

(English version)

**Question for written answer E-002386/25
to the Commission**

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(13 June 2025)

Subject: Keeping Sapri maternity hospital open and safeguarding essential services in small European towns and communities

Sapri's maternity hospital covers 17 municipalities alone in health district 71 — a border area between Campania, Basilicata and Calabria that is already suffering from demographic decline, poor infrastructure and regional marginalisation.

Its closure risks preventing people from having access to essential care and increasing territorial inequalities. It also contradicts EU policies to combat demographic decline and ensure the vitality of small communities.

Resolution 2020/2039 (INI) stresses the need for targeted investments to stop depopulation and support birth rates, while Regulation (EU) 2021/241 and the European Pillar of Social Rights Action Plan promote universal access to health services, which is key to a sustainable demographic fabric.

In the light of Article 3 TEU, Article 9 TFEU and the EU Charter of Fundamental Rights (Article 21):

1. Will the Commission ensure that EU funds are made compatible with the protection of essential health services, such as maternity hospitals? How?
2. Can Italy use EU funds (NRRP, ESF +, ERDF) to combat population degrowth and ensure the continuity and vitality of these small communities?
3. Does it consider it appropriate to promote EU guidelines providing for specific derogations for healthcare facilities in disadvantaged areas, with a view to safeguarding basic services such as maternity hospitals and combating health desertification in local communities?

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Answer given by Executive Vice-President Fitto on behalf of the European Commission
(2 September 2025)

1. EU cohesion funds respond to health challenges in an integrated manner, with a focus on access to essential services. Infrastructure investments under the European Regional Development Fund (ERDF) include facilities for specialist, acute and long-term care, hospitals and emergency services. The European Social Fund Plus (ESF+) supports the improvement and expansion of health service provision for disadvantaged populations funding, for instance, initiatives focused on maternity care ⁽¹⁾. In Italy, in addition to regional programmes, the ESF+ ERDF national programme 'Health Equity' focuses particularly on underserved areas in southern regions. Addressing regional disparities is also one of the key objectives of the health component of the Italian national recovery and resilience plan (RRP) ⁽²⁾.
2. Cohesion funds are also used to tackle depopulation and specific challenges in remote communities, by supporting integrated territorial strategies ⁽³⁾. The Recovery and Resilience Facility ⁽⁴⁾ also ensures the continuity and vitality of small communities. For example, the Italian RRP includes measures such as the establishment and operationalisation of community health houses as well as rural pharmacies. They aim to strengthen healthcare capacity and services of community nurses and midwives in remote areas.
3. Member States ⁽⁵⁾ are responsible for healthcare delivery and the Commission cannot intervene in the organisation of healthcare services.

⁽¹⁾ Such as the strengthening of local family planning clinics (consultori).

⁽²⁾ Recovery and Resilience Plan: https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/italys-recovery-and-resilience-plan_en#operational-arrangements.

⁽³⁾ In specific areas identified in the National Strategy for Inner Areas and its recently adopted National Strategic Plan, in addition to territories identified at regional level.

⁽⁴⁾ Recovery and Resilience Facility. https://commission.europa.eu/business-economy-euro/economic-recovery/recovery-and-resilience-facility_en.

⁽⁵⁾ According to Article 168 of the Treaty on the Functioning of the European Union.