



CENTRO NAZIONALE
PREVENZIONE DELLE MALATTIE
E PROMOZIONE DELLA SALUTE

Monitoring Breastfeeding in Italy: the Italian Surveillance System for Children Aged 0-2 Years

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The logo for "Zero Due" features the words "zero" and "due" in a stylized, rounded font. The "zero" is in a light orange color, and "due" is in a dark red color. A small, stylized baby face with a wide smile is positioned between the two words, partially overlapping the "o" in "zero" and the "u" in "due".

zero
due

The First 1,000 Days of life: international and national framework



(WHO - Nurturing Care for Early Childhood Development)



"Investing early in health: actions and strategies in the first 1000 days of life"
Italian Ministry of Health



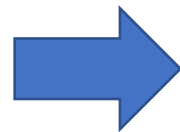
National Prevention Plan 2020 -2025

The period from conception to age two - *The first 1,000 days of life* - is recognized by scientific evidence as a **critical time window**, both in terms of **vulnerability** and **opportunity** for child development to ensure well-being, growth, learning. During this period, it is crucial to **promote protective factors** and to **reduce exposure to risk factors**, with the aim of preventing health problems in children and promote well-being throughout adulthood.

The key components identified as essential for a child to fully develop their potential are: **good health, proper nutrition, responsive caregiving, opportunities for early learning, safety and security.**

The Role of Public Health Surveillance

Reliable data must accompany scientific evidence to monitor key health determinants during this period of life and inform **effective** and **equitable preventive strategies**.



Population-based Surveillance Systems are important **monitoring tools** that enable the **ongoing and systematic collection of data** in order to design, implement and evaluate **public health interventions and programs**.

The Italian context

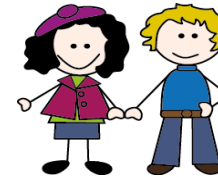
Children
0-2 years



8-9 Years
OKkio alla
SALUTE



11/13/15/17
years
HBSC



18-69 years
Passi



65+ years
Passi d'Argento



Promoted by the Ministry of Health and coordinated by the National Institute of Health in collaboration with regional authorities

The Surveillance System for Children Aged 0-2 Years



2014-2016

Pilot phase: in Italy was conducted a study in **13 selected local health districts of 6 Italian regions** to *test a national population-based surveillance system* targeting children aged 0-2 years. Health indicators aligned with WHO recommendations and national/regional prevention plans were evaluated.

2017

The surveillance has been officially recognized as **nationally relevant** by the Prime Minister's Decree (GU n. 109 05/2017).

2018-2019

1st round: involved **11 regions** (mainly from the South Italy).

2022

2nd round: involved all of Italy's **21 regions/autonomous provinces** with the exception of Region of Molise and the autonomous province of Bolzano (Bolzano was unable to complete the data collection). The Region of Tuscany participated by sharing results of its ongoing maternity care survey.

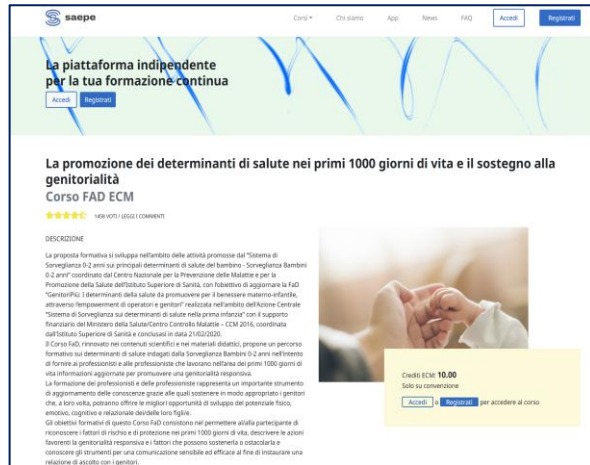
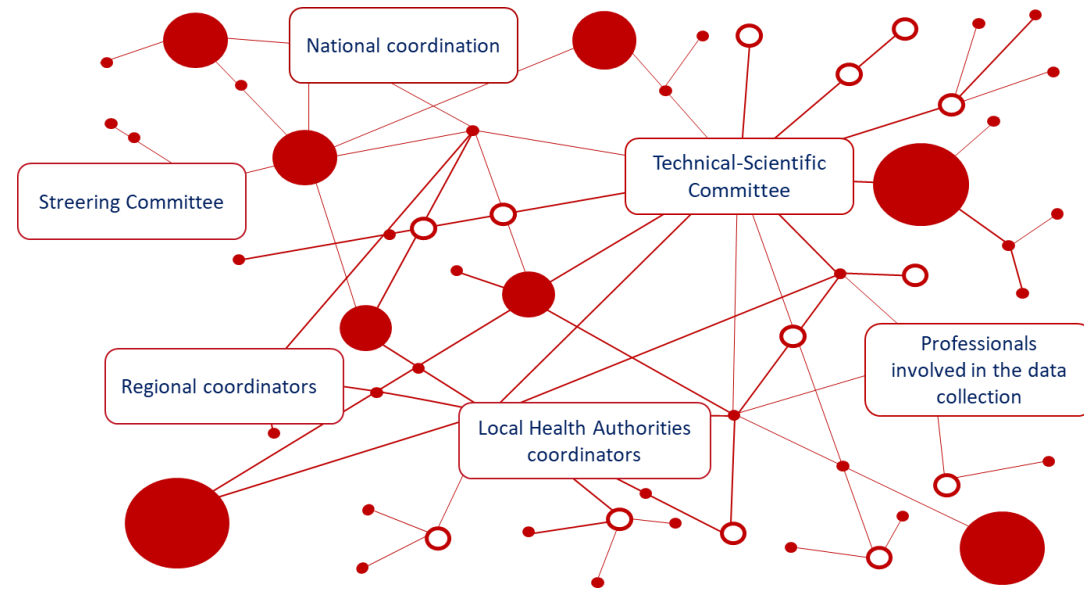
2025

3rd round: involved all of Italy's **regions/autonomous provinces**.



Beyond the methodology

The Surveillance System is structured with national, regional, and local (health authorities) levels; the **network** is crucial, as are the relationships between all the actors involved.



Training of professionals involved in the Surveillance, both on the determinants investigated and on methodological aspects.

Dissemination of **communication materials** on the determinants investigated, providing professionals with updated communication tools to support parents in promoting their children's health.



Aim and health determinants

To collect information on key health determinants in children - from conception to age 2 - producing indicators (partly required by the WHO and/or by National and Regional Prevention Plans) that enable territorial and temporal comparisons

Investigated topics



Folic acid intake



Tobacco Avoidance in pregnancy and lactation



Alcohol Avoidance in pregnancy and lactation



Breastfeeding



Infant sleep position



Family reading and Screen time exposure



Home safety



Car safety



Vaccination intention



Maternal and family socio-demographic characteristics

Other topics

Access to Services: home visiting

Support / Caregiving: primary and/or other caregivers of the child, paternal leave

Mothers' perceived well-being

Environmental exposures: Home and neighborhood conditions, perceived risks

Surveillance 0-2 years: methods and data collection

STUDY DESIGN: cross-sectional sample surveys repeated every 3 years.

TARGET POPULATION: mothers of children aged 0–2 years.

ENROLLMENT: mothers attending vaccination centers with children receiving one of the first 4 doses (DTP/ MMRV) according to the Italian vaccination schedule.

SAMPLE: four independent samples representative of region/local health unit, at approx. 2–3, 4–5, 11–12, and 13–15 months.

DATA COLLECTION: anonymous multilingual questionnaire (paper or online) completed by mothers during waiting time before/after vaccination sessions.

ANALYSIS: responses gathered via a dedicated online platform and analyzed centrally by the coordination group.

Results of the 2025 data collection



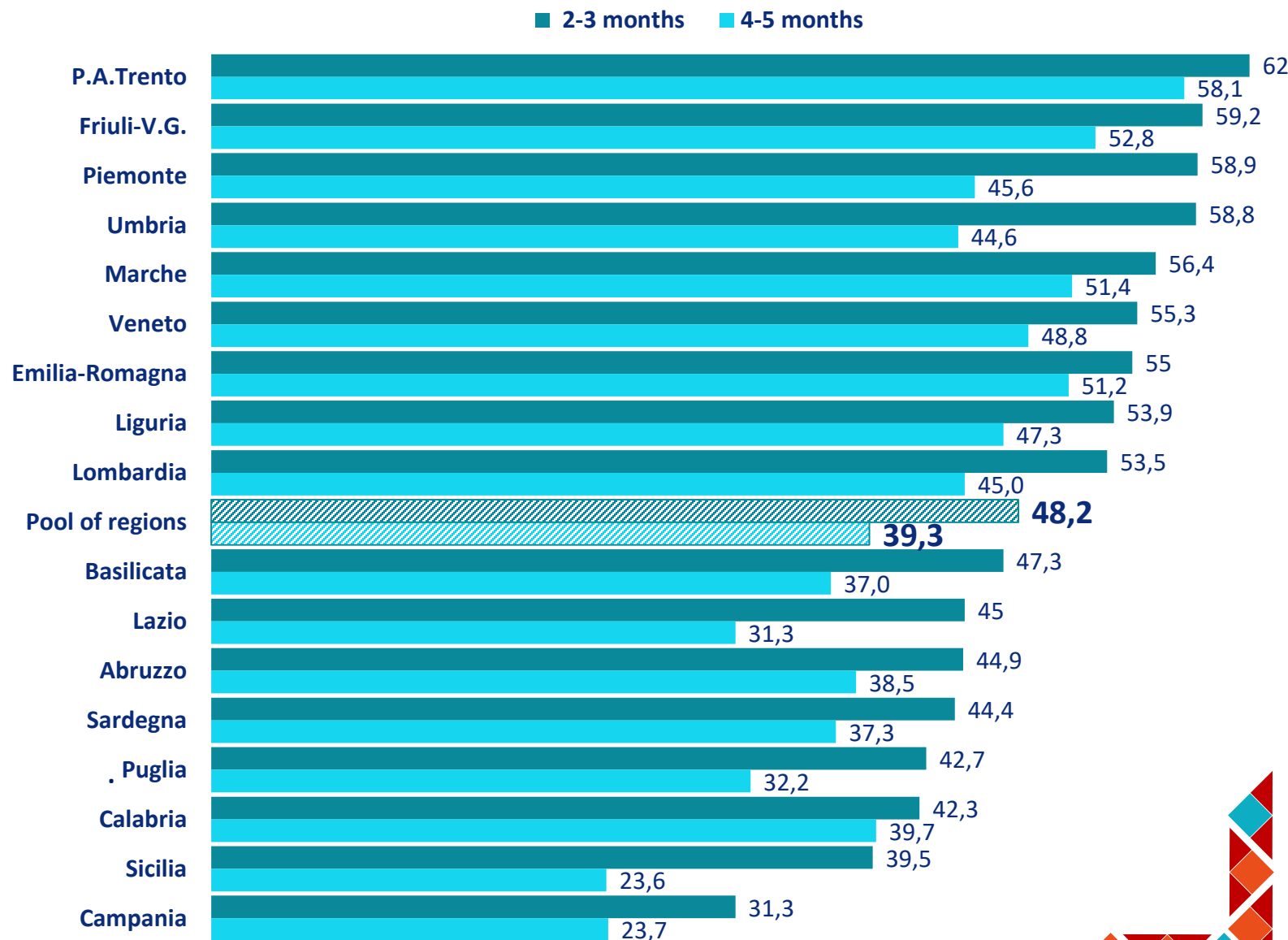
N = 64.789 mothers enrolled
Response rate= 93 %

Exclusive breastfeeding among children aged 2–3 months and 4–5 months (%)

Among infants aged 2–3 months, **48.2%** are exclusively breastfed, with substantial regional variability, characterised by lower prevalences in the southern Regions compared to central and northern Regions

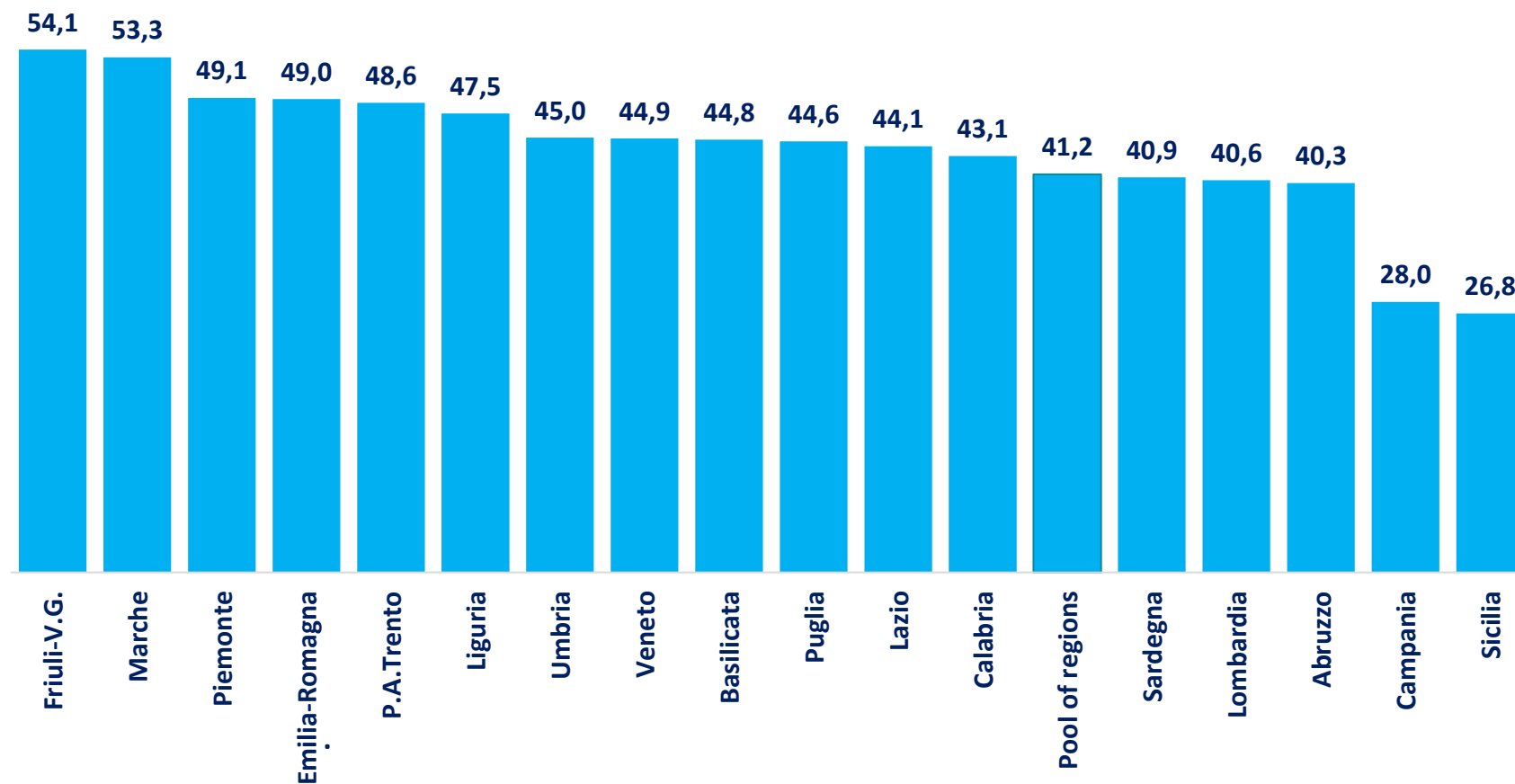
Exclusive breastfeeding **decreases markedly in the 4–5-month age group**, falling to **39.3%**, with values ranging from 23.6% in Sicily to 58.1% in the Autonomous Province of Trento.

Never breastfed: **13.0%**

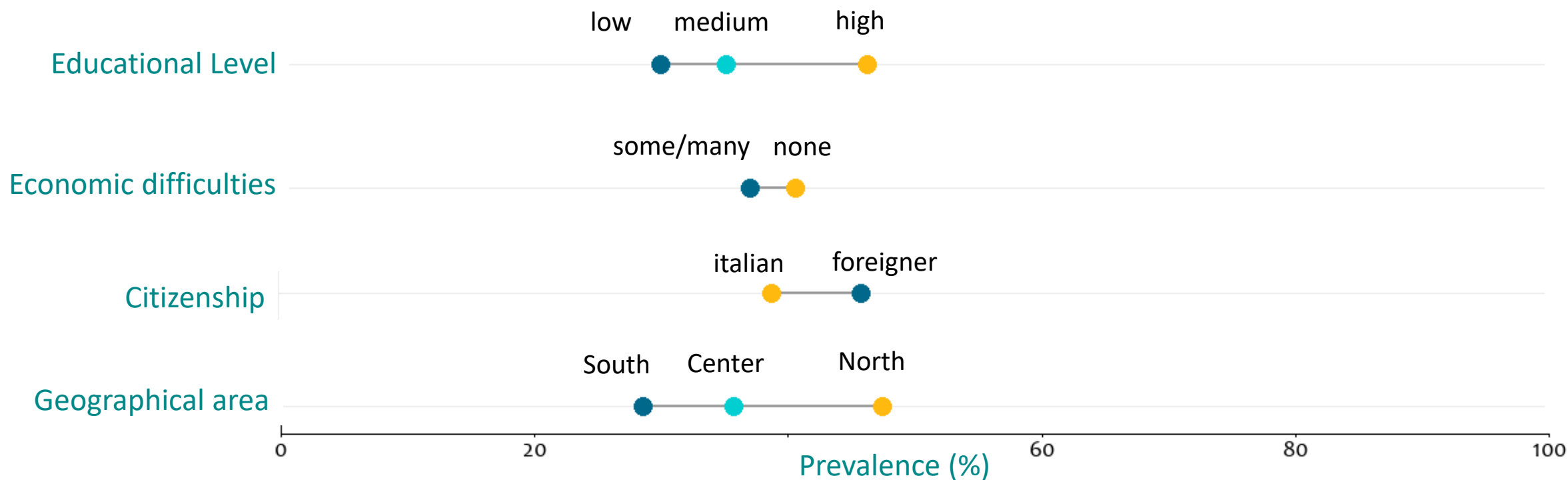


Children breastfed milk in the 12–15-month age group (%)

Analysing the prevalence of breastfeeding beyond the first year of life, the proportion of children receiving breast milk in the **12–15-month** age group varies **between 26.8%** (Sicily) and **54.1%** (Friuli-Venezia Giulia)



Exclusive breastfeeding among children aged 4–5 months and maternal socioeconomic characteristics



A significantly higher prevalence was observed among foreign mothers and among mothers with medium to high levels of education.

Furthermore, participation in antenatal education was associated with a higher likelihood of adopting health-promoting behaviours for infants, **including exclusive breastfeeding.**

Dissemination



The results of the Surveillance are disseminated through a national and regional reports available online on the website, as well as in conferences and scientific publications.

Italiano - Home page

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EpiCentro - Epidemiology for public health

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Surveillance system for children aged 0-2 years

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General information

[Italiano \(Italian\)](#)

Included in the list of surveillance systems and registries identified by the Prime Ministerial Decree of 3 March 2017, the "Surveillance system for the main determinants of health in children aged 0-2 years" is promoted by the Ministry of Health and coordinated by the ISS, which focuses on monitoring certain aspects relating to the health of children aged 0 to 2 years. That includes key aspects across the maternity pathway (e.g. periconceptional intake of folic acid, recommended behaviours during gestation and breastfeeding) and others that are recognized to be important for the health of young children, such as vaccinations, correct position in the cot and early reading.

<https://www.epicentro.iss.it/en/surveillance-0-2-years/#>

Surveillance of Children Aged 0-2 Years

Summary of results 2025 Edition

Ann Ist Super Sanità 2025 | Vol. 61, No. 1: 3-12
DOI: 10.4415/ANN_25_01_02

Monitoring prevalence of breastfeeding and associated factors: results of the 2022 data collection of the Italian surveillance of children aged 0-2 years

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Evaluating screen exposure in very young children: insights from the Italian Surveillance System of children aged 0-2 years

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**The members of the 2022 Surveillance of children aged 0-2 years Group are listed before the References

Abstract
Objective. To describe screen exposure and its association with socio-economic characteristics in a large representative sample of children aged 0-2 years in Italy.
Materials and methods. Data from the 2022 Italian Surveillance of children aged 0-2 years, collected on 33,550 mothers, were analysed to estimate the prevalence of screen exposure. Logistic regression was used to investigate the association between exposure and potential predictors.
Results. Overall, 39.2% of children aged 2-15 months were exposed to digital screens. The exposure prevalence increased with age, ranging from 13.9% at 2-3 months to 61.9% at 13-15 months. Screen exposure was significantly more frequent among children of mothers with non-Italian citizenship, having lower levels of education, reporting economic difficulties, non-participating in maternal classes (MCs), and residing in the center-south.
Conclusions. Most babies, particularly from low socio-economic status (SES) families, were exposed to screens in a period when this may interfere with responsive caregiving and thus with early child development. It is imperative to inform parents and caregivers about the risks of early exposure since the first months of life.

Key words
• surveillance
• screen exposure
• young children
• parental responsiveness

INTRODUCTION
The use of screen technologies (smartphones, tablets, research on the effects of exposure to screens continues to evolve, highlighting the complexity of the issue and underscores the public health importance of ad-

Conclusions

Data show that it is important to continue protecting, promoting and supporting breastfeeding, including by working to build a 'culture of breastfeeding' within local communities.

This is essential to ensure that parents are supported in making informed choices about their child's feeding, based on evidence-based information, free from commercial interests, and are supported in implementing these choices.

Overall, the Italian Surveillance highlighted substantial room for improvement across most of the determinants investigated, with marked geographical disparities and differences according to mothers' socioeconomic conditions.

The Surveillance serves as a national observatory on the first 1,000 days of life, providing a framework for international comparison and collaboration.

By collecting these data, it enables the design of targeted programmes that promote the health and well-being of children and families, with the aim of reducing health inequalities.

By monitoring key indicators and analysing geographical and socioeconomic differences, it provides valuable evidence to support national and regional decision-makers in planning effective and equitable public health policies and interventions.



thank
you

For more information about the Surveillance System for Children Aged 0-2 Years

 <https://www.epicentro.iss.it/en/surveillance-0-2-years/>

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