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Italy’s health workers denounce ruling elite’s negligence on coronavirus

By Marc Wells
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The coronavirus pandemic escalated this weekend in Italy, with 1,500 dead and 13,000 new cases. Hospital systems are submerged, lacking basic supplies like safety masks that leave them completely unprepared for the massive epidemic.

The Conte government announced Saturday evening that all non-strategic production will be suspended: “Outside activities deemed essential, we will only allow work to be carried out in smart working mode and we will only allow production activities that are deemed in any case relevant for national production. … It is the most difficult crisis that the country has been experiencing since the second post-war period. The death of many fellow citizens is a pain that is renewed every day.”

In stark contrast with a tardy and inadequate response from the state, overworked health care workers are showing extraordinary dedication to patients. But the contradictions of a crippling system are bursting at the seams. Medical staff are increasingly discussing broader political questions, and that the pandemic is not only a health but a social and political crisis.

The WSWS spoke to Italian health care workers facing the growing wave of severely ill and dying patients. Monica Giglio Fiorito is a registered nurse at the emergency room of the San Giovanni Addolorata hospital in Rome, currently deployed at the intensive care coronary unit.

Giglio Fiorito said, “We have created special areas for the COVID-19 emergency, a buffer zone for those suspected of being infected. After a test and a CAT scan, we assess whether the patient needs COVID-19 specific care. If positive, then the patient gets transferred to Lazzaro Spallanzani National Institute for Infectious Diseases, since, outside ventilators and NIVs, we don’t have that specific type of intensive care.”

She explained that her hospital is not equipped to directly treat coronavirus patients, though they work with positive cases to send them to appropriate facilities for treatment: “We health care workers are absolutely exposed to risk. In my hospital we’ve reported two doctors testing positive, however it’s unclear whether they contracted it in the hospital. More than the doctors, we nurses are particularly exposed to the virus. Upon a new patient’s arrival, we wear an FPP2 mask, whose filter is weaker than an FPP3. But we are in Italy.”

Giglio Fiorito observed, “We have excellent training for doctors and nurses in Italy, but the Lazio Region does not give us sufficient tools … Today I worked in the morning. We had 3 FFP3 masks, 2 FFP2s and several surgical masks. So, with a nursing staff of 20 in my unit, you can see how many have been exposed all day.

She added, “I love my job for many reasons. Unfortunately, I didn’t go all the way for a medical degree and I regret it. Still, as a nurse I received an excellent training and execute difficult tasks. But we are underpaid for what we do. After 24 years of service, I get 1,800-1,900 euros a month. In the last few years, governments shut down many public hospitals, moving towards privatization. The system has been a vehicle for exploitation: the entire ruling class took all
the fat, there’s nothing left.”

She indicted the ruling elite’s neglect of the population: “At the beginning of the coronavirus phenomenon, it was known that it would spread from China everywhere, including to Italy.” However, she said, “No one sounded the alarm. I can show you official documents from the Gazzetta Ufficiale [official journal of legal record] that clearly warned of the problem as far back as at least February 5. And now I am terrified by the prospect that it will spread down south. One can only pray to God on that, as the death toll will be way higher than Bergamo.”

Gigliofiorito stressed the criminal negligence of the state: “The president of the Lazio Region, at the beginning of February, had the nerve to say that this was a simple and banal flu, that we were making too much noise. They did not want to test even us, medical personnel. In my department we had the first death from COVID-19, an 89-year-old woman, certainly with cardiac preconditions. When she died, they tried to hush the news, but couldn’t.”

She added, “Of course, the hospital was engulfed in a scandal. But no one worried about us, 25 nurses placed in quarantine. They only worried about testing us and giving us the results for one purpose: to rush us back on the job.”

The WSWS also spoke to a technician from Lombardy, who wished to remain anonymous: “I work with cancer patients who need to be treated with radiation. We have 150 to 200 patients a day. We don’t have an emergency room, so we don’t work exactly in the frontline. However, our demographic is most vulnerable to COVID-19, so we must take strict precautions.”

He explained, “I’ve had two patients who tested positive, although without symptoms. I also have two coworkers who have tested positive. We have been in daily contact, so we have all been exposed. They are now quarantined, but it’s very possible we’ve all been contaminated.”

“Tests are only given to those with clear symptoms: one must have high fever and heavy cough, or shortness of breath. Testing the full population is difficult. However, there has been a sort of abnegation, in addition to shortage of supplies, compounded by a difficulty of getting these supplies on the world market.”

He criticized the European Union’s role: “Europe is not so much a Union. They forgot about the alliance and are acting on the basis of ‘to each his own,’ if one looks at how the EU ignored our emergency.” In contrast, he said, “I also must say China’s contributions have been noteworthy.”

He described how EU governments ignored World Health Organisation warnings: “The priority is given to the stock values of Morgan Stanley and Goldman Sachs, but when the scientific community warns that half the world population will be affected by a deadly virus it’s considered crazy. This is a history classic.”

He said, “The loss of lives is the saddest part of all this. I cannot hide my anger when I read the daily death toll. After that, one gets news from the stock market, how this affects finance.” He added, “I get irate when in such a pandemic they think about a decline in their stock value. The situation in the real world is not rosy, but the response of the ruling elite is absolute folly, from my viewpoint ... 95 percent of the population doesn’t know whether it’s positive [i.e., infected].”

Pointing to the massive resources expended on bank bailouts after the 2008 Wall Street crash, such as for the failing Monte dei Paschi di Siena bank in Italy, he said, “History teaches a lot: the dramatic consequences we saw in Greece were caused by the speculations of a rapacious financial elite. They speculated on a people’s hunger to make money. … Our own micro-world has changed since the Lehman Brothers collapse.”

In contrast with the indifference of the financial aristocracy, he said, “I am in the business of health care. Frankly, I see human misery every day. People looking into my eyes and begging for help. ... I do not accept financial speculations on starvation and people’s deaths, or bets on the failure of an entire people.”

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