ORIGINAL ARTICLE

“Short Epic” on gender-based violence in the healthcare landscape, according to Italian legislation: An example of modern social and cultural evolution

Short title: Evolution of Italian legislation approach to gender violence

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Gender-based violence; stalking; sexual violence; domestic violence.
Main Text

Gender-based violence is a worldwide phenomenon that requires a targeted and incisive legislative approach due to its sociocultural and health impact.

Nowadays, it is a highly topical issue, which requires international dissemination. This is why we aim to describe the Italian legislative growth in this regard, as an example to use and improve.

In Italy, the first step in tackling this issue was made with the law n. 66/1996 [1]: gender-based violence was merged with "crimes against the person" against the previous legislation which considered it in the context of "crimes against public morality". This step is crucial to understand the will to protect, enhance, and recognize individual sexual freedom, considering not only the acts strictly concerning the victim’s body, but also the compromission of one’s sexuality.

In 2001, the laws [2], [3], [4] introduced legal aid for women and new measures aimed at fighting cases of domestic violence, as well as the removal from violent family and the direct protection of women and minors, giving new impetus against gender-based violence from a social and economic point of view.

Significant changes were made in 2009 [5], with the introduction of the crime of stalking and the increase of penalties for sexual violence, placing the emphasis on the victims' psychological consequences. The same law also provided indications for the category of health professionals, responsible of taking care of the weakest and providing information relating to anti-violence centers. For the first time, the fragility of healthcare workers is recognized and the need to strengthen their knowledge in this regard is considered to protect themselves and their patients. Therefore, the law n. 77/2013 [6] ratified the adhesion to the directives of the Istanbul Convention, which evaluate the prevalence of the phenomenon and increase the training of professional figures more exposed to the victims of violence [7].

The repercussions on the activity of health professionals who assist victims of gender-based violence are obvious, not just personal or ethical, but also legal.

In 2019, the law [8] tightened the convictions for crimes of sexual and domestic violence and introduced the crime of revenge porn, to deal with violence in all its forms, not just physical.

Finally, the law n. 53/2022 [9] established the obligation for all public health structures (especially in the Emergency Room) to provide data relating to violence against women, to prevent and to monitor the phenomenon. It is essential for the doctors and the paramedical personnel to have an in-depth knowledge of the procedure to which women and all the victims of gender-based violence (such as children and the elderly) should be directed, with reference to the comprehensive Guideline published in 2017 by the Italian Ministry of Health [10].

This brief excursus about the evolution of Italian legislation on gender-based violence highlights the close relationship between the population, the legislation and health professionals. The activity of the Law, which follows the social evolution of the population, has involved health professionals over time, giving them a central role in this fight: the recognition of violence and the direct support of the victims.

Therefore, the healthcare professionals should consider themselves (for better or for worse) an active and essential part in the fight against gender-based violence, recognized by Law, capable of radically changing the life of the victims.

There is still much to evaluate in this field. The goal is to provide ever better assistance to victims of gender-based violence and to improve the various possible approaches, with the hope of being an inspiration in those contexts in which there is not yet this sensitivity to the subject.
COMPLIANCE WITH ETHICAL STANDARDS

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