New editor in chief for the Italian Journal of Public Health

Seven years ago I had the privilege to found the Italian Journal of Public Health. I did so on the ground that in Italy we needed a journal, written in English, to disseminate scientific knowledge relating all the aspects of public health. The aims I had in mind were to:

• encourage research and promote knowledge relating to the problems, needs and development of public health
• to promote and provide a forum for the regular exchange of views and information
• to promote the development and education of public health workers
• to involve anyone interested in public health activities and programmes.

Seven years later, I am finally handing over this task to my successor, professor Giuseppe La Torre. I could not wish for a more worthy successor. Giuseppe is one of Italy's leading public health researchers. He has contributed greatly to our understanding of the impact of epidemiology in Public Health Technology Assessment and he shares my commitment to the added value of comparative research, taking advantage of the rich diversity of health and health policy that exists in Italy and Europe. I will not, however, be escaping entirely as I have agreed to stay on as Founding Editor and I look forward to continuing to work with Giuseppe and with my colleagues who have done so much to support me over the past seven years, Stefania Boccia, Roberto Bucci, Roberta Siliquini, Pietro Folino Gallo, Laura Muriranni, Patrizia Laurenti and Wendy Morotti and Claudia Corsetti, from the editorial team, Maria Teresa Pesenti, who produces the journal and Pietro Bruschi at Prex.

2009 will bring many new challenges for Italian and European public health. One immediate issue that my successor will have to tackle is the future of the journal. When PREX decided to publish this journal, it put in place a funding system that had the great advantage of publishing four editions per year for our readers, at no cost to the individual. It was important that it did this as the journal provided a tangible symbol of what our work was about.

It provided a vehicle for exchanging information on subjects that concerned all of us, allowing Italian and European authors, and especially those from regions that have often remained relatively invisible in the public health literature.

I will give my full support to Giuseppe La Torre as I think that the importance to have a respected Italian Journal of Public Health is apparent, especially when we consider the many challenges we face.

Italy's health care system has experienced an important transformation during the last thirty years. The transition to the NHS model initiated in 1978, ultimately guaranteeing all Italian citizens access to a wide range of services, irrespective of their social and economic conditions, signalled a strong commitment to equity. The period 1997–2001 witnessed a series of radical and innovative changes in state institutions and health care regulation. First, political devolution of health care powers to the regions was promoted, and the transition towards fiscal federalism started within the context of a profound transformation of Italy towards a federal state.

Today, northern and central Italian regions are actively implementing guidelines and standards for the delivery of health care services, as well as setting up specific programmes for different population groups (women, children, elderly, migrants, etc). Additionally some of them have agreed on procedures for regulating the cross-border flows of patients, organised their own schemes for centralised purchasing of services and equipment as well as having
experimented with complex accounting systems. While some regions are funding medical and health services research, others are struggling with serious deficits (three such regions accounted for the 80% of the total national deficit in 2008 (Lazio, where Rome is located, Campania, including Naples, and Sicily)).

If there is a lesson to be learnt from recent experiences, it is that without new institutional mechanisms that are able to guarantee basic health benefits and a similar quality of health care to all citizens, Italy will experience wider inequalities among and within the regions, in addition to a larger North–South divide. As these examples show, it has never been more important for Italy's public health community to have a voice and I am delighted that our journal's future is in such good hands.

Walter Ricciardi
IJPH Founding Editor