

FROM ITALY'S REGIONS

Gender medicine policies in the Tuscany Region

An interview with **Stefania Saccardi**

Why do you think gender medicine is important and how attentive are your Region and policymakers in general to this issue?

The World Health Organization defines "health" as a complete state of physical, mental and social well-being. In addition, the WHO and Italian Constitution state that health is one of the fundamental rights of every human being without distinction of sex, race, religion, or economic and social condition.

This means that we must give everyone equal opportunities in care. And in my capacity as Councillor for the Right to Health, Welfare and Social and Health Integration, I share the statement of the European Council of Ministers in its recommendation to Member States dated 30 January 2008 "the objective to produce equality, fairness and respect for human rights (...) in the field of health, requires that the effects of gender differences and their consequences are taken into account in the planning of health policies, in health services and in the derived processes."

For too long, in fact, diseases, their prevention and therapy have been studied mainly based on cases concerning one sex, i.e., men, un-

derestimating the specific biological, hormonal and anatomical, as well as socio-cultural characteristics of women.

Men and women have a different risk of developing many diseases and also a different response to many of these. It is therefore not only scientifically and ethically wrong to transfer the data obtained on men to women, but also a real methodological error.

Gender medicine is therefore called upon to limit inequalities in research, treatment and attention which to date have mostly affected women. However, this does not mean creating a medicine for women or men only, but applying the concept of diversity to provide everyone, men and women alike, with the best possible treatment according to their gender. To achieve this goal, gender medicine should not be a separate field of medicine, but a cross-cutting integration of medical skills and expertise to develop a culture and care of individuals that takes into account gender differences, not only in anatomical and physiological terms, but also from a biological, functional, psychological, social and cultural point of view.

Knowledge of gender-specific differences favours greater appropriateness of therapy and a greater

protection of health, thus guaranteeing the principle of equity which means not only equal access to care, but also having care appropriate to one's gender.

That's why gender medicine is now a requirement of the Health Service and we need to think of organizational and coordination models of services that take into account gender-specific differences.

The Tuscany Region has always been a pioneer in community health and welfare policies. What has your Region done in the field of gender medicine? Would you like to explain the process that led to the Resolution that established the Regional Gender Health and Medicine Coordination Centre? Would you like to explain why it is important?

Starting from the considerations above, 6 years ago, the Tuscany Region started to address the issue by establishing a Permanent Commission on Gender Medicine Issues within the Regional Health Council, the technical and scientific advisory body of the Department of the Right to Health, Welfare and Social and Health Integration. This Commission, composed of over thirty professionals who work in various capacities in health care in Tuscany and who had already been dealing for a long time with gender-related issues in their respective fields, set up a number of thematic groups: from research and pharmacological experimentation, to cardiovascular



Stefania Saccardi. From 2015, she is the Councillor for Social, Sport and Health policies of the Tuscany Region. A degree in law, she started her administrative career already during her years in university as municipal councillor in Campi Bisenzio. After other non-political experiences, she was appointed Deputy Mayor of Campi Bisenzio in 2004. In Florence, the new mayor Matteo Renzi delegated her in 2009 to Social Policies. She was also delegated from time to time to deal with housing, sports, and environmental policies. She was later appointed deputy mayor of Florence. At the beginning of 2014, Enrico Rossi, Governor of the Tuscany Region, appointed her Vice-President of the Region charged with Welfare, Housing and Social and Health Integration policies. On her personal website (<http://www.stefania-saccardi.it/>) she confesses: "The beauty of politics consists in seeking solutions to the problems of people and in pursuing their welfare; it means making a difference in their lives, through services and opportunities, especially in times of need. These delegations will give me the chance. Rest assured that I will do my best."



The principle of equity means not only equal access to care, but also being able to have the most appropriate care to one's gender.



pathologies and metabolic disorders; from health determinants to preventive medicine and workplace safety; from the identification of gender equity indicators to the organization of services, up to the design of health facilities in a gender perspective.

The Commission helped not only to include a specific paragraph on "Gender Health and Medicine" in the 2012-2015 Integrated Regional Social and Health Plan, but also sponsored, in collaboration with the Regional Health Agency, the first report "Gender Health in Tuscany." Thanks to the work of a large and qualified team of experts, this Report included a series of contributions on current scientific knowledge about different gender-specific behaviours and the impact of these on health and disease in epidemiological and clinical terms in Tuscany. And precisely these data allowed

making a further step forward by including gender health and medicine among the seven priority actions of the Department.

In February 2014, the Regional Gender Health and Medicine Coordination Centre was set up in view of creating a network to ensure the implementation of the guidelines set out by the Centre at wide area and hospital level. Throughout the entire Region, 12 Hospital Gender Health and Medicine Coordination Centres, four University Hospital Centres and the Monasterio Foundation Centre have been established with hospital resolutions. Almost more than 250 professionals, including doctors, nurses, psychologists, pharmacists, social workers, etc., as well as professional rolls, and trade, volunteer and citizen associations, are promoting gender culture in all activities involving the Tuscany Regional Health System.

The Regional Centre collects and coordinates the actions and initiatives put in place by local coordination centres and other entities involved, to set up a network system that is able to promote and ensure a uniform development of gender medicine throughout the Region. In addition, it promotes pathways for taking charge of individuals that take into account gender differences for greater appropriateness and personalisation of therapy, charts out itineraries for awareness-raising and training of healthcare professionals on gender determinants in order to ensure equity in the diagnostic, assessment and therapeutic approach, and favours the development of innovative solutions for access to services, codifying and spreading the experiences already made at local level. It also collaborates with universities in Tuscany and with Italian and European institutions.

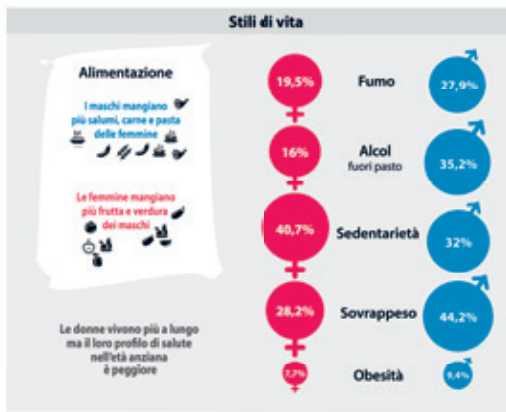
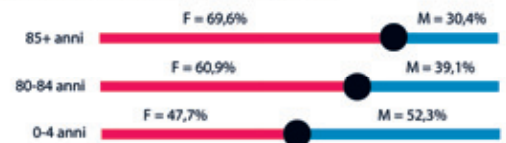
The screenshot shows the ARS Toscana website. At the top left is the ARS Toscana logo (agenzia regionale di sanità). To the right are utility icons for font size, contrast, layout, and refresh. Below the logo is a navigation menu with items like Home, Agenzia, Eventi, Pubblicazioni, Progetti, Banche dati, Press room, Amministrazione trasparente, and Lavorare con noi. The main content area features a breadcrumb trail: Sei in: Home > Aree d'intervento > La salute di... > Genere > La salute di genere in Toscana. The article title is "La salute di genere in Toscana". Below the title are social media sharing buttons for Facebook, Twitter, and LinkedIn. The article text discusses the development of a gender approach to citizen health as a priority action of the 2014 programming. It mentions the Commission for Gender Medicine in Tuscany and states that health is neutral and that diversity should be applied. It notes that in Tuscany, a permanent commission for gender medicine was established in 2014. At the bottom of the article, it says: "Individuare quante, quali e a cosa sono attribuibili le differenze di genere, formare". On the right side of the page, there are two vertical lists: "Determinanti di salute" (Alcol, Alimentazione, attività fisica e peso corporeo, Ambiente, Dipendenze, Fumo) and "Problemi di salute" (Gravi cerebrolesioni acquisite, Incidenti stradali, domestici e balneari, Lesioni midollari).

LA SALUTE DI GENERE IN TOSCANA

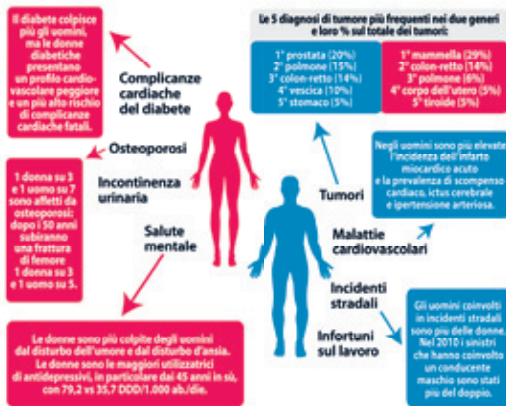
Ci sono differenze nella salute di **donne e uomini** che non sono esclusivamente biologiche, ma anche (e in alcuni casi soprattutto) socio-culturali, ambientali e relazionali.



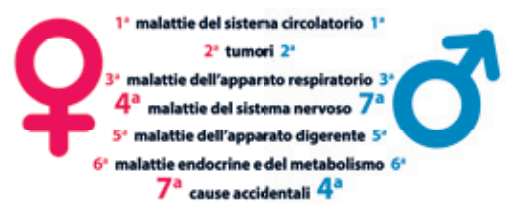
Nascono più maschi che femmine, ma già intorno ai 40 anni le donne sorpassano numericamente gli uomini, per arrivare agli ultra80enni in cui sono il doppio dei coetanei maschi:



Patologie e problemi di salute



Prime 7 cause di morte



What do you plan to do to include gender medicine in the healthcare plans of the Tuscany Region especially with regard to prevention and other areas affecting health?

With the reorganisation of the Tuscany Regional Health System, started by Regional Law at the end of 2015, the Regional Gender Health and Medicine Coordination Centre is among the regional clinical governance bodies. This means that the Centre operates within the Department for the Right to Health, Welfare and Social and Health Integration, constantly liaising with the competent offices responsible for the planning and organization of care, quality of services, research, innovation, human resources, prevention, pharmaceuticals and appropriateness and with the other regional clinical governance bodies, including the Tuscany Transplantation Organization, the Tuscany Cancer Institute, the Regional Blood Bank, the Regional Centre for the Management of Clinical Risk and Patient Safety, the Tuscany Network for Integrated Medicine, the Regional Referral Centre for Critical Relationships, the Regional Referral Centre for External Quality Audits (VEQ). Moreover, in order to promote synergy and develop initiatives carried out elsewhere and by other institutions, the Centre liaises with the various players involved, including the Tuscany Regional Health Agency, the MeS laboratory of the Sant'Anna School of Advanced Studies in Pisa,

the Regional Commission for Equal Opportunities and the universities of Tuscany.

Finally, the Centre, while carrying out strictly healthcare-related activities, also has contacts with other institutional groups and regional offices that deal directly or indirectly with gender equality.

The Resolution of the Tuscany Region is considered somewhat as a model: in your opinion, what should be done so that everyone can apply these concepts at an organizational level and make them become a cultural approach in everyday practice?

I believe that every Region, having its own organisational model in healthcare, must find its own ways and pathways to spread culture and implement gender-specific policies, with the common goal of ensuring every individual, whether man or woman, the most appropriate therapy. It is therefore necessary to invest in gender medicine to materialise the concept of patient centricity in research and in the development of effective and innovative treatments for the protection of health.

The objective should be that of evidence-based and gender-specific medicine to ensure more adequate and appropriate care, which will also result in savings for the National and Regional Health Systems.

Interview by *Mariapaola Salmi*