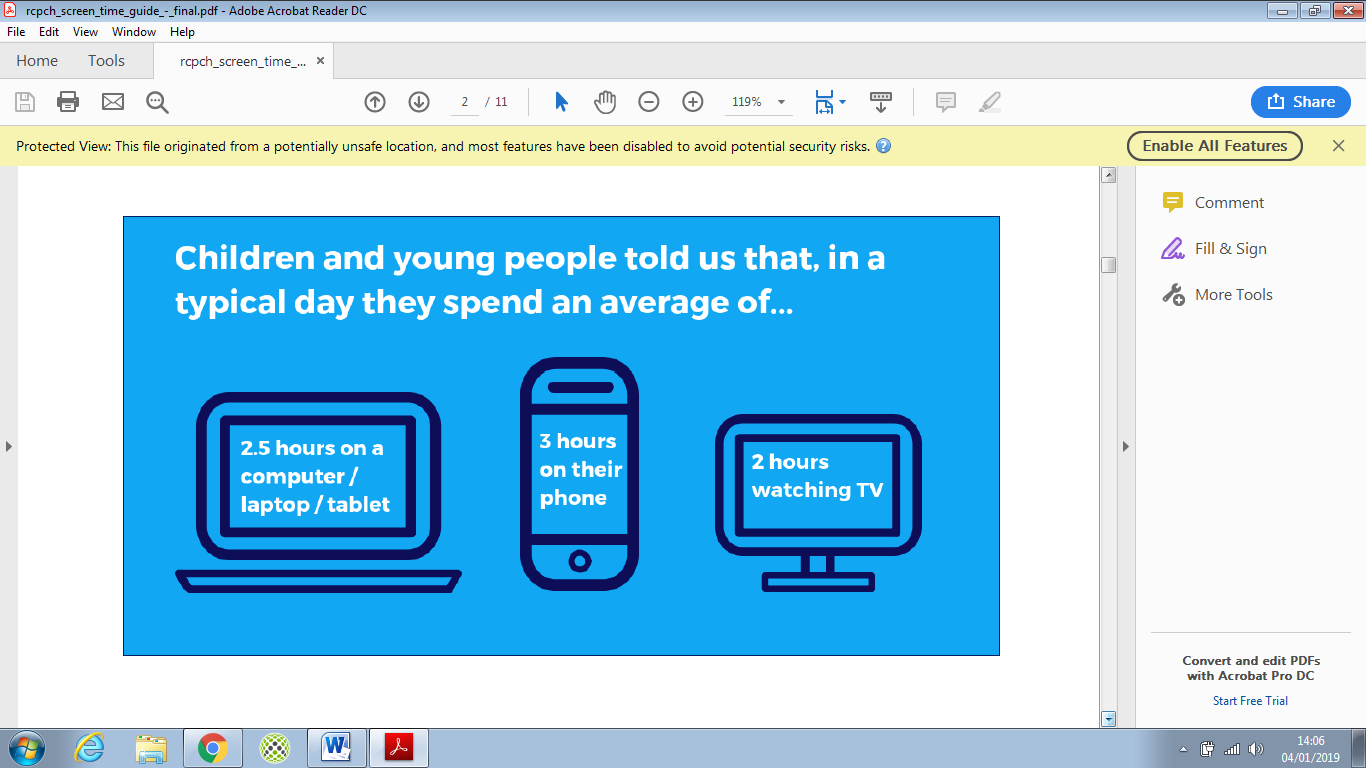
Screen use in day to day life- guidance

Screen use is part of day to day life. There is controversial evidence of benefit and harm. These are findings from a study and guidance is offered to all professionals and parents



systemic reviews have provided with the following evidence

Children with higher screen time tend to have a less healthy diet, a higher energy intake,

and more pronounced indicators of obesity.

2. Children with higher screen time, particularly over 2 hours per day, tend to have more

Depressive symptoms, although it has been found by some studies that some screen

time is better for mental health than none at all.

3. There also seems to be a trend towards poorer educational outcomes, sleep and fitness

in children using screens for long periods, although the evidence is weaker for these

associations. We didn’t find consistent evidence for any specific health or wellbeing

benefits of screen time.

4. When the effect of screen time on health amongst young people in the UK was analysed,

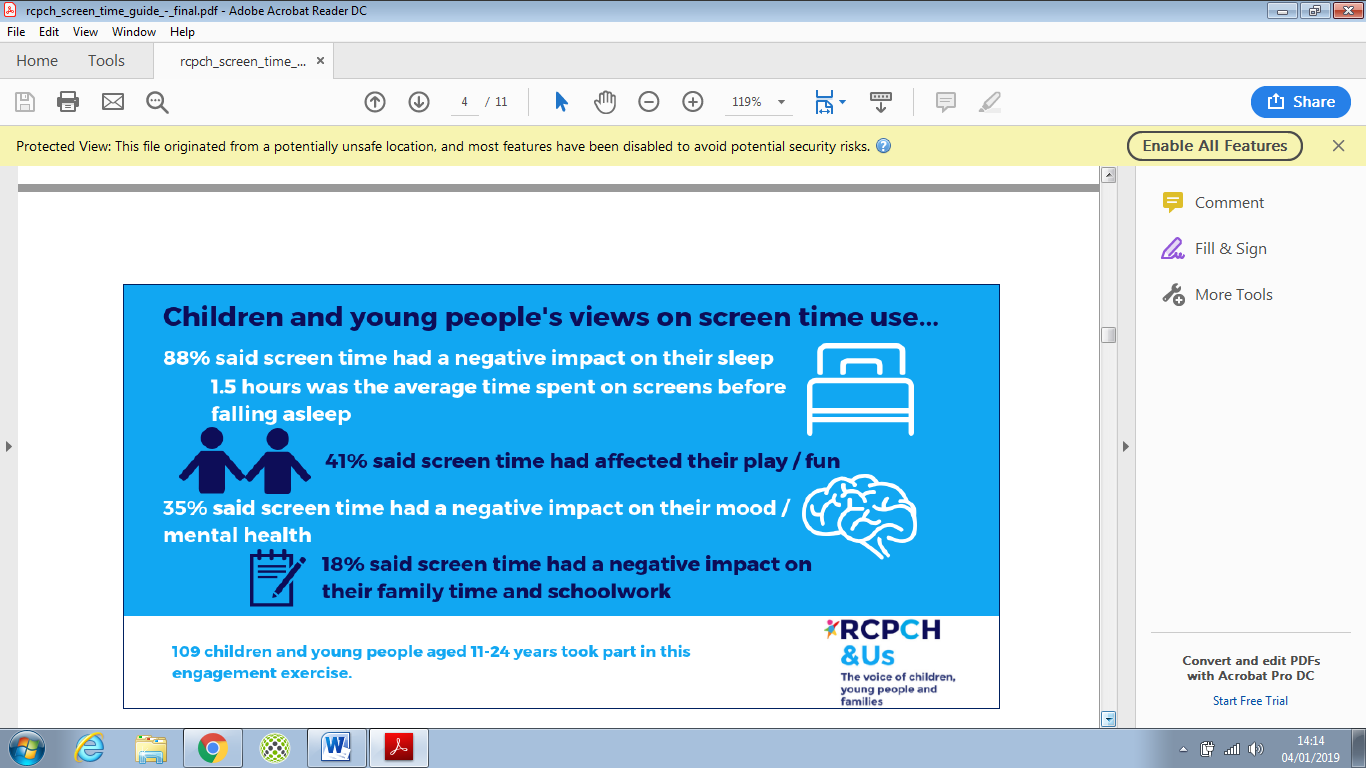
it was found that the contribution of screen time to wellbeing is small when considered

together with the contribution of sleep, physical activity, eating and bullying as well as

poverty.

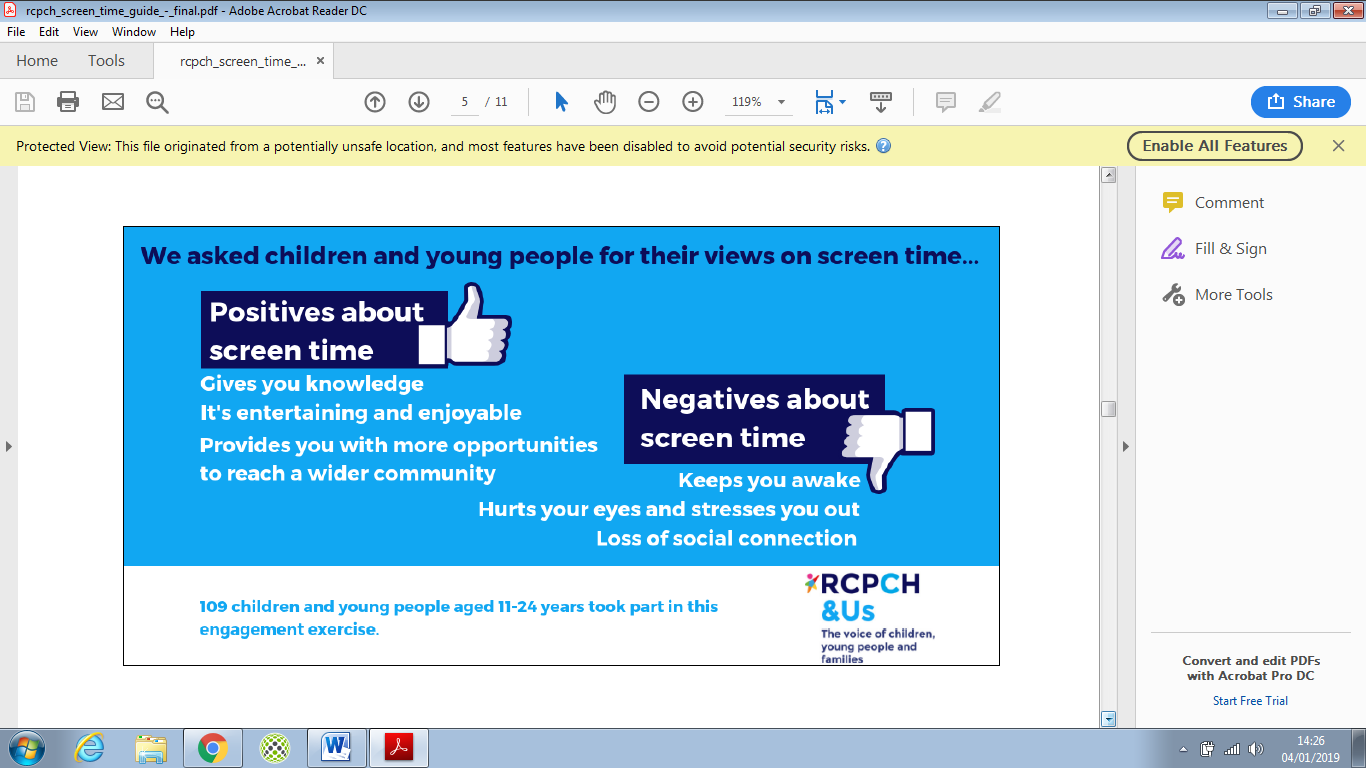
5. There is some specific evidence for an association between screens experienced around

Bedtime and sleep duration.



Association between screen time and negative outcomes:

1. Watching screens can distract children from feeling full and this may contribute to increased intake. Also children are exposed to advertising which appears to lead to higher intake of unhealthy foods.
2. Exposure to harmful content- see NSPCC NetAware material. Parents should be aware of the certification systems of video content and games.
3. Displacement of positive activities eg supported socialising, good sleep, diet and exercise.



Key messages to health professionals:

Many of the apparent connections between screen time and adverse effects may be mediated by lost opportunities for positive activities (socialising, exercise, sleep) due to displacement by screen time. This is not the case however for the increase in the consumption of high-density foods while using screens, which appears to be related to being distracted from feelings of satiety.

Screen time limits

Evidence is weak for a threshold to guide children and parents to the appropriate level of screen time. Hence a universal cut-off cannot be recommended.. However, thresholds may be an appropriate part of a family’s media planning.

1. **Our primary recommendation is that families should negotiate screen time limits with their children based upon the needs of an individual child, the ways in which screens are used and the degree to which use of screens appears to displace (or not) physical and social activities and sleep.**

Content of screen time

. Regarding the specific area of online safety, we suggest using existing guidance from organisations such as the NSPCC.

Parental control

The evidence that time spent on screens is associated with harmful impacts on health and wellbeing amongst children should lead families to ensure that exposure to screens by children and young people is subject to parental control.

**RCPCH recommendations for discussing screen time with families**

If a family can ask themselves (or be asked by others) these questions, and are satisfied with the answers, then they can be reassured that they are likely to be doing as well as they can with this tricky issue.

**Question 1: Is screen time in your household controlled?**

For infants and younger children this means that screen time duration and content is set by their responsible adults. If these limits are regularly broken and the parent feels that screen use is out of control, this may indicate the need for parenting support.

For older children and young people, there will be a move towards autonomy and self-control, but this will need to be gradual and under the overall guidance of an adult.

Adults within families also need to consider their own use of screens, using the questions below for guidance. It is useful for us all to ask, especially regarding smartphones, “whether you are using it for what you want to, or whether you are unconsciously using it all the time”

**Question 2: Does screen use interfere with what your family want to do?**

* Varies from family to family
* Many families want to spend more time together, and there is good evidence that this is beneficial for the welfare of all family members.
* Mealtimes are an opportunity for this---declare meals to be a ‘screen-free zone’. This may be a good way to ensure interaction, especially with older, more independent young people, but each family needs to find its own way to maximise interaction and shared enjoyment.
* For younger children, face-to-face social interaction is vital to the development of language and other skills. Screen-based interaction is not an effective substitute for this.

**Question 3: Does screen use interfere with sleep?**

Even quite modest sleep deprivation can interfere with mental and physical health, educational success and family relations.

**Question 4: Are you able to control snacking during screen time?**

It can be very easy to lose track of how much is eaten during a session of screen time particularly if meals are eaten in front of screens. Adults should monitor what is eaten during sessions on screens, especially in children at risk of obesity.

Top tips from children and young people on screen time use.

1. Find a balance and make sure health comes first
2. Don’t get addicted
3. Be careful and control how much time is spent on a screen.

What can families do?

1. Have a plan and stick to it.
2. Sit down as a family and discuss boundaries of screen use.
3. Praise family members and rewards given for respecting the boundaries
4. Boundaries are applied consistently and if necessary consequences put in place.
5. Be aware of which networks/ apps children are using- don’t be intrusive but have open and informed discussions
6. Think about own media use- children learn from adults using media- can it wait when children need attention?
7. Priorities- face to face versus online discussions: especially for younger children. Note educational apps do not help communication in most children
8. Be snack aware
9. Protect sleep- wind down times before bed. Models with reduced blue light do not have benefits from exposure to blue light.

American Academy of Paediatrics recommendations:

* For children younger than 18 months, avoid use of screen media other than video-chatting. Parents of children 18 to 24 months of age who want to introduce digital media should choose high-quality programming, and watch it with their children to help them understand what they're seeing.
* For children age 2 to 5 years, limit screen use to 1 hour per day of high-quality programs. Parents should co-view media with children to help them understand what they are seeing and apply it to the world around them.
* For children age 6 and older, place consistent limits on the time spent using media, and the types of media, and make sure media does not take the place of adequate sleep, physical activity and other behaviours essential to health.
* Designate media-free times together, such as dinner or driving, as well as media-free locations at home, such as bedrooms.

The Canadian Paediatric Society recommendations (2017) are similar; essentially recommending no screen time for children <2 years, a 1-hour daily limit for 2-5-year olds and avoiding screens for an hour before bed.

Reference:

<https://www.rcpch.ac.uk/resources/health-impacts-screen-time-guide-clinicians-parents>



<https://www.rcpch.ac.uk/sites/default/files/2018-12/rcpch_screen_time_parent_fact_sheet_-_final.pdf>



<https://www.rcpch.ac.uk/sites/default/files/2018-12/rcpch_screen_time_full_cyp_views.pdf>

