

# Handbook on Active Citizenship

Cyprus  
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## Foreword



This handbook is one of the outcomes of the project "Patients' Voice" implemented in the north of Cyprus in 2016-2017. The project is funded by the European Union and implemented by the Universal Patient Rights Association (UPRA)<sup>1</sup> and the Active Citizenship Network<sup>2</sup>, the European and international branch of the Italian movement Cittadinanzattiva<sup>3</sup>.

The aim of this handbook is to foster civic attitudes and initiatives by sharing a conceptual framework and concrete experiences. The underlying principle of this text is that citizens, when actively getting together and participating in everyday "politics", represent a huge power. Empowering citizens as actors in the public sphere contributes to the development of societies and their ability to address problems of public concern. Therefore, governments and civil society should encourage citizens to take responsibility in caring for common goods, since their involvement helps strengthen the governance process.

The handbook is therefore primarily targeted to citizens, and in particular to:

- Those who are already active in NGOs, associations, or movements and want to strengthen their civic skills;
- Those who would be interested in taking part in civic initiatives and want to look for how-to information.

But it is also targeted to those who are interlocutors of citizens in managing public affairs (for example, politicians, public servants, journalists, businesspeople) and believe that citizens represent an asset instead of a problem in dealing with issues of public interest. The handbook is particularly relevant for government officials at the local level, since a new space for public participation is emerging as a result of decentralization. Further, active citizenship usually results from acting upon problems that are mostly found at the local level.

This handbook should be mainly used for training activities, including seminars. The format of the text is based upon the handbook developed by the Cittadinanzattiva's School of Active Citizenship in 2001, and successfully used for the organization of approximately 180 training seminars for citizens in Italy; on the Handbook "Introduction to Active Citizenship" produced for a Project in Macedonia in 2004 and the Practical Handbook for active citizens produced for the project "Derechos y Desarrollo" in Colombia<sup>4</sup>.

## I. Conceptual Framework for Active Citizenship



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<sup>1</sup> <http://www.ehhd.eu/en/>

<sup>2</sup> <http://www.activecitizenship.net>

<sup>3</sup> <http://www.cittadinanzattiva.it/>

<sup>4</sup> <http://www.cittadinanzattiva.it/approfondimenti/attivismo-civico/3835-derechos-y-desarrollo-english-presentation.html>

We hope that the dissemination and use of this handbook helps enhance the ability of local citizen organizations and other bodies to further document successful and unsuccessful experiences and practices, increasing the available knowledge on civic initiatives in Cyprus. In this way, the handbook should be continuously revised and updated to new situations and needs.



## A CONCEPTUAL FRAMEWORK for ACTIVE CITIZENSHIP

The conceptual framework addresses three main issues, namely the difference between traditional citizenship (promoted through civic education and active citizenship); the kind of powers held by civic organizations and citizens; and a more comprehensive and inclusive definition of governance that rests on both the demand (civic organizations) and supply side (state institutions).



## 1. BEING CITIZENS

What does it truly mean to be a citizen? According to common wisdom, being a citizen means belonging to a community and having entitlement to a number of rights and duties in relation to public institutions (for example, the duty to pay taxes and the right to safety).

But looking at everyday life, where people must face problems that affect them in a direct and concrete way, being a citizen often means advocating and exercising concrete rights. Let's consider three Italian stories related to health care.

The first is that of Maria Grazia C., a mother whose daughter died in a hospital in 1978 and reported it to Cittadinanzattiva's Tribunal for Patients' Rights in 1980. Her story significantly contributed to the development of a movement in support of patients' rights in Italy.

### So that it may not happen to others

The following is a complaint submitted to the Tribunal for Patients' Rights regarding the hospitalization and death of my daughter Valentina, which occurred in 1978 at the second pediatric clinic of the Rome General Hospital (Policlinico di Roma).

I would like to start by saying that putting into your hands something that I have carried with me for two years not only means providing you with information useful to your work, but also entrusting you with something extremely delicate that I suffered personally, and which marks my conscience with a great sense of responsibility. I am convinced that part of the blame for what occurs today in our hospitals falls upon those who suffer in silence.

First of all, I would like to say something about my experience, and that of other mothers, in the hospital. I must point out that having the right to accompany and assist one's own child in the hospital is very different from having permission to do so, given at the discretion of the head physician. The latter creates a situation in which mothers are psychologically subordinated and literally terrified to disagree in any way with even the most junior employees because of the risk of being forced out. (...)

For children, the hospital means pain, physical fear, a new dimension that makes one feel different, punished for his or her illness. In the hospital, injections were given at noon and at midnight, because of a division of labor between the nurses' shifts. However, this schedule failed to consider the needs of children that are the most important ones. My daughter was given extremely painful injections of two types of antibiotics mixed together. Lunch was brought to her at noon, soon after her shots. But my daughter, exhausted from crying and from emotional stress, nearly always fell asleep and missed the meal. The situation at midnight was even more dramatic, since we were usually awakened by the neon light switched on in the

room. Besides these incredible practices, we experienced a further cruel episode during the first day in the hospital. When my daughter had calmed down and was finally about to go to sleep, the same nurse returned and rudely ordered me to get her undressed so that they could weigh her and measure her height. Despite my complaints, the nurse insisted on completing her task, which could easily be performed the following morning. Of course, the episode provoked further tears and fear that were completely unnecessary.

As far as hospital staff is concerned, their behavior completely depends on the sensibilities and good will of particular individuals. There is no regulation in this regard, to which one can turn for assistance. One can be badly treated for absurd and trifling reasons by an employee just the same as by the chief physician. (...)

And there is yet another serious problem: the paternalistic attitude of doctors, who consider you to be nothing more than a complication and prevent you from closely monitoring your own child's illness by not explaining clearly and completely its causes. This leaves parents completely unprepared for the possible tragic finale of their child's illness, something that unfortunately happened to us. We found ourselves facing our child's death even as they continued to give us hope, despite the fact that my daughter's condition was so serious and irreversible that even a layperson could easily see that she would never make it. I believe that parents have a right to obtain regular and clear information, and that their opinions must also hold a minimum of weight with the doctors.

During examinations, I often pointed out various things that my daughter or I had noticed, but we were continuously ignored. In some instances, our impressions were confirmed, perhaps two or three days later, but they were presented as information noticed by the doctors. One can only sit by and watch helplessly, without an opportunity to understand the risks of one treatment or the utility of a therapy.

This sense of powerlessness continued even after my daughter's death: the corpse is not yours, but yet again it belongs to the hospital. (...) It was thus that, the night when my daughter passed away, after accompanying her to the mortuary wrapped only in a sheet, through endless tunnels underneath the hospital, we were asked to return home, and I was not allowed to accompany her in any way. And what can I say about the mortuary personnel, who wear smocks smeared with blood, and curse as they load and unload corpses to the floor above for autopsies? Thanks to a hefty tip, I was able to spend half an hour with my daughter. One of those attendants approached me and, in a conspiratorial tone of voice, offered a burial cell for sale in the cemetery. I learned from him that he had spent time in prison for pandering, and that the next morning, he would be the one to dress my daughter for the last time, since I was not allowed to do it myself.

I don't mention these details morbidly, but because I hope that this situation could change and others will not have to suffer the same that we did. There are many other episodes I could tell, but I'm sure that this will be sufficient to describe a situation that, were it to

change, would make me very happy. Finally, I have no desire for revenge, which I could gain through other means. But the fact remains that my daughter ended her days in a sad and squalid world, amid unnecessary suffering and great fear, and this could have been avoided if other mothers who experienced the same incident before me would have spoken out and protested.

Though there are many old and new problems, since 1978 the status of patients' rights in Italy has certainly improved. And this happened thanks to thousands of people who, as in the case of Maria Grazia C., decided to become active citizens "so that it may not happen to others".

The second story is that of Mr. Cirillo, a man who was able to achieve something that seemed impossible.

### The case of Mr. Cirillo

Mr. Cirillo, a small-scale businessman about sixty years old, traveled to Rome from the southern region many years ago to check himself into a hospital. He was a cardiac patient and had to undergo surgery to have a pacemaker implanted.

When he arrived at the hospital, he was admitted to the cardiovascular surgery section, where he found approximately twenty other patients awaiting the same operation. The presence of so many people puzzled Mr. Cirillo, so he made a few inquiries and discovered that the hospital had run out of money to purchase pacemakers. Because there were no funds, everyone would have to wait (no one knew for how long) for the hospital to purchase the pacemakers and then operate on the patients.

Mr. Cirillo was certainly not the most "patient" of patients, and he was also not too pleased to be restrained in a small room in his pajamas doing nothing and having to put up with absurd schedules. But his patience truly reached its limit when he did a few quick calculations and discovered that the money the hospital was wasting to house twenty patients, without any reason, could easily pay for more pacemakers than were needed, and was even enough to supply the hospital for the rest of the year.

Thus, Mr. Cirillo decided to begin a hunger strike in the hospital. He officially informed the head nurse of his decision, and called the local papers and the Tribunal for Patients' Rights (Cittadinanzattiva).

Naturally, when the news of his hunger strike spread, hospital managers got into a panic, especially since the regional chairman and health minister had been informed. Besides, it's not every day that a cardiac patient in a hospital awaiting surgery goes on a hunger strike.

All attempts to convince Mr. Cirillo to give up his strike, by both the health director and the department's chief physician, were in vain. Mr. Cirillo was resolute. Even the

attempts to frighten him, emphasizing the possible harm to his health, did nothing but strengthen his determination and resolution: "If something happens to me," he said, "it will be your fault."

There was even an attempt, although rather naive, to bribe him. No one knows how, but the medical staff managed to find a pacemaker. They hurried to him, ready to operate immediately. But Cirillo said he wouldn't even consider it; he would undergo the operation last, because first they would have to perform the surgery on all the other patients.

In the end, no one knows how, but funds were obtained, the pacemakers were purchased, and the patients had surgery. Therefore, everyone benefited: the patients whose rights to good health were protected, and the state, which put an end to an absurd waste of financial resources.

After the successful results, Mr. Cirillo said goodbye to everyone and went home.

The third story concerns mothers who met in a hospital and discovered that they were able to get together and successfully act for the protection of their children's rights.

### Indomitable Mothers

In Italy, a couple of decades ago, unnecessary hospitalization of children was common. However, hospitals lacked adequate infrastructure and policies. It usually happened thus that young patients did not get psychological assistance, lived in dreary places, did not have any recreational opportunities, and were not able to continue their school activities. Hospitals did not take into account the existence of parents, so they did not have access to hospital facilities (such as toilets) and usually did not have any physical space to stay with their children. On the contrary, their presence was discouraged; they were considered as a hitch for health treatments and were asked to stay away for hygiene reasons. Regularly, mothers were forbidden to sleep near their children. At the same time, because of the limited number of nurses, children were fastened to their beds at night.

A few years after Maria Grazia C.'s letter and shortly after Mr. Cirillo's hunger strike, a group of mothers of children at San Camillo hospital in Rome got together and dealt with this situation. Thanks to their actions, Italian hospitals' attitudes towards children significantly changed. They talked with doctors and managers about the nonsense of forbidding them to stay with their children at night, since there was negligence and lack of assistance to patients. Given the reiterated refusal of authorities to allow mothers to stay with their children, even using a simple deckchair, mothers decided to take extreme actions. One afternoon, they refused to leave the hospital. They said that they would stay with their children whether authorized or not. They added that if the hospital's authorities were to dismiss them, they should call the police, since they would no longer obey an absurd order. Facing the prospect of bad publicity, doctors and managers finally had to accept the legitimate mothers' claim.

Thanks to that action, the presence of parents in hospitals began to be considered as an asset and no longer a problem.

These are common cases. They happen every day, everywhere in the world, thanks to millions of ordinary people who, instead of waiting for someone else's intervention, take the initiative to address problems of common concern. These initiatives can include:

- Various parents getting together to set up a day-care center for their kids in their homes
- Friends of disabled people removing architectural barriers (for example, a step) that hinder them from having access to the cinema
- Neighbors repairing a road affected by floods
- Setting up a public garden by restoring a field, planting trees and building seats
- Bringing together families of different ethnic groups and promoting a shared solution to problems which could cause violence
- For those living in an industrial area documenting, reporting cases of pollution and demanding that factories address the situation

Through these actions, people exercise citizenship in ways that are completely different from the traditional one.

Traditional citizenship can be defined as the system of various rights and duties that govern the relationship between the citizen and the state to which he or she belongs. Exercising the right to vote is the highest form of expression of citizenship.

Though traditional citizenship is of crucial importance, it presents two major limitations. First, it underestimates the potential of individuals - considered only as voters, yet unable to manage public affairs. Second, it presupposes public institutions' ability to manage solely public affairs, addressing people's needs and protecting citizens' rights.

Both assumptions are false:

- Throughout the world, people are able to do more than vote to care for public interest;
- Public institutions are not able to solve only by themselves problems of public concern.



The cases reported above make it evident that a more concrete citizenship, which is realized not only at the ballot box but everyday, is required. This citizenship entails not only claiming the protection of citizens' rights, but also acting in their defense. We can call it new citizenship.

**We can define new citizenship as the exercise of powers and responsibilities of the citizen in the daily life of democracy, where problems of public significance are faced.**

How and why does one individual become an active citizen? There can be many reasons. They include:

- Desire for justice
- Solidarity
- Desire to change reality
- Desire to "count" and to play a leading role
- Desire to join others and develop cooperative and friendly relations and share common interests and activities
- Desire to experience reality "first hand", without intermediaries

Usually these and other motivations appear combined, as in the case of Maria Grazia C.

After all, becoming an active citizen can happen during the life of an individual for a number of reasons, values and circumstances. Being an active citizen is not a special status, which requires particular competencies, know-how or abilities. Nor is being an active citizen exclusive of certain groups such as businesspersons, traders or professionals. Everyone can be an active citizen if he or she engages him or herself and acts for the common interest (and not for personal reward).

- A hospital doctor, who demands a better quality of food for patients, requires transparency in waiting lists, or confronts corruption, bureaucracy and paternalism, is an active citizen.
- An entrepreneur, who supports both financially and technically the set up of a public garden in an area where his/her factory operates, is an active citizen.
- A public servant, who out of regular working hours advises citizens with special needs on public administration, is an active citizen.



## 2. WHAT ACTIVE CITIZENSHIP IS

Beyond the experiences and motivations of each person being or becoming an active citizen, how can we consider this phenomenon in a more objective manner? An active citizen fully develops when he or she joins others in order to achieve a common goal.

Active citizenship can be exercised through different organizational forms, including the following:

- Voluntary organizations
- Grassroots and community groups
- Associations
- Social enterprises
- Communities
- Self-help groups
- Advocacy movements, for example, the environment and consumers
- Networks and coalitions

These organizations may intervene in different fields. Examples of active citizenship may include:

- Providing services and advocating in favor of minorities
- Organizing services for rehabilitation of drug addicts, alcoholics, and prisoners
- Promoting foster care and adoption of abandoned children
- Prohibiting overbuilding and fighting against unauthorized construction
- Creating after-school programs for children who run the risk of dropping out
- Providing legal, psychological and material assistance to crime victims
- Promoting conciliatory forms of conflict management in neighborhoods
- Creating equal opportunities for disadvantaged people
- Combating corruption in public life
- Organizing training for citizens residing in high risk areas on how to understand and prevent calamities and catastrophes
- Fighting for access to drugs for the chronically ill
- Controlling and improving the quality of hospitals
- Initiating legal action against unfair contractual clauses in banking or insurance contracts, among others

How can we define all these different actions and initiatives? Giovanni Moro<sup>5</sup> in his "Handbook of Active Citizenship" provides the following definition:

Active citizenship is the capacity of citizens to self-organize autonomously in a variety of ways to defend their rights, exercising powers and responsibilities in public policies for the caring for common goods.

Becoming an active citizen may happen for different reasons. Active citizenship entails getting together, self-organizing, and deploying forms of collective action. As an old labor union song says, no single stone forms an arch, and no single drop of water turns the mill on its own. It is important to remember this collective dimension of the concept in a time when a single political leader is often presented as having the solution for every problem.

The realm of action for active citizenship is that of policy-making. Public policies aim to deal with problems of public interest such as health, education, transportation, or employment. They represent the daily and practical dimension of democracy in which active citizenship has a fundamental role to play.

Active citizenship encompasses some particular organizations. In other words, not all the associations of citizens are "active citizenship" organizations. For example, sports associations, chess clubs, networks of motorcyclists, groups of friends of poetry, and amateur orchestras and choirs are associations of individuals that are citizens, but are not considered "active citizenship" organizations.

Active citizenship and civil society are different - though related - concepts. Civil society refers to the sphere where non-state actors share fundamental values and rules. It includes a variety of actors such as religious organizations, professional associations, schools and universities, trade unions, sport, music, art, recreation centers, etc. Active citizenship organizations are part of this sphere, but they are aimed at protecting rights and caring for common goods through the exercise of citizens' powers and responsibilities.

We may define organisations promoting civic activism those associations dealing with activities of public interests. It means that they aim for the whole collectivity and not just only for their members. Those activities imply consistent actions aiming at:

- protecting citizens' rights and common goods,
- empowering disadvantaged people, supporting and promoting civic

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<sup>5</sup> Sociologist of political phenomena and of organizations, he carries out research, training, cultural dialogue and advice on citizenship and related issues such as civic activism in public policies, new forms of governance, corporate responsibility and the citizens' side of Europe. He is president of FONDACA since its establishment, in 2001. Among his various publications, he published in 1998 "Manuale di cittadinanza attiva" (Handbook of Active Citizenship). <http://www.giovannimoro.info/indexEN.html>

activism.

What do we mean by **protection of rights**? Any action promoted by citizens with the purpose of:

- Making effective rights established by national or international laws and adopted by a specific country
- Promoting the institutionalization of new rights
- Recognising and introducing new rights

These outcomes may be reached in various ways and with the help of a variety of actors, but the initiative should be promoted by citizens.

What do we mean by **common goods**?

By common goods we refer to all material and immaterial goods, of a public or private nature, which must be free, accessible and usable for everyone, in defense of the right of citizenship and safeguard of the future generations. Common goods include natural resources (such as air, water, soil) virtual/immaterial goods related to society (trust, legality, public institutions, security), material goods created by citizens (networks, such as Internet, pieces of art, public infrastructures). Common goods protection implies:

- actions planned to identify a good as public good.
- actions intended to prevent or minimize impoverishment or neglect of public goods (forest protection, road maintenance)
- actions meant to facilitate wide access to common goods and to educate people to a responsible usage (access to museums, monuments for disabled people, Internet access in rural areas).

With the term **empowerment** we mean a cognitive process through which an under advantage person becomes aware of his ability/ power as citizen. Empowerment applies to both individuals and collectivity. The status of "disadvantage person" may be either occasional or temporary (hospitalization, natural disasters), or permanent (disabilities, chronic diseases).

The process and effect of empowerment allows an individual to exercise his own prerogatives: "I can do it and I will do it". The process of empowerment concerns providing individuals in difficult situations with assistance and care, but also helping them to become autonomous and key players in their life as well as de facto citizens.

What are the links between active citizenship organizations and other civic associations and civil society forces? All these actors cooperate in creating and enhancing "social capital," that is, the network of ties based on values, reciprocity and trust that constitute the fabric of society. However, active citizenship organizations are devoted to empower citizens as actors who must play an active role for the protection of their rights.





### 3. WHY ACTIVE CITIZENSHIP?

The purpose of active citizenship can be summarized in three objectives:

- Caring for common goods
- Protecting rights
- Empowering citizens

What exactly are common goods?

Common goods are goods that belong to everyone, and that everyone can use freely. Common goods include the environment, health, culture, trust, the rule of law, etc. They are continuously threatened by selfish and speculative use. Their depletion impoverishes society as a whole.

Then, active citizenship serves to help take care of, protect, develop and provide access to common goods.

A second objective is the protection of rights. Active citizenship contributes to put into effect the rights proclaimed by law.

Unfortunately, a right stated by law is often not implemented for a number of reasons:

- Lack of real administrative commitment,
- Conflict with other rights,
- Limited interpretation of the right by those who should protect it,
- Apparent lack of links with precise norms.

Active citizenship serves to ensure the effective protection of rights that are proclaimed at all levels (including regional and international ones) by the law, or those that are deeply rooted in the political culture.

The work of citizen organizations for the enforcement of rights takes two main forms:

- Advocacy, which consists of defending the points of view and desires of people in need vis-à-vis those who fail to recognize these rights;
- Service provision, which means delivering services able to meet legitimate needs of people unsatisfied with public provision.

Usually, citizen organizations use both approaches. For example, those organizations that manage kindergartens for poor families also have to lobby the public administration so that an official program for kindergartens accessible to everyone is adopted. Further, those organizations that protect patients' rights vis-à-vis public authorities or professionals often have to provide information, assistance, and advisory services for citizens in need.

The third objective of active citizenship is to empower citizens. So, what does empowerment mean?

Empowerment takes place when people realize that they have the right as well as the concrete ability to solve the problems they face, so that they can gain control over their lives.

Specifically, this entails the capacity to affect reality and other people's behavior - that is, to exercise power.

It is often said that citizens have no power. This is not true. The experience of active citizens actually demonstrates the opposite. When citizens get organized and participate in public policy, they exercise their own powers of influencing other people's behavior and the course of reality. We can list at least five kinds of power:

- The power to inform and present different viewpoints
- The power to raise awareness by using symbols
- The power to make institutions operate in concordance with their missions
- The power to deliver services and produce goods
- The power to create alliances and partnerships

But, what do these powers mean? Let's take some examples, coming from the worldwide experience of citizen organizations.

#### FIVE POWERS

##### Power to inform

Citizen organizations are able to generate information and, in this way, affect reality. Information concerning the violation of human rights in prisons, the existence of illegal dumps with dangerous waste, the real condition of people at risk, etc. is provided through different means, such as monitoring, dissemination activities, etc.

### Symbolic power

In various countries, citizen organizations have used symbolic power to increase awareness concerning disabled people. They have demanded the removal of architectural barriers, and have shown the impossibility for the disabled to practice sports or arts, as well as discrimination against the disabled in recreational places. They did so through protest, organization of special events, awards to good practitioners, etc. Thanks to civic action, being disabled is becoming more and more socially accepted. Families no longer feel shame or fear, but the support of neighbors and society at large.

### Power to hold institutions accountable

Citizen organizations that control and promote consistency between the organizational and professional patterns in the municipal delivery of services and citizens' needs are exercising such a power. For example, they can ensure that a public transportation service conforms to its schedule.

### Material power

When citizen organizations deliver services for mentally handicapped people or poor families, or when they organize humanitarian relief operations in catastrophes, they are exercising this kind of power.

### Power of partnership

Significant results in the protection of the environment have been achieved thanks to partnerships promoted by citizen organizations together with private companies and trade unions. These partnerships have enabled, for example, a decrease in industrial waste and pollution, protecting at the same time the right to safety, health and employment, avoiding any conflict between employers, workers, and the community.

We can say, then, that active citizenship serves to ensure the effective protection of the rights that are proclaimed on all levels (including regional and international ones) by the law, or those that are present and deeply rooted in the collective consciousness, as is the case with the right to justice.

On the basis of these elements, we can give a more concrete answer to the question, "What is the purpose of active citizenship?" The answer is that active citizenship is useful to put into effect the rights proclaimed by law. As we well know, public institutions often hardly guarantee the rights they ought to protect, and often they do not guarantee them at all, if left to do so on their own. Instead, it is often precisely these institutions that ought to protect and defend rights that are responsible for their violation.



## 4. OBSTACLES

If, however, someone might think that things are going well, they would be mistaken. And it's not only that the problems faced by active citizens around the world are of enormous dimensions, but also because the presence of active citizens is not so welcome.

In 2000, Cittadinanzattiva promoted a campaign entitled "Accused of excessive citizenship". The problem is that in a country like Italy, where everyone lectures about the lack of a civic sense, when a citizen rolls up his or her sleeves and sets about solving public problems, instead of being thanked, he or she is often fined instead.

If you don't believe it, here are a few examples in different Italian cities:

### *Accused of excessive citizenship*

#### Rome

The inhabitants of the Torbellamonaca area erected a football field on land belonging to the city of Rome, which had long been abandoned and had become a full-scale dumping ground. They were denounced to the police for doing so. They had asked the city to intervene to improve that piece of land for years.

#### Avellino

Some young members of a social centre restored a city nursery school that had fallen into disuse, been nearly destroyed by hooligans, and had remained in deplorable condition for a long period of time, and they transformed it into a gathering place for recreation. They were forced to vacate while they were fixing up the building, some of them were denounced, and two or three of them were taken to trial for "occupation of public property."

#### Corcolle (Rome)

Considering the condition of the streets and pavements in their neighbourhood, the residents got together and agreed to repair them, by themselves, using scrapers. They were denounced by the city of Rome, the pavements were dismantled, and the scrapers were seized.

#### Taranto

A group of attorneys in the local branch of Cittadinanzattiva, dedicated to "Justice for Rights" co-ordination, were denounced to their professional order for having defended pro bono a citizen who did not possess the means to pay. The allegation was unfair competition. They were suspended and investigated for a long time.

#### Vicenza

An association of ex-members of the Italian Alpine troops, the guests of a building owned by the city, repainted and changed the shutters of the office at their own expense. The association was fined.

#### Rome

A tobacconist provided a container for the proper disposal of used batteries in his shop. He then took care of disposing of them himself, when the container was full, by taking them to the city collection point, which is located in an inaccessible and difficult to reach location. Fined.

#### Livorno

Railroad workers on the Livorno-Bologna stretch requested the substitution of a locomotive that lacked safety devices. Fined.

#### Rome

Parents cleaned swastikas and racist phrases from the walls of their children's school. Fined.

#### Allume-Giglio (Grosseto)

A group of citizens rearranged an excavated street, which had been neglected to the point of becoming impassable. Fined.

#### Sapri (Salerno)

The local group from the Tribunal for the Patients' Rights went to the hospital to carry out an inspection, which was duly authorised by the health authority. But faced with the publicity of the exponents of the Tribunal about the gravity of the situation they found, the hospital authorities denounced them for interrupting a public service. At the trial, they were absolved only because a local television station had filmed the inspection, recording the extreme situation of squalor in the hospital.

#### Rome

A merchant cleaned the pavement in front of her shop of the dog excrement and other garbage that the street-sweepers had not removed. The police, with the accusation that by wetting it down she had made the pavement slippery, presented her with a ticket.

#### Rieti

The local Legambiente association (an environmental league), began a informational campaign against a project of the city administration that called for the construction of a parking structure directly under a square in the historic city centre. The city administration denounced the members of the association for defamation, and the police fined them for having distributed flyers without authorisation.

#### Busto Arsizio (Varese)

A traveller on a train was fined by the controller because, since the validating machine was broken, he had validated his own ticket by writing the date and time his trip began on the ticket.

Naturally - of course! - things do not usually go this badly. But the fact that such absurd events happen at all means that there is still a problem in our public culture that must be solved.

Luckily, following this campaign, the government and the Italian parliament took action. In the constitutional law on federalism, approved at the beginning of 2001, an amendment that Cittadinanzattiva proposed was inserted in Article 118 of the Constitution:

*"The state, regions, provinces, municipalities and towns favour autonomous initiatives of citizens, individually and in association, to conduct activities in the general interest based on the principle of subsidiarity."*

Of course, the war is not yet won, but no one will ever again be able to invoke the Constitution to fine a citizen for pulling weeds in front of a public building.



## 5. ACTIVE CITIZENSHIP and PUBLIC ADMINISTRATION

It could be said that those functions of citizen organizations highlighted above are specific tasks of public administrations. According to this vision, the Mayors or the government, and not the citizens, have to protect their rights and care for common goods. From this perspective, citizens are expected to communicate their needs and demands to the public administration, which is responsible for providing the appropriate answers.

However, the public administration often does not have enough power, information, or resources to meet people's needs. In other cases, administrations themselves are the ones that fail to respect citizens' rights.

Consequently, in order to get their expectations met and legitimate demands addressed, citizens cannot limit themselves to posing questions, but have to contribute to finding solutions as well.

The need for this cooperation encompasses a new approach to "governance."

From the perspective of a more inclusive approach to governance, we acknowledge that, by themselves, governments can no longer manage the problems they face. They can only address these issues by calling upon all public, private, and social entities (including citizens) that are involved in a problem to assume their responsibilities. In order to govern society, then, we need "co-government", in which citizens are no longer simply the beneficiaries of public policy, but are partially responsible for planning policy, putting it into action, and evaluating it.

In this governance framework, active citizens must contribute constructively to a dialogue with public administration, both at national and local levels.

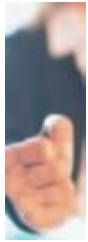
The relationship between citizens and local administrations is of special importance: not only because local administrations are closer to citizens, but also because they have a direct and concrete responsibility in managing those problems that are of main concern for people.

This cooperation can take various forms:

- Information sharing
- Support to civic initiatives
- Partnership arrangements
- Contracting the implementation of public programs or services to citizen organizations

Whichever form it takes, it is of crucial importance that autonomy and equal basis are granted in active citizen-public administration relationships.

The new governance approach is actually challenging for public administration. It indeed goes beyond the traditional principle of freedom of association, where the State must guarantee the possibility for citizens to gather and organize themselves for private purposes. Instead, it relies on citizen self-organization to promote the common interest, traditionally considered the exclusive monopoly of public administration.



## 6. ACTIVE CITIZENSHIP and POLITICS

An extremely hot topic is the relationship between active citizenship and politics, including parties, elections, representative assemblies, or parliaments.

Active citizens often feel dependent or think that their powers and abilities are inferior to those of official political actors. This leads to peculiar behaviors, such as trying to get friendly with or initiate understandings with the councilor or auditor on duty, or nurturing the idea of competing in elections as an alternative to current political parties. There can also be attempts to avoid any contact with politics as a result of the fear of "dirtying one's hands," or thinking "oh well... they make all the decisions anyway."

What can be said about this complex topic? Active citizenship involves a political experience, because it refers to the governing of society and intervening in conflicts inherent to this process. However, this is entirely different from the parties and coalitions that compete in elections and constitute elected assemblies at the local, regional, national, and European levels.

Why?

- Because parties deal with the administration of the state, but active citizenship contributes to the governing of society while remaining part of it.
- Because there is no correspondence between organizations of active citizens and political parties, even if certain organizations are aligned with specific parties.
- Because the consensus and support gained as an active citizen does not translate into votes or the ability to affect the electorate. Anyone who is under the illusion of doing so (for example, the various "consumer parties") has always been disproved by the facts.

It must be stressed that a functional democracy requires both parties and civic organizations. Therefore, it is not actually true, as politicians often say, that "citizen organizations exist because things do not work; we must therefore work so well that there is no longer a need for those organizations." It is also fundamental that political parties and active citizens, as well as all other actors, find a way to interact and cooperate with each other, notwithstanding their differences and possible conflicts.

No reason, though, can serve as an excuse for active citizens not to assume their own responsibilities regarding the reform and advancement of democracy. This reform, in fact, concerns the citizens regardless whether they are electors or "governors," and therefore cannot

be considered to lie beyond the interests of active citizenship.

In this topic we can consider the following Italian Paradox: the "CIVICUS", Civil Society Index Report<sup>6</sup> for Italy, shows us that Civil Society Organisations (CSOs), and civil society as a whole, have a low weight in Italian society compared with other forces and sectors. BUT the degree of trust in social forces goes precisely in the opposite direction of their weight, meaning that: while CSOs have a very low weight, they are at the top level in terms of trust in Italian society, because of their role, and vice versa. This divide between weight and trust is a peculiar feature of Italian civil society.

- Which is the actual situation in Cyprus?

The Civil Society Index Project, done in Cyprus in 2008 in both sides of the island, showed that

- Structure of civil society is considered "slightly weak"
- The environment (political rights, civil liberties etc) in which civil society was judge "relatively enabling"
- The extent to which civil society practices and promotes social values was considered "relatively significant"
- Impact of civil society at large was judged "moderate".<sup>7</sup>

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6 The Civil Society Index (CSI) was developed by CIVICUS, the world alliance of Civil Society Organisations (CSOs) with members in over 100 countries. Each year CIVICUS publishes the State of Civil Society Report, offering a comprehensive picture of civil society and the conditions it works in around the world, to assess the health and vitality of national civil societies.] The Civil Society Index (CSI) in Italy was carried out by Cittadinanzattiva with the scientific support of Active Citizenship Foundation (FONDACA) and in cooperation with a wide range of organisations and individuals. <http://csi.civicus.org/>

<sup>7</sup> For more info: [http://www.civicus.org/new/CSI\\_Cyprus.htm](http://www.civicus.org/new/CSI_Cyprus.htm)

and

Assessing civil society in Cyprus and across the world - the Civicus civil society index  
<http://www.civicus.org/index.php/en/media-centre-129/reports-and-publications/237-assessing-civil-society-in-cyprus-and-across-the-world-the-civicus-civil-society-index>



## I I A TOOLBOX for CIVIC ACTION

How does active citizenship work? The best way to answer this question is to examine and analyze concrete experiences of self-organized active citizens dealing with public problems and the lack of effective rights. From this analysis, a number of different tools emerge that can make their action effective. These tools represent a wealth of operational models, or technologies, which are available for all active citizens.

The various tools through which civic organizations can fully participate in the definition, planning, implementation, and evaluation of public policies for the protection of rights, can be defined as civic technologies.

Here is a list of civic technologies grouped into four categories. An example and a descriptive summary are provided for each technology. The list has been adapted from one developed by Cittadinanzattiva.

### A. Direct Action Technologies

This first group of technologies relates to the tools that citizens activate themselves, without needing the assent or collaboration of interlocutors.

## 1. THE CHARTERS OF RIGHTS

The Charters of Rights — the most important among them are those for patients' rights—are: *documents that contain clarifications and specifications of the ways in which rights, which are generically called for by the laws and regulations but ignored in practice, must be protected.*

The Charters spring not from a process of a technical-judicial nature, but rather are born from the systematic collection of reports and denunciations by citizens about the malfunctions and disservices discovered in the frameworks and systems under discussion. They presuppose the formalisation of the violations and the corresponding rights, through analysis and cataloguing of the denunciations. These charters are proclaimed publicly and solemnly in the presence of a judging board, composed of well-known figures from the worlds of culture, information and politics, as well as ordinary citizens. They are the fruit of the mobilisation of citizens, in order to make the charter a shared item, belonging to the local communities. They are widely and thoroughly distributed at regular intervals, principally within the frameworks involved (e.g. health care). They make the concrete application of the proclaimed rights possible through actions and specific interventions.

### *The European Charter of Patients' Rights<sup>8</sup>*

Drafted in 2002 by Active Citizenship Network in collaboration with 12 citizens' organizations from different EU countries. The European Charter of Patients' Rights states 14 patients' rights that together aim to guarantee a "high level of human health protection" (Article 35 of the Charter of fundamental rights of the European Union) and to assure the high quality of services provided by the various national health services in Europe. The 14 rights are an embodiment of fundamental rights and, as such, they must be recognised and respected in every country. They are correlated with duties and responsibilities that both citizens and health care stakeholders have to assume. The Charter applies to all individuals, recognising the fact that differences, such as age, gender, religion, socio-economic status etc., may influence individual health care needs. It is based on the experience of Charters of Patients' Rights promoted in Italy by Cittadinanzattiva's Tribunal for Patients' Rights.

Recently, the EU Directive 2011/24/EU on the application of patients' rights in cross-border healthcare officially recognizes the "right to free choice" and the "right to information" included in the European Charter of Patients' Rights. Article 6 § 1 of the Directive establishes that "Member States shall ensure that the national contact points consult with patient associations, healthcare providers and health insurance agencies", recognizing and enhancing also the ultimate principle of the European Charter of

<sup>8</sup> <http://www.activecitizenship.net/patients-rights/projects/29-european-charter-of-patients-rights.html>



Patients' Rights, namely the "right to participate in policy-making in the health area".

## 2. ADVISORY SERVICES

It deals with the services and tools that citizens can use to obtain information and assistance when their rights are violated. These structures must generally be accessible in person or in another way and have certain, established hours. They must have adequately trained staff and data storage tools available. They must also have on hand documentation and supporting information regarding the activities performed. They must have a network of consultants and references available to help them in the resolution of cases. As a general rule, they must not entail burdens for citizens.

*Pit: an integrated service that listens to citizens and offers assistance and rights protection<sup>9</sup>*

Pit is a Cittadinanzattiva service that gathers requests for consultations and intervention arriving from across the country. The requests regard the functioning and quality of services and the activation status of laws and provisions that concern the protection of citizens' rights in the health care field and in services of public interest. A front-line structure gathers request from citizens via telephone, fax, traditional mail and e-mail, and responds to them directly providing information, means of defence, and activating networks on a local level. The most complicated cases, however, are dealt with by consultants in various fields. On the basis of the reports received, Pit promotes campaigns on themes that concern large portions of the population and formulates policies to protect the rights of citizens. Local groups in the network and other civic and professional associations are connected by the central structure. Based on the requests for intervention and given advice, which are recorded in a database, an annual report is prepared on the status of citizen's rights in the various sectors. This represents a point of reference for all operators of the policies in which the service is involved with, and provides direction for the work of Cittadinanzattiva.

## 3. MONITORING AND GENERATION OF DATA AND INFORMATION

By monitoring, we mean collection of information periodically performed by active citizens. This is done through interviews, questionnaires, and observation grids. The aim is to better understand the functioning of services and the problems that require preventive actions, as well as to identify solutions over time.

<sup>9</sup> <http://www.cittadinanzattiva.it/corporate/istituzionale/4131-pit-integrated-project-of-citizen-protection.html>

## *Assessing Patients' Rights in Europe<sup>10</sup>*

The project "Assessing Patients' Rights in Europe" aimed to assess with the cooperation of national citizens' organizations the situation of 14 Rights as stated in the European Charter of Patients' Rights in various European countries and consequently set up a report on the state of these rights.

ACN has been developing a set of indicators and a methodology for assessing patients' rights in Europe inspired by a Civic information (civic audit) approach, which has been used as a framework in the Italian experience of Cittadinanzattiva.

The European Charter on Patients' Rights which aims at strengthening and bringing greater awareness concerning patients and citizens' rights, making concrete and applicable certain rights present in the Nice Charter of Fundamental Rights is the foundation of this innovative project developed by ACN. Citizens reporting on patients' rights is a concrete step towards strengthening and increasing the European civic dimension, an active European citizenship. This report:

- produced information on the actual situation of patients' rights.
  - it tried to change the conception of citizens as passive and inactive into that of the idea of conceiving of them as active citizens involved in the production of information with the aim of participating in the improvement of services and the process of policymaking.
  - attempted to facilitate the empowerment of citizens' organization and citizens themselves in the protection of rights and the caring of common goods such as health.
- The benefits of this are: creating knowledge and information on the state of patients' rights in Europe from the citizens' point of view and the empowerment of citizens' organizations through the implementation of this process.

## 4. SYMBOLIC ACTIONS

Symbolic actions are the most commonly used mobilisation tools. They have good visibility, and provoke action from the interlocutors. Usually, the initiatives are put forward only after having established the impossibility of being heard by officials.

### *Citizens enclose an enormous hole*

Roccella Ionica (Italy) - October 2000. On the occasion of the Cittadinanzattiva's "Pit Bus" journey, inhabitants reported the existence of an enormous hole (100 m. long, 3 m. wide, and approximately 3 m. deep) in one of the main roads. The hole was created in part by heavy precipitation during the preceding weeks, but also because road repair work had been started on that section and then suspended. The residents of the area did not complain so much about the delay in the continuation of the road works, but rather about the complete lack of barriers and danger signs. This was a great concern because

<sup>10</sup> <http://www.activecitizenship.net/patients-rights/projects/31-assessing-patients-rights-in-europe.html>

many children pass by the area on their way to the local school. The bus team immediately contacted the City, requesting a meeting about the problem and measures to be taken. Having established the absolute unavailability of the city contact persons, the team purchased a roll of safety tape at its own expense and, with the help of some citizens, it enclosed the hole and posted signs indicating the danger. While this operation was underway, representatives of the City arrived, and they hotly contested the initiative of the bus team, justifying the technical impossibility of the City to respond quickly. Later that evening, a local television team broadcast the news and some interviews filmed on location. The next day, a team of workers from the city blocked off the entire area.

## 5. AWARENESS RAISING/ SENSITIZATION

Actions aimed at raising citizens' level of understanding and awareness of a problem or opportunity.

### *«Patients' rights have no borders»<sup>11</sup>*

To celebrate the 10th Anniversary of the European Patients' Rights Day (2016), Active Citizenship Network has decided to organize a widespread campaign in cooperation with some of the national patient associations involved in its network. A European communication campaign with online, offline and on-the-spot initiatives on cross-border healthcare rights and the implementation of the EU Directive 2011/24 with the aims:

1. To improve citizens and patients' awareness about their rights to go abroad for care;
2. To enable organisations to contact their counterpart in another country to get specific information on the local healthcare system and so to offer better assistance to citizens;
3. To build a network of patient organizations all around Europe, able to collect data and share information, case histories and good practices on cross-border healthcare: "European Patient Center – Network" (EPC-Net).

A leaflet, in the specific country language and in English, has been drafted with information on the patient's rights to go abroad for care.

## 6. PROXIMITY OF INFORMATION

Proximity of information is a civic technology that implies mobilization of trustworthy people closer to the target citizens. They are able to give citizens more direct information and answers on relevant matters, such as new policies, changes in public organization, risks related to everyday life, and others.

<sup>11</sup> <http://www.activecitizenship.net/patients-rights/projects/208-patients-rights-have-no-borders.html>

### *"Easy Euro" program (European Union)*

In preparation for the introduction of the European single currency (2000), several citizen organizations of different countries participated in a European Commission program called "Easy Euro". The program was aimed at facilitating access to the new currency by vulnerable groups (about 30% of the European population, according to the EC), preventing the risk of social exclusion. Focus groups of target people were organized in several European countries by citizen organizations in order to identify problems. Then, the EC entrusted citizen organizations in creating networks of "proximity informers," that is people working closer to citizens and able to provide information and mitigate their fears. Thousands of teachers, medical doctors, pharmacists, front-line officers of public services, concierges, etc., were mobilized and trained to achieve this goal.

## 7. CONFLICT MANAGEMENT

Conflict management can be defined as the set of activities that aim to prevent the deterioration of situations, recourse to violence, or illegal ways of resolving controversies. In recent years, this has turned out to be one of the principal functions of citizens' organisations. Conflict management has become increasingly important with the emergence of conflict on all levels: in situations of social inconvenience, in the realm of services, in the relationship between citizens and the public administration, in immigration questions, etc. The principal characteristics of conflict management are: the promotion of dialogue and meetings between parties; recognising the dignity and the motivations of each; the absence of bureaucracy and the rapidity of the procedure; the presence of a mediator; the lack of sanctions; and low costs.

### *15 July 1994 - Case examined by the Lucca Conciliatory Commission*

Description of the case: the complainant reported that having accompanied her mother to a medical examination appointment in order to gain recognition of the right to accompaniment, the elderly woman was received in a basement used as a warehouse. She was not examined, and only a small portion the documentation they had produced was inspected.

Professionals involved: doctors

Health care services involved: medical commission for the recognition of disability

The judgement's decision: having registered the differences between the versions provided by the exponent and members of the medical commission, the Commission acknowledged the unsuitability of the location in which examinations were held. It was suggested that a clinic be erected quickly, which must be free of architectural barriers, where even patients carried on stretchers could be examined. The Commission censured the bad practice of giving appointment to different patients (in this case 15) at the same time, a practice that demonstrates scant sensitivity and little consideration for the needs

of the citizens, especially the sick.

## 8. ORGANIZATION AND DELIVERY OF NEW SERVICES

The organisation of new services consists of the creation and/or management of structures and facilities meant to ensure the protection of rights that otherwise would not be guaranteed by public institutions because of their inefficiency (as is the case with psychiatry) or because of their inability to respond to new needs (as in the case of the elderly or the chronically ill).

### *Province of Pordenone: home delivery of pharmaceuticals*

This is a service launched on June 1, 2000 by the Pharmacy Owner's Association in the province of Pordenone (Italy), by the Cittadinanzattiva's Tribunal for Patients' Rights, by the "Western Friuli" public health agency, and the Surveillance Institute "The Safety of Pordenone". The purpose of this service is to deliver urgent medicines during the night to people living alone who are unable, because of their permanent or temporary physical condition, to reach the pharmacy on their own. The doctor on the Night Medical Watch, having established that the patient fits the description given above, contacts the Surveillance Service, which sends an agent to the patient's home. This agent collects the prescription, goes to the closest pharmacy on duty, fills the prescription and returns the medicine immediately to the patient's house. The patient is required to reimburse the agent only for the cost of the medicine. On weekdays, the service is available between 10 PM and 6 AM the following morning. On Sundays and holidays, the service is available beginning at 10 PM of the preceding evening until 6 AM on the next regular working day. The service (delivery) costs the citizens nothing. For one area of the province, the expenses are sustained by the Surveillance Institute, and the rest of the province is covered by the Pharmacy Owner's Association.

### *Rome, District 2 - A time bank*

Computer lessons in exchange for cake; a shiatzu massage swapped for a small household repair; French lessons exchanged for Spanish lessons. These things and many others are requested and given by the members of the Time Bank, a group of citizens who exchange time and services independently of economic and social conditions, profession, age, or sex. It is an original form of bartering, in which the value of the exchange is measured in units of time: hours. The operational methods are similar to those of a traditional bank, including personal current accounts, chequebooks. But it's not about money: clients deposit and withdraw time. In Rome today, there are 22 "branches" open, in nearly every area of the city. The people who have decided to deposit their time, women for the most part, number over 3,000.

## B. Resource Mobilisation Technologies

Many of the activities of the citizen's organisations consist in increasing their own strength, by increasing the human resources involved in the causes they fight for. To this end, they utilise resource mobilisation technologies.

### 1. MOBILIZATION OF TECHNICAL RESOURCES

#### *Earthquake and health equipment*

In the Lazio Region in August 2016 there was a very disruptive earthquake. Cittadinanzattiva's members activated immediately their contacts (health institutions and private companies) to guarantee the best and more timely social and health assistance to affected populations, but also to create and re-create health services where there were no more. In particular has been recovered electro-medical equipment (portable medical ultrasound etc..) and medical supplies for the surgeries re-created. Moreover there were a work for the family doctors support to enable them to resume their clinic in which to be able to meet their clients.

### 2. GATHERING SIGNATURES AND SUPPORT

Collecting signatures may support complex and costly initiatives (such as a referendum) or simple ones (such as an appeal or petition). In general this initiative is not sufficient by itself but must be coupled with other types of intervention. However, it allows for raising awareness or disseminating information about civic actions.

#### *MEPs Interest Group "European Patients' Rights & Cross-Border Healthcare"<sup>12</sup>*

ACN realized the idea to encourage a Members of European Parliament informal Interest Group focused on patients' rights follows the widespread request and support (by signing an agreement) of more than 80 civic and patient organizations sent to the EU Parliament to recognize officially the value of citizens' initiatives, such as the European Charter of Patients' Rights.

The request has been launched on May 12<sup>th</sup> 2015 during the IX Edition of the European Patients' Rights Day and the first meeting of the Interest Group has been celebrated the 2<sup>nd</sup> of December 2015 in the EU Parliament.

<sup>12</sup> <http://www.interestgroup.activecitizenship.net/>

### 3. COLLECTION AND DISSEMINATION OF GOOD PRACTICES

A 'good practice' in the realm of public service is a successful initiative that aims to simultaneously improve the efficiency (economic aspect) and the efficacy (accessibility) of the services or structures, and is promoted by administrators, professionals, or citizens. A programme to collect and circulate good practices consists in the creation of a catalogue or database containing informational files on the projects, the institution of modalities of recognition (such as prizes, contests, and certificates), and the spread of information about the projects selected, so that they can also be adopted by others. This technology makes it possible to highlight opportunities for change, appreciate good workers, censure negative behaviours, introduce winning mechanisms that awaken individuals to their responsibilities, and foster the spirit of competition.

#### *"European civic research: collection of good practices on chronic pain"*

In 2004 Active Citizenship Network carried out a civic research-project at European level with the aim to highlight the existing good practices in several European countries regarding the fight against pain. The aim of the civic research was to help raise the level of awareness, increase the evidence of known positive experiences and successes, and strengthen commitment in this issue. In particular, the research allows us to give continuity to the investigation on good practices in the fight against pain started in 2012-2013<sup>13</sup>.

#### *"European Civic Prize on Chronic Pain - Collecting Good Practices"*

In 2016 Active Citizenship Network launched this prize with the aim to give evidence of existing good practices in European countries in terms of struggle against pain. Establishing a "European Civic Prize on Chronic Pain", based on the selection of the practices presented by different healthcare stakeholders (patients' associations, health professionals, private and public hospitals, universities, etc.) provide an occasion for demonstrating what this community can offer in terms of good practice and experiences which are useful in raising awareness about the condition, enhancing the body of knowledge of positive cases and success, and strengthening commitment to this topic. The public European celebration of the Prize (final event planned for June 2017) will represent the recognition of ongoing excellence<sup>14</sup>.

<sup>13</sup> <http://activecitizenship.net/patients-rights/projects/157-eu-civic-research-collection-of-good-practices-on-chronic-pain.html>

<sup>14</sup> <http://www.activecitizenship.net/patients-rights/projects/204-european-civic-prize-on-chronic-pain-collecting-good-practices.html>

### 4. CREATION OF ASSOCIATIONS

Though getting together and acting as active citizens does not require any formal decision or institutionalization process, in some cases, the formal establishment of an association or committee can be useful. It may help mobilize and motivate the people affected by a problem and give them a stronger voice with their interlocutors. In addition, it gives groups of citizens a formal legal status.

#### *Colombia: "Derechos y Desarrollo" program (2009/2012)<sup>15</sup>*

After few years from the first mission of Cittadinanzattiva in Colombia ("*Derechos y Desarrollo*" program 2009/2012) aimed to contribute to the growth of civic dimension in Colombia to reach a higher and better level of protection of the rights of users in the field of public services and health care, has been created the "Corporación Tribunal de Derechos" of Cartagena de Indias, Colombia. It is a new civic subject involved in the protection of citizens' rights as a result of the work of many active citizens of one of the most beautiful city in Latin America, Cartagena.

### 5. CIVIC USE OF INFORMATION TECHNOLOGIES AND MEDIA

Information technologies provide numerous advantages since they are fast, global and interactive. They allow active citizens to organize themselves, communicate, discuss, make decisions, and take action, overcoming economic, geographic, and time obstacles. The use of e-mail, and the possibility to design web sites with interactive forums or chat lines are increasingly accessible to citizens. The Internet is also a place for direct civic action, for example through on-line petitions. Through the Internet, civic organizations can carry out different activities: fund raising, educational and informational campaigns, boycotts, convening meetings, refining common documents, prepare petitions, conduct consultation, training, and recruitment of interested citizens.

#### *Approval of laws on pain therapy*

On 19 December 2000, the Tribunal Patient's Rights, with an open letter to the Speaker of the Chamber of Deputies and the Chamber Social Affairs Commission, requested the speedy approval of new regulations on pain therapy. The Commission approved them at the legislative stage and sent the text to the corresponding Senate commission so that it could be approved under the same procedure.

17 January 2001 - 5 senators brought the measure back under discussion, foiling the

<sup>15</sup> <http://www.cittadinanzattiva.it/approfondimenti/attivismo-civico/3835-derechos-y-desarrollo-english-presentation.html>

efforts of the Chamber Social Affairs Commission, which intended to approve the text before the closure of the Parliament.

18 January 2001 - a press release was circulated which stated that the Cittadinanzattiva Internet site contained the names of the politicians who had blocked the legislative measure, and provided their e-mail addresses with an invitation to citizens to write to them. Cittadinanzattiva committed itself to use its Internet site to publicise the comments of the citizens and copies of the letters to the senators, and it was soon accomplished.

19 January 2001 - the text of the law returned to the deliberation stage and was approved, following the Movement's on-line campaign and the intervention of the President of the Senate.

8 February 2001 - the regulation was published in the Italian Official Journal.

## 6. PEOPLE MOBILIZATION

By using information, training, and—in a more complex and structured phase—education, it is possible to train large numbers of citizens belonging to very different social and professional categories about specific subjects. It also provides them with technical skills and tools for action, which are easy to use and to circulate, sharing their experiences. This technology is meant to involve people on a permanent basis, for example in initiatives and organisations for the protection of rights, or at least to provide citizens with the understanding, awareness, and means to protect their own rights

### *Civic safety monitors*

As part of the "Safe Hospital" campaign, in 1998, the Cittadinanzattiva's Tribunal for Patients' Rights has recruited over 300 citizens in various Italian cities who have become civic safety monitors in the hospitals. This was achieved through the circulation of an announcement in all sections of the Tribunal for Patients' Rights in Italy as well as through Cittadinanzattiva Internet site. After having selected from among the applications received, various inter-regional training seminars were organised. A group of applicants was selected, according to the criteria mentioned above, to attend the six-hour training seminars. The training aimed to present general knowledge about the risks that exist in hospitals, to aid understanding of data collection tools (grids and questionnaires), and to explain a guide to their good use. When the training seminars were completed—with the grant of "civic safety monitor" certificates—the monitors formed small groups, and began to gather information in the previously selected hospitals.

## 7. EDUCATION AND TRAINING

We mean activities that attempt to facilitate, through interactive means, the acquisition of knowledge and skills, and the development of individual abilities in the realm of civic commitment. They are carried out through the organisation of various types of opportunities (thematic conferences and seminars, courses of medium and long duration) that entail the participation of experts, activities related to long distance and on-line learning, the production of material and information for students, etc. The fundamental characteristic of these initiatives is their concreteness, that is, not only theoretical but practical learning, and the importance of "learning by doing".

### *Formation seminar for managers of civic and volunteer organisations in the province of Campobasso*

Organised by Cesvo (Volunteer Services Centre) and Cittadinanzattiva in Campobasso, this seminar was held between February and April 2001, with four training modules of 3 hours each. The first one offered a general introduction to active citizenship and rights protection technologies. The second module dealt with planning, the third discussed fund raising, and the final section concerned human resources. 20 associations were present, of which most were local organisations. Each of the first three modules included a testimonial from an individual who shared a personal experience related to the subject of each module. The seminar's organisation permitted different people from the same organisation to alternate, according to the subject under discussion. In total, over thirty people participated in the seminar. In June, an important indicator of the course's efficacy in comparison with the previous year was given by the fact that altogether, the associations presented many more projects to the Molise Region, most of which were the result of the collaboration of different associations.

## **C. Technologies for Dialogue and Cooperation**

Often the exercise of active citizenship comes about through dialogue - in confrontation or conflict between interlocutors - whether they are institutions, unions, vehicles of information, or others. Technologies of interlocution are useful to better activate these necessary relationships.

### 1. ROUNDTABLES

Concertation tables are tools used to bring together individuals who intend to collaborate on a permanent basis to pursue issues of common interest connected to the protection of citizens' rights. The tables are generally the result of a consensus or actual alliances.

### *Hospital facilities safety table*



The table is composed of experts in the field of safety (technical-scientific entities, professional associations, quality control institutions, manufacturers, doctors, and health care agencies). It meets periodically to discuss the subjects to be dealt with in the course of the campaign and to prepare the technical monitoring tools (questionnaires and grids used during visitations). The Safety table also deals with certain areas in which emergency safety is especially serious, as for example in the operating rooms and test labs.

## 2. PARTICIPATORY PLANNING

### *Health services conference in Venosa*

In 2000 in the city of Venosa, the local health agency convened a conference on health services. The convocation required a great deal of time, but in the end, nearly 500 people attended. Participants included representatives of the health services administration, workers, unions, civic organisations (including the Tribunal for Patients' Rights), volunteer organisations, and many individual citizens. The aim was to examine the relationships between health care agencies and citizens (and in particular the citizens' level of satisfaction regarding the health care services provided), to evaluate the programmes conducted, and to present the main initiatives for the future. A collection of filmed testimonies from common citizens on the workings of the health services proved very useful, and pointed out numerous problematic areas in the administration. The attending workers in attendance had plenty of criticism to offer as well. Duration of the Conference: nearly 5 hours. At the end of the conference, a final agenda was presented on the commitments that the health care administration had decided to assume in light of everything that had emerged during the discussions.

## 3. PARTNERSHIPS

Partnerships involve various individuals (for example, from the professional world, the business world, the political realm, the administrative sector, and active citizenship) who establish a strong collaborative relationship, even while maintaining their own individuality, and they share strategies and work to pursue common goals that are complex, innovative, and long lasting.

### *Stations open to citizens*

The Open Stations project, promoted by the Citizens' Advocates in collaboration with the State Railroads, was held from May to December 2000. Its objective was to enhance the value of the train stations by giving citizens the opportunity to acquaint

themselves with all different areas of the stations, including those lesser known sections that are nonetheless equally important for the good working of the systems and services. 28 dates were set, in 28 stations across Italy. Forty-five minute guided tours were organised in each station between the hours of 10 am and 1 pm, and they described the working of the station systems and services. From 10 am to 4 pm, a special area was also made available to citizens where they could formulate proposals, suggestions, ask for information, and receive materials and promotional items. A meeting was held from 5 pm to 9 pm between citizens and workers from the railroads, local institutions, and information agencies. All together, 16,000 citizens participated in the initiative.

## 4. COOPERATION AGREEMENTS

This technology entails the responsible involvement by active citizens of other individuals or entities implicated in the issue at hand. Through the agreements and protocols, reciprocal commitments are assumed, deadlines are agreed, and collaboration is vested with institutional power. The interlocutor can be administrative authorities, social forces (such as unions), and other civic organisations. The agreements can have a general scope, that is, they can steer the desires of the parties involved with respect to an overall working programme. Alternatively, they can be operational, aiming to solve concrete and immediate problems, or simply on a single theme.

### *Co-operative protocols regarding procedures for surgery*

In order to guarantee citizens better accessibility and higher quality in the entire procedure surrounding and including surgery, the Fimmg family doctors and the Anaa-Assomed hospital doctors committed themselves to support and respect the following procedure, in agreement with the Tribunal for the Patients' Rights:

- requests for out-patient specialised examinations from the family doctor (written legibly and presented with pertinent and important information about the patient's health)
- out-patient medical report from the specialist (clear and legible, containing the diagnostic and therapeutic suggestions, with reference to the notes of the Unified Drug Commission)
- hospitalisation access card issued by the family doctor (clearly prepared with the patient's clinical history)
- referral physician (a doctor-tutor is selected in the department who will be the patient's point of reference during his or her stay in the hospital)
- examination by the family doctor (who must go to examine his or her in-patient whenever deemed necessary, or when requested by the department doctors or the patient themselves)
- ward telephone booth (with a set schedule, in order to receive phone calls from the attending doctor)
- availability of the family doctor (for the entire duration of the patient's hospitalisation)



- informed consent (family and hospital doctors must provide information about the risks and benefits of the surgery, but also about possible problems and subsequent treatments)
- discharge papers (with precise information about the surgery and its course, possible complications, etc.)
- waiting lists (highest possible degree of transparency regarding waiting periods and the criteria used to compile the waiting lists).

#### D. Technologies for Institutional Action

##### 1. INSTITUTIONAL ACTION AND ENFORCEMENT OF PROCEDURES FOR THE PROTECTION OF RIGHTS CALLED FOR BY LAW

This technology refers to actions taken by citizens to force administrations to put into practice laws that contain principles and procedures of protection and user participation. There are many different tools, but a few to remember include: access to administrative documents; services charters; public relations offices; protection and participation institutions called for by the laws reforming local self-government and inserted in city statutes (e.g., civil defender, advisory referendums, popular actions, constitutional courts, petitions, etc.); city plans for civil protection; basic minimum services during strikes; recourse to the regulating authorities; regulations regarding participation and protection of rights in health services; and committees for the proper use of blood. In addition to these examples, there are other tools provided by the European Union, such as appeal to the European Parliament and recourse to the European Ombudsman.

##### *Appeal to Antitrust*

Following the inquiry into telephone rates conducted by the Citizens Advocates network of Cittadinanzattiva in January 2001, explanatory data, information and rates were sent to the Antitrust (Communications and Competition Authority). The data demonstrated the problematic failure to recognise citizens' rights, and requested action on at least four issues: getting around the call answer charge, definitively adopting the second as the unit of measurement for both land lines and mobile phones, eliminating recharging fees, and obliging telephone companies to provide the "everything included" price in their offers and promotions. The Antitrust body publicly recognised the existence of the problems, and contributed to initiating solutions to some of them.

Even if, contrary to common opinion, legal action is certainly not the only method available in the protection of rights, it is nonetheless a tool of the utmost importance. Among the forms of legal action, beyond bringing civil suits in penal trials, we can enumerate: penal action; representations; writ of summons; appeal to the Labour magistrate; Article 700 of the Civil Procedure code; intervention ad adiuvandum; recourse to the TAR; inhibitory actions introduced by the new law on consumers. These tools are joined by those of the European Union and international bodies: appeal to the European Court of Justice, the Court of First Instance (of the Court of Justice), and the European Court of Human Rights.

##### *Bringing civil action by the Tribunal for Patients' Rights*

Gaeta - A pregnant woman in her forty-seventh week was given oxytocin during labour in order to accelerate her contractions, and an amniotomy (artificially provoking the water to break) was performed incorrectly. In addition, serious foetal distress went unnoticed. The consequences of these errors and delays, both diagnostically and therapeutically, were dramatic: the child died, the uterus broke, and the woman's bladder was removed. The woman turned to Pit Health, whose experts found reason for grave accountability in the conduct of the caregivers. An accusation of involuntary manslaughter and grievous bodily harm was presented. In the trial against the doctors, the Tribunal for Patients' Rights brought civil action and was admitted by the court. The trial ended recently with the conviction of the doctors, compensation for damages for the woman, and the awarding of damages to the Tribunal for Patients' Rights, still to be quantified in a separate civil trial.

##### *Inhibitory action against unfair clauses in bank contracts*

With its sentence of 21 January 2000, Rome's civil court sentenced two important lending institutions, the Banca Popolare di Milano and the Banca Fideuram, and ABI (Italian Banking Association), to review most of their bank contracts in order to eliminate a series of clauses judged to be unfair for their clients. Judge Antonio Lamorgese accepted the appeal presented by the Justice for Rights initiative as part of the Thirty Pilot Cases project supported by the European Commission.

The conditions included in the principal banking contracts demonstrated an imbalance between bank and client entirely in the bank's favour. The sentence thus prohibited the use of 32 clauses (of the 42 proposed), both in previously existing contracts and in future ones, and it required ABI to modify the instructions it sent to associated banks in a special bulletin. (For example: clauses which permit recession from credit openings, lines of credit, or from other banking relations. These clauses were ambiguous and vague, since they can take effect without warning and are not submitted to justifiable motive). Another success was achieved against Ania and Nuova Tirrena (insurance sector).

## 2. LEGAL ACTIONS

## 3. LOBBYING

This technology consists in the exertion of pressure on political and institutional power to achieve change in terms of laws, regulations, financing, etc., in favour of the protection of citizens' rights. It requires a certain capacity for communication and the involvement both of organised groups, ordinary citizens, information tools, and other influential individuals.

#### *Changes in the limiting notes of the Unified Drug Commission (UDC)*

Following reports from citizens received by the Clttadinanzattiva's Pit Health service about UDC decisions on various drugs, in the second half of 1999, Pit began to approach other associations, principally those for the chronically ill, in order to acquire a more inside point of view into the problem. A dossier was prepared based on the information they collected, and it was sent to all members of the Unified Drug Commission, and in particular to its Director General. The dossier presented precise requests regarding the modification of certain limitations in the access to drugs. Faced with these requests, the Commission convened the signatories (the Tribunal for the Patients' Rights and Alliance of the Associations for the Chronically Ill) but the meeting ended in stalemate. Afterward, it was decided to proceed indefinitely in sending letters demanding changes regarding numerous drugs and requesting meetings with the Commission. This correspondence was punctually sent to the Ministry of Health as well. At the same time, a massive informational campaign was launched that made use of all public events to which the Tribunal for the Patients' Rights was invited in order to publicise this information as widely as possible. The commissions of Health and Social Affairs of the Chamber of Deputies and the Senate were also involved. All of this led, in October 2000, to the recognition of nearly every note proposed by the Tribunal, which were published in the Italian Official Journal in January 2001 and took effect on 24 February 2001. 15 notes were abolished, 8 were combined, and the local health service registry was abolished for 11 notes.

## RESOURCES

With reference to citizens' initiatives at the local level in Cyprus, we have collected some links to projects related to active citizenship and participation in Cyprus. Each of them includes the use of one or more tools for civic action (or not?). Given the introductory nature of this handbook the objective of sharing these links is that readers try and learn to recognize tools or technologies used in the course these projects and also use the contacts of the coordinating organization and its partners as resources to exchange views, news, information. It could be an occasion to learn each other's and create a network of people interested and expert in active citizenship.

#### **Youth Activism Project, implemented by the Cyprus Network for Youth Development.**

<http://www.icicp.org/resource-library/icp-publications/global-youth-service-database/europe-2/eastern-europe-and-commonwealth-of-independent-states/cyprus/>

#### **Empowering Citizens of Small Member States - Programme: Europe for Citizens**

<http://ec.europa.eu/programmes/europe-for-citizens/projects/efc-project-details-page/?nodeRef=workspace://SpacesStore/739abf12-ec3b-4675-b7d4-1fd27d3fa13f>

#### **Youth Promoting Solidarity - Programme: Europe for Citizens**

<http://ec.europa.eu/programmes/europe-for-citizens/projects/efc-project-details-page/?nodeRef=workspace://SpacesStore/f7d978ef-eff5-4638-b2bb-4a81bafd22d1>

#### **Let's Get Active Project**

<http://www.letsgetactive.eu/documents-for-downloading>

#### **Civic Participation Course: Resources for Democracy**

<http://www.seedsofpeace.eu/index.php/projects/68-civic-participation-course-resources-for-democracy>

and

[http://www.cy.undp.org/content/cyprus/en/home/operations/projects/action\\_for\\_cooperation\\_and\\_trust/](http://www.cy.undp.org/content/cyprus/en/home/operations/projects/action_for_cooperation_and_trust/)

#### **Project: The Cypriot Civil Society Mapping and Capacity Building**

<http://www.ngosincyprus.org/About>



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