



**The Italian workers' model for promoting health and safety in the 1970s and 1980s, its influence in Europe and its implications for current trade union prevention strategies.**

ETUI Seminar

Brussels, 9-10 February 2016

Presentation by Claudio Stanzani

**Renewing the trade union health and safety strategies for prevention in the workplace implemented in Italy in the 1970s.**

**The CRD and the *Occupational Medicine* journal**

# Context

During the mid 1960s, the trade union movement became increasingly aware of the health problems and serious psychological/physical damage suffered by workers as a consequence of risks in the workplace, and the need to move beyond:

- a widespread fatalistic attitude: accidents, deaths and health problems caused by work were considered inevitable
- a public policy which only compensated for damage, shared its costs, and failed to exercise vigilance or apply sanctions
- yet another defeatist perception that working conditions would inevitably improve thanks to technological and organisational progress, the use of different products and manufacturing processes
- numerous contractual practices which monetised risks.

**FIG. A – OVERVIEW: ITALY**  
**INDUSTRY AND SERVICES + AGRICULTURE**  
**Accidents per year reported to INAIL**  
**(national workplace accidents insurance provider)**

Year	REPORTS	
	No. of cases	No. of fatal accidents
1951	728,788	3,511
1952	853,134	3,871
1953	937,698	3,763
1954	1,036,124	3,840
1955	1,104,455	3,950
1956	1,150,354	3,900
1957	1,196,360	3,948
1958	1,205,342	3,980
1959	1,269,509	3,883
1960	1,366,672	3,978
1961	1,486,070	4,418
1962	1,484,361	4,349
1963	1,577,352	4,644
1964	1,504,721	4,254
1965	1,321,166	3,823
1966	1,382,294	3,744
1967	1,496,492	3,935
1968	1,519,164	3,829
1969	1,565,788	3,863

**Period of economic boom in Italy**

**Trade union campaigns**

**Health is not for sale!  
PREVENTION!!!!**

FIG. A – OVERVIEW: ITALY

INDUSTRY AND SERVICES + AGRICULTURE

Accidents per year

Year	REPORTS	
	No. of cases	No. of fatal accidents
1970	1,601,061 <b>Workers' Charter art. 9</b>	3,675 <b>Generale strike Reforms</b>
1971	1,562,879 Reprinting of brochure developed by FIM, FIOM and UIL entitled "The working environment"	3,594 Supplementary company-level agreement for FIAT
1972	1,522,683 March National CGIL-CISL-UIL Conference for health and safety reps	3,462 October Congress of the Italian Occupational Medicine Association
1973	1,547,355	3,774
1974	1,433,358 Foundation of the CRD: <i>Centre for Researching and Documenting Risks and Damages in the workplace</i>	3,057 1° edition of the <i>Occupational Medicine</i> journal

Claudio Stanzani

# Art. 9 of the Workers' Charter

- In 1970, law 300 entitled the “Workers’ Charter” reaffirmed the following:

*Workers, via their representatives, have the right to monitor whether regulations aimed at preventing accidents and occupational illnesses are being applied, and whether all appropriate measures to protect their health and their physical wellbeing are being developed and implemented.*

# Renewing trade union action in the health and safety domain in Italy. Birth of the so-called *Italian workers' model*.

Between 1969 and 1978, the Italian trade union movement used the following methods to actively promote protection of the health and psychological/physical wellbeing of workers:

- Joint action and attempts to build trade union unity from the bottom up, by organising meetings for groups of workers in the same industry and health and safety reps.
- Despite considerable infighting, a quest for more advanced ways of involving workers in companies: collective bargaining, non-delegation and approval based on consensus.
- An attempt to build a different and less submissive relationship between workers and health and safety experts: workers as protagonists, questionnaires on the four categories of harmful factors, workforce surveys on working cycles and working environments.

- **Over 3000 CGIL, CISL and UIL shop stewards** gathered in Rimini from 27th - 30th March 1972, together for the first time at a conference entitled "*Health protection in the working environment*".
- They approved the shift in trade union policy and shared experiences of fighting for and acquiring new rights in the field of prevention in the workplace.

- In October of the same year (1972), the **Italian Occupational Medicine Association** met in Pugnochiuso for its annual congress, choosing to adopt the strategies proposed by trade unions for prevention and conducting workforce surveys.
- The country's first public prevention services were set up.

## **Trade union activity in the 1970s focussed on three priorities:**

- **Bargaining** on prevention strategies in companies and trade union presence in the workplace.
- An original proposal for changing the **cultural mind-set** to a less submissive perception of worker health and safety
- **Reform** of the public services responsible for workplace health and safety.

## **Collective bargaining:**

to prevent any attempts to monetise risks and to claim new rights to representation, information and analysis of the working environment and conditions.

Bargaining resulted in the appointment of experts by joint agreement, joint analyses and assessments of risks and protection/prevention measures, a register of risks and bio-statistical data, bans and limits on the use of harmful substances, etc.

Internal committees became a thing of the past and, under the new site committees, the first health and safety representatives were appointed.

# A culture

which is not submissive and involves workers in prevention strategies in workplaces and working conditions.

Publication of the FIM-FIOM-UILM joint brochure (1971) “***The working environment***”. Over the next few years this publication was translated into several languages including English, French, Spanish, Japanese etc.

**The four categories of harmful factors** and the workforce survey.

**Workers as protagonists, non-delegation, approval by consensus and meetings of workers in the same industry.**

# Health reform.

Trade unions jointly demanded a health system based on universal services and the **integration of prevention, care and rehabilitation activities.**

As part of this reform, **health and safety protection for workers** also had to be included.

The law establishing the national health service was approved in December 1978.

# The CRD

The **Centre for Researching and Documenting Risks and Damages in the workplace** was set up in spring 1974 on the initiative of the *patronati* INCA, INAS and ITAL (trade union related assistance institutes). This was based on the mandate provided in the report of the first national joint conference for CGIL, CISL and UIL shop stewards entitled *Health protection in the working environment* (Rimini, 27th-30th March 1972).

First edition of the ***Medicina dei lavoratori*** journal.

- In 1974, the joint CRD was able to build on the work of the centre established by Gastone Marri in 1965 at INCA CGIL and the magazine he curated entitled *Rassegna di Medicina dei Lavoratori*.
- This legacy was supplemented by the (more piecemeal) cultural and organisational experiences of CISL and UIL.

- In 1977, the CRD was incorporated into the CGIL-CISL-UIL Federation established on 3rd July 1972 and adopted as its own initiative.

In that same year, Giuseppe Ferrara directed the film ***Health is not for sale.***

# What did the CRD do?

- The CRD was a physical location where trade union experiences, institutional and legislative reforms, and technical expertise on the topics of health and safety protection and prevention strategies could be collected, filed and made available to all.
- The CRD acted as a tool for sharing the prevention culture among workers, but it also played an important role for the experts in the field of prevention.

- The CRD was a meeting point for trade unionists and prevention experts, the working world and the academic world.
- The CRD was a centre where initiatives regarding research, study, training and technical assistance could be developed.
- The CRD produced the *Medicina del Lavoro* journal.
- The CRD was a benchmark for other trade union movements around Europe and on other continents.
- The CRD was one of the greatest demonstrations of what it is possible to achieve with a united trade union movement.

- For 10 years, the CRD was **at the heart** of this trade union surge in activity. It recorded experiences, collected documents, carried out analyses and surveys, and shared the working culture and methodologies.
- It was the benchmark for what became known in Europe and elsewhere as "**the Italian model**".

- The CRD was sent documents, publications, books etc. which were read and numbered according to a set of criteria (*DO* documents included those of a trade union nature whereas *D* documents included all texts).
- The documents were then filed by keyword so that they could be located, shared and published in the *Occupational Medicine* journal.

- Over the years, dozens of people were seconded from their own organisations to work at the CRD. They continued in their different ways to pursue and share the jointly-developed, approach to the culture of prevention.
- Several dozens of prevention experts partnered with the CRD, working on their university theses, meeting other specialists, and learning how best to continue their work from within the public services.

- In 1984, the decline and demise of the joint CGIL, CISL and UIL activities marked the end of the CRD. In spite of hundreds of telegrams and protest letters, the Centre for Research and Documentation was shut down.

- The archives of the CRD remained inaccessible for around 30 years.
- They were (in the year 2000) entrusted to the ISPESL (now the INAIL).
- In 2011, the trade union research institutes Fondazione Di Vittorio, SINDNOVA and ANCS, with the financial support of INAIL, began to recover the CRD's documentation and the memory of that extraordinary period.