

This report was compiled by Niccolò Rodinò, Turing Scheme trainee at the Centre for European Volunteering (CEV) from the University of East Anglia (UEA). The report is based on information gathered from online research. This is a preliminary study to gather information about the economic implications, key challenges, and policy aspects of volunteering within Italy's healthcare system.

## **The economic effects, systemic challenges and policy implications regarding volunteering in Italy's healthcare sector**

December 2024

## Index

Introduction	2
The context of volunteering in healthcare	2
State reliance of volunteering in healthcare	3
Decreasing the pressure on volunteers	3
Conclusion	4
References	5

---

## Introduction

The Italian National Health Service (*Servizio Sanitario Nazionale*), is known for providing an excellent level of care, performing much better than the OECD average in terms of quality of care (OECD, 2023). However, for the past 2 decades the public sector has been under strain due to a lack of nurses, doctors and hospital staff (Monti, 2022). This is most often where volunteers fill in the gaps, caring for an increasingly ageing population, in emergency services, offering long term care and specialist appointments (Repubblica.it, 2017; Novartis, 2021). In this report there will be an analysis over the impact of healthcare volunteering in the Italian healthcare system, exploring how extensively the sector relies on volunteering, the impact of this reliance, and the opportunities to ensure this collaboration works more effectively.

## The context of volunteering in healthcare

The Italian National Health Service is regionalised, with Local Health Services (*Aziende Sanitarie Locali*) managing the funds allocated to them by the central government. This means the quality of healthcare can vary depending on the region and the amount of funding it has received (Tediosi & Gabriele, 2010). A report released by 5 volunteer organisations active in the healthcare sector has outlined that a total of 19,630 volunteers working on the field have provided free appointments to 70 thousand patients and 15 thousand free therapist sessions, among other services. Altogether this work has been valued at more than 20 million euros (Novartis, 2021). Outside of the ones mentioned in this report, there are many other healthcare volunteer organisations operating in Italy, offering similar services. As an example, Telethon and Uniamo support patients and children with rare diseases ([Telethon](#); [Uniamo](#)), while Progetto Arca supports those who are homeless and those who are suffering from addiction by offering them specialised medical services (Progetto Arca, no date).

The Italian government has also consistently underfunded Southern Italy when compared to Northern regions, perpetuating a cycle of neglect and disparity in resources, with corruption and organised crime further draining the funds Southern regions already receive (Garofalo, 2017). Southern Italy also registers fewer numbers of volunteers compared to other areas of the country, with the North West and North East registering an average of 1,300,000 volunteers annually between them, while the South has 815,000 (Istat, 2024). A contributing factor to this is the typically lower wages and worse working conditions in the South compared to the North, leaving people with not enough free time to volunteer. Additionally, the lack of funding to these regions means obsolete machines and equipment and a smaller number of paid doctors and nurses per bed, which affects waiting times in A&E and for surgeries. This translates to 9 out of 12 of the worst performing hospitals in Italy being located in the South (Gabanelli and Ravizza, 2023)

---

## State reliance of volunteering in healthcare

The ambulance service in Italy is run almost entirely by volunteers from various organisations such as the Italian Red Cross, Anpas, and ONLUS (non-profit organisations). Many of these volunteers have a day-to-day job but might dedicate some of their time to work in emergency services (Granziero, 2019). These organisations, focused on emergency responses, constitute the majority of volunteers in the Italian healthcare system. Emergency services volunteers are typically unpaid, with reimbursements being given for expenses such as lunch and petrol upon providing receipts, as established by an Italian Supreme Court ruling in 2015 (Domeneghetti, 2016).

The reliance and demand of volunteers by the state has also caused the rise of “sham” volunteer organisations. These are sham “ONLUS” associations which pay “volunteers” meagre sums under the guise of reimbursements, while offering poor training and syphoning away government funding and donations given to them (Angelo, 2016). Because this work is clandestine, some of them have been found to be working 350 hours a month (Gaita, 2016), making it effectively a full-time job, paid off the books and without a reasonable time to rest between shifts. This is a symptom of a bigger problem affecting the whole country: the undeclared work market. Generating €77.8 billion in total each year, the lack of oversight from authorities and gaps in the law allow employers and organisations such as those mentioned earlier to continue operating in these conditions (Baroli, 2024), and continue damaging the reputation of the voluntary healthcare sector.

## Decreasing the pressure on volunteers

As the hospital staff are often underpaid and overworked, raising wages and decreasing working hours would have positive knock-on effects to the rest of the healthcare service, including those volunteering in the sector. The first measure would encourage more graduates in the field of medicine to pursue a career in the public healthcare sector, rather than going abroad for a better pay, contributing towards tackling shortages. The second one would require trade unions to lobby for a guaranteed maximum number of hours volunteers and professionals can work/volunteer per week, across all local health services (Monti, 2022; Gabanelli & Ravizza, 2023). Lastly, the government should increase the depth and frequency of audits to ensure nonprofit organisations comply with the legal requirements and require more transparent financial documentation so that it is easier to detect fraudulent activities. These measures would create a better and fairer environment for volunteers to learn at their own pace and without the stress of potentially taking over paid work. It would also improve interpersonal relations between professionals and volunteers, as hospital staff would have more time to dedicate towards training and cooperating with volunteers effectively.

Expanding on the issue of public sector pay, the Italian healthcare system is decentralised and mostly run by each region, the national government sets the minimum wage for each job sector through negotiations with trade unions, which is known as collective bargaining. As Italy is one of the few countries in the EU without a minimum wage, many politicians have pushed for the creation of one, criticising the current system (ANSA, 2024). However, there has been bigger pressure from the other

side to maintain the system in place, being joined by trade unions afraid of losing their bargaining power (Amato, 2023). While there has recently been a minimum wage increase for the healthcare sector (ARAN, 2024), this does not match inflation nor the minimum wages in neighbouring EU countries (Gabanelli & Ravizza, 2023). *Unione Sindacale di Base* (Grassroots Trade Union) have been pushing for a minimum wage of €10/hr since 2019, organising demonstrations with the help of volunteers (Unione Sindacale di Base, 2024) and pushing local governments to institute one so that nurses and care home workers are not underpaid (USB Livorno, 2023). Parties such as *Potere al Popolo* (Power to the People) have been relying on volunteers to spread the word about a petition to push the government to debate the possibility of a national minimum wage, issuing activist kits and organising flash mobs (Potere al Popolo, 2023). In the meantime, although the deadline for transposing the 2022 EU Directive on the Adequate Minimum Wage (which ensures that workers in the EU have access to adequate and fair wages) will be in November 2024, it is unlikely that this action alone will push the government to establish one in the near future (Luccisano, 2023).

Volunteers in Italy are seen as the backbone to the ambulance service and a vital addition to the healthcare sector overall. The President of the Republic, Sergio Mattarella, released a statement on International Volunteer Day in 2020: “Volunteering in our country has a long history, it is an important driving force of solidarity and has been the creator [...] of a profound social change that has improved the quality of life of the community”. Italian Prime Minister Giuseppe Conte also joined in expressing their gratitude for the work done by volunteers, defining it as: “The beating heart of our community life” (De Amicis, 2020). Volunteers can receive certificates as proof of their experience and learning outcomes which help with employability, benefiting those seeking more experience and those who are looking to reposition themselves in the job market after a long period of unemployment. The existence of sham volunteer organisations discussed previously, is a significant issue regarding volunteering in Italy. Increased regulation, oversight and the closing of legal loopholes, such as those that allow these organisations to claim public benefits of up to €7 million euros (Florio, 2019), are key points the government should focus on.

## Conclusion

While volunteering is a useful tool for those looking to make a positive impact in people’s lives, it cannot be used as a single solution to a problem caused by the inaction of the Italian government. We have seen how stagnating wages and lack of professional employed staff can translate to overloaded volunteers, poor quality of service to the patients, and in some cases, a source of undeclared work. For legislation to protect volunteers and improve working conditions, the political class needs to be made aware of these issues. A good first step would be for volunteer healthcare organisations and trade unions across the country to collaborate better together in order to bring more attention to these problems

---

## References

- Amato, R. (2023) *Il Cnel Affossa il Salario Minimo, no della cgil, la Repubblica*. Available at: [https://www.repubblica.it/economia/2023/10/04/news/salario\\_minimo\\_approvato\\_il\\_primo\\_documento\\_del\\_cnel-416838983/](https://www.repubblica.it/economia/2023/10/04/news/salario_minimo_approvato_il_primo_documento_del_cnel-416838983/)
- Angelo (2016) *Scandalo 118, Le Iene Ricevono Centinaia di Segnalazioni Su Finte onlus in Tutta Italia*, Nurse24.it. Available at: <https://www.nurse24.it/infermiere/dalla-redazione/118-iene-scandalo-onlus.html>
- ANSA (2024) *Schlein: 'l'italia ha bisogno di una legge sul salario minimo' - italia*, Agenzia ANSA. Available at: [https://www.ansa.it/sito/videogallery/italia/2024/06/04/schlein-litalia-ha-bisogno-di-una-legge-sul-salario-minimo\\_fcd0e7db-7f6e-44d0-aff6-f84645d028a1.html](https://www.ansa.it/sito/videogallery/italia/2024/06/04/schlein-litalia-ha-bisogno-di-una-legge-sul-salario-minimo_fcd0e7db-7f6e-44d0-aff6-f84645d028a1.html)
- ARAN (2024) *Contratto collettivo nazionale di lavoro dell'area sanità triennio 2019 - 2021*. Available at: [https://www.anaao.it/public/aaa\\_2862741\\_2024.01.23\\_-\\_ccnl\\_dirigenza\\_sanitaria\\_2019-2021\\_-\\_definitivo.pdf](https://www.anaao.it/public/aaa_2862741_2024.01.23_-_ccnl_dirigenza_sanitaria_2019-2021_-_definitivo.pdf)
- Baroli, M. (2024). I numeri del lavoro nero in Italia (che fattura quasi 80 miliardi l'anno). [online] Panorama. Available at: <https://www.panorama.it/economia/numeri-lavoro-nero-italia>
- De Amicis, D. (2020, December 5). *Volontariato: "È il cuore pulsante del nostro vivere sociale."* La Porzione. <https://www.laporzione.it/2020/12/05/volontariato-e-il-cuore-pulsante-del-nostro-vivere-sociale/>
- Domeneghetti, A. (2016). *Volontari 118 a stipendio fisso grazie ai finti rimborsi. E la Regione apre allavoro nero*. [online] Primonumero. Available at: <https://www.primonumero.it/2016/10/volontari-118-a-stipendio-fisso-grazie-ai-finti-rimborsi-e-la-regione-apre-al-lavoro-nero/23203/>
- Florio, F. (2019). *Truffa da 7 milioni di euro di quattro onlus, il gip: «Decine di migliaia di euro a 'ndranghetisti»*. [online] Open. Available at: <https://www.open.online/2019/07/02/maxi-truffa-da-7-milioni-di-euro-nellaccoglienza-dei-migranti-co-involte-quattro-onlus/>
- Gabanelli, M. and Ravizza, S. (2023) *Ecco Quanto Guadagnano Davvero i Medici Ospedalieri: Milena Gabanelli, Corriere della Sera*. Available at: <https://www.corriere.it/dataroom-milena-gabanelli/medici-ospedalieri-ecco-quanto-guadagna-no-davvero/5a4d4d2a-830e-11ee-b01e-f6b2afc73b92-va.shtml>

Gabanelli, M. and Ravizza, S. (2023). *Gli ospedali top e i peggiori: vi diciamo quali sono e perché. Ecco le pagelle mai rese note* | Milena Gabanelli. [online] Corriere della Sera.

Available at:

<https://www.corriere.it/dataroom-milena-gabanelli/gli-ospedali-top-peggiori-vi-diciamo-quali-sono-perche-ecco-pagelle-mai-rese-note/f4b1cd62-f968-11ed-90a5-dd2651f8f2ee-va.shtml>

Gaita, L. (2016). *Ambulanze, lavoratori del 118 contro volontari: 'Poco formati e fanno turni fino a 60 ore'*. [online] Il Fatto Quotidiano. Available at:

<https://www.ilfattoquotidiano.it/2016/09/17/ambulanze-lavoratori-del-118-contro-volontari-poco-formati-e-fanno-turni-fino-a-60-ore-a-ferrara-parte-indagine/3036035/>

Garofalo, A. (2017). *Economic Underdevelopment in Southern Italy: The Mafia Effect*. [online]

Available at:

<https://as.nyu.edu/content/dam/nyu-as/ir/documents/Garofalo-Amanda-20170424-ThesisFinal.pdf>

Granziero, S. (2019) *È giusto che il personale sulle ambulanze sia volontario?*, *The Vision*. Available at:

<https://thevision.com/attualita/ambulanze-volontario-personale/>

Istat (2024). *Censimento permanente delle istituzioni non profit*. [online] www.istat.it. Available at:

<https://www.istat.it/it/archivio/296339>

Jooble (2024a) *Infermiere stipendi*, Jooble. Available at:

<https://it.jooble.org/salary/infermiere?salarySearchSource=>

Jooble (2024b) *Onlus stipendi*, Jooble. Available at:

<https://it.jooble.org/salary/onlus?salarySearchSource=1>

Luccisano, M. (2023). *Minimum wage debate in Italy* | *European Foundation for the Improvement of Living and Working Conditions*. [online] www.eurofound.europa.eu. Available at:

<https://www.eurofound.europa.eu/en/resources/article/2023/minimum-wage-debate-italy>

Monti, G.L. (2022) *Ecco perché in Tutta Italia mancano medici, La Legge per Tutti*. Available at:

[https://www.laleggepertutti.it/576715\\_ecco-perche-in-tutta-italia-mancano-medici](https://www.laleggepertutti.it/576715_ecco-perche-in-tutta-italia-mancano-medici)

OECD (2023) *Health at a glance: Highlights for Italy*. Available at:

<https://www.oecd.org/italy/health-at-a-glance-Italy-EN.pdf>

Potere al Popolo (2023). *KIT ATTIVISTA SALARIO MINIMO*. [online] Potere al Popolo. Available at:

<https://poterealpopolo.org/kit-attivista-salario-minimo/#1684501735351-6583ee6e-c87e>

Progetto Arca (no date) *Assistenza Medica, Progetto Arca Onlus*. Available at:

<https://www.progettoarca.org/cosa-facciamo/i-nostri-servizi/assistenza-medica.html>

---

*Rapporto sulla Valorizzazione della rete dei volontari Alleati per la Salute (2021) Novartis.* Available at:  
[https://www.novartis.com/it-it/sites/novartis\\_it/files/Rapporto\\_Valorizzazione\\_della\\_rete\\_volontari\\_Alleati\\_per\\_la\\_salute\\_2021.pdf](https://www.novartis.com/it-it/sites/novartis_it/files/Rapporto_Valorizzazione_della_rete_volontari_Alleati_per_la_salute_2021.pdf)

Repubblica.it (2017) *Volontariato, Radiografia di Quei 6 milioni e mezzo di Italiani Votati al bene comune, la Repubblica.* Available at:  
<https://www.repubblica.it/solidarieta/volontariato/2017/01/16/news/volontari-156168983/>

Tediosi, F. and Gabriele, S. (2010) *Long-Term Care in Italy.* Available at:  
<https://www.files.ethz.ch/isn/122409/Italy.pdf>

Telethon (no date) *Servizi per I Pazienti Affetti da Una Malattia Rara, Telethon.* Available at:  
<https://www.telethon.it/en/what-we-do/supporting-research-and-patients/supporting-patients/>

UNIAMO (no date) *Chi siamo: La Federazione, UNIAMO.* Available at:  
<https://uniamo.org/la-federazione/>

Unione Sindacale di Base (2024). *La diretta del corteo nazionale contro il governo Meloni.* [online] Youtube. Available at: <https://www.youtube.com/watch?v=TdrXzISLimg>

USB Livorno (2023). *Livorno: il consiglio comunale approva mozione sul salario minimo. Ora intervenire negli appalti comunali e cancellare l'applicazione di contratti da fame firmati dai confederali.* [online] toscana.usb.it. Available at:  
<https://toscana.usb.it/leggi-notizia/livorno-il-consiglio-comunale-approva-mozione-sul-salario-minimo-ora-intervenire-negli-appalti-comunali-e-cancellare-lapplicazione-di-contratti-da-fame-firmati-dai-confederali-141>



