

Too Many Channels?
Sifting through the Recommendations on Screen Media and Technology
By John Surr

This article is about moving electronic pictures in some kind of box, large or small, which we call *screen media* or *screen technologies*.

Screen media have been around since early in the 20th Century, in forms that began with cash registers and black & white television. Especially in the last 20 years the forms of screen media have bloomed into thousands of varieties, which we use in many of our daily activities. Television still dominates these daily uses, and in many households one or more TVs are always on in the background, even if ignored. For many others, computers, smart phones and video games are consuming increased time and attention.

In the past year a number of organizations and government agencies concerned with young children have issued statements of advice to parents, early education and care providers, and the general public about what in screen media is healthy for young children, and what is not. The *White House's* Let's Move! Initiative, the National Institutes of Health (*NIH*), the American Academy of Pediatrics (*AAP*), the health profession's child care health bible, *Caring for our Children (CFOC)*, the Environmental Rating Scales (*ERS*) for child care, and the National Association for the Education of Young Children and the Fred Rogers Center (*NAEYC/Rogers*), all have come out recently with recommendations. These authorities, and the reports that they issued, are described more fully below in the box.

In addition, Arizona, Delaware, Mississippi, New Mexico, North Carolina, Vermont, and West Virginia all have regulatory limits on screen time in child care for children under 2. Arizona, Delaware, Maryland, Nevada, and South Carolina include screen time limits in their QRIS systems (National Resource Center 2012).

What's a teacher to do about screen media in child care? What's a center director to do about advising teachers and parents? The organizations' recommendations differ widely from each other in many areas, so they may confuse more than they clarify or help. This article is aimed at helping you to make a wiser decision for the children in your care, through a comparison below, issue by issue between the authorities. The recommendations mostly do not apply to adults' use of screen media, which can be useful in moderation except when it gets in the way of our relationships with, and examples for, our children.

Recommendations on Young Children's Screen Media Use:

- The American Academy of Pediatrics (*AAP*):
 - Children, Adolescents, Obesity, and the Media, 2011
(<http://pediatrics.aappublications.org/content/128/1/201.full?sid=76ab8514-4aef-4a0c-820f-5fc58436d50b>) (accessed 3/17/12)

- Media Use by Children Younger Than 2 Years, 2011 (<http://pediatrics.aappublications.org/content/128/5/1040.full?sid=065ca470-89ad-404a-acb4-dee7261b3a0a>) (accessed 3/17/12)
- Children, Adolescents, and Television, 2001 (<http://pediatrics.aappublications.org/content/107/2/423.full>) (accessed 3/17/12)
- Media Violence. 2009. (<http://pediatrics.aappublications.org/content/124/5/1495.full>) (accessed 3/18/12)
- Children, Adolescents, and Advertising. 2006, reaffirmed 2010. (<http://pediatrics.aappublications.org/content/118/6/2563.full>) (accessed 3/18/12).
- AAP, American Public Health Assn., National Resource Center for Health & Safety in Child Care & Early Education. 2011. *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Early Care and Education Programs*, Third Edition. (http://nrckids.org/CFOC3/CFOC3_color.pdf) (accessed 3/17/12). Family Checklist for Physical Activity in Early Care and Education, Standards 2.2.0.3 (Limiting Screen Time — Media, Computer Time) and 3.1.3.4 (Caregivers’/Teachers’ Encouragement of Physical Activity).
- Frank Porter Graham Center, University of North Carolina, Additional Notes for Clarification of the ITERS- R, ECERS- R, and FCCERS- R. 2012. (<http://ers.fpg.unc.edu/sites/ers.fpg.unc.edu/files/ITERS-R%20Additional%20Notes%2007-11.pdf>) (accessed 3/17/12) ITERS Note 25, Standards 1.4 and 3.3.
- National Association for the Education of Young Children (NAEYC) and Fred Rogers Center for Early Learning and Children’s Media (FRC), Position Statement: Technology and Interactive Media as Tools in Early Childhood Programs Serving Children from Birth through Age 8. 2012. (http://www.naeyc.org/files/naeyc/file/positions/PS_technology_WEB2.pdf) (accessed 3/17/12).
- NAEYC, New Guidance on Accreditation Criteria, Effective April 15, 2012. (<http://www.naeyc.org/files/academy/file/NewGuidanceOnNAEYCAccreditationCriteriaEffectiveApril2012.pdf>) (accessed 3/17/12). Standard 2.H., p. 2.
- White House, Let’s Move! Initiative, (WH/Let’s Move) 2012. Let’s Move! Child Care (<http://www.letsmove.gov/blog/2011/06/08/introducing-let-s-move-child-care-tools-child-and-day-care-centers-and-family-care-h>) (accessed 3/17/12).
- Institute of Medicine of the National Academies (NIH/NIM), *Report: Early Childhood Obesity Prevention Policies* (6/23/2011). (http://www.nap.edu/catalog.php?record_id=13124#toc), pp. 6, 119- 124.

The Current Situation:

According to Rideout (2011, 11), 47 percent of babies 1 year and younger watch TV and videos, and 30 percent of them have a TV in the bedroom.

Those babies who watch do so for an average of almost 2 hours a day. For children aged 2- 5, the most conservative of the data (Rideout, *ibid.*) show them spending an average of 2.2 hours per day, although some studies show them spending an average of 4.1 (Tandon et al 2011) to 4.6 (Nielsen 2010) hours per day. Children from low-income (Landhuis et al 2008), African-American, and Latino (Rideout, 2011, 25) families spend more time than others, with child's bedroom TV averages more than twice as high than for other children (Rideout 2011, 27). According to *AAP* (2011) children aged 2-5 average 1 hour, 53 minutes with TV, 17 minutes with video games, 6 minutes with educational software, and 2 minutes with other apps on smart phones or tablets.

Christakis and Garrison (2009, 1629- 31) surveyed child care settings and found that 70 percent of home-based child care settings gave children daily TV time, but only 36 percent of centers did so. Generally, home-based settings had an average of 1.84 hours more television exposure than center-based settings. The average hours of exposure for preschoolers in family home care was 2.4 hours for preschoolers, 1.6 hours for toddlers, and 0.2 hours for infants. Children in centers had averages of 0.4 hours for preschoolers, 0.1 hours for toddlers, and no exposure for infants. Family child care providers with a 2 or 4 year college degree exposed the children in their care to an average of 1.4 hours less TV per day than others.

The Issues:

A. Focus: Each of the agencies making recommendation had its own focus of attention, and some piggybacked on others. The *White House* and *NIH* were concerned that time spent sitting in front of a screen detracts from the physical activity that children need for growth and health, especially because of the alarming growth in obesity. Others included that focus among their issues, but raised other concerns as well. Several of the other organizations — *Caring for our Children*, the *ERS*, and the *White House* — followed the recommendations of the *AAP*, long a leader in raising consciousness about young children's media exposure. *NAEYC* and the Fred Rogers Center, in a joint Position Statement, incorporated some of the *AAP* recommendations but ignored others. The *NAEYC/Rogers* Statement addressed the use of all forms of technology, including microscopes, telescopes, cameras, communications equipment, light tables, etc., so its focus went beyond screen media. But *NAEYC/Rogers* did not address significantly the *content* of the programs or activities on the screen. The *NAEYC Accreditation Standards* followed the *NAEYC's* general focus.

B. Audience: Each of the organizations gave their recommendations to a different constituency, which affected both the form and substance of their recommendations. *NIH* and the *AAP* both addressed their statements mainly to pediatricians and other medical specialists dealing with young children, but also to parents in general. The *White House* Let's Move initiative is addressed to the general public, but its Let's Move Child Care program is directed at child care providers. *Caring for Our Children*, speaking for the *AAP*

and other health care professionals, is addressed to child care providers and those who license them. *ERS*, which adopted the standards in *Caring for Our Children*, has the same audience, as do the *NAEYC Accreditation* standards. *NAEYC/Rogers* address their remarks primarily to child care providers, but also to parents of young children.

C. Television and other Screen Media: As television (including recorded movies shown on television) has long dominated discussions of screen media, this passive form of involvement was addressed by all of the authorities cited above. All of them agreed that *children under 2 should not be exposed to any TV, DVDs, or movies in any child care setting*. Indeed, *NAEYC/Rogers* says that teachers should “prohibit” that use. In this context, it appears that the *NAEYC Accreditation Standards* depart from *NAEYC* itself when they only require that “The use of passive media . . . is limited to developmentally appropriate programming.”

Although the *AAP*, *Caring for Our Children*, *ERS*, and the *White House* all recommend specific *time limits* for TV, movies, and DVDs for children 2-5, *NAEYC/Rogers* “discourage passive and non-interactive uses with children 2-5.” *Caring for Our Children*, followed by the *White House* and *ERS*, suggests that “total media time should be limited to not more than thirty minutes per week”, and that no screen media should be allowed during snack time or naps.

Most of the authorities suggest that child care providers should be *mindful of each child’s viewing practices at home*, and that no child aged 2-5 should be exposed to more than a *total of 2 hours per day* of television. *NIH*, however, adopted a medical consensus position that children under 6, within the 2 hours a day limit, should be limited to 30 minutes of TV, DVD, or movie time for half a day in care, or 1 hour a day in full day care. *NAEYC/Rogers* said only that teachers should “carefully consider” these other authorities’ limits on screen time. The *AAP*, *Caring for Our Children*, *ERS*, the *White House*, and *NAEYC/Rogers* all recommend that an *adult be involved in helping* children while they watch TVs, DVDs, or movies, to interpret for them what’s happening on the screen.

D. Computers and other Interactive Screen Media: *Caring for Our Children* and *ERS* would *limit the amount of time* a child spends on interactive media, including computers and video games, to *15 minutes a day in child care* settings, within the 2 hours a day total screen media limit. These authorities and *NAEYC/Rogers* make an exception to this recommendation for screen media that help children with *special needs* adapt to the classroom.

NAEYC/Rogers distinguishes “passive” screen media from “interactive” screen media, allowing the latter even for children under 2 if it “appropriately support[s] responsive interactions between caregivers and children and . . . strengthens adult-child relationships.” For children 2-5, *NAEYC/Rogers* recommends that screen media tools be selected “in intentional and developmentally appropriate [but otherwise unspecified] ways, giving careful

attention to the appropriateness of the quality of the content, the child's experience, and the opportunities for co-engagement, . . . [within] a balance of activities." *NAEYC/Rogers* recommends that teachers "carefully consider the screen time recommendations from public health organizations", but does not specifically adopt their suggested time limits for this age group. The *NAEYC Accreditation Standards* require that "All children have opportunities to access technology (e.g., tape recorders, microscopes, computers) that they can use by themselves, collaboratively with their peers, and with teaching staff or parent."

E. What's On the Screen: The *AAP, Caring for Our Children, ERS,* and *NAEYC/Rogers*, all speak out against exposing young children to *violence* on screen media, although *NAEYC/Rogers* refers only to "undue exposure to violence" in a background part of their Position Statement. Similarly, The *AAP* and *NAEYC/Rogers* would limit exposure to *sexual content*, though the *AAP* comments that this exposure is less harmful than exposure to violence, and *NAEYC/Rogers* speaks only of "highly sexualized images". Gender role stereotypes, such as princesses and superheroes, are not addressed. The *AAP* would *limit* children's exposure to "*noneducational television*", particularly because of the media's messages about tobacco, alcohol and drug use, as well as unhealthy foods. The *White House* and *NIH* are particularly concerned about *food commercials and food use* in screen media as a factor in children's obesity. *NAEYC/Rogers*, despite efforts of advocates to have them consider the exploitation of children's vulnerabilities by the marketing industry (CCFC 2012, TRUCE 2009), did not include any recommendation in their Position Paper about limiting young children's exposure to *media marketing*, including product placement.

None of these authorities give as a reason for limiting access to screen media that it tends to *capture a child's imagination*, pushing aside her natural focus to work out developmental issues through pretend play. Recent contributors to the Exchange, like David Elkind (2011), have pointed our attention to this problem, as have writers like Diane Levin (2009, 2011), Nancy Carlsson-Paige (2008), and others. The *AAP, NAEYC/Rogers,* and the *White House* have all pointed out that young children tend to believe what they see on the screen, which makes them vulnerable to learning harmful lessons.

F. The Screen as a Distraction: The *AAP, Caring for Our Children,* the *White House,* and *NAEYC/Rogers* all stress the importance for young children that they have *strong and positive bonding relationships with their caregivers*. Particularly for the youngest children, but also for older children, the presence of screen media powered on in a room where the caregiver is present distracts both the child and the caregiver from the attention that needs to be given to each other. An adult constantly talking on a cell phone or punching a computer interferes with the child's personal relationship with her, and the adult's behavior also makes the child seek to imitate that example.

An adult who watches a screen with a young child may help her to understand better what is on the screen and how it relates to her life, but it still

may not be as helpful as a more direct, personal contact between the two, with their own personal agenda. Co-viewing reduces personal interactions in other contexts (Vandewater et al 2006), including conversation (Courage et al 2010).

Conclusions:

It is clear that today's young children are being raised in a *media-saturated environment*, dramatically more so than in their parents' generation. Although many parents and early childhood educators grew up after President Reagan de-regulated television in 1984, they need to be aware of the effects of that saturation for today's young children, even though scientists are still learning about the full scope of those effects.

It is clear that *young children's intense involvement in screen media has adverse effects on their growth and health*. We in early care and education have a responsibility, in the best interests of the child, to wean them from excessive dependence on screen media, especially while they are with us and in our care. We also need to be able and willing to work with parents to help them to make informed media choices for their families.

All of the authorities cited in this article are agreed that children under two should be exposed to screen media as little as possible, and that child care is a place for their relationships and concrete explorations of the world around them, not for the children's or caregivers' screen media experiences. Passive screen media in child care should be very limited, based partly on the likelihood of the children's excessive exposure at home and the danger that a sedentary media habit can lead to obesity, sleep problems, and other health difficulties. Although some authorities are more enchanted with interactive screen media than others, there is a widespread feeling that there should be limits on total daily media exposure, and much stronger limits on exposure while in child care, for children between 2 and 5 years of age.

Violence, sex, and commercials on screen media available to young children should be discouraged, according to the health authorities. Others recommend that children need time away from media to develop more fully their own imagination and capacity to play.

We in child care have a responsibility to reach out to parents and community leaders, to convince them to make their lives more child-friendly and less media-saturated. We all need to go outside and play.

Resources (in addition to the recommendations themselves):

American Academy of Pediatrics (AAP) (2010) Policy statement – Media education. *Pediatrics* 26:5, 1012- 1017.

Campaign for a Commercial-Free Childhood (CCFC), <http://www.commercialfreechildhood.org/issues/overview.html>.

Christakis, D. A., & Garrison, M. M. (2009). Preschool-aged children's television viewing time in child care settings, *Pediatrics* 124:6, 1627- 1632.

Carlsson-Paige, N. (2008) *Taking Back Childhood: Helping your Kids Thrive in a Fast-paced, Media-saturated, Violence-filled World*. New York, Hudson St. Press.

Courage, M., Murphy, A., Goulding, S., Setliff, A. (2010) When the television is on: The impact of infant-directed video on 6- and 18-month-olds' attention during toy play and on parent-infant interaction. *Infant Behavior and Development* 33: 176-188.

Elkind, D. (November/December 2011) What the future holds for young children. *Exchange* 33:6 50-52.

Levin, D. (2009) Too young to be a consumer: The toll of commercial culture on the rights of childhood. *Exchange* 32:3: 49-52.

Levin, D. (2011) Beyond remote-controlled teaching and learning: The special challenges of helping children construct knowledge today. *Exchange* ???: 59-62.

National Resource Center for Health and Safety in Child Care and Early Education,

<http://nrckids.org/SearchResults.html?qNrcSrch=television&submit.x=9&submit.y=6>

Nielsen Company (2009) TV viewing among kids at an eight-year high. http://blog.nielsenwire/media_entertainment/tv-viewing-among-kids-at-an-eight-year-high/ (accessed ?)

Rideout, V. (2011) *Zero to eight: Children's media use in America*. San Francisco, CA, Common Sense Media: 11, 25, 27.

Teachers Resisting Unhealthy Children's Entertainment (TRUCE) (2009) Toys, Play & Young Children Action Guide. <http://www.truceteachers.org/toyactionguide.html> (accessed 5/2/12).

Tandon, P. S., Zhou, C., Lozano, P., & Christakis, D. A. (2011) Preschoolers' total daily screen time at home and by type of child care. *Journal of Pediatrics*. 158: 297-300.

Vandewater, E. A., Bickham, D. S., Lee, J. H. (2006). Time well spent? Relating television use to children's free-time activities. *Pediatrics* 117:2: 181-191.