Sample District-Wide Recommendations

The following recommendations were developed by a group of parent activists for their Student Health Advisory Board (SHAB) in the Arlington, Virginia, public schools (APS). In the context of the Action Kit, it serves as an example of a formal statement of parents’ concerns, delivered through existing channels – i.e., “working within the system.” The challenge, now, is to get the District to implement the suggested changes!

Screen Use in Schools

Members of the Student Health Advisory Board (SHAB) voted to approve the development of a new SHAB workgroup this year. The “Screen Use in Schools Subcommittee” was formed and has met several times to develop recommendations for safe screen and personal device use in schools. The intent is to add a new set of recommendations to the Wellness Policy Implementation Procedure (PIP), either in full or in part, with a reference to a more comprehensive set of guidelines published as a companion to the PIP. The draft recommendations are divided into the following areas:

1. Health and wellbeing of students
2. Teacher training
3. Collaboration with APS technology committee, teachers and stakeholders
4. Supporting documentation

1. Health and Wellbeing of Students

Low/No-screen option
All parents are entitled to request a low/no-screen option for their child. This option will be presented in the first day packet. APS will develop guidelines to accommodate. No child should be withheld a device that helps them access their learning, nor forced to use a device that may exacerbate a diagnosed condition, as agreed upon through 504, IEP, health plan, or parental request. Proper computer configurations need to be offered in classrooms for children.

General use of screens in APS
Because real-life and multi-sensory experiences have been proven to be more meaningful than learning experiences on electronic devices, screens should be used for specific purposes rather than as a replacement for hands-on, project-based learning. Authentic books (paper) have been proven to be more effective in reading processes and acquisition. Screens and educational apps lack multisensory input and pose health risks, so screens should be implemented only when other methods of meeting curricular objectives have been exhausted. Diverse modalities for learning will be offered, with screens not being a choice at times. Personal devices brought from home will not be allowed in class.
Time on devices: per session and per day
Classrooms must implement scheduled and staggered screen use. In this way, breaks will be embedded throughout the day. Schedule device use within grade levels to ensure routine breaks from screens on a daily basis. For example, when device use is required in the first period, it must take place in the first 20 minutes of class. Then in second period, device use would also take place during the first 20 minutes, followed by a break. Each grade level team can determine what part of the class they prefer, as long as the use and breaks are consistent throughout the school day. The American Academy of Pediatrics (AAP) suggests a daily digital plan, where homes and schools collaborate on the quantity received per day to maintain a healthy average.

Safe configurations for every classroom
The State of Virginia requires a ratio of 1 computer to every 5 students. Each classroom needs to have these computers in the proper configurations. Classrooms should have a cluster of safely configured computers with time limits and intentional use:

1. Place a blue light filter on the screens.
2. Make sure the monitor is at eye level when seated in front of the screen.
3. Keep monitor at least 20 inches from eyes (adult arm’s length).
4. Use a chair that can adjust in height to the child’s sight.
5. Minimize reflections and screen glare by adjusting contrast and brightness settings and the light in the room (lamps, overhead, sunshine, etc.) to match the lighting on the screen. The screen and room lighting should be similar.
6. Ensure the feet are resting flat on the floor.
7. Keep track of time with a timer.
8. Consider setting a volume limit for headphones.

School issued devices should stay at school
Safe computer configuration cannot be assured at home, nor can the schools control the time the school device is used by a student. School device use could be contributing to the interruption of critically important healthy sleep patterns, since many students are doing homework late in the evening.

Consistency across schools
All APS Schools and Programs at Elementary, Middle, and High School levels need to follow the Policy Implementation Procedures for best outcomes in student wellbeing and academic performance.
2. Teacher Training

As technology is constantly changing and new research shifts our understanding of best practices, teachers and staff shall participate in ongoing training regarding health and safety issues associated with children's use of digital devices. When devices are used in schools, teachers shall ensure that students heed manufacturers’ guidelines when using school-issued devices and adhere to best practices as put forward by pediatricians, ophthalmologists, and other medical professionals. Teachers will take into account the published ergonomic considerations from the manufacturer. Teachers will model screen hygiene at school when using their own devices. Classroom posters showing proper computer configuration should be in sight for easy reference. Teacher training will also include best practices for identifying and reducing improper/excess screen use among students that contributes to distraction and limited attention span in class.

3. Collaboration with Stakeholders

SUS aims to work in tandem with APS tech personnel, teachers, parents, and health care professionals to create a committee of experts to continue to monitor how technology is being implemented in the schools – its positive and negative impacts to the growth and development of the whole child and the community at large. SUS also believes an educational technologist would be helpful on staff.

4. Supporting Documentation (links):

Ergonomics

Personalized Learning and the Digital Privatization of Curriculum and Teaching

Groundbreaking study examines effects of screen time on kids

Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study

Seeing the Light – Myopia Is on the Rise, and Screens May Be to Blame
ACTION REQUESTED

1. Review Screen Use in School Subcommittee recommendations and update the Wellness PIP with associated content.

2. Monitor the latest data and research on personal electronic devices and their effect on growth and development.


4. Promote best practices in screen hygiene through modeling, training, and advocacy (i.e., “devices down and heads up,” active listening, face-to-face social interactions – generally being fully present in the company of others).

5. Inform parents about software platforms and learning apps that students are exposed to and seek parental approval as indicated by the software terms and conditions.