

Revaluation of working conditions and wages for essential workers

Annex 3.4. - Country study on Italy





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Abstract

This country case explores the situation of essential workers in Italy in the context of the COVID-19 emergency, with a focus on women and migrant workers in low-paid frontline occupations. The study first provides a definition of essential workers in this country, together with key socio-demographic characteristics. It then analyses, based on existing literature and selected stakeholder interviews, the main impacts of COVID-19 on working conditions. Finally, it illustrates key policy measures and agreements adopted in Italy to support essential workers and their personal and professional lives.

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AUTHOR

Daniela LOI, Istituto per la Ricerca Sociale (IRS)

ADMINISTRATOR RESPONSIBLE

Helen HOFFMANN

EDITORIAL ASSISTANTS

Mina DRAGANSKA Roberto BIANCHINI

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ABOUT THE EDITOR

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To contact the Policy Department or to subscribe for email alert updates, please write to:

Policy Department for Economic, Scientific and Quality of Life Policies

European Parliament

L-2929 - Luxembourg

Email: Poldep-Economy-Science@ep.europa.eu

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LIST OF ABBREVIATIONS

ATECO Attività Economiche (*Classification of Economic Activities*)

ATM Azienda Trasporti Milanese (*Transport Company of Milan*)

D.P.C.M Decreto del Presidente del Consiglio dei Ministri (*Prime Ministerial Decree*)

EIGE European Institute for Gender Equality

EMN European Migration Network

EULFS EU Labour Force Survey

ICT Information and Communications Technology

INAIL Istituto nazionale Assicurazione Infortuni sul Lavoro

(National Institution for Insurance against Accidents at Work)

INPS Istituto Nazionale della Previdenza Sociale (National Institute of Social Security)

ISTAT Istituto Nazionale di Statistica (National Institute of Statistics)

OECD Organization for Economic Co-operation and Development

PNRR Piano Nazionale di Ripresa e Resilienza

(National Recovery and Resilience Plan - NRRP)

RFL - ISTAT Rilevazione sulle Forze di Lavoro ISTAT

(Labour Force Survey)

SSN Servizio Sanitario Nazionale (the Italian national health service)

TCNs Third-country nationals

Ull Unione Italiana del Lavoro (Union of Italian Workers)

UILA Unione Italiana dei Lavori Agroalimentari

(Italian Union of Agricultural and Food Workers)

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EXECUTIVE SUMMARY

Background

During the COVID-19 crisis, the Italian Government has identified the sectors of economic activity defined as 'essential', as opposed to the non-essential sectors that had to be closed when it was not possible to work remotely. Workers in the 'essential' sectors continued to work during the pandemic often facing difficult situations and risks. In some essential sectors, working conditions were critical even before the pandemic, and the health and economic crisis further worsened them.

Aim

The case study aims to analyse the working conditions and risks faced by essential workers, particularly women and migrant workers in low-paid frontline occupations, during the COVID-19 pandemic. It aims to provide an overview of the main legislative and policy measures adopted at national level to support these workers and sectors during the pandemic, as well as to provide some policy indications to improve and revaluate their working conditions and wages, particularly in consideration of the important role they played during the pandemic.

Key Findings

Definition, share and main characteristics of essential workers in the EU27

- In Italy, there has been no unique definition of 'essential workers' and the list was gradually defined through various decrees.
- The group of essential workers that continued to work during the pandemic includes the sociohealthcare sector, public administration, law enforcement, the entire agri-food chain (from production to trade), domestic and long-term care work, logistics and transport, platform workers in delivery services, cleaning and surveillance services, and many manufacturing and extraction activities key to the primary needs of people and companies.
- According to National Institute of Social Security (INPS) estimates, almost half of Italian dependent workers in the private manufacturing and service sectors continued to work between 22 March and 4 May 2020 (INPS, 2020). This share increased significantly after the first re-openings on 4 May 2020, reaching 81.7 %.
- The incidence of women in essential as opposed to closed sectors was similar in the first period
 of the pandemic (March-April 2020) while it increased in closed and non-essential sectors with
 the reopening of most of the productive activities. The essential sectors employed older
 workers to a greater extent than young employees, while there were no significant differences
 in the incidence of essential and non-essential workers who were migrants.
- The working conditions in some specific essential sectors were critical even before the
 pandemic: workers in the agricultural, domestic and personal care sectors (especially migrant
 workers) are largely employed with irregular or undeclared work. In the logistics sector working
 conditions are not good, especially for workers in subcontracted cooperatives and selfemployed workers (carriers), as well as platform workers in delivery services.

Main impacts of the COVID-19 pandemic on the working conditions of essential workers

- Mortality at work due to COVID-19 especially affected male essential workers, while there was
 a high impact of the infections at work among female essential workers predominantly
 involved in essential frontline occupations.
- Working conditions during the pandemic worsened for women with precarious jobs (often young) and with low educational qualifications, such as migrant women working in the cleaning and personal care sectors for which the renewal of residence permits was difficult.
- The health risk for essential workers was very high particularly in the first period of the pandemic when safety procedures were still not clear and protective equipment was not sufficient.
- Working during the pandemic has involved increased workloads for most essential workers
 (especially for workers in social care and health care sectors, workers employed in logistics,
 food distribution and delivery sectors). Difficult shifts have increased work-life balance
 problems, especially during the closure of schools.
- Frontline workers in close contact with users, in sectors such as healthcare, long-term care, transport or food distribution have complained about psychological workload, anxiety and frustration during working activities and in some cases about the stigmatisation of their occupation.

Main legislation, policies, collective agreements and employers' measures adopted in the country to support essential workers

- Coronavirus infection is one of the diseases covered by the state insurance if the worker is
 affected at work (accident at work). It is directly applied to healthcare workers and those who
 are in direct contact with the public as users. Other workers are entitled to the protections
 provided for common illness.
- Employers must protect the physical integrity of their workers and comply with the security procedures established by the Regulatory Protocol signed between Government and social partners. Specific measures have been established for some sectors (e.g. transport, logistics).
- Little has been done to improve the working conditions of essential workers in terms of remuneration (there was a one-off state bonus of EUR 100 and incentives by private employers especially in the food sector). Specific state incentives have been provided for the health sector.
- Extraordinary staff recruitment procedures have been put in place in health and other essential
 sectors to cope with the emergency workloads. Specific agreements between social partners
 have been negotiated to move workers from closed cooperatives to ones, which needed
 additional staff.
- An extraordinary parental leave was introduced for working parents in essential and nonteleworkable occupations, and a bonus for babysitting services as an alternative to the extraordinary parental leave.
- The COVID-19 crisis has impacted on the labour migration flows in some essential sectors of the economy (agriculture, long-term care). Italy undertook two targeted regularisations and adopted special agreements with some countries to cope with labour shortages (EMN, OECD, 2020).

• The notions of "essential workers" or "essential sectors" are not present in the Italian National Recovery and Resilience Plan (NRRP). However, some investments could indirectly have a positive effect on safety, working and remuneration conditions of these workers, especially in the agricultural, logistics and transport sector. Healthcare professionals will be trained on technical, professional, digital and managerial skills and new processes are also envisaged to alleviate the burden of these workers in hospitals and improve their working conditions.

Policy indications

- Prevention and safety plans in companies should be updated for the future (including through European funding) and controls should be improved.
- The migrant and low-skilled workforce is crucial in some strategic sectors and essential
 occupations, but it is not adequately valued. Forms of marginalisation and exploitation are
 currently present, especially in agricultural and care/personal assistance sectors. It is therefore
 decisive to rethink migration policies and regularise migrants. However, the strengthening of
 the legal status of migrant workers it is not sufficient by itself to stop their marginalisation.
- Little has been done to improve the working conditions of low-paid essential workers. State and private incentives are temporary while they should be made permanent.
- Investment in training and retraining is fundamental to improve the conditions of workers with low skills and low pay, in the light of future changes in the demand for work and the growing focus on digitalisation, as well as to reconvert currently redundant essential workers in the sectors, which employed additional staff to cope with the emergency.
- The extraordinary staff recruitment in some essential sectors (especially healthcare and the
 police and security sectors) are temporary, while the problem of understaffing should be
 permanently addressed.
- The lessons learned during the pandemic should become the starting point for a revalorisation of essential workers, which also recognises the social value of their work.
- The funding of care systems is a priority (EIGE, 2021). The working conditions and pay of carers need to be improved as well as the working conditions of workers in other essential low paid sectors (agriculture, health and long-term care, transport and logistics, including platform delivery services), especially in terms of fair pay, occupational safety and work-life balance. The NRRP investments could indirectly improve the working conditions of these workers, making some essential sectors more competitive, allowing the training of healthcare professionals and alleviating the burden in hospitals, thus improving their working conditions.

1. NATIONAL DEFINITION, SHARE IN OVERALL EMPLOYMENT AND MAIN CHARACTERISTICS OF ESSENTIAL WORKERS BEFORE COVID -19

KEY FINDINGS

There has been no unique definition of 'essential workers' and the list was gradually defined through various decrees. The group of essential workers that continued to work during the pandemic includes the socio-healthcare sector, public administration, law enforcement, the entire agri-food chain (from production to trade), domestic and care work, logistics and transport, platform workers in delivery services, cleaning and surveillance services, and many manufacturing activities key to the primary needs of people and companies.

Almost half of workers continued to work in the period from 22 March to 4 May 2020. This share increased significantly after the first re-openings on 4 May 2020, reaching 81.7 %.

The incidence of women working in essential and non-essential sectors was similar in the first period of the pandemic (March-April 2020) while it increased in non-essential sectors with the reopening of most productive activities. The essential sectors employed older workers to a greater extent than young employees, while there were no significant differences in the incidence of migrants working in essential and not essential sectors.

The working conditions in some specific essential sectors were critical even before the pandemic: workers in the agricultural, domestic and personal care sectors (especially migrant workers) are largely employed with irregular or undeclared work, while workers in the manufacturing sector face a high risk of accidents at work. In the logistics sector, working conditions are not good, especially for workers in subcontracted cooperatives, self-employed workers (carriers) as well as platform workers in delivery services.

With the outbreak of the COVID-19 pandemic, the Italian Government has adopted measures to address the health risks for the population. Among these measures it also identified those sectors of economic activity defined as 'essential', as opposed to non-essential sectors that had to be closed when it was not possible to work remotely. Many of the essential activities and services were already identified pre-pandemic by special laws designed to ensure that people can enjoy services considered as indispensable, for example through the regulation of the right to strike¹.

There has been no unique definition of 'essential workers' during the COVID-19 crisis in Italy; this was also underlined by the trade union representative interviewed². This is because the list was gradually defined through various decrees, which on the one hand have reduced and on the other hand have expanded the list of essential activities depending on government opportunity assessments³. The 2007

¹ The Law 12 June 1990, No 146, modified by Law 12 November 2015, No 182, regulates the right to strike in public education, health, civil protection, justice and law enforcement, transport, post and telecommunication, assistance and social security, supply of energy, natural resources and basic necessities, waste collection and disposal sectors, as well as the management and maintenance of the related plants.

² Representative of UIL Milano e Lombardia.

In Italy, the Decree of the Prime Minister of 8 March 2020 marked the first limitations to the freedom of movement of the population and the first closures especially with reference to recreational, sport and teaching activities in person. Following the **Decree of the Prime Minister of 22 March** (modified and integrated by the Ministerial Decree of 25 March), since 23 March 2020 productive activities were blocked except for those considered essential. The detailed list of essential activities listed in the Decrees of 22 and 25 March 2020, is available at: https://www.gazzettaufficiale.it/eli/id/2020/03/26/20A01877/sg. The re-opening of activities occurred gradually after 4 May 2020 following the **Decree of the Prime Minister of 26 April 2020**, which identified a new list of essential and blocked sectors. The

ATECO (attività economica) sector classification codes were used to identify the essential activities⁴. The first list of essential activities resulting from the combined provisions of the March government decrees identified the group of essential workers that continued to work during the pandemic, and it includes the socio-healthcare sector, public administration, law enforcement, the entire agri-food chain (from production to trade), domestic and care work, logistics and transport, cleaning and surveillance services, and many manufacturing and extraction activities key to the primary needs of people and companies that perform essential activities⁵.

According to INPS estimates (INPS, 2020), almost half of Italian dependent workers in private manufacturing and service sectors continued to work between 22 March and 4 May 2020. This share increased significantly after the first re-openings on 4 May 2020, reaching 81.7 % (INPS, 2020)⁶.

According to the classification ATECO adopted on 22 March, the incidence of women in essential and closed sectors was similar (around 42–43 %), while from 4 May 2020 with the re-opening of most of the productive activities, the incidence of women in closed sectors was much higher (56 % vs 40 % in essential sectors). However, the high presence of women in essential activities can be explained by their predominance in certain essential sectors (for example, in the healthcare sector).

The composition of essential workers by age shows a prevalence of young employees in non-essential occupations especially in catering and tourism, which tend to employ a younger (and more precarious) workforce, while the essential sectors employ older workers to a greater extent. Because catering and tourism sectors remained closed for longer, the presence of young employees in the closed sectors was higher after 4 May (44 %) than in the closed sectors according to the classification of 22 March (32 %).

In the essential sectors, there is a clear predominance of workers from medium to large companies (from 50 to 250 employees) and large ones (over 250), while the incidence of workers in small enterprises (with fewer than five employees) is higher in closed sectors: 30 % according to the list of essential sectors adopted on 22 March. This percentage becomes higher (46 %) after 4 May 2020.

As for the incidence of migrant workers, there were no significant differences between essential and non-essential workers, and the situation remained substantially unchanged over time (INPS, 2020). Regarding the differences between migrant and Italian workers, the distribution among the three main economic sectors (agriculture, industry and services) shows that migrant men are slightly more concentrated in the primary and secondary sectors than Italian workers, while migrant women are more concentrated in the service sector⁷. 47.3 % of migrant men (vs 58.8 % of Italian men) are employed in essential occupations, while the share is slightly higher for migrant women in essential

number of essential activities therefore increased (e.g. textile sector, construction sectors, take-away and home delivery activities). The list of essential activities is available at: https://www.governo.it/sites/new.governo.it/sites/new.governo.it/files/Dpcm_img_20200426.pdf. However, shops and restaurants could reopen from 18 May 2020, even if with great limitations. In the following months, the openings and closures of shops and restaurants were regulated in a flexible manner according to the progress of the epidemic.

⁴ According to a UIL representative, difficulties in identifying the essential activities also derived from using the ATECO codes for sectors, which refer to an old nomenclature that needs to be updated.

⁵ For example, medical supplies and the chemical and pharmaceutical production sector, extraction of energy resources, energy supply, textile sector for technical and safety clothing, plant installations, packaging, vehicle repair, publishing, funeral services, schooling but only online, etc. For the detailed list see the link included in the previous note.

The UniEmens INPS 2018 annual data used by INPS provides a good picture of the Italian labour market before the pandemic, given the substantial economic stability from 2018 to early 2020. The data consider only employees and do not include self-employed workers, collaborations, domestic work, the public sector and agriculture. However, a part of the agricultural sector is present in Uniemens, as well as industrial activities that use intermediate products from the agricultural sector. However, a part of the agricultural sector is present in Uniemens, as well as industrial activities that use intermediate products from the agricultural sector. Similarly, some sectors of the public sector are included if the contributions of public workers are declared through Uniemens.

Migrant people in Italy (i.e. people without Italian citizenship) represent about 13.8 % of the male workforce and 15 % of the female one. The study was based on the Istat Labour Force Survey (2019).

occupations (67.7 %) than for Italian women (65.4 %). However, the real incidence of migrant workers in essential sectors is likely to be underestimated, given the high numbers of undeclared migrant workers in the economy (Campo et al., 2020).

Studies on the contribution of migrant key workers during COVID-19 (Fasani & Mazza, 2020)⁸ show that these workers tend to have a lower education (especially in countries such as Italy) and to be overrepresented in low-skilled key occupations (e.g. personal care workers, transport and storage labourers, food processing workers). According to the study mentioned above "this is partly due to the original skill distribution of migrants in each country, as well as the process of selection of individuals into migration".

As stated by the union representative interviewed, the working conditions in some specific essential sectors were critical even before the pandemic. Workers in the agricultural, domestic and personal care sectors (especially migrants workers) are largely employed with irregular or undeclared work⁹, while workers in the manufacturing sector face a high risk of accidents at work. In particular many agricultural workers experience a context that is characterised by precariousness, both economic and social and in terms of housing. It is therefore evident that the pandemic has further aggravated life and working conditions by exposing these workers to greater health risks¹⁰ and economic and social consequences (Gonnelli, 2021).

Further, in the logistics and transport sector working conditions are not good, especially for workers in subcontracted cooperatives that often do not apply the sector-level collective agreements regarding wages and working hours. In addition, the logistics and transport sector includes many self-employed workers (especially carriers) for whom employment, social and safety protection is even lower than for employed persons in the same sector. The working conditions of platform workers in delivery services, for example in the food sector, are particularly difficult as these workers do not have a fixed income, receiving payment only when they actually perform the service requested by the users of the platform. Their working and delivery times are managed by an algorithm that controls them. This results in extremely flexible working hours with different degrees of intensity during the working day that can also become unsustainable, with high risks in terms of health and security. Moreover, the companies owning the platforms are able to save the costs of overtime, training and illness, as these workers are considered as self-employed workers (Marta et al., 2020). Recently, a minimum legal protection system has been established by the legislative decree 101 of 2019 (Article 47)¹¹, which includes an insurance against accidents at work and the provision of a basic salary. In addition, a digital platform to monitor the food delivery couriers' employment relationship was recently proposed by the INPS to manage all worker contracts, contributions and employment relationships, to improve transparency and reduce

The study used a sample of employed workers in the 15 to 64 age bracket, and it quantified the prevalence of migrant workers in the so-called key professions identified by the European Commission using the 2018 EU Labour Force Survey (EULFS). 'Key occupations' involve the following categories: teaching professionals, market-oriented skilled agricultural workers, science and engineering associate professionals, personal care workers, cleaners and helpers, drivers and mobile plant operators, health professionals, health associate professionals, ICT professionals, science and engineering professionals, labourers in mining, construction, manufacturing & transport, ICT technicians, food processing, personal service workers, refuse workers, stationary plant and machine operators and market-oriented skilled workers in forestry, fishery and hunting.

According to the Report on foreigners in the labour market in Italy (2020) by the Directorate General of immigration and integration policies, the agri-food sector in 2019 had the highest incidence of employment relationships with foreign workers (about 38 %) with a contract irregularity rate estimated at 23.8 %, which corresponds to approximately 220,000 irregular relationships. In the field of domestic and personal care, the figures go up for both indicators, with 48.3 % of foreign labour (mainly non-European) employees and an irregularity rate of 58.8 %, which corresponds to about 900,000 workers without contracts.

Many trade union and civil associations (e.g. Flai-Cgil, Terra!, Medici per i Diritti Umani, Oxfam, Asgi) have denounced the worsening of the health and hygiene situation experienced by thousands of agricultural workers within the informal settlements near the agricultural grounds.

The text of the Decree is available at: https://www.gazzettaufficiale.it/eli/id/2019/09/04/19G00109/sq.

undeclared work (Redazione PMI.it, 2021).

The public transport sector shows different working conditions. They are better in municipal or former municipal companies than in private transport companies (even when the same collective agreement is applied). Furthermore, transport companies can choose which collective agreement to apply, including the tourism collective agreement which provides for fewer favourable conditions than the trade collective agreement.

In the food distribution sector, the minimum wage is low and working conditions change across companies and geographical areas, although the same collective agreement applies to all workers. Differences are especially high in relation to working hours, wages, training and professional career opportunities.

Finally, as regards the socio-healthcare sector, Italy is facing labour shortages particularly for nurses, with negative effects on working conditions such as demanding shifts and long working hours. Healthcare workers employed in the private sector have fewer protections than those in the public sector, where the guarantees of public employment apply. Care work, especially involving migrant women, is among the most disadvantaged and underpaid occupations in the EU and in Italy as well. "This undervaluing of care work is closely linked to the idea that caring is a woman's responsibility within the household and that it is something that is done without payment" (EIGE, 2021).

2. MAIN IMPACTS OF THE COVID-19 PANDEMIC ON THE WORKING CONDITIONS OF ESSENTIAL WORKERS

KEY FINDINGS

In Italy, mortality at work due to COVID-19 especially affected male essential workers, while female essential workers were particularly affected by infections at work due to their predominance in some of the essential frontline occupations.

Working conditions during the pandemic worsened for women with precarious jobs (often young) and with low educational qualifications, such as migrant women working in cleaning and personal care sectors, for whom the renewal of residence permits was difficult.

The health risk for essential workers was very high especially in the first period of the pandemic when safety procedures were still not clear and protective equipment was insufficient.

Working during the pandemic has involved increased workloads and working hours for most essential workers (especially for workers in the social and health care sectors and workers employed in the logistics, food distribution and delivery sectors). Difficult shifts have increased work–life balance problems especially during periods of school closures.

Frontline workers in close contact with other people, in sectors such as health care, long-term care, transport or food distribution, have complained about psychological workload, anxiety and frustration during working activities, and in some cases about the stigmatisation of their occupation.

Essential frontline workers who had to continue their working activities in their normal workplace during the most difficult period of the pandemic endured difficult working conditions and were exposed to more health risks than the rest of the population. The correlation between the performance of work and the increased risk of COVID-19 infection was confirmed by a study conducted by INPS, in which an increase of about 25 % in infections was detected, compared to the national average in areas of the country with a higher concentration of essential economic activities (INPS, 2020). Based on these data, it is also possible to hypothesise that among the essential workers without a contract (so-called undeclared work) this percentage was even higher (Gonnelli, 2021)¹².

The COVID-19 pandemic especially hit the male population in terms of mortality. According to 2021 data from the National Institution for Insurance against Accidents at Work (INAIL), in the period between January 2020 and August 2021, COVID was the cause of death for 83.1 % of essential workers who died at work, compared to 16.9 % of essential female workers (Vega Engineering Occupational Safety Observatory, 2021). However, in Italy the disease had a high impact in terms of infections among women at work, simply because some of the essential frontline occupations are predominantly occupied by women (Ferrera & Stefanelli, 2020)¹³. In fact, INAIL data on accidents at work due to COVID-19 indicate that women were more affected (68.5 %) than men (31.5 %). INAIL data on accidents at work due to COVID-19 by macrosectors of activities show an almost total concentration (97.10 % without

¹² The data was obtained from the comparison between the official data of the infections provided by Civil Protection, and the shares of employment relationships in the essential sectors regularly reported to INPS.

¹³ In health and social services, two thirds of the staff are women. Women also predominate among workers in retail (e.g. supermarkets), call centres and cleaning activities.

breakdown by gender) among essential workers in the industry and services sector (Vega Engineering Occupational Safety Observatory, 2021).

According to the union representative interviewed, women were most negatively affected by the pandemic, especially those with precarious jobs (often young people) and with low educational qualifications, such as migrant women working in the cleaning and personal care sectors. For these workers, working conditions during the pandemic worsened and the renewal of residence permits was particularly difficult.

The health risk for essential workers was very high especially in the first period of the pandemic when safety procedures were still not clear and protective equipment was not sufficient, as also highlighted by the frontline retail worker interviewed ¹⁴. However, the interviewed worker also stressed that fulfilling all the safety procedures required for personal sanitation was not always compatible with the time available for her and colleagues to be able to perform the work, and this often resulted in them disregarding the procedures. She also complained about the total absence of specialised workers and actions for the cleaning and sanitation of the workplace, which are the employer's responsibility. The store staff therefore also had to deal with the cleaning in this situation of emergency, which increased their fear and perception of being exposed to high health risks and especially exposing their relatives to the same risks as well.

For platform workers in delivery services, safety also became more important during the pandemic, and this situation made it necessary to provide workers with protective equipment. However, as underlined by many newspapers¹⁵, many of the workers have denounced the lack of such measures and equipment, as well as the lack of interest of some companies in the protection of workers. This resulted in several workers, especially at the beginning of the pandemic, deciding to stay at home to avoid the risk of getting sick.

According to the union representative interviewed, working during the pandemic has involved increased workloads and working hours for most essential workers (also to cover colleagues on sick leave). The workloads have been particularly heavy for workers in social and health care sectors, workers employed in logistics, food distribution¹⁶ and for platform workers in delivery services¹⁷, whose working conditions were already difficult before the pandemic. The worker interviewed also underlined that the workload (also psychological) had more than doubled when compared to the period before the pandemic. However, she also stressed that thanks to overtime, workers earned more than before the pandemic and for the first time she also reached turnover targets and earned an additional bonus. Nevertheless, these considerations are related to a sector (large retailers) that is more contractually guaranteed than other essential sectors such as agriculture or logistics.

Interview with cashier of IN'S Mercato, PAM Group. The worker specified that in the workplace (supermarket) protective masks arrived after two weeks while other protective equipment (such as Plexiglas dividers) was never delivered.

Many online newspapers and legal newsletters underlined this critical aspect. More information is available at: https://milano.repubblica.it/cronaca/2020/05/05/news/coronavirus_rider_indagine_procura_carenze_protezioni_mascherine_delivero_o_glovo-255747856/;

https://www.lastampa.it/cronaca/2020/05/05/news/rider-costretti-a-lavorare-senza-mascherine-il-focus-dei-carabinieri-in-procura-1.38807977/; and

https://www.dirittoconsenso.it/2021/04/30/tutela-dei-riders-lavoratori-atipici-consegne-a-domicilio/?utm_source=rss&utm_medium=rss&utm_campaign=tutela-dei-riders-lavoratori-atipici-consegne-a-domicilio.

¹⁶ On the contrary, the big shopping centres remained closed for much of the pandemic using state welfare support provisions for their workers

Food delivery was a fundamental service during the health emergency because it allowed restaurants to maintain their business even though their premises were closed to the public.

According to the union representative, in any case, as the pandemic retreats in the future there will be a reduction of workloads and the use of e-commerce deliveries. Consequently, additional staff who were employed to cope with the increased workloads during the pandemic are likely to be dismissed.

Regarding the transport sector, there were differences in working conditions during the pandemic between public and private companies. For example, the transport company of the Municipality of Milan (ATM) has guaranteed good contractual conditions to workers and it signed an agreement with the trade union to establish operational protocols to cope with the emergency, and increased staff to strengthen and expand its offer of services¹⁸.

The health emergency due to the COVID-19 epidemic has highlighted not only the strengths but also the weaknesses of the Servizio Sanitario Nazionale (SSN – the Italian national health service), especially with reference to labour shortages¹⁹. According to the union representative interviewed, in the first six months of the pandemic, hospitals and residential nursing care facilities were understaffed and shifts were almost doubled to cope with the emergency. In particular, employees of private cooperatives providing cleaning services to hospitals and those in residential nursing care facilities faced worse working conditions than workers covered by a public employment contract. In addition, unlike public sector workers, they risked losing their jobs if employed in cooperatives of services whose activities were closed due to the pandemic. However, specific agreements signed by social partners allowed many of these cooperatives to move their workers to other cooperatives which needed additional staff. For example, workers were moved from cooperatives that managed school canteens to cooperatives that managed hospital canteens, or from cooperatives of general cleaning to cooperatives of hospital cleaning.

In general, workloads and difficult shifts have increased work–life balance problems – especially during the closure of schools – for all essential workers with children, and particularly for lone parents, as for safety reasons during lockdown it was not possible to turn to the usual family support networks (especially grandparents). In addition, the care burden of the elderly worsened due to the difficulty (and fear) of turning to caregivers during the lockdown period. Women working as nurses or support staff in hospitals and residential nursing care facilities with care responsibilities were particularly affected by the worsening of the care burden.

Frontline workers in close contact with users, in sectors such as healthcare, long-term care, transport or food distribution, have complained about anxiety and frustration during work activities especially when having to tolerate both the fear and often the aggressiveness of customers and patients.

The worker interviewed, working as a cashier in a supermarket, underlined how it was really difficult for her to deal with "*crazy people who were desperately looking for alcohol and yeast to make bread at home*". She had to ask the police for help to prevent customers from entering the store when it was not allowed. She said, remembering those moments:

The agreement provided for the integration of ATM staff with workers from the Malpensa and Linate airport services closed during the pandemic. Negotiations with the trade unions are currently underway to stabilise the new staff.

In particular, the Court of Auditors reported the long period of budget cuts and blocks on labour turnover due to austerity measures, which resulted in labour shortages and lack of specialised staff. Following the suspension of turnover, the number of permanent staff in the health service has fallen sharply over the last ten years. In 2018, the staff level was even lower than in 2012 by about 25,000 workers (and about 41, 400, if compared to 2008). More information is available at: https://www.corteconti.it/Download?id=9e8923ba-4ef4-480e-90f0-ef307c3fa756.

"Customers did not respect us or care about our health; they used the supermarket to go out or even to meet their friends, without thinking that in this way we were more at risk. I was 'a time bomb' ready to explode."

Moreover, she underlined that no psychological support and no meetings to share problems in an emergency or check on employees' wellbeing were foreseen by the management.

In the opinion of the trade union representative interviewed, companies' difficulty in planning and organising work activities efficiently while complying with the ever-changing requirements of the government also resulted in worsening working conditions and an increasing state of uncertainty and anxiety in workers.

Finally, during the pandemic, essential frontline workers in the health sector complained about the stigmatisation of their occupation. Initially celebrated as 'heroes', in the most advanced stage of the epidemic they were often harassed and unfairly blamed for exaggerating the effects of the disease by causing unnecessary restrictions on people's freedom.

The recognition of the social value of the work performed by frontline essential workers is fundamental. As underlined by the worker interviewed, the perception of being useful and the recognition by the public of the importance of her work for the community (in the case of the major retail sector it was certainly the first time) was considered rewarding and highly motivational.

3. MAIN LEGISLATION, POLICIES, COLLECTIVE AGREEMENTS AND EMPLOYERS' MEASURES ADOPTED IN THE COUNTRY TO SUPPORT ESSENTIAL WORKERS

KEY FINDINGS

Coronavirus infection is one of the diseases covered by state insurance if the worker is affected at work (accident at work). It is directly applied to healthcare workers and those who are in direct contact with the public as users. Other workers are entitled to the protections provided for common illness.

Employers must protect the physical integrity of their workers and comply with the security procedures established by the Regulatory Protocol signed between Government and social partners. Specific measures have been established for some sectors (e.g. transport, logistics).

Little has been done to improve the working conditions of essential workers in terms of remuneration (there was a one-off state bonus of EUR 100 and incentives by private employers especially in the food sector). Specific state incentives have been provided for the health sector.

Extraordinary staff recruitment procedures have been put in place in the health and other essential sectors to cope with emergency workloads. Specific agreements between social partners have been negotiated to move workers from closed cooperatives to ones which needed additional staff.

Special parental leave was introduced for working parents in essential and non-teleworkable occupations, and a bonus for babysitting services as an alternative to this.

The COVID-19 crisis has impacted on labour migration flows in some essential sectors of the economy (agriculture, long-term care). Italy undertook two targeted regularisations of migrants and adopted special agreements with some countries to cope with labour shortages.

The notion of "essential workers" or "essential sectors" are not present in the Italian National Recovery and Resilience Plan (NRRP). However, some Missions through their investments could indirectly have a positive effect on the safety, working and remuneration conditions of these workers, especially in the agricultural, logistics and transport sectors. Healthcare professionals are to be trained on technical, professional, digital and managerial skills, and new processes and services are also envisaged to alleviate the burden of these workers in hospitals and improve their working conditions.

Regulatory interventions and policy measures have been implemented for essential workers, especially with regard to health protection in the workplace. Coronavirus infection is one of the diseases covered by the INAIL²⁰ (Istituto Nazionale per l'Assicurazione contro gli Infortuni sul Lavoro) state insurance if the worker is affected at work²¹. The presumption of a professional origin of the infection (accident at work) applies for healthcare workers exposed to a high risk of contagion. The same applies to workers who are in direct contact with the public as users, e.g. front-office workers, cashiers, sales staff, technical staff working within hospitals, cleaners and transport operators. On the

²⁰ The acronym means National Institute for Occupational Accident Insurance.

²¹ See Law Decree No 18 of 17 March 2020 (the so-called Care Italia Decree) and INAIL Circular No 13 of 3 April 2020.

contrary, for other essential workers who work in person, it is difficult to prove with certainty that the place of contagion is the workplace (INAIL Circular No 13/2020). However, all workers – if affected by COVID-19 or in quarantine (in the latter case only if they are not smart workers) – are entitled to the protections provided by the INPS²² for common illness (Law 24 April 2020).

Employers must protect and guarantee the physical integrity of their workers and implement the measures established by the government to combat the coronavirus infection. In particular, all companies that have not suspended their activities must comply with the 'Regulatory protocol of measures to combat and contain the spread of the COVID-19 virus in the workplace' signed by the government and social partners on 14 March 2020. This was subsequently updated several times to incorporate regulatory changes and the evolution of scientific knowledge on safety and prevention rules. This protocol obliges the employer to inform workers about the provisions of the authorities, to provide for individual protective measures and for the hygiene and sanitation of workplaces, as well as for the management of any symptomatic worker. In addition, specific measures and obligations have been established for some sectors (e.g. construction, logistics, transport). However, the trade union representative interviewed underlined that in contrast to the companies that have scrupulously followed the security protocols provided by the government, others – across all sectors – have often disregarded security procedures, especially in the absence of adequate controls. This critical aspect was also stressed by the worker interviewed who underlined the failure of her company to comply with the contagion prevention procedures²³. Also platform workers have addressed serious risks of infection due to the shortage of protective equipment, especially at the beginning of the pandemic. However, after the first period, many organisations have organised safe delivery methods to avoid direct contact between the worker and client in order to minimise the risk of contagion.

On the contrary, little has been done to improve the working conditions of essential workers, especially in terms of remuneration. A state bonus of EUR 100 was introduced by the so-called Cura Italia decree (law decree 17 March 2020, No 18, Article 63) to reward all people who worked in their usual workplace in March 2020 during the most terrible moments of the COVID-19 health emergency. This one-time bonus, paid with the salary for April 2020, was provided for public and private employees whose total income in the year did not exceed EUR 40,000. The bonus was also allocated to part-time workers, without any apportioning linked to the working time actually performed. To increase the wages of low-paid workers, many of which are essential workers, the introduction of a universal minimum wage is currently under discussion in Italy (minimum wages by sector are currently established by collective bargaining).

Specific state incentives have been provided for the health sector. Law 27/2020 provided for an increase (equal to EUR 250 million) in 2020 of the fund for the remuneration of working conditions to raise the resources allocated for overtime work of personnel in the health sector. Subsequently, Law 77/2020 modified the purposes of the first allocation, establishing that the resources are primarily intended for the remuneration of all services (not only for overtime work). It is also expected that regions and autonomous provinces may increase these amounts but not to more than double. Regions and autonomous provinces can also provide additional premiums for health staff (up to a maximum of EUR 2,000 per person) in proportion to the service performed during the pandemic. Specific resources are foreseen by the 2021 budget law (Law No 178 of 2020, Article 1) for the enhancement of health

²² The acronym means National Institute of Social Security.

²³ In particular, the worker related that the company did not proceed to the quarantine of the other workers who were in direct contact with a COVID-19 positive worker, in order to not reduce its workforce.

personnel (allowances) as part of the salary base²⁴. The definition of allowances and the amount is up to national collective agreements (Camera dei Deputati, 2021).

Incentives were also provided in the private sector by some employers to recognise and value the essential role played by their employees during the pandemic. This occurred especially in businesses in the food supply chain. They provided monetary awards and health insurance, extra leave days or babysitter vouchers for those employees who worked to ensure the supply of food and basic goods during the emergency.

Box 1: Examples of incentives for essential workers in the food sector

Giovanni Rana increased the amount paid for every day worked in March and April 2020 by 25 %. To this amount is added EUR 400 for families with children for childcare and health insurance (in case of COVID-19-19 infection) including for people who work from home.

Mutti provided a 25 % increase in the salary of plant workers, extending the benefit to all related industries, while **Amadori** provided health insurance for all workers and it has also made EUR 1.2 million in food shopping vouchers available to its workers.

The **Italian Nestlé Group** provided for the full remuneration of workers who have to suspend their business due to COVID-19 limitations and has allocated a bonus of EUR 500 gross for employees of essential production departments, while the **Ferrero company** has rewarded the workers of its sales and logistics sectors who worked from 16 March 2020 to 24 April 2020 by, making an additional payment of EUR 750 gross in relation to their presence at work.

The **Santero Winery** allocated a bonus in March 2020 of EUR 100,000 for 50 employees (equal to approximately EUR 2,000 gross per capita).

Finally, according to UILA (Unione Italiana dei Lavori Agroalimentari –Italian Union of Agricultural and Food Workers), other companies also distributed bonuses to employees during spring 2020, including Heineken, Colussi, Lactalis, Granarolo, Galbani and Parmalat, Dr. Schär, Birra Peroni, Bofrost, Sigaro Toscano and Aia Three Valleys.

Source: Lanari, C., (2020), Redazione Il Fatto Alimentare (2020).

Special measures have been put in place to increase the number of medical and health personnel, to cope with the epidemiological crisis. **Extraordinary staff recruitment procedures** were used (e.g. self-employment assignments and fixed-term contracts have been arranged for health professions including nurses and socio-health workers).

Extraordinary measures to increase the number of staff have also been adopted in the private sector by many companies in order to cope with the emergency workloads. The worker interviewed related that her company hired new staff during the pandemic to cope with increased workloads. This was because the use of interns was prohibited, and hiring new staff was cheaper than overtime.

The COVID-19 crisis has also affected on the labour migration flows in essential sectors (e.g. agriculture). As underlined by the European Migration Network and OECD study 2020, the spread of COVID-19 resulted in sharply restrictions on the admission of migrant seasonal workers from third-country,

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A specific allowance is provided for nurses (EUR 335 million per year has been allocated) and an allowance for public employees of healthcare professions in rehabilitation, prevention, technical-health, obstetricians, social assistants and socio-health workers (EUR 100 million per year).

"curbing the sector's productivity, since native workers can only partially replace third-country national seasonal workers". In order to address this problem, Italy introduced two different forms of **targeted regularisation for migrant workers from third-countries and Italian people employed in** agriculture, long-term care (for people requiring assistance with daily living) and domestic work such as cleaning and childcare (EMN, OECD, 2020). The first regularisation concerns the possibility for employers to recruit foreign workers or to declare the existence of a preexisting irregular employment with Italian or foreign workers as long as they prove they were in Italy prior to 8 March 2020 and worked in these sectors. The second regularisation concerns the granting of six-month permits for migrant workers from third countries with residence permits expired on 31 October 2019 who were in Italy on 8 March 2020 and worked in the sectors mentioned above before 31 October 2019. This temporary permit becomes a residence permit for work if the worker is hired (Camera dei Deputati, 2021)²⁵.

According to the European Migration Network and OECD study mentioned above "The rationale behind this measure was also the need to better monitor and protect health during the pandemic, and to ensure that irregular migrants would not avoid COVID-19 testing or medical treatment out of fear of detention or expulsion". The screening and health security measures in spontaneous settlements of agricultural workers were only partially reinforced. Few applications were processed compared to requests (Gonnelli, 2021)²⁶.

In addition, Italy adopted **special agreements with Ukraine, Morocco and India** in order to allow seasonal foreign workers to arrive in Italy even during the health emergency to be employed in agricultural sector and to cope with labour shortages (EMN, OECD, 2020).

Finally, with reference to work–life balance needs, an extraordinary parental leave (for children up to 16 years old) was introduced for working parents in public and private non-teleworkable occupations. This provision applies to frontline essential workers working in person and it was provided in three specific cases: if children are affected by COVID-19, if they are in quarantine, or in case of home schooling²⁷. The leave was also provided for working parents with disabled children (without age limits) in the same cases and in the event of closure of day-care centres. The parental leave is up to 15 days and paid at 50 % of the salary but only for children who are up to 14 years old.

From March 2020, a state bonus for **babysitting services** was introduced as an alternative to the extraordinary parental leave for employees in the private sector, self-employed workers, and for parents working in the socio-health sectors and in the security and defence sectors. The bonus was in place from March 2020 until 30 December 2020²⁸. Its maximum value was equal to EUR 1,200 per family, and increased to EUR 2,000 for parents working in the socio-health field. In 2021, the bonus for babysitting services was provided only for self-employed workers and essential workers working in the police/security and health sectors for which it is impossible to stay at home from work. The bonus was

The regularisation procedures were provided by Law Decree 34/2020 (so-called Rilancio decree, Article 103). The applications received by the Ministry of the Interior for regularisation amounted to 207,542. Of these, 176,848 (85 %) are for domestic work and care work. The remaining 30,649 applications are almost all (96 %) for the agricultural sector and a residual part for fishing and forestry (INPS, 2020). More information is available at: https://www.inps.it/docallegatiNP/Mig/Allegati/04_Approfondimenti_capitolo_1.pdf.

²⁶ The total number of instances accepted is not yet available because of the delays in examining the applications submitted by the administrative bodies in charge.

The extraordinary parental leave was provided by the Decree of 13 March 2021, No 30, available at: https://www.gazzettaufficiale.it/eli/id/2021/03/13/21G00040/sg; the INPS Message 25 March 2021, No 1276 which established beneficiaries and criteria for its use is available at: https://servizi2.inps.it/Servizi/CircMessStd/VisualizzaDoc.aspx?sVirtualUrl=%2fMessaggi%2fMessaggio%20numero%201276%20del%2025-03-2021.htm.

²⁸ The bonus was introduced in 2020 by the so-called Cura Italia decree for parents of children aged up to 12 (the age limit does not apply in the event of severe disability) and it was extended for 2021 by the Decree of 13 March 2021, No 30, with some changes.

provided, up to a maximum of EUR 100 per week, for parents of children under 14 affected by COVID-19 infection for the duration of the infection or quarantine, for events occurring from 1 January to 30 June 2021.

The Italian National Recovery and Resilience Plan: possible effects on improvement of the working conditions of essential workers

In the Italian National Recovery and Resilience Plan (NRRP) the notion of "essential workers" or "essential sectors" is not mentioned. However, some Missions could indirectly have a positive effect on the working conditions of these workers through their investments. In particular, Mission 2 - Green revolution and ecological transition - foresees the development of agro-voltaic opportunities with the aim of "making the agricultural sector more competitive, reducing energy supply costs (currently estimated at over 20 percent of the variable costs of companies), and at the same time improving climatic-environmental performances". The improvement of competitiveness and productivity in this sector is likely to be reflected on the improvement of the workers' remuneration conditions.

In the framework of Mission 3 - Infrastructure for sustainable mobility - investments in transport sector infrastructures, which today show large gaps between the territories of Northern and Southern Italy, and interventions to support the modernisation and digitalisation of the logistics system, could have significant effects on improving the transport of goods, the safety of workers and overall productivity. As in the agricultural sector, the improvement of competitiveness and productivity is likely to be reflected in the improvement of workers' remuneration conditions.

In Mission 4 - Education and Research – the NRRP provides some investments aiming to finance a "Plan for kindergartens and preschools, early childhood education and care services" to cope with the lack of educational services for children, that according to the NRRP, "combined with the unfair distribution of family workloads, negatively affects the participation rate of women in the labour market". Strengthening care services is likely to help improve the working conditions of a large number of women involved in essential sectors.

Finally, with reference to the health sector a large part of the resources of Mission 6 is aimed at improving infrastructural and technological equipment, to promote research and innovation. Technological innovation requires that healthcare professionals are regularly updated and trained, and this was even more evident following the pandemic crisis. Many resources are therefore planned to strengthen the technical, professional, digital and managerial skills of health system personnel through specific training. The investments are also aimed at strengthening training in basic medicine, introducing an extraordinary training plan on hospital infections and increasing specialist training contracts, in order to guarantee an adequate turnover of SSN (National Health Service) medical specialists and to prepare workers to cope with current and future challenges.

New processes are also envisaged for the provision of health and long-term care services (e.g intermediate health structures, strengthening of home and territorial healthcare, telemedicine and the modernisation of existing technological and digital structures) which could alleviate the burden of health and social professionals in hospitals and improve their working conditions.

4. CONCLUSIONS AND POLICY INDICATIONS

There has not been a unique definition of 'essential workers' during the COVID -19 crisis, because the list was gradually defined through various decrees which on the one hand, have reduced and, on the other hand have expanded the list of essential activities depending on government opportunity assessments. However, many of the essential activities were already identified pre-pandemic by special laws designed to ensure people can have access to services considered as indispensable.

The health risk for essential workers was very high especially in the first period of the pandemic when safety procedures were still not clear, and there was a lack of protective equipment to protect workers in the workplace. Women greatly suffered the consequences of the infection at work, due to their predominance in some of the essential frontline occupations (for example, healthcare and domestic work). On the contrary, mortality at work due to COVID-19 especially affected male essential workers.

The health risk for essential workers also concerned mental health. Frontline workers in socio-health, transport or food sectors have complained about the fear of being in closer contact with clients and also anxiety and frustration during their working activities for having to tolerate the anxiety and often aggressiveness of others.

Specific safety protocols have been provided at national and company level but, as underlined by the trade union representative and the worker interviewed, adequate controls have not been carried out to make these measures more effective. The control system needs to be improved for the future and in general, prevention and safety plans in companies should be updated particularly because organisations will have changed after the pandemic. The adaptation of the organisations to the new safety measures could be carried out through European funding.

Some essential sectors and occupations during the pandemic could have been paralysed without the migrant workforce. However, immigration flows were blocked by international mobility restrictions. In order to cope with this workforce shortage, Italy took action to allow seasonal workers who were already in Italy to have or extend their residence status, and to allow seasonal inflows of workers from third countries, especially workers to be employed in the agriculture sector. However, the regularisation procedures implemented during the pandemic - because of the few applications processed - failed to respond to the lack of labour force in these most crucial sectors, and they did not stem the sanitation problem. This migrant and low-skilled workforce is therefore crucial for the Italian economy but not adequately valued. Forms of marginalisation and exploitation such as illegal intermediation ('caporalato') and undeclared work are still present, especially in the agricultural and care/personal assistance sectors.

In general, the working conditions for some categories of essential workers were also not good before the pandemic. In particular, according to the European Migrant Network and OECD, "low-skilled workers from third countries are over-represented in a number of key occupations vital in the fight against COVID-19, underscoring such workers' often-neglected value within the economy" (EMN, OECD, 2020). It is therefore crucial to rethink migration policies and regularise migrants, and also to give these workers equal rights and protections in line with Italian workers (Campo et al., 2020).

However, criticism has been raised about the use of regularisation as a means to solve structural problems faced by migrant workers in Italy. The strengthening of the legal status of migrant workers is surely a useful measure to reduce vulnerability but not sufficient in itself to stop their marginalisation.

Little has been done to improve the working conditions of low-paid essential workers. State incentives for all workers who continued to work in person were instead provided only during the first wave of the pandemic and not in the successive waves, as underlined by the worker interviewed. State

incentives and extraordinary staff recruitment procedures concerned the socio-health sector in particular. However, these economic compensations were temporary while they should be made permanent. Only the allowances foreseen by the 2021 budget law for the enhancement of health personnel are currently the subject of collective agreement to be incorporated as part of the salary base. In addition, the extraordinary staff recruitments are not permanent, although the strengthening of the healthcare and the police and security sectors should be guaranteed regardless of the contextual emergency, because these sectors were already lacking in staff before the pandemic.

Monetary incentives and other measures (health insurance, extra leave days or babysitter vouchers) were provided in the private sector by some companies, especially in the food sector. However, in this case they were exceptional measures that were not permanently incorporated by companies in the employment contract of workers. It is necessary for the private sector to await the renewals of the sectoral collective agreements to see if the working conditions will improve for essential workers following the pandemic.

In Italy, the introduction of a universal minimum wage to increase the wages of lower-paid workers is currently under discussion. However, according to the union representative interviewed, in order to improve the conditions of workers with low skills and low pay, it is crucial to invest in training and retraining in the light of uture changes in the demand for work and the growing interest in digitalisation across all sectors. It is also important to reconvert currently redundant essential workers in the sectors which employed additional staff to cope with the emergency, for example in the logistics sector, which will undergo a downsizing with the probable reduction of the use of e-commerce following the resumption of direct purchases. With specific reference to the platform workers in delivery services, the process of improving their rights has already begun and it is likely that after the pandemic their employment relationship could move towards a greater recognition of their rights and a consideration of their work, which could also lead to the definition of more adequate sector legislation. Furthermore, the food delivery sector will be more regularised in terms of safety procedures (hygiene and quality certifications, etc.). However, the recognition of greater rights (e.g. illness coverage) will risk making employers/platforms lose their competitive advantage, and this could result in a jobs reduction.

According to EIGE, "the COVID-19 pandemic has also highlighted the importance of both paid and unpaid care work for a well-functioning society and economy (...). The distribution of care work, whether it be paid or unpaid, is one of today's most significant challenges that needs to be put at the centre of COVID-19 response strategies". The funding of care systems is a priority and "the working conditions and pay of carers, who are mostly women, need to be improved. Greater investment would lead in new jobs in care and related professions (...). Better working conditions in care could also attract more men to the profession, helping to address the shortage in carers" (EIGE, 2021).

In general, European and national institutions, together with social partners, should improve the working conditions of essential workers, especially in terms of fair pay, occupational safety and worklife balance. The lessons learned during the pandemic should become the starting point for a revalorisation of essential workers, which also recognises the social value of their work.

NRRP investments could also indirectly have a positive effect on the working conditions of these workers, especially in the agricultural, logistics and transport sectors which could be made more competitive by digitalisation and new infrastructures, which is likely to be reflected in the improvement of workers' safety and remuneration conditions. Through the NRRP investments, educational services for children will increase improving the working conditions of a large number of women involved in essential sectors, while the healthcare professionals will be trained on technical, professional, digital and managerial skills. New processes are also envisaged for the provision of health and long-term care

services which will could alleviate the burden of health and social professionals in hospitals and improve their working conditions.

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ANNEXES

Annex I – Stakeholders Interviewed

Position	Organisation	Date of interview	
Trade Unionist	UIL Milano e Lombardia (Trade Union)	22 July 2021	
Worker: cashier	Large retail distribution	9 September 2021	

This country case explores the situation of essential workers in Italy in the context of the COVID-19 emergency, with a focus on women and migrant workers in low-paid frontline occupations. The study first provides a definition of essential workers in this country, together with key socio-demographic characteristics. It then analyses, based on existing literature and selected stakeholder interviews, the main impacts of COVID-19 on working conditions. Finally, it illustrates key policy measures and agreements adopted in Italy to support essential workers and their personal and professional lives.

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