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Chapter

Inclusion Policies and Territorial Welfare Networks between Society, Work and the Economy at the Times of Covid 19

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Abstract

The Covid 19 health crisis rose the level of unease in the global market, bringing about a need for national systems which favour the development model, capable of giving centrality to the system with notions of inclusion and human development. Italy, having been categorised as one of the countries with the highest mortality rates as a direct result of Covid 19, provides us with the context in which we can identify how the capacity for resilience and economic development increasingly depend on the adoption of effective policies and tools which pursue these notions of inclusion and quality, and how the response to crisis often falls hand in hand with the strengthening of health prevention and territorial social networks. Through the analysis of data across the Italian regions, we find that a connection exists between environmental risk and health risk; with the greater spread of Covid 19 being found in the most industrialized areas, which only highlights the importance of adopting a development model that promotes the environmental turnaround of the economy while, at the same time, strengthening the functionality of social ties. This article addresses the issues of how, through aggravated discomfort, the crisis has made some of the ongoing phenomena even more apparent, with the introduction of social pathologies and increasing risk of inequality. Italy, despite its difficulties, offers interesting social and welfare network systems characterised by eco-sustainable productions, which can be strengthened through measures supported by European programs for the purpose of recovery and resilience.

Keywords: inclusion, welfare, pandemic, development, public health

1. Introduction

Well-being depends more and more on human development, given the ability of nations to promote investments capable of providing care, training and employment to citizens. The ability to guarantee free and efficient healthcare, education, training and work services to a large proportion of the population free of charge, or at least with limited costs, constitutes not only the concrete principles and base level of civilisation, but is, in fact, a prerequisite for the system to be competitive, functional and capable of generating wealth. The paradigm of the new millennium, as supported by the Fourth Capitalism dimension, requires that social development and economic growth be held together. The magnitude of the recent Covid 19 health

crisis has illustrated the importance of the relationship, showing how the level of human development is capable of determining the level of resilience within a given system, and how the ability to deal with crises, while crucial, is not sufficient. On the one hand, we have seen how countries in which economic growth and social development are not well integrated, matched with a higher level of inequality, such as the United States and Brazil, have struggled to deal with the consequences brought about by Covid 19. On the other hand, we have also seen how the impact of the large-scale health crisis is greater in regions and territories which have a higher level of economic and human development, matched with a greater urban concentration and higher levels of pollution, mobility and traffic. The social dynamics determined by the Covid 19 pandemic have made the importance of a system capable of taking care not only of the disease, in terms of functioning hospitals and health centres, but of the social and welfare repercussions even more apparent. Addressing the various forms of malaise and discomfort through a network of social inclusion and assistance when it comes to welfare, accompanying and following people throughout the course of treatments. The Covid 19 health crisis helps to shed light on the contradictions present in contemporary society, showing how the road to a prosperous economy passes through social equality, sustainable development and a quality of life that supports the intertwined relationship between these two underlying principles in an attempt to combat against the main factors of discomfort in today's society, loneliness and lost ties [1–3].

2. Evolution characteristics of the Covid pandemic in Italy and Europe

2.1 Diffusion and resilience factors

The analysis of diffusion factors and those of resilience and health risk reduction which have presented themselves in the Covid 19 pandemic, highlight a system contradiction: separating an economy that was united for many years, the resilience of the system and the ability to manage the risk of contagion and its consequences in territories where social equality appears to be greater is magnified, guaranteeing the presence of an effective health, assistance and inclusion system becomes all the more apparent. The Covid 19 pandemic has added gravity, and put emphasis on the contradiction of the system, when a system deemed wealthier, with higher levels of employment, especially in areas where the risk of infection is greater, faces greater risks. This phenomenon is evident in all European regions, but especially amidst the Italian ones, where the spread of infection is entirely linked to the presence of air pollution factors and is event in areas with a higher rate of urbanisation and mobility. The risk of contagion, on the other hand, appears somewhat more attenuated in regions such as Emilia Romagna or Tuscany, where economic growth and the presence of a robust entrepreneurial fabric correspond to the presence of a high rate of social and human development and a lower presence of polluting factors.

The Health crisis appears as yet another episode in a sequence of phenomena that contribute to the connection between factors of social unease and the consequences of an economic, financial and productive model that ought to be structurally re-thought, considering aspects that impact the environment, health and society in terms of inequality. This data appears to be present and well confirmed also by the evaluation of the diffusion and resilience factors found in the Italian system, which appears particularly exemplary of the different conditions present in European nations. In fact, Italy includes in its territorial diversity almost all the socio-economic conditions present in Europe and the analysis of the impact of the pandemic shows factors of diffusion and resilience that confirm what can be seen of the broader European framework.

In particular, the data concludes that:

- The areas with the greatest spread of the contagion both in the first and second wave can be placed in urban contexts and with greater anthropization, but above all, in those contexts characterised by the presence of particularly structured production and economic systems alongside an increased environmental risk.
- The realities affected by the major contagion, have the capacity to reduce the risk of mortality, dependent on the presence of valid social and health aids as well as intensive care.
- Preventative actions and above all the contexts capability to mitigate the repercussions on families and individuals with respect to the discomfort and social malaise aggravated by the health crisis and the impact of the pandemic, depend on the presence, alongside health facilities, of advanced social networks and services that support the formation of social capital.
- The treatment of health pathology through hospitalisation is ultimately one aspect, despite its obvious importance, the overall solution concerns itself with more widespread and extensive prevention and contrast tools, which consider places as well as the ways of living, working and production.

The data helps to express how the internal areas of the country have been less affected by risk factors and how the more cohesive local communities with more personal services are able to mitigate the phenomena of post Covid discomfort, as a result, territories characterised by more eco-sustainable productions generally appear less affected by the risk. In light of this, the Covid 19 pandemic has set forth a basic rule of thought: that health security is dependent on how one lives and how one produces. The presence of a system of social services and the people who help to reduce the use of hospitalisation and promotion of production activities capable of limiting the emission of pollutants into the atmosphere.

The thousands of villages and small municipalities, which offer high touristic value albeit at the risk of depopulation, are territorial contexts in which the risk factors appear less serious, as do the conditions of social hardship, due to the presence of social networks and stronger community ties. The Italian situation confirms what has been known for some time, and has been reaffirmed in the recent months through the analysis of the impact of Covid 19 derived from individuals, society and the economy, namely that human beings are incredibly sensitive to social circumstances – as put forth in the R. Laing's work *'The Politics of Experience'* (1967) [4]. Verified by social sciences and the growing role of welfare systems, which in recent years see social pathologies being derived from economic-culture factors, the situation that the world is currently experiencing confirms this fundamental assumption of psychiatry, bringing about a risk of dissociative identity disorder, anorexia, schizophrenia and above all depression in the post Covid context. The spread of depression as the "social disease" of this decade stems from the profound sense of inadequacy for what one could do and are unable to do, resulting from the ethics of efficiency at any cost, which coincidentally has been a common thought in shaping these past decades and that of late liberalism, such ideals have led to devastating consequences for the human condition and society – from the growth of inequality to the other various forms of unease [3, 5–8].

The risk factors and spread of the Covid pandemic have certainly brought these social issues to light, however, the elements of resilience show how the health crisis

is an expression of a wider environmental crisis and a development model that generates situations of crisis, hardship and difficulty. To recall the words of Pope Francis, and applying his rationale to the current context in which the epidemic has spread; *“it’s not possible to remain healthy in a sick world”*.

The response to crisis factors and the consequences on people within a territory ought not to be traced back to the sole dimension of health therapy and pharmacology as they have been in the last phase. Instead, the therapies must primarily concern themselves with risk reduction, and therefore be of a preventative nature. It’s not possible to solve structural problems with the logic of merely containing consequences, instead it’s necessary to shift the focus and act on the causes. Genetic and biological research is called upon to pay attention to social transformations and the consequences found in the everyday lives of people who live in an economic and productive model that exasperates the individual and the environment [9–12].

The Covid 19 pandemic ought to be considered as the latest example of a continuous acceleration of crises deriving from the current exasperation of economic growth which, like many of the preceding crises i.e. the financial and the employment crises as well as the continuous environmental crisis, puts too much emphasis on the speculative logic of ‘short-term advantages’ [13].

2.2 Inequality and social hardship

One characteristic of social impact which presents itself in the current economic model, on a global scale, lies in the increase of inequality, traditionally measured through the “Gini index” which considers the differentials that present themselves amidst the different income classes. The notion is increasingly important given its connotations with two of the world’s largest economies, the USA and China, ranking top in both the West and the East within terms of inequality. It’s interesting to note that China, while formally a communist country, has a much higher level of social inequality compared to that of Japan, despite Japan being generally accepted as the main capitalist nation in the Eastern world. Exasperated capitalism seems to spread better in this era in the less democratic countries. In any case, the dimension of inequality constitutes as one of the basic characteristics in the current and prevalent development model, which calls into question the function of welfare policies and social inclusion networks. A deeper analysis into the Covid pandemic seems to only exacerbate the critical elements of the current development model, given the connection between the spread of the pandemic and the growth of inequality factors. The apparent need to counteract the increased condition of inequality and related social dynamics is becoming more and more important in light of the recent pandemic and its aggravations:

1. Avoid the impoverishment of people and the worsening inequalities resulting from a fall in income, or loss in employment, and the obstacles arising from social distancing
2. Avoid the collapse of the productive system, especially of those which contribute significantly to the competitive capacity of the country and its social infrastructure
3. Promote private, public and social activities that are, necessary in the short term to counteract the effects of the virus and, vital in the mid-long term to bring about a wider change with the participation of citizens and work development on the basis of environmental (ecological and agro-food transition) and social justice.

If we consider the trend of wealth in the West over the course of the pandemic, we can observe that OCSE countries have seen an unprecedented growth in bank deposits. Such data indicates that the crisis may be leading to an extra-economic situation, especially when compared to historical data, with the previous financial and unemployment crisis of 2009/2011 we saw a decrease in bank deposits and savings. The extra-economic situation is also plausible given the natural consequence of the containment measures adopted during the pandemic, in the months following the decrease in the infection, there will likely be, as usually the case after a crisis, an increase in consumption. Having said this, the decrease in propensity concerned itself primarily with expenses such as international tourism, generally speaking, it was those individuals with a higher level of income that had a greater effect of savings. This excess of savings affects not only families, but companies, particularly those in an advantageous situation, i.e. operating in technological innovation, or those who have had access to forms of financial support. According to analysts, this phenomenon also leads to an increased level of inequality, given that it's likely these saved resources remain in the bank deposits of the owners. This is one of the ongoing phenomena that illustrates how the crisis, induced by Covid 19, is destined to aggravate inequality, a common factor among the recent economic crises faced in the past decades since the turn of the millennium.

While this phenomenon is more evident in countries already known for characteristics including a greater level of inequality, less welfare coverage and a less gradual tax systems, such as the United States, the risk in the West is still apparent. The sequence of crises that have spanned the last twenty years have contributed to a divide in people, a distance in social classes, decreases in opportunities and an impoverished middle class. It's a trend that can only be stopped through robust investments in human development, health, education, welfare in the workplace. It's the process of rebuilding social bonds weakened by the continuous attack of crises and the advance of inequality in a system that requires performance, feeds expectations and generates depression, a phenomenon that is widespread, especially among the richer counties.

One of the most important cultural changes that will prevail at the end of the pandemic is therefore a renewed focus on the responsible innovation of life models. Forms of social interaction and production of goods and services based on investments in innovation capable of promoting responsible growth, directly or indirectly linked to the use of digital technologies for more sustainable development, must be promoted. If the spread of the health crisis feeds factors of inequality, it is equally evident how inclusion policies aimed at reducing social inequality can contribute to not only contain, but also reduce health risk factors. There is, therefore, an interesting connection between social risk containment policies and interventions to reduce health risks.

3. Reasons for the high mortality rate among Italians and the implications of post Covid 19 trauma

In the long months drawn out by the Covid pandemic, Italy's found itself in a situation characterised by some basic contradictions. On one hand, being the first Western country hit in February 2020, the delays in the initial closures significantly worsened the impact of the first wave. Generally speaking, the Italian health system ranked second in the world by the WHO for efficiency, according to the 2019 index, held up, though this is arguably due to the impact of the pandemic being somewhat concentrated from the outset in regions with the most solid health structures. In spite of this, Italy remains among the countries in the world with the highest mortality rate and a high rate of contagion, this is a likely result of the country having a high percentage of the elderly population matched with a decrease in the number

of intensive care units in health centres, especially when compared to countries like Germany. In any case, even in the Italian situation, the risk factors have been increased by the lower investment across health systems in recent years, in particular, the lowered investments in emergency therapy departments.

If we consider the comparison with the indicators of the state of concern among European citizens, we can evaluate how Italians today have a far greater concern for work and the fate of the economy than for their own or family's health conditions and the possibility of getting sick. The second wave of the virus has, in fact, increased the fears of Italians for the economy, while decreasing those for the disease. The emotional dimension remains in this decisive situation, having said this, there are also reports which indicate the inherent stress enforced upon Italian families as a result of the health crisis. This leads to an assessment of the fragility in families, which in turn highlights the importance and need to strengthen social networks and communities as a means of alleviating burdens or stressing in isolation, such a notion is generally supported in the results of surveys carried out in countries such as Spain and Poland. In Italy, as in other countries, the family has represented a decisive factor of resilience, as is typical with countries with a prevailing Catholic culture.

Another form of discomfort during the months of the pandemic concerns itself with the younger side of the spectrum, poor socialisation, deprivation of play and sharing with peers. Social isolation has resulted in widespread forms of unease and fragility among the younger generation, to the point of real 'broken sociality' crises. Professor Massimo Ammaniti, developmental psychoanalyst and honorary professor of Developmental Psychopathology at the Faculty of Medicine and Psychology of the University of Rome, and member of the international Psychoanalytical Association, has published an important research on this very aspect. Professor Ammaniti argues that: "The identity of children is closely linked to the rhythms, habits, rituals of daily life and its environments, so, in the absence of these elements, the risks are disorientation and insecurity. In fact, everyday life reassures children and confirms them in their identity and in the fact that they live in a predictable environment on average. These shortcomings, together with the absence of other important stimuli (confrontation with other children, group games, school activities), have created a real syndrome of social deprivation" [14].

Research has highlighted the difficulties faced by the younger generation during the period of the pandemic, with around 30% of Italian children having faced difficulties and disturbances of emotional regulation, i.e. sleep disturbances, irritation, mood swings, and increased tendency to favour the opposition and increased anger.

All these phenomena lead to a situation that requires the adoption of tools and behaviours capable of dealing with the evident increase in situational discomfort. The turning point is the investment in human development and the ability to intervene on the pre-existing development models, increasing social ties and promoting the resulting economic activities. Through analysing the ongoing phenomena and evaluating its data, we can observe how socioeconomic and health resilience capacities find common ground in the relationship with the human development index: this is an interesting albeit diminutive studied convergence, measurable not only in European counties but also among Italian regions and the various factors of human development, the ability to react to the social and economic crises of the territory and the response to the health crisis in terms of care and assistance systems.

4. Welfare systems and work-related stress in the context of Covid 19

If we consider the evolutionary indicators of economic frameworks, such as the Excelsior forecast reports by UnionCamere as well as the various company

analyses carried out by the Foundation of Labour Consultants, we can see how the Italian economy might emerge in the coming months, generating or at the very least accentuating a tendency towards specialisation, which runs the risk of creating higher levels unemployment, or people who cannot easily be re-employed in the labour market. It would seem that the crisis has had a greater effect on sectors with low added value, for example catering or tourism, which during recent years have provided opportunities of employment even for people with low professionalism and/or low incomes. Considering this, the effect of the pandemic, in Italy just as in other countries, will weigh more on families with low-professionalism and income workers, contributing to both social and economic unease. This unease is only magnified in counties with less investment in social promotion and active policies. The criticalities linked to the exceptional nature of the economic and health phase, deriving from a climate of uncertainty, include difficulty of planning, management of remote work, stress of workers, organisational problems and naturally, a worsened climate and quality of work. The long months of the pandemic as well as those following have imposed greater levels of work-related stress, which seem to be only partially mitigated by the presence of remote work, even more so given that such work is not always turned into effective 'smart-working'. The phenomenon of work-related stress undoubtedly impacts a given company's productivity and is a root cause faced by many Italian companies today. Company priorities in the pursuit of resilience and recovery are therefore closely linked to the recovering and raising of productivity levels as well as the reconstruction of a peaceful working climate within the structures. The internal reorganisation of work processes, prompted by the many innovations introduced over the course of the pandemic, are instrumental in the growth of productivity and play an important role in helping to orientate corporate strategies on human resources, together with the acquisition of new skills and the introduction and strengthening of a work logic geared towards objectives and results. In Italy, Covid 19 has emphasised the differences between territories and social classes, as well as the differences between various economic sectors, penalising, as mentioned previously, economies with less added value or a weakened capacity for innovation. According to the analyses on the Italian employment situation, the majority of losses are recorded within the fields of accommodation and catering, suffering from a 20% reduction in staff, followed by trade, recreational, cultural and sports services. The expectations for manufacturing activities are generally less critical, especially for companies with a greater capability for innovation and sustainability as well as the production of Made in Italy excellence, and show signs of growth, albeit moderate. Fortunately, there are industry sectors that are significantly less affected by the crisis, and are in fact showing signs of improvement, such as credit and insurance, information and communication and social services and assistance. Generally speaking, the social and economic data reporting on the effects of the Covid 19 pandemic show how the crisis has weakened industries that were already considered as weak, emphasises fragility leads to further disintegration, inequality and social unrest which has been coming to light in the recent decades, the consequences weigh not just on the health system but also on the economic one.

5. Elements of resilience and control, and overcoming the Covid 19 crisis

To understand what the elements of resilience are with respect to health risk factors, it's useful to first verify how the Covid 19 pandemic affected Italian regions in different ways throughout 2020, and how the level of lethality does not strictly depend on the level of the elderly population within a given region. Covid 19 does

not result in the same mortality rate across the board but instead manifests itself with extreme variability, with positivity levels ranging from a maximum of 5.4% in Lombardy to a minimum of 1.3% in Campania, averaging out at 3.5% nationwide. The mortality rates for Covid 19 vary significantly across the different regions, with the same prevalence of new infections irrespective of the age range in a given territory. This is what we are led to believe from the emerging analysis of data collected by the national health observatory in Italian Regions of the Catholic University (Rome campus). The recent analyses further confirmed the data which emerged in the outset of the pandemic, namely that Covid 19 had a different intensity and lethality both in Italy and in Europe. The evidence ought to be analysed and fully understood by medical science and experts within the field of organisational health systems, especially since the differences found do not solely concern the fragility of the elderly population, those whom seem to be most affected by the virus. The researchers underline that the reasons for the regional and European differences must be sought among a very wide range of factors; organisational deficiencies, initial delays in understanding the severity of the emergency, deficits in the infection tracing systems, variant levels of virus aggression or aggressiveness, individual behaviour and the choices of central and local governments.

Another possible interpretative path suggested by the study is that among the most affected territories, with many having high levels of anthropisation, urbanisation and mobility, where most of their social and economic relationships take place. These areas, in all probability, have been subjected to a greater risk of contagion. Take Lombardy for example, the Italian region has both the highest intensity of movements and also, the greatest number of recorded infections. Paying attention to the relationship between deaths and infected people (the lethality), European analyses even depicts a high level of variability in this case, even the comparison amidst the elderly population (over 65) shows a correlation that is not always significant. In other words, the rate of mortality does not depend on the elderly structure of the population (**Figure 1**). Across Europe, the analysis of lethality recorded in its individual counties in relation to the percentage of elderly people has brought to light significant differences. For example, in groups with the highest

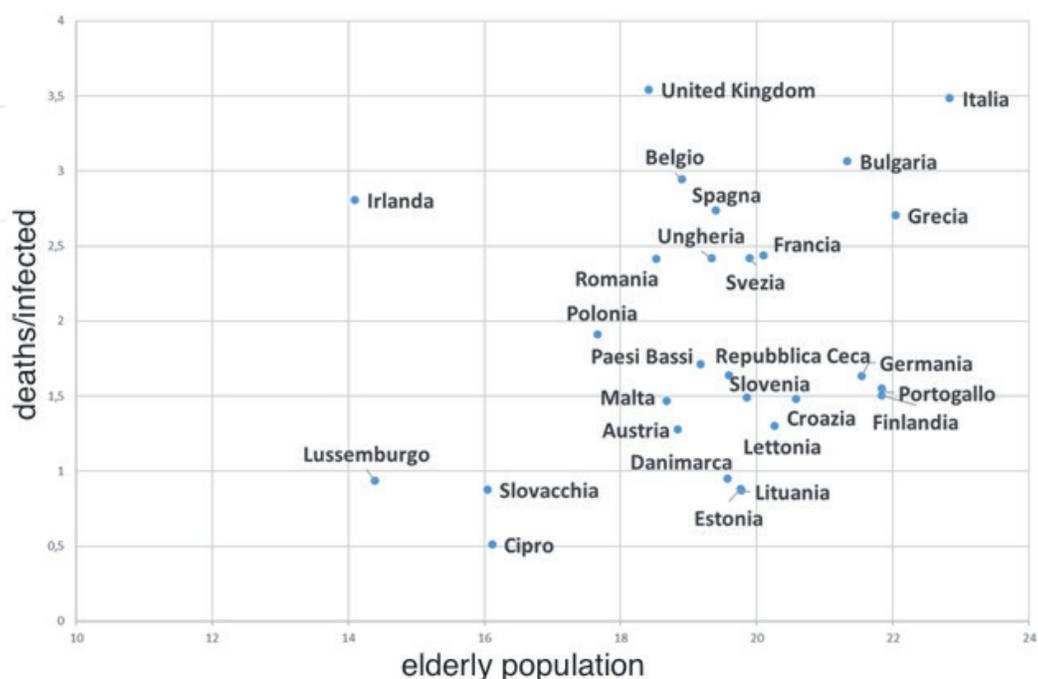


Figure 1.

A graph to represent the lethality of Covid 19 per country in relation to the proportion of elderly people.

percentage of an elderly citizens, lethality varies from 1.3 in Latvia to 3.1 per 100 inhabitants in Bulgaria; comparatively, in countries with the lowest percentage of elderly people, lethality varies from 0.5 recorded in Cyprus to 3.5 per 100 inhabitants in Great Britain.

Italy has a high level of lethality, with a contagion rate that places it within the central range of European rankings. Data has helped to verify that many of these deaths occurred within the elderly Italian population, Italy, in comparison to other European countries, ranks first for its share of elderly people, however this is only one factor that contributes towards mortality. In fact, the more worrying situation can be found in Great Britain, the cost with the highest level of lethality, despite having a relatively young population compared to many other European states. Similarly, Ireland also shows a high level of lethality in relation to the share of elders in the population. In general, there are very different situations with respect to lethality which do not necessarily rely solely on the share of the elderly population.

The analysis helps to clarify a plausible connection between the health crisis and the characteristic of the development model, and the connection between the lethality rate and the level of economic growth between Italian regions appears to be somewhat verifiable in this sense. The first phase of the epidemic was principally consolidated in northern Italy, while the second affected the whole national territory, albeit with varying intensity. What's interesting to note is that northern cities continued to record the highest mortality rate even in the second phase of the infection: in November 2020, for example, the mortality rate was 73 percent in north cities compared to 46 percent in the south. Despite the spread of the epidemic throughout the country in the second phase, the lethality rate remained higher within the urban context and in areas with a higher presence of productive settlements and mobility. Building on this, the highest mortality rate was found amidst Italian regions with a presence of territorial industrial systems, including Lombardy, Veneto, Friuli and Piedmont.

There is also a connection between the environmental risk factors and those relating to the health risk, which can also be found with regards to the spread of Covid 19. In particular, Italian provinces which, over past decade prior to the start of the pandemic, had the highest levels of atmospheric pollution (as reported in January 2020 by the Air Quality Index) appear to align themselves to the greater levels of spread-ability in the first phase of the pandemic, such was the case for Bergamo, Brescia, Lodi, Piacenza, Milan, Monza, Turin, Pavia, Parma and Modena. Unsurprisingly, the effect was greatest in northern Italy, one of the places in Western Europe with the highest levels of atmospheric pollution, and at the same time, home to the greatest presence of production sites. Over the course of the second wave, we can see a greater challenge in containing the rate of contagion especially in areas with a higher presence of pollutants. If the environmental element is an important factor in preventing health risk, arguably, the ability of social and welfare systems to contain and manage risk factors can be found in the greater capacity to contain and manage the consequences of said contagion that appear to be present in regions such as Emilia Romagna, Lazio and Tuscany. All of whom happen to have a better human development index compared to other regions that have been proportionally more affected by the health risk, namely, Lombardy, Umbria and Piedmont. The human development index is an official indicator that measures, among other things, the quality of social ties, the health and the welfare systems present in a given territory. In comparing Italian regions, which appear similar from a socio-economic point of view and neighbouring from a territorial perspective (which ultimately allows for a comparable level of exposure to the health risk), we can see how territories with a better human development index have been able to develop a greater resilience capacity and health risk

containment; i.e. Emilia Romagna reacts better than Lombardy, Trentino better than South Tyrol, and Lazio is considerably more resilient compared to Abruzzo or Umbria. This correspondence is further supported by pre-covid data, under the comparison between the management and containment of the health risk and the levels of social and health services measured through the official LEA indicator. If we combine this data with research indicators that attempt to measure 'social capital' (the presence of social participation, civic sense, non-profit enterprises and associative and voluntary networks within a territory) we can see a significant correspondence with the human development index and a partial alignment with measurements in health care quality levels. In fact, the relations they maintain with other subjects of the social protection system, both public and private, within a territory contribute to the value generated by non-profit institutions. The network of social and economic relationships that non-profits build ought to also be considered as an important indicator of social capital. Territories ranking top in this regard, i.e. Emilia Romagna, Trentino, Tuscany and Friuli, show a greater capacity for socio-economic resilience and at the same time a greater ability for containment with regards to the effects of the health crisis.

Such data can certainly stand to be depended and strengthened by further comparisons and feedback, but nonetheless seem to indicate that the various risk and crisis factors of this economic phase (from the productive crisis to a social one and from an environmental crisis one of health) have a common denominator that requires a reflection on the development model and shift in direction towards environmental and social sustainability. This empirical evidence establishes the needs for further fields of research and studies to highlight and support the following considerations;

- The Covid 19 health crisis appears to be determined by a series of contributing causes, a mix of elements that favour the spread of the virus
- The ability to either reduce or spread risk appears to be linked to the environment, the level of anthropisation and the presence of air pollution factors
- Urban contexts, both for environmental factors and for the presence of a continuous and high contact between people, are considered to be places with the greatest diffusion of health risk
- The ability to contain and manage the effects on people's health is linked to the presence of adequate social health and welfare facilities within a territory
- The ability to intervene and reduce social hardship depends on the presence of networks supporting social inclusion and personal services within a given territory
- Both the resilience and resilience capacity of socio-economic dynamics as well as the promotion of development factors are dependent on the ability to invest in an eco-sustainable economic system, the promotion of an evolved welfare system, the centrality of investments in social protection, the prevention of health risk, as well as human development and civil liability.

The comparative analysis of the connected phenomena and the effects produced by the coronavirus pandemic from a social, health and economic perspective highlight the need to intervene and amend the current development model, promoting ecological reconversion of the economy that goes hand in hand with the promotion

of central social ties. Questioning the current neoliberal and global economic model, which can in part find references and tools in the innovation model of the Fourth Capitalism, providing interesting examples and good practises in Italy's own social and economic system.

6. The necessary integration between health, social and economic networks

6.1 The Italian example

Faced with crises, civil and cohesive communities react as plants do; strengthening the roots, developing shared bonds, protecting and including the weakest subjects and innovating and generating beauty. These are the realities of Italian production excellence, local networks, districts and supply chains of small to medium-sized enterprises that support both quality and sustainable production. The network system of Italian manufacturing excellence, studied throughout the world, is one of the few models where the increase in productivity and the innovation capacity of the economy is linked to the improvement of cohesion and social ties, as well as environmental investment: it's an example of the possible and desired relationship between social quality and the quality of the economy. There is a vast amount of data that confirms how the resilience of the Italian economic and social system, in its best expressions, relies on the distinctive characteristics of a 'vegetable economy', whereby the economy is considered as an expression of the territory and its environment. If Italy remains the fifth country in the world in terms of its trade surplus, and the seventh with regards to its manufacturing, it is likely a result of it having the highest percentage of waste reduction and recycling compared to other European countries (79 percent, double the European average). As the research of the Symbola Foundation (www.symbola.net) shows, Italy also ranks first in the world view for organically grown agriculture, with no European rivals to match their number of organic producers: approximately 70 thousand, almost double the average of other nations. Italian agriculture emits around 50% less greenhouse gases compared to the EU-28 average, significantly better than other large countries. Italian productions boast as many as three thousand geographical indications recognised at a community level for food products, considering this, it's no surprise that the added value of Italian agriculture is among the highest of large European countries.

If we consider the eco-efficiency factor (a synthesis of four factors: 1. Materials used 2. Energy used 3. Waste production and 4. Atmospheric emissions) the Italian system is among the most environmentally sustainable in Europe and among the major European economies. In recent years, Italy has grown the most in terms of its production eco-efficacy, thanks to the promotion of both recycling and circular economy. During the pandemic, 'green' companies, which have invested in eco-sustainability, appeared to be both more resilient (with a lessened decrease in turnover) and reactive, allowing for a more confident outlook in the future. Generally speaking, these 'green' companies are more dynamic, innovative, digital and young. Investments in eco-sustainability and in the reduction of consumption also helps to establish a foundation for employment opportunities, the shift towards eco-sustainability has seen a rise in demand, both now and in the coming years, for professionals with green, environmental and digital skills.

Italy is also the first European country for companies operating within the cultural sector, deriving value from both its historical and artistic heritage. Generally speaking, Italy has a 'cohesive' business dimension well rooted in Italian history,

culture and economy linked to a given territory which creates value directly from social ties. Among these enterprises, the role of the cooperative enterprise is of special importance. While Italy has suffered from production and financial system crises in recent years, cooperative and mutual systems have been able to respond to said crises by strengthening networks, promoting participation and creating jobs. Since the beginning of the last century, non-profit companies have continued to promote an alternative model to financial capitalism, demonstrating how it is possible to consider economics primarily in terms of social well-being as opposed to not profit.

No reflection on overcoming a system based on the relationship between production and income through social and territorial networks can ignore the consideration of experience and value that comes with cooperative enterprises, very few countries in the world show the capabilities of this model as the national economy of Italy does. If the previous tendencies to lean towards a capitalist model were based on the hegemony of utilitarianism and competition, both between firms and within the internal organisation of work, the inclusion of Fourth Capitalism ideals allows the axis to shift in favour of a shared ability and cooperation within a system, present in the form of sharing knowledge and experiences. In this sense, the cooperative dimension that presents itself in the Italian model no longer appears solely in the non-profit economic dimension as a response to social needs, but as a possible means of organising the economy and society around the value of a person and for the purpose of well-being. Considering this it's fair to say that Italy not only has a strong tradition of cooperation and social enterprise, but also has a historically consolidated model promoting both human and social relationships; organising the territory and creating networks and relationships between people, businesses and the territory that they establish through an economy of collaboration and sharing. From these practises, examples and experiences, it's possible to build the conditions for a sustainable and stage development model on a health, environmental and social level.

6.2 From the recovery fund to a new development model

From the outset of the Covid 19 pandemic, originating areas surrounding Northern Italy, Southern France and Catalonia, some of the most developed areas across the continent, Europe saw a reactional divide. Two key directions emerged; Northern European countries as well as some eastern European countries gave priority to economic protection, whereas other countries, such as France and Italy, limited economic activity and prioritised above all, the health of their citizens. This division emphasises the first significant consequence of how the Covid 19 epidemic brought to light an important transition in the geopolitical relations perspective and the development model itself. The indications of the PNRR, the plan supported by the Recovery Fund for the recovery and resilience of countries within the European Union, offer a clear directive necessary to prevent current and future health risk situations: namely, the promotion of investments, infrastructures and incentives for an ecological conversion of the economy and greater social inclusion. For many nations across the world, especially the recently developed counties, this is likely to trigger an expensive change to production models that emit mass pollutants into the environment and have little regard for conditions of growth with respect to inequality. Many corporations and international companies, for example those operating in a highly polluting sector such as that of clothing, continue to produce in countries where there are no, or at least little, regulations and limited imposed on productions which negatively affect both humans and the environment. As such,

a global strategy for the purpose of pandemic risk prevention ought to be imposed upon nations with rigorous agreements aimed at supporting ecologically sustainable production, which at the same time, ought to reduce the emissions of gas and pollutants, even if this means the banning of products which appear difficult to recycle and dispose of. Nations know what they must do, but the path of a circular and environmentally sustainable economy, which involves both heavy costs and investments, cannot be explored only by Europe and the more advanced economies. In this sense, a directive heads towards the direction of re-converging two of the planet's largest economies, that of America and that of China, is necessary. Albeit difficult to imagine given their tendency to prefer security over enrichment at a cost.

The belief of scientists regarding the close correlation between environmental crisis and the health crisis much reach policy makers as soon as possible, necessary countermeasures for the purpose of resilience and recovery must be taken. The hope is that the European Union's recovery plan could stimulate change and initiate a change in direction, even if the world is not entirely binding. The new development model that needs to be determined in order to recover from the crisis and the sequence of crises that have characterised the last ten years, i.e. financial, environmental, economic and health, must be sustainable for man, society and the planet. Health sustainability ties itself to environmental sustainability, which in turn paves the way for human sustainability acts. Considering this, while quantitative productions, generated by the anxiety of the consumption of perishable goods as spawned by the rampant depression in a hyper-consumer society, must be expanded, services ought to be expanded to fully ensure citizens live better and together. The demand for solitary and selfish consumption must be replaced with the demand for sharing and social bonds. There is an economy of beauty and the well-made which opposes the consumerism of 'ugly' and perishable goods, the production of which generates pollution. There is a civil economy based on community-like-services promoting togetherness, increasingly requested not only by the elderly and generally weaker population, but also be those who want to escape from the social malaise that is fuelled by the current development model [15, 16].

The pursuit for another quality of life not measured by the conditions of production (a parameter used mainly by the US news and WEF model indicators), but instead, measured by psychological factors of well-being (i.e. parameters used by the BES). Both economic and social references call for a different model for the purpose of attaining sustainable development and are well presented within the Italian experience, even more so from an ethical and cultural point of view. The task of Italy, is therefore, in this phase of crisis resilience, to focus on the basic aspects of its model; quality, environmentally and socially sustainable productions with investments in networks and personal services.

7. Conclusion

The health crisis, which arrived in 2020 following a sequences of other crises, both an environmental and financial one – which continue to remain prevalent even today, have brought to light a need to reform social and economic models for the purpose of ensuring greater sustainability and balance between economic growth, social development and respect for the environment. In defining the conditions which some economists, including professor Stefano Zamagni, refer to as 'integral development', offers an appropriate means of determining decision makers in public policies. In light of this, actions must:

- Support social ties through forms of collective participation, associations, voluntary work and other forms associated with the aggregation of promoting a common good
- Promote methodologies, especially those which preserve initiatives and the creation of territorial networks of solidarity, learning and sharing
- Promote conditions for the participation in civic life and decisions regarding territorial development models
- Promote social mobility and the dissemination of personal, civic knowledge and growth, all the while ensuring development of social capital in areas which are determined by the conditions of economic growth
- Investing in the quality of human relationships, interventions for the inclusion of people in difficult conditions and considering work as a fundamental measure in the promotion of social development, through the support of effecting and present training and work-related services within a territory
- Promote activation and welfare interventions in the workplace and support a wage policy that limits inequality

All the challenges, which ties themselves to the underlying foundations of a system, gives reference to ethics. If the antidote to crises lies in the reconstruction of social ties, we must understand how to intervene in an attempt to counter the widespread ethics of individualism – which has seemingly been fuelled by decades of economic and political neoliberalism and only proves to feed the endless cycle of empty consumerism [17–19]. Humanity must free itself from the fragility and illusionary will to power, which is often expressed in the logic of accumulating useless goods and precarious experiences. The new development model must avoid the promotion of freedom to ‘do as one want’s and instead promote the freedom to change oneself. It is only in this way that we can truly take care of others and develop beyond a sick world.

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