip.



For more information on health, accident and occupational medicine services, see chapters *Safety at work and Health protection*.

Social security contributions

When the worker is too old to work, s/he has the right to stop working and receives a pension (i.e. a monthly sum paid by the National Institute for Social Security, INPS). In order to pay the pension, the state takes a little money from the salary every month: the social security contributions. The employer is required to pay the social security contributions according to the regulations in force. The worker can see the amount paid on the **pay slip**.



If your employer doesn't pay your social security contributions, you may be in a situation where your employer is exploiting you.



Violation of social security legislation is one of the indicators of labour exploitation (see chapter *Illegal employment and labour exploitation*).



Agricultural unemployment aid

For the periods of unemployment, INPS (National Institute of Social Security) pays an Agricultural unemployment aid to agricultural workers who are registered in the lists of workers. In fact, fixed-term agricultural workers are registered in special lists of workers drafted by INPS on the basis of the declarations sent by employers.

Agricultural unemployment aid is paid directly by INPS in a single instalment on the bank account (bank or postal bank account), Post office savings passbook or payment card with IBAN. The daily amount that is paid is equal to **40% of the reference salary** (i.e. what has already been earned in the periods worked).

Who can apply for agricultural unemployment aid?

- Fixed-term agricultural workers.
- Permanent agricultural workers who work for part of the year.
- The family members of the owner of the company.
- Small direct farmers who have at least 51 days of registration at the lists of workers through voluntary payments.

The following workers cannot receive the agricultural unemployment aid:

- Workers who resigned voluntarily, except in case of **justified dismissal** or in case of the resignation of working mothers and working fathers in the period of pregnancy and puerperium.



You are entitled to the unemployment aid if you resign for example because your employer does not pay you or your employer makes you perform a work other than the one for which you were hired or if you have suffered harassment in the workplace (etc.).

- Non-EU workers with a permit of stay for seasonal work.
- Workers who have mainly performed non-agricultural work as employees in the two years before submitting the application.
- Workers who have not submitted the application within the deadline.
- Workers registered at the Autonomous Management or the Separate Management of INPS for the whole year or part of the year, but only if the number of working days in the registration period is higher than those of the agricultural activity.
- Workers who are already holders of a direct pension from 1 January of the year of the aid allocation.

What are the requirements for the unemployment aid?

- Registration at the lists of agricultural employees (for the year of the application) or a permanent agricultural job (for the part of the year covered by the aid).
- At least 2 years of seniority in involuntary unemployment insurance.
- At least 102 daily contributions in the two years preceding the application (year to which the application refers and previous year). This requirement is valid also if you were a non-agricultural employee, but only if agricultural activity was predominant in the year or two years of reference.



When and how to apply

The application shall be submitted from **1 January** to **31 March** of the year following the year in which unemployment began.

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For example, the unemployment application for the year **2020** shall be submitted by **31 March 2021**.

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You shall submit the application digitally on the institutional website of INPS, through a secure authentication.

You can contact a trade union in order to understand if you are eligible for the agricultural unemployment aid and in order to get help in the procedure.



Further information on the access to the website of INPS is available at the following Internet address:
→ <https://www.inps.it/prestazioni-servizi/disoccupazione-agricola-indennita-erogata-in-unica-soluzione-per-i-lavoratori-agricoli-dipendenti>

Unemployment fund for agricultural workers (CISOA)

The unemployment fund **protects agricultural workers temporarily suspended from work** and allocates an economic aid in lieu of wage. The aid is granted in case of work interruption because of adverse weather conditions, infectious phenomena and parasitic attacks, product loss, drought, seasonal stasis and the involuntary lack of raw materials.

The Ministry of Labour grants the aid directly in case of interruption operated for company conversion and restructuring needs, as well as in the event of exceptional calamities or adverse weather conditions for companies located in the municipalities affected by such events.

Who can apply?

- Only permanent employees (blue-collar workers, white-collar workers and middle managers).
- For full-day interruptions and not for a reduction in working hours.
- Workers who have performed at least 181 days of work in a year at the same farm (seniority not required for ordinary unemployment aid).
- For a maximum of 90 days per calendar year (instead of 52 weeks potentially eligible for compensation under the ordinary unemployment aid).



This aid is equal to 80% of the average daily wage. The reference remuneration cannot be lower than the remuneration established by law or by the collective agreements or contracts according to the category and qualification of the worker.

Family allowance

The family allowance is an economic aid for the families of employees, pensioners or persons who receive other benefits from INPS and who have an overall income below the limit established each year by law.

Who can apply?

- The allowance is paid for the whole year to agricultural workers with at least 101 days of work.
- For fixed-term agricultural workers with less than 101 days of work per year in agriculture, the allowance is due for the days worked in the agricultural sector increased by 13.78% for leaves and holidays. In case of a simultaneous right to agricultural unemployment aid, the allowance is paid for the unemployment days covered by an imputed contribution up to a maximum of 180 days.

- The allowance is due for a maximum of 26 days for each monthly payment, if the permanent agricultural worker has less than 101 days of work per year.



The family allowance is calculated in relation to the annual days of agricultural work, in addition to the percentage of days due as leaves and holidays. The amount of the allowance depends on the type of family, number of members and income.

When and how to apply

Similarly to agricultural unemployment aid, the application must be submitted by **31 March of the following year**.

You are allowed to apply both for the family allowance and **the agricultural unemployment aid** (see above). You shall submit the application digitally on the institutional website of INPS, through a secure authentication.



Further information on the access to the website of INPS is available at the following Internet address:
→ <https://www.inps.it/prestazioni-servizi/disoccupazione-agricola-indennita-erogata-in-unica-soluzione-per-i-lavoratori-agricoli-dipendenti>



03

Employment services

Work is a serious matter: for this reason it is necessary to contact only public and private organisations which are authorized to carry out intermediation activities and are able to guarantee the protection of workers.

Employment services are a network of public and private bodies which operate throughout the whole region and are organized as follows:

- Employment centres, coordinated by the Regions or autonomous Provinces, which operate at the provincial level.
- Employment Agencies, public or private bodies authorized nationally by the Ministry of Labour and Social Policies and/or locally accredited by the Region (Legislative Decree no. 150/2015).

Objectives

If you are unemployed or inactive, the services aim at promoting your employment through job placement and re-employment or vocational training.

Labour intermediation is one of the available services and concerns **the job matching in the labour market**, also for the disabled and disadvantaged groups of workers (Article 2, paragraph 1, letter b, Legislative Decree no. 276/2003).

Activities include:

- Collection of the Curriculum Vitae of job seekers.
- Preselection and database update
- Promotion and management of the job matching.
- Upon request of the employer, submission of all mandatory communications concerning the recruitment carried out thanks to the intermediation activity.
- Professional guidance.
- Training activities aimed at job placement.

Who

- **Unemployed and employed** persons who look for a new job opportunity.
- **Workers who receive an aid**, with an employment and at risk of unemployment.
- **Foreign citizens who hold a valid permit of stay** and look for new job opportunity.
- **Companies and other employers** that are looking for staff.
The service is free for job seekers.



How

If you are looking online for a job, you can visit the website of MyANPAL where you can find the section *Job offers* → <https://www.anpal.gov.it/domanda-offerta>)

You can upload and manage your CV, enter or modify your information details. If you are looking for a job, you can visit the *Job finder* section
→ https://myanpal.anpal.gov.it/myanpal_service/auth/login

If you are looking for work in agriculture, you can also download for free the *Restoincampo* application, available for Android devices (Google Play) and iOS devices (Apple Store) in 5 languages (Italian, English, French, Romanian, Punjabi).

Through the application, you can search for a job offer and send your application on the basis of your skills and availability in the area.

Jobincountry, *Agrijob*, *Agrijobs*, *Fairlabor* and more applications may also be useful for you, according to the area where you live!

If you are interested in working in agriculture, you can contact the Employment Center in your area directly (*Cliclavoro*) or an employment agency, as indicated below.

If you wish to send your application to the Employment Centre

- 1 – Fill in the form directly on the computer (it is not necessary to print).
- 2 – Send the form to the local Employment Centre by email. The email address is published in the website.
- 3 – The Employment Centre will contact you for further information and indicate the schedule for the selection.



This service is free.

Employment agencies provide companies with tools and services for

- **Intermediation:** matching job supply with demand.
- **Personnel search and selection:** all activities related to the optimal choice of human resources for a specific job on the basis of the requirements indicated by the employer.
- **Support for professional re-employment:** support for the re-employment of workers in the labour market, through training, guidance and coaching for new positions.
- **Outsourced personnel under fixed-term or permanent contract:** a temping agency employs workers and provides them to companies.



The list of employment agencies is available in the digital register on the website of Cliclavoro, which is managed by the Ministry of Labour and Social Policies and on the website of Anpal - National Agency for Active Labour Policies.



04

Illegal brokering and labour exploitation

Work in agriculture is regulated by rules and laws.

Labour exploitation occurs every time the employer does not respect the rules and the rights of workers.

Labour exploitation indicates a situation of oppression, where the employer exercises excessive power over the employee and violates the rights of the worker.

There are **different forms of labour** exploitation: **violation of labour rules**, i.e. non-compliance with labour regulations (for example non-compliance with working hours and wage, non-payment of social security contributions and accident insurance), illegal employment, severe labour exploitation and forced labour, the latter ones being outright crimes.



Law no. 199 against illegal employment and labour exploitation was approved in 2016 in order to contrast these crimes.

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Example of violation of labour rules

Andrzej is Polish and 35 years old. He is hired at Maurizio's farm for the apple harvest, with a fixed-term contract, i.e. a contract that will end when the apple harvest is over. Andrzej and Maurizio agree on a remuneration of 7 euros per hour. Some days Andrzej works non-stop 15 hours a day, other days less because of the rain. At the end of the month Andrzej counts the hours: he worked 270 hours in one month. Maurizio, however, decides to pay Andrzej only 200 hours,

therefore 1,400 euros (200 hours \times 7 euros per hour). Maurizio does not report all 200 hours in the pay slip. He reports only 50% of the hours (100 hours) in the pay slip and transfers 700 euros to Andrzej's bank account. He pays cash-in-hand the remaining hours and gives Andrzej an envelope with 700 euros.

Andrzej is exploited by Maurizio because Maurizio does not comply with the labour regulations concerning working hours, wages and payment of social security contributions.

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What is Caporalato?

Caporalato and labour exploitation are widespread throughout Italy, from **North** to **South**, and particularly concern sectors such as **agriculture, livestock, portering, construction, logistics and care services**.

Agriculture is the sector where illegal employment and labour exploitation are particularly important.

There are about **180,000 “vulnerable” agricultural workers** who undergo **labour exploitation** and illegal employment. Caporalato is a **crime**. Caporalato means the **exploitation of workers and is implemented by “Caporali”**, i.e. persons or organizations that recruit and manage the workforce on behalf of company owners in order to facilitate the work in conditions of exploitation.

“Caporali” are **illegal intermediaries**, i.e. they recruit male and female workers on behalf of the employer outside the framework of legal recruitment. Thanks to this “service”, they keep a share of the worker's remuneration for themselves. “Caporali” are not only intermediaries who recruit male and female workers, but **often exercise a complete control over the lives of the exploited workers**.

In fact, they manage the recruitment and the wages of male and female workers, take care of organizing and supervising the work and provide for all other needs such as transport to the workplace, accommodation, supply of food and water at the workplace.

For all these illegal activities “Caporali” receive compensation and keep a share of the remuneration for themselves. This system takes advantage of the conditions of **fragility and need and provides vulnerable people** with work and ancillary services (accommodation, transport, food, water). “Caporali” earn illicit money from this activity.

Example of illegal recruitment and severe exploitation

Michele owns a winery and needs seasonal workers for the harvest. He contacts Clodel, a Romanian who has lived in Italy for many years, because Clodel can easily get him a team of workers.

Clodel tells Michele that the workers are available to work both under contract and illegally and that they want to be paid 7 euros per hour. Clodel points out that he wants to manage directly everything, including the payment of workers, and does not want Michele to have direct contact with the workers.

Clodel tells Michele that the workers need accommodation and accept any kind of accommodation. Michele and Clodel agree that Clodel will provide Michele with 20 workers, 7 euros per hour per person.

At the end of the month, Michele reports only half of the hours in the pay slip. Clodel receives the other half of the hours illegally and pays the workers directly. Clodel pays the workers 5 euros per hour, instead of 7 euros.

He keeps part of the wages for himself.

Workers work an average of 12 hours a day, every day. Michele does not provide workers with training on safety at work or protective equipment (gloves, etc.).

Michele provides workers with accommodation in an isolated shed in the middle of the vineyards and very far from urban areas. Workers sleep on mattresses on the floor. Workers pay Clodel € 3 for each trip if they wish to go grocery shopping in the town. Workers are exploited. Clodel is a “Caporale” and commits the crime of illicit intermediation.

Michele commits the crime of exploitation because he relies on a “Caporale” and exploits the workers. He does not comply with the labour regulations relating to working hours, remuneration and social security contributions, safety at work. He forces workers to live in degrading conditions.

What is labour exploitation?

Labour exploitation is possible in different phase of the employment relationship. In particular, you can be exploited in the recruitment phase through illegal methods of recruitment. Or you can be exploited if your rights are violated in the organizational and management phase (see chapter *Rights of the worker, Work in agriculture*).

Workers are exploited if they do not have the means to satisfy their basic needs (food, accommodation, clothing, etc.) and the employer **takes advantage of their vulnerable condition**.

Labour exploitation is identifiable by the following elements:

a – Illicit or misleading intermediation

workers are recruited by an intermediary (individual, cooperative, company, etc.) in order to facilitate their employment in conditions of exploitation in companies and enterprises (see the history of Clodel in the box). Misleading intermediation occurs when a worker is deceived about the working conditions.

b – Irregular working conditions

workers undergo working conditions that violate the rules as follows:

– **Violation of the legislation on working hours**

The working hours imposed by the employer are excessive and rest periods are not respected (daily breaks, weekly rest, annual leaves).

– **No remuneration or remuneration below the minimum limits**

Workers are not paid or the remuneration is lower than the contractual minimum or not proportionate to the work performed. The payment of remuneration “in kind” or the substantial reduction of the remuneration to cover the expenses of room and board are forms of exploitation.

– **Violation of the rules on health and safety at work**

Non-compliance with the rules on health and safety at work endangers the worker.

– **Violation of labour and social security regulations**

Workers are forced to work without a contract, or the contract is not respected or social security contributions are not paid.

c – Degrading working conditions: workers live in situations of psycho-physical stress because

- Transportation to workplaces is carried out in conditions that endanger the workers.
- The work is carried out in difficult weather conditions and without adequate personal protective equipment.
- There is no possibility of communicating between workers or with other people.
- There are no toilets.
- There are excessive and degrading surveillance methods at the workplace.

Degrading living conditions

Accommodation and general conditions of life are not decent. For example, workers cannot choose the place and conditions of life or are forced to live in unhealthy or overcrowded places. You are experiencing degrading living conditions, if you are forced to live on the street or if your accommodation is close to the workplace and provided by employers or intermediaries and it does not meet the minimum living requirements (electricity, sanitation, heating, etc.).

Forced labour is the most serious form of exploitation. Forced labour is the **forced obligation** (coercion) to work through violence, deceit and threats, in addition to the aforementioned exploitation and conditions.

In this case, workers or their families suffer violence, threats or abuse such as a threat of being reported to the authorities, confiscation of identity documents or mobile phones, isolation, deprivation of food, water or rest.



Who are the victims of illegal recruitment and labour exploitation?

Anyone can be a victim of illegal recruitment and labour exploitation. If you are a **recent immigrant, especially if you do not have a valid permit of stay, you are more vulnerable** because you have problems in finding a job within the framework of legal recruitment. People in your community can help you find a legal and decent job. But they could also be “Caporali” who want to exploit you.



The safest way to find a job is within the framework of the legal recruitment (employment centres, temporary agencies, etc.).

If you do not have a valid permit of stay, you may feel compelled to accept any job opportunity because you have no alternative to survive. If you are an **asylum seeker** and have problems in finding a job, you risk accepting a job where your rights are violated.

If you are a migrant **with a permit of stay for work,** and you accept a job without a contract, you lose your permit of stay and risk falling into a vicious circle of irregularities and labour exploitation.



Don't fall into the trap of labour exploitation, there are organizations that can help you.

What can you do if you think you are vulnerable to labour exploitation or are a victim of exploitation, illegal employment or forced labour?

Law no. 199 introduced crimes of illicit intermediation and labour exploitation in 2016 and imprisonment is the penalty for those who commit these offenses:

- **crime of illegal intermediation:** the law punishes whoever recruits workers and makes them work in conditions of exploitation.
- **crime of labour exploitation:** the law punishes whoever hires or employs workers in conditions of exploitation.

Italian law guarantees protection to victims of illegal employment and labour exploitation.

If you believe you are vulnerable to labour exploitation or a victim of illegal employment and labour exploitation, you can access a social protection program of the **national anti-trafficking network**, i.e. a network of public and private organizations that support victims of trafficking and severe exploitation.

These organizations support you to get out of the exploitation, in particular they offer listening and support to identify your immediate needs and connect you with facilities that offer answers to your needs (for example food, health, work, housing, safety, etc.).



If you are a victim of illegal employment and labour exploitation and want to report your “Caporale” or your employer, you can contact the Labour Inspectorate, or the Police (Carabinieri Corps and Guardia di Finanza Corps).





05

The permit of stay

The permit of stay is a fundamental document and ensures the safety and protection of workers and allows access to the rights and services for foreigners. Find out how to request and obtain it.

Who should apply for the permit of stay?

The permit of stay is the document that certifies the legal presence of the migrant in Italy.

Third-country nationals and stateless persons, i.e. those who do not have a nationality, are obliged to apply for the permit of stay. The permit of stay is not necessary for European citizens, who can enter Italy without a passport or an entry visa.

Permit of stay for work

The permit of stay for work allows migrants to work in Italy and to have access to many rights and services. For example, the registration at the civil registry and the issuance of the identity card and the tax identification number, which allows to receive health care.

What are the requirements to apply for the permit of stay?

The **permit of stay** for work is issued to third-country nationals who are in Italy for work.

If you apply for a permit of stay for work – even seasonal – the employer receives the authorization (“Nulla Osta”) within the framework of the annual decree of migratory flows, then you can enter Italy and the permit of stay is issued.

Third-country nationals can apply for a permit of stay for work if they already hold a permit of stay for family reunification, study, humanitarian reasons, subsidiary protection, minors. In order to apply for the permit of stay for work, an employer (Italian or legally resident in Italy) shall apply for the work authorization, or the permission to sign an employment contract with a person living abroad.

The permit of stay is issued only after the issuance of the aforementioned authorization. The employer shall have an Italian or foreign citizenship and legally reside in Italy. The employer shall verify at the Employment Centre that no worker living in Italy is available for the position. Then, the employer shall sign a fixed-term or permanent employment contract with a foreign worker who lives abroad. The application shall be submitted to the Immigration Office in the province of residence of the company, or in the province where the work will be performed. The application shall include the following documents:

- a – Request for a permit of stay **for work**.
- b – Documentation about a **suitable accommodation**.
- c – **A contract** specifying that the employer will pay the costs of the return trip to the country of origin.
- d – Declaration of commitment **to communicate any changes** concerning the employment relationship.

The employer can request the authorization for one or more persons registered in specific lists, if the employer does not know any foreigner to be hired.

Period of validity of the permit of stay

In case of a **permanent employment contract**, the permit of stay will last for **two years**. In case of a **fixed-term employment contract**, the permit of stay will last for **one year**. The duration of the permit of stay for work coincides with the residence contract, but in any case it cannot exceed:

- a – One year.
- b – Two years in case of a permanent contract.



If you lose your job, your permit of stay or the permit of stay of your family members will not be revoked. If you lose your job or if you resign from your job, you can register at the unemployment lists for the period of validity of the permit of stay and for a period of not less than one year or for the entire duration of the unemployment aid, if longer, except in case of a permit of stay for seasonal work.

What are your rights?

- Enter Italy without a visa and move around freely.
- Work as an employee or self-employed, except for the cases provided for by law.
- Access social security and social aids.
- Access health, school and social services.
- Access the services provided by the public administration.
- Circulate freely in the Schengen area for 90 days for tourism.
- Live in another Schengen country, even for work reasons, even for more than 90 days, in compliance with the law of the other Member State.

Who can you contact?

The application for the issuance or renewal of the permit of stay shall be submitted to the Immigration Office at the competent police office, where you live. The receipt of the application is the document that certifies the legality of your stay in Italy until the issuance of the permit of stay.



For more information

→ www.interno.gov.it

→ www.inps.it

→ www.poliziadistato.it

Permit of stay for seasonal work

The permit of stay for seasonal work allows you to work legally in Italy and to have access to many rights and services for foreigners as well as the registration at the civil registry and the issuance of the identity card and the tax identification number, which allows to receive health care.

What are the requirements to apply for the permit of stay?

The **permit of stay** for work is issued to third-country nationals who are in Italy for work.

If you apply for a permit of stay for work – even seasonal – the employer receives the authorization (“Nulla Osta”) within the framework of the annual decree of migratory flows, then you can enter Italy and the permit of stay is issued, except for cases provided for by law.

Third-country nationals can apply for a permit of stay for work if they already hold a permit of stay for family reunification, study, humanitarian reasons, subsidiary protection, minors.

In case of recruitment of a foreigner as a seasonal employee in the agricultural and tourism/hotel sector, the employer or by the trade association on behalf of the employer shall submit an application to the Immigration Office of the province of residence. The Immigration Office issues the authorization for the same duration of the seasonal work no later than twenty days from the date of receipt of the application, including multi-year work authorisations.

The application shall include the following documents:

- a – Documentation about a suitable accommodation for the worker.
- b – The proposal for a residence contract with detailed conditions, including the commitment of the employer to pay the costs of the return trip to the country of origin.
- c – Declaration of commitment to communicate any changes concerning the employment relationship.

Concerning the documentation about accommodation, when the residence contract is signed, the employer proves availability and suitability of the accommodation pursuant to the provisions in force, as well as the rent conditions. Any rent may not be excessive in relation to the quality of the accommodation and the remuneration of the foreign worker and, in any case, it is not more than one third of the remuneration. Rent cannot be automatically deducted from the remuneration.

If seasonal workers had worked in Italy in the previous five years and complied with the conditions indicated in the permit of stay and returned to the country of origin at the expiry of the permit of stay, they have priority over other workers who never entered legally in Italy for work and they can work for the same employer or for another one.

The seasonal worker can apply at the Immigration Office to convert the permit of stay into a permit of stay for work, if s/he has worked legally in Italy for at least three months and finds a fixed-term or permanent employment contract, within the limits of the annual decree of migratory flows.

Period of validity of the permit of stay

The authorisation for seasonal work allows to work up to a maximum of nine months in a twelve-month period.

What are your rights?

- Enter Italy without a visa and move around freely.
- Work as an employee or self-employed, except for the cases provided for by law.
- Access social security and social aids.
- Access health, school and social services.
- Access the services provided by the public administration.
- Circulate freely in the Schengen area for 90 days for tourism.
- Live in another Schengen country, even for work reasons, even for more than 90 days, in compliance with the law of the other Member State.
- Participate in local public life, as provided for by law.

Who can you contact?

The application for the issuance or renewal of the permit of stay shall be submitted to the Immigration Office at the competent police office, where you live. The receipt of the application is the document that certifies the legality of your stay in Italy until the issuance of the permit of stay.



For more information

→ www.interno.gov.it

→ www.inps.it

→ www.poliziadistato.it

Permit of stay for family reunification

The right to maintain family unity is recognized to foreigners who have a long-term residence or permit of stay with a duration of not less than one year issued for work, or for asylum, study, religious or family reasons.

Who should apply for the permit of stay?

The permit of stay is the document that certifies the legal presence of the migrant in Italy.

Third-country nationals and stateless persons, i.e. those who do not have a nationality, are obliged to apply for the permit of stay. The permit of stay is not necessary for European citizens, who can enter Italy without a passport or an entry visa.

The permit of stay for family reunification shall be requested by the holder of an EU long-term residence permit or a valid permit of stay with duration of not less than one year, issued for subordinate work or self-employment, or for family, asylum/ subsidiary protection, study or religious reasons.



If you have an expired permit of stay in the renewal phase, you can apply for family reunification even if the administrative procedure has not been completed. If you are waiting for the first issuance of the permit of stay, you can only apply after the photo identification procedure.

What are the requirements to apply for the permit of stay?

The permit of stay for family reunification can be requested for the following family members:

- a – Spouse not legally separated and over the age of eighteen.
- b – Minor children, including those of the spouse or born out of wedlock, unmarried, provided that the other parent, if any, has given the consent.
- c – Dependent adult children, if for objective reasons they cannot provide for their own indispensable life needs due to their state of health which entails total disability.
- d – Dependent parents, if they do not have other children in the country of origin or provenance, or parents over 65 years of age if the other children are unable to support them because of documented and serious health reasons.

The reunification of family members referred to in letters a) and d) is not permitted when the family member whose reunification is requested is married to a foreign citizen legally residing with another spouse in Italy.

Children are considered minors if they are under the age of eighteen at the time of application. Minors adopted or entrusted or under guardianship are treated as children.

Except for refugees, the following requirements are necessary:

- a – Availability of a suitable accommodation.
- b – A minimum annual income deriving from legal activity of not less than the annual amount of the social allowance increased by half the amount of the social allowance for each family member to be reunited. In any case, an income of not less than double the annual amount of the social allowance is required for the reunification of two or more children under the age of fourteen.
- c – In case of an ascendant over sixty-five years of age, a health insurance or similar in order to cover all risks, or registration at the National Health Service.

Entry of the family members is allowed for reunification, if the foreigner holds a long-term residence permit or an entry visa for work as an employee relating to a contract lasting for no less than one year, or for non-occasional self-employment, or for study or religious reasons. In addition, the foreigner has to prove adequate housing and income.

Entry of the natural parent is allowed for reunification with the minor child already legally residing in Italy with the other parent, adequate accommodation and income has to be proven.

The possession of these requirements by the other parent is taken into account.

Period of validity of the permit of stay

The permit of stay for family reunification is issued for duration equal to the permit of stay of the foreigner who has applied for family reunification.

What are your rights?

- Enter Italy without a visa and move around freely.
- Work as an employee or self-employed, except for the cases provided for by law.
- Access social security and social aids.
- Access health, school and social services.
- Access the services provided by the public administration.
- Circulate freely in the Schengen area for 90 days for tourism.
- Live in another Schengen country, even for work reasons, even for more than 90 days, in compliance with the law of the other Member State.

Who can you contact?

The application for the permit of stay for family reunification and the necessary attachments shall be sent digitally to the Immigration Office at the prefecture of your place of residence and you will receive a digital receipt.

The authorization for family reunification is issued within ninety days of the application.

After the issuance of the authorization for reunification by the Immigration Office, the family members will be able to apply for an entry visa to Italy at the Embassy or Consulate of their country of origin. They shall certify the relationship of kinship, marriage, minor age and any civil status. Documents shall be duly translated into Italian and legalized by a notary.

After the issuance of the entry visa, the family members shall go to the Immigration Office within 8 days of their entry in Italy.



For more information
→ www.interno.gov.it
→ www.inps.it
→ www.poliziadistato.it

EU long-term residence permit

Who can apply for the permit of stay?

If you have been in possession of a valid permit of stay for at least five years and have an income, you can apply for the EU long-term residence permit. You can apply for the residence permit even if you are a beneficiary of international protection (refugees and holders of subsidiary protection).



What are the requirements to apply for the permit of stay?

If you apply for a permit of stay for yourself:

- Holder of a permit of stay for at least five years.
- Income not less than the annual amount of the social allowance (equal to € 5,977.79 for the year 2020);
- Italian language proficiency test if you do not have another appropriate certification of Italian language skills.

If you apply for the permit of stay for your family members:

- Income not less than the annual amount of the social allowance (equal to € 5,977.79 for the year 2020) increased by half for each family member.
- In case of two or more children under the age of fourteen, income not less than double the annual amount of the social allowance.
- Suitable accommodation.
- Certificate of the family relationship, translated, legalized and validated by the consulate in the country of origin or residence of the foreigner.
- Italian language proficiency test for each applicant if they do not have another appropriate certification of Italian language skills (excluding children under 14).

Period of validity of the permit of stay

The permit of stay is permanent and shall be renewed every five years from the date of issuance or renewal.

What are your rights?

- Enter Italy without a visa and move around freely.
- Work as an employee or self-employed, except for the cases provided for by law.
- Access social security and social aids.
- Access health, school and social services.
- Access the services provided by the public administration.
- Circulate freely in the Schengen area for 90 days for tourism.
- Live in another Schengen country, even for work reasons, even for more than 90 days, in compliance with the law of the other Member State.
- Participate in local public life, as provided for by law.
- Register at the National Health Service.

Who can you contact?

The permit of stay is issued by the Police head of the city of residence within ninety days of the application. The application shall be submitted at the post office, at the Municipality of residence, if available, or at the “Patronati” centres.



For more information

→ www.interno.gov.it/it

→ www.poliziadistato.it

Permit of stay for humanitarian reasons

Who can apply for the permit of stay?

If you are a victim of violence or serious exploitation and you are in danger because of this situation, you can apply for a permit of stay for humanitarian reasons. You can request it even if you have finished the prison sentence for crimes committed when you were a minor.

What are the requirements to apply for the permit of stay?

If you wish to apply for a permit of stay for **humanitarian reasons**, the following requirements are necessary:

- A condition of violence or serious exploitation.
- A significant contribution to the fight against criminal organizations, or to the identification or capture of criminals.
- Proposal or favourable opinion of the Public Prosecutor.
- Participation in a social assistance and integration program prepared by local authorities or private organisations which carry out activities in favour of migrants, are registered at the special register of the Ministry of Labour and are under contract with local authorities.

In the case of a **permit of stay issued at the end of the prison sentence**, it is also necessary to give concrete proof of participation in a social assistance and integration program.

Period of validity of the permit of stay

The permit of stay for humanitarian reasons lasts for six months and can be renewed for one year, or for any longer period that may be necessary. If you are working at the expiry of the permit of stay, the permit of stay can be further extended or renewed for the duration of the employment relationship. If you have a permanent work contract, the permit of stay will be renewed following the rules of the permit for work.

The permit of stay can be converted into a permit of stay for study if you are enrolled in a study program.

The permit of stay is revoked in the event of **interruption of the assistance** and **social integration program or of misconduct**, or when the other conditions are no longer met.

What are your rights?

- Access to welfare services and education.
- Registration at the Employment Centre and work as an employee.
- Registration at the National Health Service.
- Access to social inclusion programs of local authorities, if you are not included in specific protection programs and within the limits of available places.

Who can you contact?

The request for the permit of stay for humanitarian reasons can be submitted:

- By the Public Prosecutor during a criminal proceeding for violence or serious exploitation;
- By social services;
- By associations, organizations and other bodies which carry out activities in favour of migrants and are registered at the special register of the Ministry of Labour and Social policies.



For more information

→ www.interno.gov.it/it

→ www.poliziadistato.it

Permit of stay for victims of domestic violence

Who can apply for the permit of stay?

If you are a victim of domestic violence or abuse and you find yourself in danger because of this situation, you can apply for a permit of stay for victims of domestic violence.

What are the requirements to apply for the permit of stay?

To obtain a permit of stay for victims of domestic violence, the following conditions should be met:

- The presence of one or more acts, serious or non-episodic, of physical, sexual, psychological or economic violence that occur within the family or between persons currently or in the past linked by marriage or by an emotional relationship.
- Proposal or favourable opinion of the Public Prosecutor.
- Report drafted by the social services, if violence or abuse emerge during welfare activities carried out by anti-violence centres, local social services or social services specialized in victims of violence.



Period of validity of the permit of stay

The permit of stay for victims of domestic violence lasts for **one year**.

When it expires, the permit of stay can be converted into a permit of stay for work as an employee or self-employed, or into a permit of stay for study if you are enrolled in a study program.

What are your rights?

- Access to welfare services and education.
- Registration at the Employment Centre and work as an employee or self-employed.
- Registration at the National Health Service.
- Access to social inclusion programs of local authorities, if you are not included in specific protection programs and within the limits of available places.

Who can you contact?

The request for a permit of stay for victims of domestic violence can be submitted:

- By the Public Prosecutor during a criminal proceeding for family mistreatment, personal injury, genital mutilation, kidnapping.
- By social services.
- By associations, organizations and other bodies which carry out activities in favour of migrants and are registered at the special register of the Ministry of Labour and Social policies.



For more information

→ www.interno.gov.it/it

→ www.poliziadistato.it

Permit of stay for victims of labour exploitation

Who can apply for the permit of stay?

If you are a victim of labour exploitation you can apply for a permit of stay for victims of labour exploitation.

What are the requirements to apply for the permit of stay?

To obtain a permit of stay for victims of labour exploitation, the following conditions should be met:

- Absence of a permit of stay.
- Work illegally.
- Labour exploitation;
- Proposal or favourable opinion of the Public Prosecutor.

Period of validity of the permit of stay

The permit of stay for victims of labour exploitation lasts for six months and can be renewed for one year, or for the longer period necessary for the conclusion of the criminal proceeding. The permit of stay can be converted into a permit of stay for work.

What are your rights?

- Work activities.
- Registration at the National Health Service.
- Access to social inclusion programs of local authorities, if you are not included in specific protection programs and within the limits of available places.

Who can you contact?

The request for the permit of stay for victims of labour exploitation can be submitted:

- By the Public Prosecutor during a criminal proceeding for hiring foreign workers without a permit of stay or with an expired permit of stay;
- By social services;
- By associations, organizations and other bodies which carry out activities in favour of migrants and are registered at the special register of the Ministry of Labour and Social policies.



For more information

→ www.interno.gov.it/it

→ www.poliziadistato.it

Procedures for acquiring Italian citizenship

Automatic acquisition

You can acquire Italian citizenship automatically only if, alternatively:

- You are the son of a father or mother who are Italian citizens.
- You were born in Italy and your parents are unknown or stateless.
- If the state of your parents does not grant citizenship to children.
- If you are a minor and have been adopted by an Italian citizen.

Acquisition of the Italian citizenship upon request

You can acquire Italian citizenship upon presentation of an application, alternatively:

- If you are a foreigner born in Italy and resident without interruption until reaching the age of 18. In this case, you can apply within one year from that date if the Registry Officer has notified you within six months that you have the opportunity to apply for Italian citizenship. Otherwise, you can apply even after the deadline of one year.
- If you are a foreigner or stateless person and your father or mother or one of the grandparents were Italian citizens by birth.
- If you are a civil servant, even abroad.
- If you are 18 and you have legally resided for at least two years in Italy, you can apply for Italian citizenship within one year.
- If you are 18 and over and you have been recognized or have been judicially declared as a child of an Italian parent, you can apply for citizenship within one year of recognition or declaration.

Acquisition by marriage

You can submit the application for Italian citizenship to the competent Prefect or the competent Italian consulate, if you meet the following requirements:

- You are a foreigner or stateless person, you are married or civilly united with an Italian citizen and you have legally resided for at least two years in Italy or you are a foreigner or stateless, you have been married or civilly united with an Italian citizen for at least three years and reside abroad.
- Absence of criminal convictions in the cases indicated by law.
- Absence of impediments related to national security.
- Existence of the marriage bond or civil union at least up to the time of adoption of the decree.
- If you have children born or adopted, the terms of residence or marriage or civil union respectively are halved.

Acquisition of Italian citizenship by naturalization

You can submit the application for Italian citizenship to the competent Prefect, if you meet the following requirements:

- If you are a foreigner, son or grandson of Italian citizens by birth, or born in the Italy and have legally resided in Italy for at least three years.
- If you are an adopted foreigner of 18 and over and have legally resided in Italy for at least five years.
- If you have served, even abroad, as a public servant of the Italian state for at least five years. In the case of service abroad, the application shall be submitted to the competent consular authority.

- If you are a foreign citizen of one of the member countries of the European Union and have legally resided in Italy for at least four years.
- If you are a stateless person or a refugee and you have legally resided in Italy for at least five years.
- If you are a foreigner and have legally resided in Italy for at least ten years.

The granting of the Italian citizenship in the event of acquisition by marriage or naturalization is subject to the possession of an adequate knowledge of the Italian language, not lower than level B1 of the Common European Framework of Reference for the knowledge of languages.



For more information
www.interno.it
www.inps.it

Issuance of the tax identification number

What is it?

The tax identification number is a sixteen-character alphanumeric code, which includes the personal data of the citizen and is used to be identified by public bodies and administrations. The tax identification number is necessary, for example for:

- Registration at the National Health Service.
- Be hired as an employee.
- Start self-employment.
- Open a bank account.
- Submit the income tax return.
- Issue invoices and receipts.
- Sign a contract.

Who can apply for the tax identification number?

- Non-EU nationals who enter Italy for work or for family reunification.
- Non-EU nationals already residing in Italy and without a tax identification number, even for dependent family members.

Who can you contact?

- If you are a non-EU national and you need to enter Italy for work or for family reunification, you can contact the Single Desk for Immigration.
- If you are a non-EU national already residing in Italy, you can apply personally or through a delegated person at the local office of the Revenue Agency.

What are the necessary documents?

If you apply for the tax identification number at the Revenue Agency, you need:

- Copy of a valid permit of stay.
- Copy of a valid passport.

Can you ask for a duplicate of the tax identification number?

Yes, in case of loss or destruction of the paper certificate or plastic card, a duplicate can be requested in the same way.

The duplicate can be requested:

- At the local offices of the Revenue Agency.
- On the website of the Revenue Agency.
- At the self-service counters of the Ministry of Finance in the Public Relations Offices of the Municipalities and the Prefecture, at the Financial Offices and in some Post Offices, shopping centres and airports.



06

Safety at work

Safety at work means fair working conditions for everyone. It is necessary to follow specific obligations and an adequate response in the event of an accident at work or an occupational disease. It is your right.

Objective of **work safety** is the prevention and reduction of the risk of accidents at work and occupational disease and the protection of the health of workers. Health is a state of complete physical, mental and social well-being and not just the absence of disease (World Health Organization, 1946).

Work accident is a traumatic event and occurs due to a violent cause at the workplace or while working and makes you impossible to work. For example, trauma, wounds, poisoning, infectious agents can cause potential damage to health, from a mild to very serious degree (death).

Occupational disease acts slowly and progressively on the body (non-violent and progressive cause over time). Work may be the only factor involved (for example intoxications) or can contribute to the development of the disease together with other factors, even outside the workplace (for example tumours or osteoarticular diseases).

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Who is in charge of safety at work?



1 – The employer is responsible for the company (or workplace, etc.) where you work (Article 2, paragraph 1, letter b, Legislative Decree no. 81/2008; Article 18, Legislative Decree no. 81/2008, Obligations of the employer and manager).

Responsibilities

- Evaluate all risks to the health and safety of workers.
- Appoint **the head of the risk prevention and protection service and the competent doctor**.
- Compliance with the obligations of **information, education and training of workers**.
- **Periodic meeting in facilities with more than 15 workers** with the participation of the worker safety representative.
- Information to workers about **emergency measures, the head of the prevention and protection service and the competent doctor** as well as **training** on specific risks, on dangers involved in the use of chemical products, on protection and prevention measures and on emergency procedures.
- Provide workers with **the necessary and suitable personal protective equipment and update the prevention and protection measures** that guarantee the protection of health and safety.
- Require workers **to comply with the rules and regulations** in the company concerning safety and workplace hygiene, the use of collective protective equipment and personal protective equipment.
- Adopt **measures to control risk situations in the event of an emergency** and provide instructions so that workers leave the workplace or the dangerous area, in the event of serious, immediate and unavoidable danger.



2 – The competent doctor has obtained the qualifications and training and professional requirements provided for by legislation (Article 2, paragraph 1, letter h, Legislative Decree no. 81/2008; Article 25, paragraph 1, Legislative Decree no. 81/2008, Obligations of the competent doctor).

Responsibilities

- Assess the **risks** for workers and prepare **measures for the protection of health**, together with the employer.
- Plan and carry out **health surveillance**, through health protocols defined according to specific occupational risks and provide information to workers on the results of health surveillance.
- Participate in training and information activities for workers and in the organization of the first aid service.
- Collaborate in the implementation and enhancement of voluntary “health promotion” programs.
- Visit the workplace.



3 – The occupational safety manager is the person who represents you with regard to health and safety topics (Article 2, paragraph 1, letter h, Legislative Decree no. 81/2008; Article 47, Legislative Decree no. 81/2008). In companies with a maximum of 15 workers, workers choose the occupational safety manager within the company or nominate him/her in the reference area of the company (RLST). On the other hand, in the company with more than 15 workers, workers choose him/her within the company.

Responsibilities

- **Enter the workplaces** where the work takes place
- **Receive information and company documentation** concerning the risk assessment and protection measures.
- **Participate in the promotion of prevention measures** in order to protect your health and physical well-being.
- **Warn the employer** of the risks.
- **Have recourse to the competent authorities if the risk prevention and protection measures** adopted by the employer or managers and the means used to implement them are not suitable for guaranteeing safety and health at work.
- **Attend periodic meetings.**



4 – The worker safety representative is the person elected or designated to represent you with regard to health and safety aspects (Article 47, Legislative Decree no. 81/2008).

Objectives

The worker safety representative **protects workers of public or private organizations, with or without remuneration**, even trainees who learn the job (art. 2, paragraph 1, letter a of the legislative decree no. 81/2008).

Workers **shall take care of the health and safety of themselves and of other people in the workplace**, according to training, instructions and the means provided by the employer (Article 20 of the Legislative Decree no. 81/2008, Obligations of workers).

How is health and safety at work protected?

- **Apply the rules provided** for prevention, health and safety in the workplace.
- **Assess all occupational risks**, implement **technical, organizational, procedural, health and non-health measures**, in order to eliminate/reduce occupational risks.
- Provide **adequate** collective and individual **protective equipment**.
- **Provide information**, education and training.
- Adopt preventive measures, such as **“health surveillance”**.

What is risk assessment?

Risk assessment allows to identify the hazards that can cause potential damage to the health and safety of workers and to **estimate the probability of damage** (i.e. the risk) for health and safety, such as accidents and occupational diseases.

It is an analytical procedure and is divided into various phases, such as the collection and analysis of various sources and information (knowledge of technological cycles, substances, analysis of environments and tasks, work procedures, protections, work organization, etc.), as well as instrumental analysis and specific measurements. The employer shall proceed with the **identification of all risk factors** and their mutual interactions in the company, as well as the assessment of their importance. The employer shall identify the prevention measures and plan their implementation, improvement and control in order to verify the effectiveness and efficiency.

The assessment is carried out in collaboration with **the head of the prevention and protection service (RSPP)** and with **the doctor** (if health surveillance is mandatory), with previous consultation with **the worker safety representative**. At the end of the assessment, a specific document is written and kept at the company. It is an important document in order to protect health and safety.

The work-related **risks** can be divided into three main categories:

1 – Safety risks

Accident risks, in case of **accidents or injuries**. Accident risks are caused by **structural deficiencies in the working place, safety deficiencies of machines, equipment, tools, handling of hazardous substances, lack of electrical safety, fire and/or explosion**.

2 – Health risks

Health risks are caused by the following factors:

Chemical agents resulting from (more frequently) inhalation of dust, smoke, mist, gases, steam; skin contact; (rarely) ingestion of agents containing substances such as solvents, pesticides, metals.

Physical agents, for example noise, vibrations, radiation (Ultraviolet radiation - UV), microclimate and macroclimate (cold or hot temperature, humidity, ventilation).

Biological agents, risks associated with exposure (ingestion, skin contact, inhalation) to infectious organisms and microorganisms, such as viruses, bacteria, fungi, parasites.

3 – Risks to health and safety

Risks to health and safety are caused by the following factors:

Psychosocial factors

Work rhythms, work shifts, working hours, oversized or undersized loads, very low or excessive workloads, difficult interpersonal relationships, inadequate communication, atypical and precarious employment contracts, emergency work, organizational constraints such as marginalization, disqualification, emptying of duties, inadequate work tools, exclusion from training initiatives, excessive control from the superiors.

Ergonomic factors

Incongruous and prolonged work postures, manual handling of loads, repetitive movements.

What is personal protective equipment?

In the agricultural/agro-zootechnical sector the personal protective equipment must guarantee:

- Head and face protection (skull, hearing, eyes and face).
- Protection of the upper limbs (hands, arms).
- Protection of the lower limbs (feet and legs).
- Respiratory protection.
- Body protection.
- Protection against falls from above.



If you are a seasonal and occasional worker and you work less than 50 days a year in the same company, you have the right to basic information, training and health surveillance (Interministerial Decree of 27 March 2013).

What is information and training?

The employer gives you all the necessary information, instruction and adequate safety training about the use of the equipment and foreseeable abnormal situations (Articles 36 and 37 of the Legislative Decree no. 81/08, use of the work equipment).

In particular, the employer shall give you **sufficient and adequate** training on health and safety (Article 37, Legislative Decree no. 81/2008):

- General training: **4 hours.**
- Average risk training: **8 hours.**
- Total training: **12 hours.**
- **Every 5 years a 6-hour update course** for all risk sectors and macro sectors.

The employer will also **inform you about:**

- **The risks** you are exposed to during the use of work equipment.
- **The work equipment** present in the premises, even if not directly used.
- **Changes in such equipment** (e.g. modification, adaptation and improvement).

What is health surveillance?

Health surveillance is

“The set of medical documents aimed at protecting the health and safety of workers, in relation to the working environment, occupational risk factors and methods of carrying out the work”.

according to art. 2 of the Legislative Decree no. 81/2008.

Systematic, preventive and periodic health check of workers are implemented in order to assess the state of health of the workers and to prevent illness and accidents. It is important to assign a job to the workers according to their abilities, without damaging their health and that of the others. Health surveillance aims at the **identification of health alterations** caused by occupational risk factors. Health surveillance highlights health alterations that can be aggravated by work or can interact with the normal performance of work.

When to carry out health surveillance?

- In the cases provided for by the legislation (activities that expose to **infectious agents, chemical and carcinogenic substances, manual handling of loads, radiation, noise and vibrations, night work**).
- **For the risks** highlighted by **the risk assessment**.

Who carries out health surveillance?

The doctor is appointed by the employer and holds the title and professional requirements established by law (according to the Legislative Decree no. 81/08).

Health surveillance objectives

The objective can be preventive, clinical, epidemiological and health information and promotion, such as:

- Assess general health, health alterations and make clinical diagnoses.
- **Identify pathologies that can worsen** with exposure to occupational risks or **pose a risk to third parties** (for example colleagues, the public).
- Identify **early pathologies** due to exposure to risk factors.
- Provide workers with health and safety risks information/ training.
- **Identify and inform workers** – who may have conditions of **“vulnerability”**, for example related to differences in gender, age, pregnancy and breastfeeding, language difficulties. Identify and inform vulnerable workers to certain occupational risks, for example carriers of skin-mucosal pathologies, pathologies such as diabetes, cardiovascular,

renal, hepatic, blood diseases, neoplasms, allergies, immunological deficits, conditions that can cause limitations to the use of protective devices.

- **Assess the need for any vaccination.**
- **Occupational-work-related diseases certification** and reports.
- **Establishment of health data base** to evaluate or interpret future situations.
- **Certificate of fitness for work.**
- **Work reintegration/relocation** of people who return to work after injury or illness.
- **Collect and process** individual and group **health data.**
- **Evaluate** the adequacy **of the risk assessment.**
- **Health promotion** and counselling.

Medical examinations for health surveillance, what and when

Health surveillance includes (art. 41 of the Legislative Decree no. 81/08):

Pre-employment preventive medical examination

Pre-employment preventive medical examination is done before the signature of the employment contract. The medical examination is ordered by the employer to the company doctor or to the local health authorities.

Preventive medical examination

Preventive medical examination is done **after the signature of the employment contract and before the beginning of the work.** Work tasks may involve exposure of the worker to certain risk factors. The preventive medical examination verifies the absence of contraindications to the job in order to assess the suitability of the worker for the specific job.

Periodic medical examination

Periodic medical examination is performed at time intervals established by the health program. Periodic medical examination depends on the type of risk factor that the worker is exposed to. The frequency is usually once a year. The frequency of the medical examination is provided by the current legislation or is established by the doctor on the basis of the risk assessment, of the collective and individual preventive measures, and of the workers. The supervisory body can change the frequency of health surveillance indicated by the company doctor.

Medical examination at your request

You can request a medical examination in accordance with the competent doctor in order to evaluate whether the work task is suitable for you. The medical examination relates to professional risks or your health conditions, that can worsen due to the work carried out.

Medical examination in case of change of work tasks

This medical examination verifies the conditions of vulnerability to the occupational risks in the new work task and not in the previous work task. It is requested by the employer.

Medical examination prior to resuming work, following an absence for health reasons of more than 60 days, in order to verify if the worker is suitable for the work tasks.

It is requested by the employer as well as by the worker.

Medical examination when the employment relationship terminates

Medical examination when the employment relationship terminates is carried out in the cases provided for by the legislation. It is carried out in the case of exposure to hazardous substances.

- This medical examination is carried out for workers exposed to chemical risk, to carcinogens and mutagens, asbestos and in some circumstances to biological agents.
- Certificate of fitness for work is not necessary.
- The competent doctor provides information to the worker on the medical prescriptions which should be respected. The doctor prescribes to the worker other health checks.

Medical examinations for safety from alcohol abuse and drug and psychotropic substance use

- The medical examination protects both you and third parties (for example, work colleagues, the public) from the risk of injury.
- The tasks performed by workers who must undergo this health check are listed in regulatory provisions for both alcohol and drugs and psychotropic substances.



The employer pays the medical examinations which include clinical and biological analysis and diagnostic investigations decided by the competent doctor.

What is health surveillance?

Health surveillance is necessary to certify the fitness for work and is based on the assessment of health and safety risks and on the specific health programs and protocols defined and prescribed by the competent doctor.

The **medical examination** can be **integrated by**:

- **Questionnaires**, for risk factors or diseases (for example noise, vibrations, infectious agents, allergies, pesticides, psychosocial risk factors).
- **Instrumental tests**, including audiometry in order to evaluate auditory function, spirometry in order to evaluate respiratory function, the electrocardiogram for the heart.
- **Chemical-clinical and toxicological laboratory tests** (for example blood and urine tests), aimed at assessing both the general state of health and the specific occupational risks.
- If you are exposed to chemical or carcinogenic substances, the competent doctor could do **biological monitoring**, i.e. the assessment of exposure to working substances in biological matrices (blood, urine, exhaled air for example), which allows you to detect if the exposure is acceptable or exceeds the limits allowed by law or by guidelines or by good practices.



Drug and alcohol addiction will be assessed, if you carry out particular tasks that can put the safety of other people at risk (for example forklift drivers, crane drivers, drivers, pilots).

Is health surveillance mandatory?

Yes, the employer is obliged to have workers undergo health surveillance when they are exposed to specific risks pursuant to art. 18 of the Legislative Decree no. 81/08. The worker is also obliged to undertake **the examinations and assessments** in order to allow the competent doctor to issue **the certificate of fitness for work**.



If a worker refuses to undertake health surveillance, it is impossible for the employer to fulfil a legal obligation and for the competent doctor to certify fitness for work. Therefore, the worker is not allowed to work.

What are health promotion activities?

Health promotion is a health activity that aims at the adoption of conscious, virtuous behaviours for health and safety in order to abandon negative behaviours. For example, health promotion concerns diet, physical activity, end of lifestyle habits such as smoking, alcohol-related problems, drug use, in addition to the participation in cancer prevention programs, vaccination, stress management, blood pressure and body weight control, etc.

The competent doctor implements voluntary programs for health promotion in the workplace. The workplace is the ideal environment to involve many people at the same time, because they are more easily reachable and supervised, according to art. 25 of the Legislative Decree no. 81/08.

What is the Certificate of fitness for work? What are the principles?

The Certificate of fitness for work is the result of the health surveillance procedure and concerns a specific task identified by the employer.

The following elements are necessary for a correct assessment:

- **Updated and adequate** risk assessment for the specific task.
- **Appropriate health surveillance**. In particular, a correct assessment of the health of the worker and of any pathologies in order to assess the causes, severity, prognosis and any interference or correlation with the work.

The Certificate of fitness for work should include the following elements:

- Do not discriminate sick workers and healthy workers.
- Protect the employment inclusion of vulnerable workers.
- Take into account the professionalism of the worker.
- Be strictly individual (only valid for the worker).
- It must not contain indications or references to the state of health.

- It should be complementary and not alternative to primary prevention measures.
- Be a stimulus for the adoption of technical, organizational, procedural, health and non-health preventive measures.

The competent doctor formulates the judgment of suitability during preventive and periodic assessments and at the resumption of work upon request (Legislative Decree no. 81/08). The competent doctor informs the employee and the employer accordingly.

The worker and the employer must comply with this judgment. The judgment is necessary in order to protect the health of workers from risk factors that can cause occupational damage, aggravate non-occupational pathologies or compromise physiological conditions. The judgment is necessary in order to protect the community, in the event of workers with diseases that affect the performance of tasks at risk. It protects the workers and third parties such as work colleagues, the public.

What are the types of Certificate of fitness for work?

The Legislative Decree no. 81/08 (art. 41, paragraph 6) provides for the following Certificates of fitness for work:

a – Fitness

In this case you are fully fit for work and to carry out all the tasks.

b – Partial, temporary or permanent fitness, with prescriptions or limitations

If you are affected by pathological or vulnerable conditions, you may have problems in carrying out some tasks related to your job. An example of a limitation is night shifts (for example for a worker with major heart disease), or for manual lifting of weight (for example for a worker with lumbar disc herniation), or for exposure to pesticides (for example for a worker with blood or liver disease). An example of a prescription may concern the use of specific means of individual protection. The limitations or prescriptions can be temporary (and the judgment must indicate the temporal limits) or permanent, depending on the state of health.

c – Temporary fitness

When there are temporary pathological conditions that endanger your health (for example a worker suffering from a serious respiratory disease not yet controlled).

d – Permanent unfitness

When there are permanent pathological conditions that endanger the health of the worker.

What happens if you are permanently unfit for work?

If you are permanently unfit for a specific task, the employer will assign you to an equivalent task, if possible, or lower task and will maintain the same remuneration (Article 42, Legislative Decree no. 81/08).

What happens if you do not agree with the judgement expressed by the competent doctor?

If you (or, in rare cases, the employer) believe that the judgment of the competent doctor is incorrect or unjustified, according to art. 41 of the Legislative Decree no. 81/08 you can appeal the competent supervisory body (within 30 days from the date of notification of the judgment). The competent supervisory body will confirm, revoke or modify the judgment of the competent doctor.

Who can access your health data?

The results of health checks are saved in your health record file. The health record file is kept under the responsibility of the competent doctor, according to the laws in force on the treatment of health data. The competent doctor shall establish a health and risk file for each worker. The health and risk file contains the health data, the results of examinations and assessments, and the level of the risk factors to which the worker is exposed.

The health and risk file is subject to professional secret; it must be secured and kept in a safe place.



You can ask a copy of the health record file and know the outcome of the examinations performed during the health surveillance.

Health data are collected anonymously and collectively for the preparation of the annual health report. The annual health report is presented to the employer, to the head of the prevention and protection service and to the worker safety representative, as established by art. 35 of the Legislative Decree no. 81/08.

What shall a doctor do if an occupational disease or a work-related disease is diagnosed?

If a doctor suspects an occupational disease, s/he is obliged to:

1 – Declaration of an occupational disease

Law reference

Art. 139 of the Decree of the President of the Republic no. 1124/1965, amended by art. 10 of the Legislative Decree no. 38/2000.

When should the doctor write the declaration?

When the doctor suspects an occupational disease published in the list of diseases for which reporting is mandatory, pursuant to art. 139 of the Decree of the President of the Republic and subsequent amendments and additions, as approved by the specific Ministerial Decree, and periodically updated on the basis of the indications of the Scientific Commission established by art. 10 of the Legislative Decree no. 38/2000. The latest update of the list was approved with the Ministerial Decree of 10 June 2014. The list is divided into three sub-lists:

- **list no. 1 of diseases** “with a highly probable occupational origin”.
- **list no. 2 diseases** “with a limited probability of occupational origin”.
- **list no. 3 diseases** “with a possible occupational origin”.



The doctor is obliged to report the event even without the consent of the worker and even if the worker is not insured at INAIL (National Institute for Accident Insurance).

What information should be included in the declaration?

- Identification data of the doctor.
- Personal data of the worker.
- Information relating to the current job of the worker.

- Identification data of the current employer.
- Information about the disease, including the identification code of the disease and of the job.
- Date of diagnosis.
- Risk factors that could have caused the disease.
- Symptoms.
- Clinical examinations.
- Laboratory analysis and tests (copies attached if possible).
- Place, date and signature of the doctor.

Responsible Authority

The health prevention and protection service in the workplace of the local health authority (for example SPISAL or SPreSAL) and the competent local employment directorate. The purpose is to inform the competent authority for any supervisory and control activities and for epidemiological reasons.

2 – Certification of occupational disease by Inail

This certification allows INAIL to begin the procedure for the recognition of the occupational origin of the disease and any provision of services.

Law reference

Art. 53 - 251 of the Decree of the President of the Republic no. 1124/1965 and subsequent amendments and additions.

When

The certificate is issued when a doctor diagnoses a disease and suspects an occupational origin.

Necessary information to be included in the certificate

- Address of the worker.
- Place of any hospitalization
- Detailed report of the symptoms declared by the worker and detected by the doctor. The doctor is obliged to provide Inail with any further information.

Beneficiaries

The Decree of the President of the Republic no. 1124/1965, as amended by the Legislative Decree no. 151/2015, provides that the doctor issues the certificate and transmits it to INAIL, exclusively digitally starting from 22 March 2016. The worker might have the right to compensation.

List of occupational diseases

The Ministerial Decree of 9 April 2008 lists occupational diseases, as provided for by art. 10 of the Legislative Decree no. 38/00. There is a detailed list of pathologies that are work-related, sorted by cause and task as well as the maximum compensation period from the termination of the work at risk (with diversification for diseases linked to specific agents). Occupational diseases are divided into two categories:

“Listed” occupational diseases

- Diseases listed in the “New list of occupational diseases in agriculture pursuant to art. 211 of the Decree of the President of the Republic no. 1124/1965 and subsequent amendments and additions” (Annex no. 5 to Presidential Decree no. 1124/1965).
- The legal presumption applies to their origin.
- It is compulsory to fill in the first occupational disease certificate.
- Inail has the responsibility to verify the causal link.

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Example:

A farmer suffers from confirmed lumbar hernias. If he works with machines that cause vibrations or if he manually moves loads, it is mandatory to complete the occupational disease certificate. This pathology is “listed” and if the occupational disease is proven, compensation is generally automatic.

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“Non-listed” occupational diseases

- Diseases not listed in the “New list of occupational diseases in agriculture pursuant to art. 211 of the Decree of the President of the Republic no. 1124/1965 and subsequent amendments and additions” (Annex no. 5 to Presidential Decree no. 1124/1965).
- The worker has to prove the causal link (Judgement of the Constitutional Court No. 179 of 10 February 1988).
- Inail has the responsibility to verify the causal link.



Some examples of “listed” occupational diseases in agriculture

- **Spondylo-discopathies** (for example hernias or disc protrusions due to the manual handling of loads or vibrations transmitted to the whole body).
- **Tendinopathies of the rotator cuff** (for example tendon injuries of the supraspinatus muscle due to repetitive movements with use of force without pauses).
- **Hypoacusis** (for example bilateral hearing loss or loss due to noise during work activity).

What if Inail does not recognize or compensate the reported disease?

You can propose an appeal and submit a medical-legal certification explaining the causal link between work and disease.

You have the right to appeal against INAIL about temporary or permanent disability (or even organic damage, after 25 July 2000), pursuant to art. 104 of the Decree of the President of the Republic no. 1124 of 30 June 1965, “Consolidated Law on compulsory insurance against accidents at work and occupational diseases”.

Medical report for the Judicial Authority

Law reference

Art. 365 of the Criminal code, art. 334 of the Code of criminal procedure, arts. 589 - 590 - 583 of the Criminal code.

When should the Medical report be drafted?

Article 365 of the Criminal Code establishes the obligation to report in case of a crime to be proceeded ex officio. This provision does not apply when the report would expose the assisted person to criminal proceedings. An occupational disease is considered as to be prosecuted ex officio if it has caused death (Article 589 of the Criminal Code) or serious or very serious personal injury (Article 590 of the Criminal Code), as defined by art. 583 of the Criminal code.

Necessary information

Art. 334 of the Criminal procedure code indicates the information to be included in the report:

- Person to whom assistance has been provided.
- Place where the assisted person is located.
- Further information to identify the assisted person.
- Place, time and circumstances in which the assistance was provided.
- Useful information to establish the circumstances of the event, the means by which the event was committed, diagnosis and prognosis.

What to do in case of an accident at work?

1 – In the event of a minor or medium serious accident at work you must (Article 52, Consolidated Law):

- **Inform immediately your employer** (or make inform your employer, if you are unable).
- **Contact the company doctor**, if available, **or the emergency room immediately** and explain the situation.
- **The doctor will give you the first medical certificate** with the diagnosis and the number of days of “absolute temporary inability”.
- **Deliver a copy of the certificate to your employer**, who will report to INAIL, if the prognosis exceeds 3 days after the day on which the accident occurred.
- Before the expiration of the prognosis **you should go to the INAIL clinics** where a medical examination will ascertain **whether or not to continue the absolute temporary inability**. If the inability is confirmed, you will be subjected to another examination and you will receive the same day a certificate for your employer in order to continue the temporary inability. If the accident is closed, you will receive a certificate that attests that you are fit for work again, you have to give this certificate to your employer.



In case of minor accidents with a prognosis of less than 3 days, INAIL does not compensate you for the injury and therefore you will be entitled to normal benefits from your employer.

If you are a self-employed worker in agriculture, the leader of your team shall make a report in the event of an accident.

2 – In case of serious or very serious injury

Inail or the judicial police report all cases of serious or very serious accidents directly to the Public Prosecutor's Office, who must prosecute the crimes of serious or very serious negligence ex officio, **without the need of any complaint from the injured person.**

In cases of death of the worker because of an accident, the Public Prosecutor's Office will initiate an investigation for **voluntary homicide.**

How to get compensation for an accident at work?

All employers are obliged to insure you for both work-related injuries and occupational diseases.

The insurance is managed by INAIL and aims to guarantee you the necessary health, rehabilitation and economic protection, in the event of an accident at work and an occupational disease.



INAIL services are automatic, i.e. they are activated even if your employer has not insured you or is not up to date with the payment of insurance premiums.





07



Health protection

Health is everyone's right, even yours. An overview of the Italian health system and how to enjoy the services for migrants, whether they are legally or temporarily present in the Italian territory.

The Health System in Italy

What

The Italian national health system (SSN) is a publicly funded system that guarantees health assistance. The Italian national health system has a network of professionals, services and hospitals.

Registration at the Italian national health system is possible for people legally residing in Italy. Registration to the Italian national health system allows to choose the general practitioner (family doctor) and/or paediatrician for children up to 14 years old. General practitioners offer medical examinations and home medical examinations for free as well as prescription of medicaments and prescription of specialist examinations. The general practitioner and paediatrician can be replaced at any time.

Who

Health is a fundamental right recognized by the Italian law. Foreign citizens legally residing in Italy have the same rights as the Italian citizens. Foreigners temporarily present in Italy without a valid permit of stay have the right to healthcare. People without economic means have the right to healthcare.

How

You must register at the national health service in order to access public health services. You can register at the local health authority (ASL) of the city, area or neighbourhood where you live. **You need a permit of stay and a tax identification number.**

When you register at the public health service you receive a **health card**, which gives you the right to access public health services. On the health card you can find your **personal identification code, your name and that of your family doctor.** The health card has the same expiry date as your permit of stay. In order to renew it the health card, you should submit copy of the application for the renewal of the permit of stay.



If you do not have a valid permit of stay (for example because it has expired or it has not been renewed or because you have never had one) and you have important health problems, you still have the right to healthcare. You can ask the local health authority of the area where you live what you can do.

Options may vary by region

1 – You can apply for the STP card (temporarily present foreigner).

In this case, you will need to communicate: name, surname, sex, date of birth, nationality. **Remember that the law prohibits healthcare professionals from reporting or communicating your details to the police.**

2 – You can choose a general practitioner in the list of the local health authority.

The STP card allows you to

- Receive healthcare in STP clinics.
- Diagnostic tests.
- Specialist medical examinations.
- Go to the hospital for one day (day hospital).
- Be hospitalized for several days, if you need it.
- You will not have to pay the doctors and hospitals, if you cannot economically afford, you will pay only a small part of the expense (known as “the ticket”). If you do not have the financial means to pay for the ticket, you can still receive healthcare for free (through the XO1 code).



Don't be afraid to go to the doctor or to the hospital! Italian law prohibits the doctors from reporting you to the police if you do not have a permit of stay. The duty of doctors, nurses and of the health system is exclusively to help those who are sick!

Health rights of migrants

- **Consolidated Law no. 40 of 6 March 1998, art. 32-34:** non-EU nationals with a valid permit of stay have the right to register at the national health service - SSN, (compulsory or legal registration is free and is different from paid voluntary registration) and they have the same rights as Italian citizens.
- **Costs:** tickets and free services in case of need or in protected circumstances.
- **STP (temporarily present Foreigner):** urgent and essential healthcare provided for illness or injury, including preventive services.
- "Urgent and essential healthcare" as defined in the Communication of the Ministry of Health no. 25 of 24 March 2000.
Urgent healthcare: the postponement of this healthcare would cause harm or danger to the patient's health.
Essential healthcare: Health, diagnostic or therapeutic interventions related to non-dangerous diseases in the short term, but which could lead to greater harm or risk (for example complications, chronic diseases or deterioration).
- **Prohibition against reporting the patient to the police.**
- Like for Italian citizens, **migrants without permit of stay can be assisted freely in case of need.**

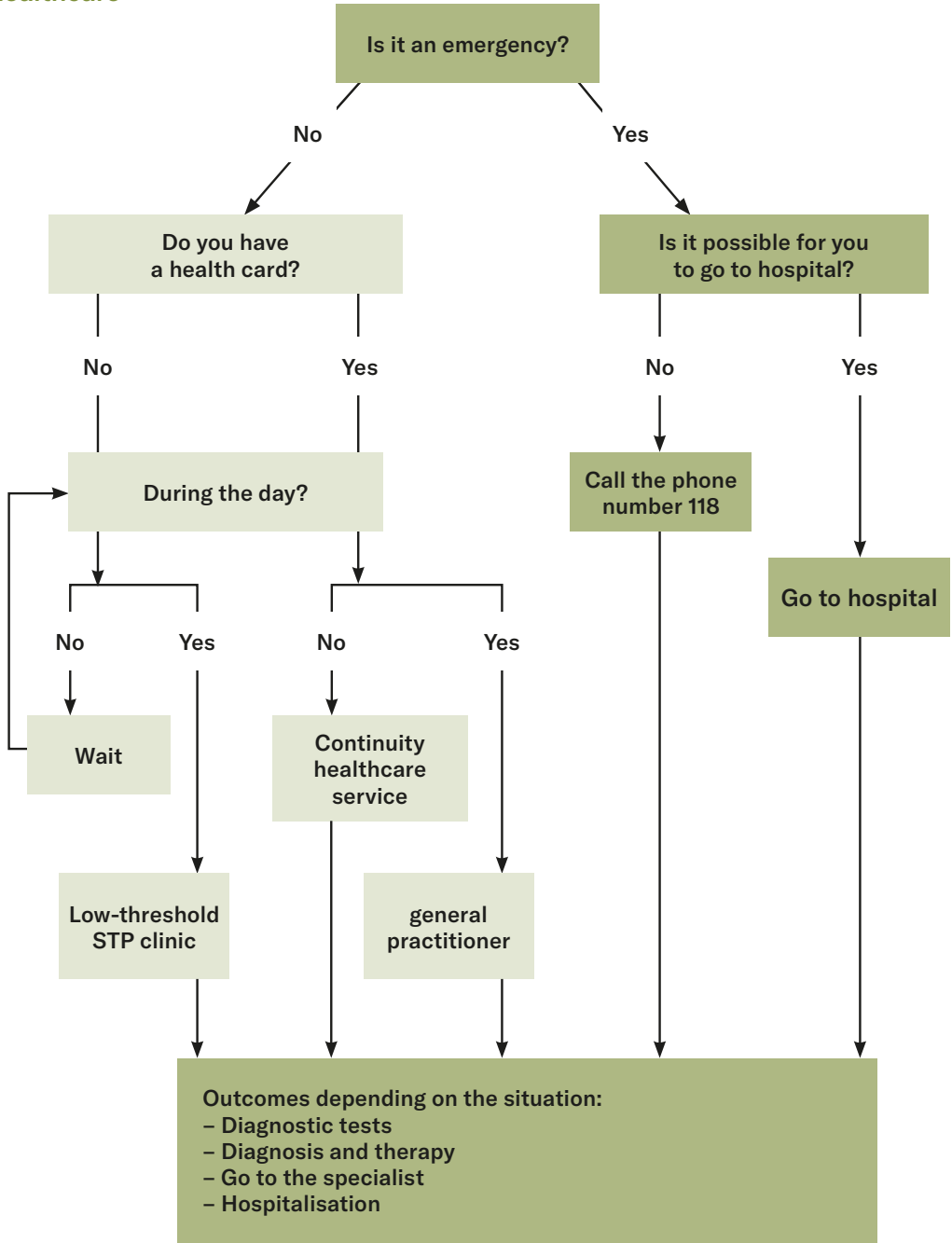
Access to healthcare

A – General medicine service

You go to the General practitioner (or family doctor) when you have health problems. The doctor has an office and offers free medical examinations, on set days and hours.

You will need to go to your general practitioner for the following services:

- 1 – Sickness certificates if you are a worker.
- 2 – Requests for specialist medical examinations and diagnostic tests
- 3 – Requests for non-urgent hospitalization.
- 4 – Prescription of medicaments.



When the patient cannot go to the clinic, the family doctor can come to the patient's house.

The paediatrician is the doctor for children from 0 to 14 years old. The doctor makes periodic visits, monitors the growth, drafts certificates, prescribes medicaments, tests and medical examinations. In some hospitals, you can choose the paediatrician immediately after the birth and before leaving the hospital. Alternatively, you can go to your local health authority.

B – Continuity healthcare service or Medical Guard

During the night, on weekends or holidays, there is a continuity healthcare service that offers the services of the general practitioner and paediatricians. This service is available only for those who are registered at the Italian national health system. Foreigners who have STP card have to wait for the clinics to open. In case of emergency, call the emergency number.

C – Access and use of the emergency room and 118

In situations of health emergency (accident, injury, life-threatening situations or situations where waiting could lead to health damage), it is possible to go to the emergency room of the nearest hospital to receive the first healthcare.

Emergency room examinations are done according to the severity of the symptoms detected by the doctors. At the entrance triage, healthcare professionals assign a color-coded priority to ensure immediate assistance to people in danger of life and to regulate access in relation to the severity of the symptoms.

You need a written request from the family doctor in order to be hospitalized, but in situations of health emergency the hospitalization is arranged by the emergency room doctor. Hospitalization costs are paid by the National Health System.

In emergency situations that require immediate medical assistance, it is possible to contact the phone number 118. It is a free public service that allows you to receive prompt intervention 24 hours a day. Its function does not replace that of the general practitioner or the continuity healthcare service. When calling the phone number 118 it is necessary to provide the following information: name, surname, telephone number, description of the emergency, address where to help is needed.

D – STP Clinics or low-threshold clinics

Foreigners who do not have a valid permit of stay and a tax identification number can apply for a health card for temporarily present foreigners. This card is valid for 6 months and allows you to access public health care. The card can be renewed in case of need. The personal information of the card is reserved, and the patient cannot be reported to the police authorities.

The card gives the right to have access to specialist medical examinations, hospital, and all that is necessary health care.

Minimum service may vary a lot. In some cities, this service is managed by public health institutions, and in other cities it is managed by private social organizations. In some cities, temporarily present foreigners have the right to have a general practitioner.

E – Family counselling centre

This service protects and promotes the psychophysical and social health of women, couples, adolescents, boys and girls, both Italians and foreigners (concerning the body, feelings and relationships). Foreign women without a permit of stay can be helped here. **Access is free, a ticket is paid for some specialist services.**

When can you contact the Family counselling centre?

- Pregnancy.
- Assistance after childbirth and breastfeeding support.
- Birth preparation courses for women and couples.
- Consultations, medical examinations and certificates for voluntary termination of pregnancy (IVG).
- Consultations, medical examinations and certificates for the birth in anonymity.
- Contraception consultations and medical examinations.
- Periodic gynaecological checks.
- Prevention of female cancers.
- Advice and assistance during menopause.
- Compulsory and recommended vaccinations.
- Advice on social and psychological problems.
- Fertility, infertility.
- Sexually transmitted diseases.

Many health professionals (gynaecologists, paediatricians, midwives, nurses, health assistants) and psychological and social professionals (psychologists, social workers, sociologists, sometimes cultural mediators) work here.



Everyone can go to the Family counselling centre, even without a doctor's prescription. Anonymity, confidentiality and professional secrecy are guaranteed. The law prohibits staff from reporting to the police foreigners without a valid permit of stay. You can go to the Family counselling centre even if you don't know how it works: the staff will help you understand your rights and duties.



For further information:

→ www.salute.gov.it/portale/documentazione/p6_2_5_1.jsp?id=118

Specific services

A – Free maternity services

What

There are many free services to protect the health of women and children. Free services are provided in order to facilitate reproductive health of women, before, during and after pregnancy.

Rights in the preconception phase

- The first gynaecological examination, including pap test, and contraceptive or preconception indications.
- The first obstetric examination.
- Antibody tests and immunological tests (e.g. Coombs test, Rubella, etc.).
- A complete laboratory analysis of blood.
- A pap test, if not done recently.
- Services necessary to ascertain a procreative risk related to a disease or a genetic risk in one or both parents as evidenced by the medical history of the couple or by the family history.

During pregnancy you have the right to

- Periodic obstetric-gynaecological examinations.
- Birth preparation courses (prenatal training).
- Assistance for the postnatal period.
- A blood laboratory analysis or complete blood test, including blood group and Rh factor.
- Serological tests on antibodies covering many diseases that are dangerous for the child, including toxoplasmosis, some sexually transmitted diseases and HIV.
- In the event of an abortion threat, all services necessary for pregnancy monitoring are also free of charge. All specialist services necessary for monitoring the pathological conditions that involve a risk for the mother or foetus, including invasive prenatal diagnoses are free.

Who

The birth preparation course aims at accompanying women in the pregnancy planning process from conception to birth, and even in the period immediately following pregnancy, in order to facilitate the recovery of the mother during the puerperium (from birth to the next menstruation) and breastfeeding of the baby. In Italy, the law allows foreign women without a permit of stay to obtain a permit of stay during pregnancy and up to 6 months from the birth of the child. The permit of stay allows women to access the services of the preventive monitoring free of charge.

How

The general practitioner and the specialist as well as the specialist from the Family Counselling Centre can give you a prescription in order to have free access to care services for the preparation for childbirth.



For further information

Multilingual health care informative brochure:

→ https://www.salute.gov.it/portale/documentazione/p6_2_5_1.jsp?lingua=italiano&id=118

Legislation on health care rights of migrants in Italy:

→ <https://integrazioneimmigranti.gov.it/it-it/Ricerca-norme/Dettaglio-norma/id/12/Salute>

Informative brochure containing addresses of health care services in specific provinces:

→ https://www.salute.gov.it/portale/documentazione/p6_2_5_1.jsp?lingua=italiano&id=119

Multilingual initiatives to protect the health of foreigners during Coronavirus Emergency:

→ <https://sociale.regione.emilia-romagna.it/intercultura-magazine/notizie/covid-19-cosa-ce-da-sapere-in-diverse-lingue>

B – Mental health

Who

It may happen that in some moments of life you may feel sad, worried, overwhelmed by thoughts or you may experience states of anguish and agitation. These experiences sometimes prevent you from carrying out normal daily or work activities, managing interpersonal relationships or getting adequate rest during the night.

The World Health Organization (WHO) states that:

“Health is a state of complete physical, mental and social well-being, and not simply the absence of disease or infirmity”.

Taking care of your health means worrying about your emotional and psychological well-being as well as your body and organic pathologies.

After consulting the general practitioner, you can have access to the psychiatric and psychological services offered by the National Health System if you are going through a condition

of uneasiness, for example linked to traumatic and/or stressful events characterized by relational difficulties, violence and family conflicts, abuse and harassment, bereavement, separations, serious illnesses, forced migration but also economic difficulties, housing, work, integration.

How

Contact your general practitioner or clinic for temporarily present foreigners in order to access to psychological or psychiatric services in your area.

What

In Italy, the network of mental health services is organised as follows:

Department of Mental Health (DSM)

The mental health department (DSM) includes facilities and services that manage care, assistance and protection of mental health within the area defined by the local health authority (ASL).

The mental health department DSM offers the following services

- Day care: mental health centres (CSM) and outpatient clinics in hospitals.
- Semi-residential services at day centres (CD).
- Residential services: residential facilities (SR) for therapeutic-rehabilitation and socio-rehabilitation.
- Hospital services: psychiatric diagnosis and healthcare services (SPDC) and day hospitals (DH).
- University hospitals and private hospitals.



For further information on the services in your area, you can visit the **registry of the mental health departments (DSM)**.

Mental health services



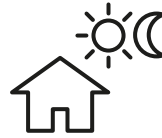
Mental health centres

They handle health care requests and offer daytime **psychological or psychiatric counselling** with multi-professional teams.



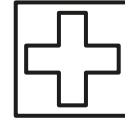
Day or semi-residential centres

These facilities have a therapeutic or rehabilitative function. These local facilities are open during the day and offer personalized help.



Residential facilities

In case of mental illness, you can stay in a non-hospital facility for rehabilitation purposes.



Hospital services

Hospitals offer psychiatric diagnosis and therapy at the psychiatric diagnosis and treatment service both in *day hospital* and in hospitalization.

Mental health centre

The mental health centre (CSM) aims at those **who experience psychological distress or who have a psychiatric pathology**.

It coordinates locally all prevention, treatment and rehabilitation interventions. A multi-professional team of psychiatrists, psychologists, social workers and nurses works in the mental health centre.

The mental health centre is usually **opened 6 days a week for at least 12 hours** and manages outpatient (i.e. at the facility) and/or home interventions.

Some of the main interventions carried out are listed below.

- Psychiatric and pharmacological treatments, psychotherapies, social interventions.
- Diagnosis through psychiatric examinations, psychological interviews for the definition of therapeutic rehabilitation and socio-rehabilitation programs, with outpatient, home, network and residential interventions.
- Interaction with services for addictions (alcoholism, drug addiction, etc.).
- Screening activities for admissions and hospitalization.

- Inclusion programs for psychiatric patients concerning employment, extra-family guardianship, home care, in agreement with the Municipalities.
- Collaboration with voluntary associations, schools, social cooperatives and the network of local agencies.

Day-time centre

The day centre (CD) is a local **semi-residential facility** with therapeutic-rehabilitative objectives. It is open at least **8 hours a day, 6 days a week**.

You can experiment and learn skills in self-care, in the activities of daily life and in individual and group interpersonal relationships, in relation to personalized therapeutic-rehabilitation projects also for work inclusion.

Residential Facilities

The residential facility (SR) is a **non-hospital facility** where part of the therapeutic-rehabilitation and socio-rehabilitation program is carried out for psychiatric patients. The mental health centre manages access to these facilities according to the personalized program of each patient.

Psychiatric Diagnosis and Treatment Service

Psychiatric Diagnosis and Treatment Service (SPDC) is a hospital service where **voluntary** and **compulsory** psychiatric treatments are carried out in hospital conditions. It is located within the hospitals (hospitals, hospital facilities, university hospitals). Each Psychiatric Diagnosis and Treatment Service has no more than 16 beds and is equipped with adequate spaces for common activities.

Psychiatric day hospital

The psychiatric day hospital (DH) is a semi-residential assistance facility where **diagnostic and therapeutic rehabilitation services are provided in the short and medium term**. It is open at least **8 hours a day, 6 days a week**. The mental health centre manages access to these facilities on the basis of specific programs.

The main activities are

- Diagnostic tests of different complexity.
- Pharmacological treatments.
- Reduction in the number of hospitalizations



For further information

→ www.salute.gov.it/imgs/C_17_pubblicazioni_558_allegato.pdf

Addiction departments

The public services for pathological addictions of the Health System are called Ser.D. Addiction departments and were established by law no. 162/90. Addiction departments deal with prevention, treatment, rehabilitation, social and work inclusion activities. Doctors, psychologists, social workers, educators, nurses and employees are the professionals who work there. In general, these services carry out primary support and orientation interventions for drug addicts and their families. They provide diagnostic, psychological guidance and support (of different types and various degrees) and therapeutic services relating to the state of addiction and the possible presence of infectious diseases or psychiatric diseases.



Professional secrecy is compulsory for the operators and professionals as provided for by the Italian law and the code of ethics. Upon request of the patient (expect for minors), the service may be carried out in an anonymous way.

How

Services and access principles are different throughout Italy and within each region. Ask your general practitioner for advice.

Who

You can contact the service if you use substances (drugs, alcohol, psychotropic medicaments, etc.) occasionally, habitually or daily (and therefore you are in a state of addiction).

You can contact the service if you suspect that a child uses substances. You can find helpful advice and guidance on the management of these issues.



For further information

→ www.politicheantidroga.gov.it/it/servizi-e-contatti-utili/serd/i-serd/

Vaccination of children

What

Some infectious diseases can be prevented through vaccination. Vaccines are substances that facilitate the creation of antibodies that prevent the contagion of these diseases. Many vaccines are free for children and are often inoculated with simple injections. There is a vaccination schedule for every age.

In addition, there are ten compulsory vaccines:

- Anti-poliomyelitis.
- Anti-diphtheria.
- Anti-tetanus.
- Anti-hepatitis B.
- Anti-whooping coughs.
- Anti-Haemophilus influenza type B.
- Anti-measles.
- Anti-rubella.
- Anti-mumps.
- Anti-chickenpox.

It is important for people who have been vaccinated in their country of origin to obtain the documentation, in order not to repeat the vaccination.

Who

There is a vaccination schedule that indicates the age of the children in order to obtain the best response to the vaccine.

First year of age

- **Compulsory and free:** hexavalent vaccination (diphtheria, tetanus, pertussis, poliomyelitis, Haemophilus influenza type b and hepatitis B), three doses: 3rd month, 5th month and 11th month.
- **Recommended and free:** pneumococcal vaccination, three doses: 3rd month, 5th month and 11th month. Meningococcal B vaccination, four doses: 3rd month, within the 5th month, 6th month, and 6 months after the last. Rotavirus vaccination, two or three doses: 6th week, within 24 weeks (third dose within 32 weeks).
- **Recommended and free for risk groups:** influenza vaccine, 1 dose from the 6th month onwards.

Second year of age

- **Compulsory and free:** measles-mumps-rubella and varicella vaccinations, one dose between the 13th and 15th month.
- **Recommended and free:** meningococcal B vaccination (second dose at the 13th month, meningococcal C vaccination, one dose between the 13th and 15th month.

5-6 years of age

- **Compulsory and free of charge:** second dose of diphtheria, tetanus, pertussis, polio vaccinations, as well as measles-mumps-rubella and varicella vaccinations.

11-18 years of age

- **Compulsory and free:** diphtheria, tetanus, pertussis, poliomyelitis vaccinations, second dose at 12-18 years as well as measles-mumps-rubella and varicella vaccinations.
- **Recommended and free:** papillomavirus vaccination, 2 doses between 11th and 12th birthday, 3 doses after the 14th or 15th birthday, ACW135Y quadrivalent C meningococcal vaccination, 1 dose between 12th and 18th year.

How

The paediatrician provides information to parents about vaccination procedures and schedules regular check-ups in order to verify that the children have received mandatory vaccinations. It is important to keep the vaccination record file, because you will need to prove that children have been vaccinated in order to attend the school.



Undocumented minors and unaccompanied minors also have the right to free vaccinations.



For further information

→ [www.salute.gov.it/portale/vaccinazioni/
menuContenutoVaccinazioni.jsp?lingua=
italiano&area=vaccinazioni&menu=fasce](http://www.salute.gov.it/portale/vaccinazioni/menuContenutoVaccinazioni.jsp?lingua=italiano&area=vaccinazioni&menu=fasce)

→ [www.salute.gov.it/portale/vaccinazioni/
dettaglioContenutiVaccinazioni.jsp?lingua=
italiano&id=657&area=vaccinazioni&menu=vuoto](http://www.salute.gov.it/portale/vaccinazioni/dettaglioContenutiVaccinazioni.jsp?lingua=italiano&id=657&area=vaccinazioni&menu=vuoto)

Female cancer prevention

What

There are two preventive tests that all adult women can perform in order to detect tumours in the female organs for an early medical treatment:

- Mammography for breast cancer.
- The pap test for cervical cancer.

When cancer of these female organs is discovered early, it is much easier to heal and prevent it from spreading throughout the body. Breast cancer is the leading cause of female mortality and its presence tends to increase, while cervical cancer is decreasing, but it remains an important risk for the life of women.

Who

The National Health Service offers all women **over 50 until the age of 69 a free screening program**, including a free Mammography every year.

After the **age of 35** it is highly recommended to schedule mammography on a regular basis.

The National Health Service also offers pap test **every three years to women between 25 and 64 years of age**.

How

Mammography consists of an x-ray of the breasts, which are slightly compressed between two surfaces in order to make a scan. You must bring your health card and the letter of invitation to the screening.

The pap test consists in taking a sample of a few cells from the cervix with a spatula to be later analysed in the laboratory.

In order to ensure reliable results, the test should be performed:

- At least 3 days after the end of menstruation and in the absence of blood loss.
- Refraining from sexual intercourse in the 2 days before the test.
- Avoiding vaginal pessaries, creams or douches in the 3 days prior to the test.



For further information

→ www.lilt.it/pubblicazioni/nastro-rosa/13639/ottobre-e-il-mese-rosa

→ www.lilt.it/pubblicazioni/opuscoli-per-la-prevenzione/43/il-tumore-del-collo-dellutero

D – Intercultural mediators in the health sector

What

Intercultural mediators who collaborate with the health service can help doctors and nurses to communicate with patients who do not speak Italian

Intercultural mediators in the health sector can perform different activities:

- Accurately translate messages between healthcare professionals and patients, in order to avoid health risks or misdiagnoses.
- Improve the quality of the healthcare service, help healthcare professionals to obtain a detailed medical history and explain drug therapies, etc.
- Help patients of foreign origin to ask questions and express their needs, as well as to learn how the local health system works and how to benefit.

Who

This service is offered in some clinics or hospitals, and is not guaranteed in all health facilities. You can find this service more often in maternity wards, or in clinics for temporarily present foreigners.

How

Many hospitals offer an on-call intercultural mediation service. The health professional activates this service in order to communicate with the patient, and then the mediator will participate in the scheduled appointments. Intercultural mediators work permanently or on a rotating basis in some hospitals that regularly receive patients of foreign origin.

Some situations require immediate translation, for example in the emergency room. Many facilities have a remote interpreting service and translators are available in few minutes by phone or video call.

It is not always possible to find a mediation service in all facilities and the healthcare professionals decide when it is appropriate to activate the service.

If you do not know the language, it is preferable to be accompanied by a person who speaks Italian.

FOCUS

Health in agriculture

Working in the agricultural sector involves **exposure to several risk factors**. Work in agriculture has specific characteristics. For example, the work is seasonal, workers perform several tasks in small companies, often far away, almost always family-run, with irregular contracts and low wages. Often workers work for several companies and several employers at the same time.

Workers (especially migrants) often live in the workplace, in very precarious houses or shacks in the fields, often without adequate sanitation. Access to health services and training is often absent or difficult. Under these conditions, the activities of the supervisory bodies are complex and not capillary.

In agriculture, all **the main risk factors of Occupational Medicine are generally present**. These factors may be present in the same working context because of the multiplicity of activities that the worker performs during a working day, as well as throughout the year. Their presence is sometimes unpredictable because of the natural variability of seasonal cycles and weather conditions. There are **different scenarios**, a circumstance that makes risk assessment complex.

What are the main occupational health and safety risks in agriculture?

The main risk factors are shown below together with the potential damage to health, which always depends on the mode, duration and intensity of exposure and individual susceptibility/vulnerability.

A – Chemical agents

Agricultural workers may be exposed to a variety of products, including **plant protection products/pesticides** (in numerous occasions), **mineral oils or solvents for the maintenance and cleaning of machinery, fuels** for agricultural machinery and tools, **“medicated feed”, gas natural, detergents/ disinfectants** for cleaning or disinfection of stables and pigsty, medicines for animals.

It is possible to be exposed to numerous plant **allergens**, such as pollen, sap and parts of plants, flowers or fruits; or animal allergens, such as hair, dandruff, poisons and droppings, larvae and insects, or other allergens such as moulds/fungi, mites.

Effects on health

Some of these agents can cause diseases such as **irritant and allergic dermatitis** or diseases of the **upper and lower respiratory tract** such as bronchitis, pneumonia or allergic asthma. In rare circumstances, even **intoxications and neoplasms**.

For example: open, semi-used and moisture-preserved nitrate-phosphate fertilizer bags can promote the growth of microorganisms on the surface and the production of nitrous gases that are released when the bag is reopened, with the possible onset of inflammatory manifestations of the respiratory system.

Exposure to chemical agents can cause

- Acute effects (which occur in a short time): for example signs of skin or eye irritation, intoxication.
- Chronic effects (which occur with longer times):
- Allergic, skin and respiratory diseases.
- Diseases of the liver and thyroid.
- Tumour disorders: leukaemia, non-Hodgkin's lymphoma, multiple myeloma, lung cancer.
- Diseases and symptoms of the central and peripheral nervous system.
- Fertility alterations in men and women, endocrine alterations (hormones).

B – Ergonomic risk factors

Manual handling of loads – incongruous postures

Pursuant to Article 167 of the Legislative Decree no. 81/08, manual handling of loads means the set of

“transport or support operations of a load by one or more workers, including the actions of lifting, depositing, pushing, pulling, carrying or moving a load, which entail risks of biomechanical overload pathologies, in particular dorsolumbar, because of their characteristics or as a consequence of unfavourable ergonomic conditions”.

In the agricultural sector, there are numerous activities that expose to this risk factor. For example, lifting, transporting, towing or pushing loads (tools, containers, bags, tools), even very heavy ones.

The risk deriving from manual handling of loads occurs for example in the case of lifting loads during the harvesting of both vegetables and fruit, transporting crates or buckets, incorrect positioning of pallets and equipment that cause torsion of the torso and high ground clearance of the hands at the start of the lift.

In agriculture, you are often forced to work by assuming **inappropriate postures** (i.e. abnormal positions of the body or parts of the body, which can cause problems with bones, joints and muscles, if these positions are maintained for a long time).

The most risky operations are, for example

- Movement or capture of medium and large animals.
- Manual excavation work and soil preparation.
- Movement of equipment and material for the construction and management of cultivation (poles, mulching sheets, nets, portable equipment, ladders).
- Treatments, supplies (moving containers for the preparation of mixtures).
- Use and management of the company warehouse with storage of loads and materials.
- Tractor ballasting.
- Operations of green management and maintenance of the area with excavation and construction of masonry works.

- Moving and collecting pruning residues.
- Preparation of the irrigation system, with displacement of pipes.
- Handling of crates and boxes.
- Handling of bags of fertilizer.
- Handling of plants/pots.
- Use of manual equipment with significant weights (chainsaws).
- Barn operations (removal of manure, manual distribution of food).

Effects on health

Potential **damages to health** are generally the injuries affecting the musculoskeletal system (for example protrusions or lumbar disc herniation, osteoarthritis of the knees).

Repetitive movements of the upper limbs

In agriculture, operations such as husking, harvesting, sorting, washing, packaging, pruning, shearing, milking, etc. are often carried out.

These activities can involve:

- Repetitiveness with high frequency of often identical movements.
- Movements that require the application of force.
- Incorrect postures maintained for a prolonged time.
- Fixed, incongruous (or extreme) movements of the upper limbs.
- Insufficient recovery periods (pauses).

Effects on health

Potential damage to health is represented by injuries to the joints and tendons of the shoulder, elbow, hands. Specific activities involve risks for specific areas of the body.

For example: repetitive movements and biomechanical overload of the wrist when milking cattle, or pulling and pushing activities in forestry in placing the trunk of cut trees on the ground, packaging medicaments, manual mowing.

C – Biological risk factors (infectious agents)

In agriculture, there are various work situations that can potentially expose you to the so-called biological risk of infectious diseases.

The transmission of the disease can occur during cleaning activities, milking and grooming operations of animals, handling of excrements, or through insects and parasites or contact with contaminated water and land, etc.

When a disease is transmitted from animals to humans, it is defined as **zoonosis**. Disease can be caused by viruses, bacteria, fungi, single organisms and multicellular organisms or parasites.

Zoonotic agents are conveyed for example with animals to workers in farms, slaughterhouses during meat processing and waste treatment and animal by-products.

Effects on health

The zoonoses potentially derived from agricultural environments are numerous, for example brucellosis, leptospirosis, tuberculosis, toxoplasmosis, mycosis. For some of these diseases, vaccination is possible and mandatory for agricultural workers, for example tetanus vaccination.

D – Physical risk factors

Noise

In agriculture, the equipment and machinery used can expose workers to high levels of noise, albeit not continuously.

Machines are the main source of noise, such as tractors, combine harvesters, excavators, from those pulled by tractors during the milling, plowing and shredding operations.

Workers are exposed to noise during green maintenance, especially if they are harrowing or cleaning ditches, the woodcutters. Animals can also be a source of high intensity noise, for example in cattle or pig farms during feeding or transfer.

Effects on health

Prolonged noise at high intensities (measurable with risk assessment) can cause health damage:

- Hearing disorders: deafness or hearing loss due to noise (permanent decrease in hearing capacity).
- Extra-auditory disorders: hypertension, nervousness, anxiety, insomnia, increased gastric secretion.

Exposure to solar radiation

Many agricultural workers often work outdoors, even in summer. Sunlight is composed of radiation which includes ultraviolet rays (UVA, UVB and UVC).

Ultraviolet light is the harmful component of solar radiation. The risk deriving from exposure to solar ultraviolet radiation varies according to the weather conditions and the hours of the day (maximum in summer and at noon).

Effects on health

Among agricultural workers, prolonged exposure to ultraviolet rays can cause **premature skin aging**, especially on the face, neck and hands. In addition, it can cause **erythema** (redness), **burns**, **increased risk of developing solar keratosis** (or actinic – a condition that can precede a tumour), as well as real **skin cancers** (of the lips, face, other uncovered parts).

Hand-arm and whole body vibrations

The activities that expose to vibrations in agriculture are of three types:

- 1 – Foot worker who works by holding the equipment raised by the two handles (chainsaws, brush cutters).
- 2 – Foot worker who follows and directs the machine on the ground and guides it by means of handlebars (walking tractors, motor mowers, mitre saws).
- 3 – Worker seated inside a vehicle that he is driving (tractors, earth moving machines, etc.).

The hand-arm system is involved in the first two cases. The whole body system is involved in the third.

Effects on health

Mechanical vibrations transmitted to the hand-arm system pose a risk to the health of workers, in particular: vascular problems (for example Raynaud's or "white finger" syndrome), osteoarticular problems (for example in the shoulders, elbows and wrists), neurological or muscular in the upper limb.

Mechanical vibrations (shaking) transmitted to the whole body also involve risks to the health and safety of workers, in particular problems with the lumbar spine (lumbar pain, discopathies).

E – Macro and microclimatic factors

The agricultural worker may perform work in **particularly severe climatic conditions**, such as in the rain, snow, strong wind, or in conditions of high temperature or humidity, often without adequate collective and individual protection devices, such as suitable clothing material, wide-brimmed and circular hat, sunglasses and sunscreen.

In such working conditions, the thermoregulation mechanisms may no longer be sufficient to compensate for a high increase in body temperature or the loss of water and salts.

It should be remembered that these risk factors have already shown in some cases a significant impact on the health of workers, such as **death by heat stroke**, concerning workers engaged in the collection of fruit in the hottest hours of the day.

Workers with cardiovascular and respiratory diseases are particularly vulnerable and at risk and they should be identified during health surveillance.

Potential damage to health are represented by dehydration, cramps and, in the most severe cases, sunstroke and heat stroke, with an increase in body temperature above 40° C and life threat.

Effects on health

– Initial phase: confusion, loss of lucidity, dizziness, nausea, headache, hot, red and sweaty skin.

- Intermediate phase: tremors, goosebumps, hyperventilation, tingling in the fingers, lack of balance
- Full-blown phase: hot and dry skin, unconsciousness, convulsions, permanent brain damage, coma.

F – Risk factors related to work organization

Psychosocial factors

This type of risk is little evaluated in agriculture sector despite the exposure of the workers to numerous psychosocial risk factors like the occasional work, irregular and extreme work shifts, the particular organization of work with several constraints, the type of contract and relationship with employer and colleagues, housing conditions, work overload, irregular pauses, etc.

Effects on health

These factors may lead to health problems such as alteration of some physiological functions, headaches, irritability, unstable mood, harmful behaviours to one's health (alcoholism, tobacco abuse), concentration problems, fatigue, sleep disturbances, eating disorders, mental discomfort and psychiatric conditions such as depression, anxiety, stress and lack of interest in work and daily life.

Accident risk

In agriculture accidents are often unfortunately not reported by the worker or notified to the competent authorities for several reasons. This involves an underestimation of the phenomenon and reduces the possibility of preventive interventions and protection of the worker. The severity of the accident may range from a slight damage (for example a small injury), to a very serious damage that leads to the death of the worker.

Accident risk is a public health problem because of:

- The size and diffusion of the phenomenon.
- The number of workers at risk.
- The direct and indirect consequences – health and non-health - for the worker, for the company and the society.

What are the causes of accidents at work?

The causes of accidents relate to both intrinsic and extrinsic factors.

- **Extrinsic factors** → related to the work environment: for example plants, equipment, machinery which are not up to standard.
- **Intrinsic factors** → related to the individual. For example, the risk of injury may be higher because of the consumption of alcohol, drugs or certain medicaments, because of overtime and atypical work, because of fatigue, previous accidents, other diseases.

The accident is always the result of the interaction between multiple environmental, technical, organizational and procedural factors and individual factors. It is a synthetic indicator of the prevention, health and safety system in the workplace.

A multidisciplinary approach in the strategies of prevention, monitoring and effectiveness of the interventions is necessary.

The accident has numerous and significant consequences, for example for

- **The worker** → mild to fatal damage to health, disability and limitation of work capacity, changes in quality of life, psychosocial problems, demotion.
- **The company** → reduction in productivity, absenteeism, several civil and criminal liabilities, the need for requalification; technical, organizational, procedural adaptations; administrative, management and insurance costs, structural damage, progressive worsening of working atmosphere and corporate image.
- **The society** → higher costs for medical treatment, insurance disputes - useful information for future choices of personal protective equipment (PPE).

The competent doctor may reduce the accident risk with health surveillance and the identification of the predictive factors of accident and the certificate of fitness for work. The accident risk may be reduced through information and training aiming at the specific accident risks to the company, as listed in the Risks Assessment Document concerning the planned technical-organizational interventions.

Co-factors for the prevention of accident risks are adequate training, occasional and seasonal work, linguistic and cultural barriers.

Accident risk in agriculture

The European commission document "protecting the health and safety of workers in the agriculture, livestock, horticulture and forestry sectors" identifies a list of 128 risks.

Main risk factors in agriculture are as follows:

- Risks associated with the use of machines (in particular transversal and/or longitudinal overturns of the tractor because of overload, excessive towing effort, sudden manoeuvres, excessive slope of the ground).
- The use of plant protection products.
- Exposure to weather conditions.
- The use of repetitive manual tasks.
- The use of the same employee in different functions and the daily use of very different machinery and equipment.
- The variety of orographic conditions, cultivation and breeding techniques.
- Job uncertainty.
- Need to begin quickly to work.
- Need to limit the times of processing.
- Distances.
- Presence of workers from other countries.
- Difficulty of timely interventions in case of injury.
- Long working hours and intensification of rhythms.
- Third party activities and tenders.
- Rates of illegality above the national average.
- Commuting.

What are the most common causes of death?

- Transportation accidents (being run over or overturning of vehicles)
- Falls from height (from trees, through roofs)
- Being struck by falling or moving objects (machinery, buildings, bales, tree trunks)
- Drowning (in water reservoirs, slurry tanks, grain silos)
- Handling livestock (attacked or crushed by animals, zoonotic diseases)
- Contact with machinery (unguarded moving parts)
- Entrapments (under collapsed structures)
- Electricity (electrocutions)

**Table 1 /
Main examples
of accidents
in agriculture**

Hazard	Activities
Drowning	Irrigation (systems of canals and wells to irrigate the fields).
Fall from heights	Use of simple ladders, silos maintenance activities, use of agricultural machinery (getting on and off). For example, falling from portable ladders, roofs of barns or rural buildings.
Falling from the same level (slipping)	All operations in the open field, work phases with the presence of water on the surface or floor.
Biological agents	Mixing, loading and distribution of slurry, fertilizer distribution, irrigation by submersion or sprinkler
Contact with animals	Care and management of farm animals. For example, bumps/crashes by cattle..
Mechanical factors	Use of agricultural machinery (for example tractors), open field operations, crushing by falling trees and forestry arrangements.
Work at height	Maintenance and access to silos, wine vessels, use of aerial platforms, construction of rural buildings.
Fire	From flammable substances , high fire loading (for example barns), possibility of self-ignition, fermentation with the development of high temperatures.
Explosion	Presence of explosive atmospheres (Biogas plants, autoclaves, deposit of granular and powdery material, presence of flour).
Chemical substances	Skin contact or ingestion of pesticides or through water or environments contaminated with pesticides.
Shaking	Crushing and burial of crop residues, loading of solid organic fertilizers and distribution in the field, tillage, soil rolling.

Is health surveillance compulsory in agriculture?

Yes, generally. Of course, risk assessment must be done in advance as for all work environments. The obligation exists on farms where there are employees, with permanent or seasonal or occasional contracts, family members working as employees, minors and apprentices. In particular, these is an obligation in the following cases:

– Permanent workers, exposed to specific risk factors for which the obligation provided for by the legislation is in force (Legislative Decree no. 81/08).

Preventive health checks with periodicity to be defined by the competent doctor in

relation to the levels and times of exposure. Art. 41, paragraph 1, let. b of the Legislative Decree no. 81/08 provides a periodicity of once a year, but this periodicity may have a different frequency, established by the competent doctor on the basis of the risk assessment.

– Temporary workers – seasonal workers (under the so-called Simplification decree).

A particular simplification is provided for occasional and seasonal workers who work at the same farm for no more than 50 days a year and who are employed for generic and simple work without specific professional qualifications. The simplification concerns information, training and health

surveillance, as provided for by the Decree of the Ministers of Labour and Social Policies, Health, Agricultural, Food and Forestry Policies of 27 March 2013, concerning provisions pursuant to art. 3, paragraph 13 of the Legislative Decree no. 81/2008.

The “simplified” health surveillance provides for a preventive medical examination which is valid for two years; the worker can also work in other agricultural companies, with a certificate of fitness for work valid for several employers. Bilateral bodies and joint organizations in agriculture can arrange agreements with the local health authority or with competent doctors.

The competent doctor is always required to deliver the health record file and the certification of fitness for work to the worker and to transmit the data electronically on the website of INAIL. The obligations relating to information and training are fulfilled with the delivery to the worker of appropriate information and training material which was certified by the local health authority, bilateral bodies and joint bodies in the agricultural sector.

The material must contain suitable information on the identification, reduction and management of risks, as well as knowledge transfer and procedures for the safe performance of tasks in the company. Foreign workers should be able to understand the information. The employer should verify that the workers have understood all the information.

– **For seasonal workers not exposed to risk, health surveillance is not mandatory.**

Despite the legislation, the obligation of health surveillance in a population with significant occupational risks is still largely eluded. In fact, the agricultural sector still occupies the first places in the ranking of accidents at work, both in terms of frequency and severity.

FOCUS

Personal protective equipment in agriculture

Personal Protective Equipment (PPE) is

“Any equipment intended to be worn and kept by the worker in order to protect him against one or more risks that threaten safety or health during the work activity, as well as any complement or accessory intended for this purpose”.
(Article 74 of the Legislative Decree no. 81/2008).

PPE is used only when the risks cannot be avoided or sufficiently reduced by technical prevention measures, by means of collective protection, by measures, methods or procedures for the reorganization of work (Article 75 of the Legislative Decree no. 81/2008).

PPE must comply with the following requirements

- Compliance with the regulations referred to in the Legislative Decree no. 475/1992 and subsequent amendments and additions
- Risk adequacy.
- Ergonomics.
- Adaptability to the user.
- Compatibility and effectiveness even in the case of simultaneous use of several PPE.
- Presence of instructions on use and maintenance.

The main PPE in use on farms include

- Polyester helmets or helmets to be worn when there is a risk of falling objects from above (for example cutting trees or activities inside holes or ditches).
- Headphones, ear plugs to be worn when working with the tractor.
- Protective goggles and visors to be used in case of pruning and harvesting of tree crops, combine harvesting, grinding, etc.
- Gloves in different materials depending on

the risk: mechanical risks (cuts, vibrations to be used with agricultural equipment such as brushcutters, chainsaws, motor mowers, etc.), chemical risks (use of plant protection products, pesticides, disinfectants) and microbiological risks (contact with animals, the terrain).

- Non-slip boots with reinforced toe or safety footwear with cut protection.
- Respiratory masks suitable for the risk in anti-dust non-woven fabric or masks with anti-dust or gas filters, to be used during pesticide treatment, inspection of cesspools, handling and storage of hay, etc.
- Tight protective overalls and clothing to be used during pesticide treatment, inspection of cesspools, work with animals, preparation of substances for phytosanitary treatment, etc.
- Work positioning systems, fall arrest systems, body harnesses to wear while carrying out work at height.

FOCUS

Migrant workers

Why are they more vulnerable?

In general, migrant workers tend to be employed in the most precarious jobs in the agricultural sector, similarly to other work sectors. In fact they are mainly employed in the so-called “3D” jobs (dangerous, dirty and demanding/ degrading), because local workers generally do not accept this kind of jobs. These jobs are mostly manual, unskilled, tiring and dangerous and within the framework of precarious, irregular and atypical contracts, with flexible hours and sustained work rates.

As a result, they are generally exposed to health and safety risks in the workplace, often more significantly than local workers. Although migrant workers are generally healthy at the beginning of their migration project, their health and safety may be more at risk and less protected, for example due to particular work relationships, linguistic and socio-cultural barriers, different housing and food conditions, difficulties in accessing local health services as well as in the workplace.

All this can lead to the development of a vicious circle, including inadequate and difficult access to diagnostic, therapeutic and preventive services, even in the workplace. A condition of greater “health” susceptibility can lead to health and safety inequalities linked to their migratory status.

The available scientific evidence documents a significant prevalence of accidents at work and occupational diseases of various kinds in migrant workers, including in the agricultural sector. For example, musculoskeletal disorders, skin, respiratory and heat pathologies, infectious diseases, intoxications, neuropsychiatric pathologies. Accidents at work and work-related illnesses are often diagnosed and under-reported. Migrant workers have more limited access to accident insurance coverage than local workers. Musculoskeletal disorders, skin diseases

(contact dermatitis in particular), respiratory and heat diseases, hearing loss from noise, infections, pesticide poisoning are more frequent among migrant workers than among local workers.

A migrant worker may be even more vulnerable in case of the so-called individual conditions of susceptibility on a genetic or acquired basis, if he is exposed to certain risk factors and working conditions (for example, certain types of anaemia susceptible to low temperatures or chemical products, some heart and vascular diseases, arterial hypertension, etc.).

The presence of foreign workers is particularly frequent in agriculture, in particular for seasonal work. The presence of foreign workers entails a series of additional obligations for the employer.

In this regard, art. 28 of the Legislative Decree no. 81/08 states that

“The assessment [of risks] (...) must cover all risks for the safety and health of workers, including those concerning groups of workers exposed to particular risks, including those connected (...) to the origin from other countries (...).”

In addition, art. 36 states that

“The employer ensures that each worker receives adequate information (...) The content of the information must be easily understandable for workers and must allow them to acquire the relevant knowledge. Where the information concerns migrant workers, it takes place after verifying the understanding of the language used in the information materials”.

Moreover, art. 37 states that

“The content of the training must be easily understandable for workers and must allow them to acquire the necessary knowledge and skills in the field of health and safety in the workplace. Where the training concerns migrant workers, it takes place after verifying the understanding and knowledge of the vehicular language used in the training course (...).”

Specific risk assessment for migrant workers

The risk assessment for migrant workers must engage the occupational doctor and include the following essential steps:

- 1 – Characterization of ethnic groups,** this initial step leads to identifying the origin and personal history of migrants, in order to assess any socio-cultural differences. For example, each ethnic group can differ in attitudes, beliefs, adaptability, lifestyles. This results in a different mentality regarding the attitude towards compliance with procedures, understanding the language, compliance with health and non-health prevention interventions.
- 2 – Highlight any differences** (migrants compared to natives) about some indicators related to the risk to health and safety at work (for greater protection), such as:
 - Exposure to the risk factors identified in the risk assessment document.
 - Work organization (shifts, commuting, employment relationship).
 - Information/education/training (outcomes in particular).
 - Accidents, work related illnesses.
 - Conditions of susceptibility/vulnerability.
 - Access to the company health service.
 - Absenteeism, turnover, disciplinary, legal, social problems.
- 3 – Estimate the risk** in terms of quality and quantity specifically for the migrant. For example, cardiovascular risk in a migrant worker exposed to various (measured) physical and chemical risk factors, perhaps a carrier of susceptibility (for example a heart disease) not well followed by the national health system; accident risk in workers with prolonged and unusual working hours, with inadequate language training and understanding. Consequently, there will be the identification of preventive interventions with priorities.

Specific health surveillance for migrant workers

The competent doctor will pay a particular attention to the evaluation of cultural, linguistic and religious aspects, nutrition, lifestyles, different perception of the concept of health and illness, during the preventive medical examination, especially in the recruitment phase.

For example, it is relevant to know whether a worker observes fasting for religious reasons, particularly for some work activities that involve fatigue, an unfavourable microclimate, as well as an accident risk in order to better manage work organization and nutrition. The doctor verifies the use of unconventional medicaments or practices (more frequent than one might think among some ethnic groups), which can lead to significant susceptibility conditions and generate pathologies of interest to the occupational doctor and public health.

Linguistic understanding (at times very limited) may not allow for an adequate physiological and pathological anamnesis; the more dramatic character of some ethnic groups or patients may lead to a different attention, with respect to occupational risks and preventive measures.

Lifestyle habits regarding tobacco, alcohol and drug addiction in general tend to be healthier than native people, especially for some ethnic groups, and this can also lead to benefits in terms of health and safety.

The pathological anamnesis identifies specific susceptibility conditions for the various ethnic groups. It is useful not only in order to formulate the diagnosis but above all on order to properly plan health surveillance, to draft the certificate of fitness for work, to set up information, training and health promotion interventions; a differentiated health care may be necessary in comparison to native workers.

For example, some blood diseases will be considered in case of exposure to certain toxic substances, or in working conditions at risk of dehydration, exposure to low temperatures; some heart disease or arterial hypertension, which are very frequent and more serious in certain ethnic groups; certain infectious diseases (in particular

tuberculosis, sexually transmitted diseases, hepatitis), psychiatric pathologies, metabolic disorders (diabetes, obesity). These diseases are significant for their relative prevalence and incidence in many ethnic groups and difficult to manage due to socio-cultural resistance.

The interpretation of some laboratory tests (for example blood count) or instrumental tests (for example spirometry) will be guided by the knowledge of ethnicity, as some parameters may depend on the ethnicity.

The competent doctor will draft specific considerations in the annual health report, outlining any differences between natives and migrants on the state of health, on the prevalence of pathologies and susceptibility conditions: the doctor will formulate indications on specific preventive measures for migrants.

Specific information and training

Particular attention must also be paid to information and training for migrant workers, making sure that they understand the nature of the occupational risks to which they are exposed and the purpose of the health checks to which they are subjected. Attention will be paid to internal communication relating to safety (for example, danger signs and procedures, instructions on the operation of machines or systems and the labelling of chemical products).

Who can you contact for assistance and information?

- **Operating units – occupational medicine services** in nearby hospitals and universities, which are responsible for prevention, diagnosis and monitoring of related occupational and work-related diseases and accidents at work and the promotion and protection of health and safety in the workplace.
- **Local health authority (ASL)** in particular the SPISAL or SPSAL service (Workplace Hygiene Safety Prevention Service), which is responsible for control and supervision of workplace hygiene and safety.
- **INAIL** (National Institute for Accident Insurance at Work), in its local offices. INAIL is an Italian non-economic public

body that manages compulsory insurance against accidents at work and occupational diseases.

- **Trade Union offices:** there are many offices throughout Italy where you can find assistance and protection in favour of workers, pensioners and all persons living in Italy. Each trade union generally has a department dedicated to migrants.
- **Voluntary or religious associations** such as Caritas Migrantes, Avvocato di strada onlus, CSVnet is the national association of volunteer service centres (CSV), Cesaim Centro Salute per Immigrati, Metis Africa – O.N.L.U.S., Centro Pastorale Immigrati, Medici per la Pace, etc.

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The project has four objectives. The objectives are developed through an interdisciplinary approach of study and applied research including legal, health, IT and sociological fields.

The first objective is to unveil situations of vulnerability and to identify the population at risk of exploitation and illegal employment, The second objective is to offer the beneficiaries services for active inclusion, psycho-physical protection and work. The third objective is to improve the efficiency of the public and private intermediation system for recruitment and to provide support for legal employment in agriculture. The last objective concerns the promotion of responsible self-regulation of farms and a responsible agricultural supply chain.

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