



Healthy Kids in a Digital World



A Strategic Plan to Reduce Screen Time for Children 0 to 5
Through Organizational Policy and Practice Change

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Campaign for a Commercial-Free Childhood

As controversies abound about the costs and benefits of screen time for young children, a few things are clear. We can't go back to an earlier era—we can only move forward. And many young children today are spending far too much time with screens, to the detriment of their health and wellbeing.

Foreword

Screen technologies from television to tablets have transformed our lives and radically altered childhood. Children born today will experience wondrous technologies few of us can even imagine. As controversies abound about the costs and benefits of screen time for young children, a few things are clear. We can't go back to an earlier era—we can only move forward. And many young children today are spending far too much time with screens, to the detriment of their health and wellbeing. Excessive screen time is linked to a host of problems facing children today, including childhood obesity and problems in school.

The Campaign for a Commercial-Free Childhood is proud to join the public health community and other advocates for children in the growing movement to help parents reduce children's screen time and encourage the kinds of activities known to be beneficial to health and development—hands-on creative play, active play, time outdoors and time with caring adults.

Working with major health, community, education, and advocacy organizations, we have devised a three-year strategic plan to incorporate reducing screen time for children 0 to 5 into organizational policies and practice. By reaching out across disciplines and settings, we have created a plan that builds to a time when—from pregnancy on—the places families turn to for services, such as WIC centers, Head Start classrooms, community health centers, child care settings, and pediatricians' offices, routinely provide parents with the necessary guidance and support to set limits on children's screen time and promote active and hands-on creative play.

We are grateful to Kaiser Permanente's Community Health Initiatives Grants Program, which generously funded the development of *Healthy Kids in a Digital World: A Strategic Plan to Reduce Screen Time for Children 0 to 5 Through Organizational Policy and Practice Change*. We are also grateful for the advocates, scholars, clinicians, and teachers on our advisory board who generously shared both their time and their wisdom.



Susan Linn, Ed.D.
Director, CCFC
Boston, October 2012

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*The American Academy
of Pediatrics and
other public health
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agencies recommend
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time for children under
2, and less than 2 hours
per day of screen time
(excluding schoolwork)
for older children.¹*

Executive Summary

Despite scant evidence, many believe that children's future success depends on early exposure to screen technologies. As digital devices become ubiquitous and portable, they are heavily marketed, often with unsubstantiated claims of their educational benefits. The newest technologies are very attractive to harried parents hoping for an educational boost and/or looking to keep kids quiet and occupied. Early childhood centers are also heavily targeted. As a result, today's children spend unprecedented amounts of time with screen media, including television, videos, video games, apps on cell phones, and other portable devices, even though research links such exposure to childhood obesity, sleep disturbance, poor long-term school performance, negative social adjustment, and multiple other problems.

Screen time begins in infancy...

On any given day, 29% of babies under 12 months are watching TV and videos for an average of about 90 minutes. Twenty-three percent have a television in their bedroom.² Between their first and second birthday, on any given day, 64% of babies and toddlers are watching TV and videos, averaging slightly over 2 hours. Thirty-six percent have a television in their bedroom.³ Little is known about the amount of time children under 2 currently spend with smartphones and tablets, but in 2011 there were 3 million downloads just of Fisher Price apps for infants and toddlers.⁴

...and increases as children get older

Data vary on screen time for preschoolers. But even the most conservative findings show that children between the ages of 2 and 5 average 2.2 hours per day.⁵ Other studies show that preschoolers spend as much as 4.1⁶ to 4.6 hours⁷ per day using screen media. As children grow older, screen time increases. Including when they're multitasking, 8- to 18-year-olds consume an average of 7 hours and 11 minutes of screen media per day—an increase of 2.5 hours in just 10 years.⁸

The professionals encountered by parents and expecting parents in medical, child care, and community settings are influenced and supported by professional and/or advocacy organizations. These organizations will prioritize reducing screen time if they (a) recognize its importance to healthy development and (b) understand that it will further their mission. Providing information, training and support on an organizational level is an efficient and sustainable means to ensure that screen-time reduction becomes a routine in professional policy and practice with children and families. This project develops the first model for achieving these changes. To date, research tells us that screen media are not an effective means of educating infants and toddlers, and may even be harmful. Experts agree, however, that some forms of electronic media may, when used thoughtfully, enhance learning for older children. But virtual experiences cannot replace the learning and the motor/brain development that result from activities using movement, interaction with people and nature, manipulation of concrete objects, and experiencing the world with all five senses, especially for very young children.

Fortunately, research shows that it is possible to reduce children’s screen exposure through carefully designed, systematic interventions at home, in school, and in child care settings. On a large scale, reducing screen time and promoting activities known to benefit development requires a systemic, evidence-based, concerted and collaborative effort by organizations and others serving young children, including identifying, validating, and sharing effective practices.

Kaiser Permanente’s Community Health Initiatives Grants Program has generously provided the Campaign for a Commercial-Free Childhood with funds to develop *Healthy Kids in a Digital World: A Strategic Plan to Reduce Screen Time for Children 0 to 5 Through Organizational Policy and Practice Change*. This plan will build a national network of organizations already committed to children’s wellbeing, develop a model to increase their proactive efforts to reduce screen time for children 0 to 5 in a culturally sensitive manner, and create policies and tools to increase their capacity to achieve that goal. The initiative will seek funding from a variety of sources to pilot community and organizational models, and measure their impact to validate effective practice.



Nurturing healthy brain development in early childhood

Discoveries in neuroscience make clear why the first years of life are so critical. Early experiences literally shape how the brain gets built. A strong foundation in the early years increases the probability of positive outcomes later. A weak foundation does just the opposite.⁹

Developing children thrive when they are talked to, read to, and played with. They need time for hands-on creative play, physically active play, and give-and-take interactions with other children and adults. They benefit from a connection with nature and opportunities to initiate explorations of their world.¹⁰

Introduction

Our future is linked inextricably to the health and wellbeing of our children. Unfortunately, ever-increasing early and extensive use of screen media—the ubiquitous television, portable digital devices, electronic games and other gadgets—can impede healthy child development. Nurturing children to become healthy adults who can deal productively with the complex challenges of tomorrow depends on large-scale, long-term solutions. One relatively simple and attainable solution is ensuring that children, in particular those ages 0 to 5, are introduced to screen media and technologies only when it is developmentally appropriate, and only in doses that promote healthy development.

With a grant from Kaiser Permanente’s Community Health Initiatives, the Campaign for a Commercial-Free Childhood (CCFC) has developed a strategic plan to reduce screen time for children 0 to 5 through organizational policy and practice change. This three-year plan will build a national network of organizations already committed to children’s wellbeing, develop a model to increase their proactive efforts to reduce early childhood screen time, and create policies and tools to increase their capacity and impact for that goal. The initiative will seek funding from a variety of sources to pilot the organizational and community models, and measure their impact to validate effective practice.

Because the need to reduce screen time is particularly urgent among children from low-income families, of whom a disproportionate number are African-American and Latino, we have focused primarily, but not exclusively, on organizations that serve these communities. Recognizing that families in these target communities may rely more heavily on screen use for a number of compelling reasons, we will include strategies for working within their particular needs—providing ideas and resources for safe and beneficial alternative activities to reduce some screen time hours as well as strategies for more thoughtful management of screen time.

Most of the organizations CCFC approached for this project were eager to work with us in creating and implementing a plan to reduce children’s screen time, and we are moving rapidly towards the possibility of pilot programs and evaluation. The project now has 11 founding partner organizations and an active advisory board of experts in child development, health care, education, and organizational change.

To date, research shows that screen media are not an effective means of educating infants and toddlers, and may even be harmful.¹¹

The Problem

Excessive Screen Time is Linked to Many Public Health and Learning Problems Facing Children Today

Studies on the impact of screen time on young children are still emerging. Despite the lack of robust study, however, many believe that children's future success depends on early exposure to screen technologies. Screen media is frequently marketed as educational for young children, yet these claims are often unsubstantiated by research. The newest technologies are often even more seductive and mesmerizing than television—making them attractive to harried parents hoping for an educational boost and/or needing to keep kids occupied.

Too much screen time can be harmful for children

Childhood obesity. Starting in early childhood and continuing as children grow, time with screen media is an important risk factor for childhood obesity in both low-risk and high-risk populations.¹² Increased BMI is linked to television viewing for toddlers¹³ and preschoolers.¹⁴ TV viewing among 2- to 4-year-old children predicts increased intake of fast food¹⁵ and other high-energy, low-nutrient foods.¹⁶ For each hour of television viewing per day, middle-school children consume an additional 167 calories.¹⁷ Bedroom televisions are associated with obesity risk in children of all ages.¹⁸

Time with video games is also linked to increased food intake¹⁹ and overweight.²⁰ And while active video games were once heralded as a means of encouraging exercise in children, those who own active video games, such as Nintendo Wii, do not show increased physical activity.²¹

Sleep disturbance. Research links hours of television with irregular sleep patterns in infants and toddlers²² and sleep disturbance in children 6 to 12.²³ In addition, time playing video games is linked to sleep disturbance in both school-age children and adolescents.²⁴

Learning, school performance, and peer relationships. Screen time for children of all ages, including time with television and video games, has been linked to problems with attention.²⁵ For children under 3, screen media are a poor tool for learning language and vocabulary,²⁶ and screen time has been linked to delayed language acquisition.²⁷ By the time children turn 10, every additional hour of television they watched as toddlers is associated with lower math and school achievement, reduced physical activity, and victimization by classmates.²⁸ Older children with 2 or more hours of daily screen time are more likely to have increased psychological difficulties, including hyperactivity, emotional and conduct problems, and difficulties with peers.²⁹

Young children in low-income communities spend more time overall with screen media than their wealthier peers.³⁰ They have higher rates of childhood obesity³¹ and poorer school performance,³² problems associated with excessive screen time.³³ A 2011 study found that children ages 0 to 8 from low-income families spend significantly more time with television and videos

Content is important, too

Research tells us that screen time has no real benefit for infants and toddlers.⁴² But for children over 3, some exposure to thoughtfully constructed media content can promote prosocial behaviors⁴³ and contribute to learning,⁴⁴ especially when a caring adult is actively involved.⁴⁵

Some screen content can also be harmful to children. Games and digital activities that limit children to a predetermined set of responses have been shown to diminish creativity.⁴⁶ Exposure to media violence is linked to aggression, desensitization to violence, and lack of empathy for victims.⁴⁷ Media violence is also associated with poor school performance.⁴⁸

than their wealthier peers.³⁴ And despite a significant gap in ownership of home computers and mobile devices, they spend about the same amount of time as other children playing games on digital devices and using computers for activities including homework or other educational pursuits.³⁵

There are many powerful reasons why families in low-income communities may rely more heavily on the use of screens. Given the potential harms of excessive screen time, however, it is crucial to develop effective, culturally sensitive strategies to reduce some of children's time with screens and to help families find safe and beneficial alternatives.

As new screen technologies become popular, they don't replace the old technologies; for children of all income levels, time spent with new media is added to time spent with older media. Video games and tablets, for instance, have not replaced television time—they have increased the amount of time children spend with screens.³⁶ As a result, they now spend unprecedented amounts of time with screen media, out of proportion to “unplugged” activities, and despite evidence that too much screen time can significantly compromise children's health and development. Research links excessive screen time to childhood obesity, sleep disturbance, poor school performance, negative social adjustment, and multiple other problems.³⁷

Research also suggests that screen time can be habit-forming.³⁸ The more time young children spend with screens, the more time they spend,³⁹ and the harder time they have turning them off,⁴⁰ when they become older. And time with screens takes children away from hands-on creative play and face time with caring adults,⁴¹ two activities known to be crucial to health, development and learning.

While research has shown a clear benefit to decreased screen time, and demonstrates that interventions can be successful, efforts to date have not produced widespread success in helping parents and caregivers set effective limits. Clearly more guidance, support and education are needed to help parents understand the need for balance. Children are growing up in a digital world, and without systematic and systemic interventions, it is likely that their screen time will continue to increase. Given the documented negative consequences of excessive screen time, and the disproportionate amount of time many young children spend with screens, it's clear that helping parents and caregivers set limits is important.

Children's screen time is increasing

As new screen technologies become popular, they don't replace the old old technologies; for children of all income levels, time spent with new media is added to time spent with older media. Video games and tablets, for instance, have not replaced television time—they have increased the amount of time children spend with screens.

Existing Policies and Programs

This is a particularly propitious moment for a strategic, concerted, coordinated effort to reduce children's screen time. The American Academy of Pediatrics has long been a strong advocate for limiting the amount of time children spend with screens. While recognizing that electronic media are pervasive, the AAP recommends discouraging screen time for children under 2 and less than 2 hours per day of quality screen time for older children (outside of schoolwork), as does the White House Task Force on Childhood Obesity, the National Resource Center for Health and Safety in Child Care and Early Education, and the CDC's state action guide for early care and education.

Reducing children's time with screens figures prominently into *Let's Move!*, a national public health campaign to address childhood obesity, initiated by First Lady Michelle Obama in 2010. Most recently, on June 8, 2011, *Let's Move! Child Care* was unveiled providing several important recommendations for child care providers to reduce children's screen time, including:

- No screen time for infants and toddlers under age 2;
- Strive for no more than 30 minutes per week of screen time for older children in child care settings; and
- Work with parents and caregivers to ensure children are exposed to no more than 1 to 2 hours of quality screen time per day.

The recently passed Healthy, Hunger-Free Kids Act requires the US Secretary of Agriculture to coordinate with the US Secretary of Health and Human Services (HHS) to encourage states to develop child care standards that address healthy eating, the amount of time children engage in physical activity, and the amount of time children spend with electronic screen media.

In Congress, Senator Mark Udall (D-Colorado) recently introduced the Healthy Kids from Day One Act (S.3298). The bill builds on the new prevention and wellness provisions of the Affordable Care Act. Its goal is to create three-year pilot programs in five states to encourage child care centers to develop obesity prevention programs targeted at children from birth to 5 years. States would work with the US HHS on approaches to help kids be more physically active, eat healthier, and spend less time engaging in sedentary activities like watching television or playing video games.

At least nine states include screen time limits in their child care licensure regulations;⁴⁹ five states have incorporated screen time standards into their Quality Rating and Improvement Systems (QRIS), a voluntary, comprehensive approach to improving the

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quality of early care and education programs by offering a variety of incentives for child care settings.⁵⁰

The Environment Rating Scales, the most widely used instrument for assessing quality in early child care and educational child care programs, includes time limits on “use of TV, video and/or computers” as one of its classroom quality indicators.⁵¹ Similarly, the 2011 version of “Caring for Our Children,” a collaborative project of the American Academy of Pediatrics, the American Public Health Association, and the National Resource Center for Health and Safety in Child Care and Early Education, has updated the sections on screen time for programs serving children from birth to 2.5 years of age.⁵²

Research shows that it is possible to reduce children’s screen time through systematic interventions at home, in school, and in child care settings.⁵³ The Appendix describes five successful interventions with young children.

Despite significant breakthroughs in public health policies, reducing screen time often remains a low priority for organizations serving children and families. Solving this problem—particularly in underserved communities—requires a systemic, evidenced-based, collaborative, and concerted effort, including identifying and sharing best practices.



Research shows the benefits of reducing children's screen time

- *Reducing screen time can help prevent childhood obesity.*⁵⁴
- *Children who spend less time watching television in their early years tend to do better in school, have a healthier diet, be more physically active, and be better able to engage in schoolwork in later elementary school.*⁵⁵
- *Television viewing at a young age is associated with later behavioral problems, but not if heavy viewing is discontinued before age 6.*⁵⁶
- *Limiting exposure to television during the first four years of life may decrease children's interest in it in later years.*⁵⁷

The Solution

A Strategic Plan to Help Key Organizations Increase the Priority of Reducing Screen Time for Children 0 to 5

Theory of Change

Because early childhood—beginning before birth—is a time of rapid brain development, it is a particularly potent time to influence children's growth and development. Potentially lifelong habits and behaviors are formed in the first few years of life. Also, in these early years parents have the most control over influences on their children and more contact with professionals who can influence child rearing practices.

The professionals encountered by parents and expecting parents in medical, child care, and community settings are, in turn, influenced and supported by professional and/or advocacy organizations. These organizations will prioritize reducing screen-time if they (a) recognize its importance to healthy development and (b) understand that it will further their mission. Providing information, training and support on an organizational level is an efficient and sustainable means to ensure that screen time reduction becomes routine in professional policy and practice with children and families. This project develops the first model for achieving these changes.

The Plan

Responding to the need for systemic change, CCFC has created a three-year strategic plan to reduce screen time for children 0 to 5 through organizational policy and practice change, with a special

Founding Partner Organizations

American Academy of Pediatrics, Council on Communications and Media
Harvard School of Public Health Prevention Research Center on Nutrition and Physical Activity
Jewish Community Centers Association
National Association of Community Health Centers
National Association of Early Childhood Teacher Educators
National Black Child Development Institute
National Head Start Association
National Women, Infants, and Children's Association
The Praxis Project
United Neighborhood Centers of America
Voices for America's Children

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Jane Healy, Ph.D. – Author, *Your Child’s Growing Mind: Brain Development and Learning from Birth to Adolescence*; *Endangered Minds: Why Children Don’t Think and What We Can Do About It*; *Failure to Connect: How Computers Affect Our Children’s Minds*

Lauren Hogan – Director of Public Policy, National Black Child Development Institute

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Makani Themba – Executive Director, Praxis Project

Yasmina Vinci – Executive Director, National Head Start Association

emphasis on children from low-income families. Our partners in creating this strategic plan include a mix of health, early childhood, and advocacy organizations whose members reach children and families in a variety of ways throughout the early years. We selected our partners based on the following criteria:

- The extent to which screen time reduction furthers the organization’s mission;
- The extent to which the organization affects the lives of children from low-income and minority communities;

- The extent to which the involvement of the organization can have an impact on reducing children’s screen time;
- The receptiveness of the organization to adopting new priorities and programs to further its mission; and
- The interest and support of influential people within the organization who share a strong interest in reducing children’s screen time.

In March 2012, CCFC gathered the leading executives of many of these organizations and a number of leading public health researchers and advocates in Boston for a one-day facilitated convening titled, “Reducing Children’s Screen Time: Organizational Policy and Practice Change.” The goal of the meeting was to gather ideas and suggestions about developing this plan and to engage those most interested in the plan’s implementation. Although most of these organizations don’t currently commit significant resources to realizing this goal, during the course of the day and in subsequent conversations, we heard tremendous enthusiasm for bringing increased attention to the need for screen-time reduction for young children. All of our partner organizations have expressed an eagerness to devote more resources to reducing children’s screen time.

CCFC will continue to develop these relationships and seek out additional partners.

Fortunately, research shows that it is possible to reduce children’s screen exposure through carefully designed, systematic interventions at home, in school, and in child care settings.



Goals, Strategies, and Tactics for Policy and Practice Change

The CCFC plan calls for strategies to help organizations work internally to raise awareness of the urgent need to reduce children’s screen time, develop necessary policies, foster interest and excitement in the process, and develop necessary implementation skills.

The model includes:

- Single presentations at conferences, workshops and board meetings;
- Live webinars;
- Multi-part trainings;
- Real-time and virtual modules that can be incorporated into existing trainings;
- Online continuing education modules;
- Coaching; and
- Consultation on policy development to strengthen local practice.

This effort puts what is best for children’s development front and center in all materials, trainings, and interventions. CCFC and our partners agree that some knowledge of early childhood development is essential to understanding why screen time should be limited.

Our partners have reminded us that “imparting information” without attention to context, emotional affect, engagement, cultural competence, trust, and a variety of other factors will doom any effort to bring professionals on board. Our trainings, tools, and materials must honor the values and principles of effective professional development and maximize the professionals’ sense of autonomy and competence in the context of the partner organizations and their professional cultures.

The tone and approach of all project presentations, trainings, and materials are vitally important. We know from the literature on adult learning, and from the colleagues we have consulted, that a strengths-based and

collaborative approach will be most successful. We also know that the most effective trainings are often peer-to-peer, culturally sensitive and work-culture specific.

Over the course of the project, we will evaluate what strategies are most attractive to which types of organizations and measure what works best. Organizations will have the option to participate in the projects that best suit their mission and constituencies. We will build on that knowledge to expand outreach to national organizations whose interests intersect with screen-time reduction.

The Timeline: Overview

The activities described above that have not already been achieved will take place over a three-year period, assuming successful fundraising. Below is an overview of these activities as we expect them to unfold.

Year 1: Laying the Groundwork

CCFC will develop introductory presentations for various stakeholder audiences; speak, along with allies, at regional and national conferences to increase awareness and support; and make presentations to organizational leadership and, when appropriate, consult with organizational leadership on the development of policies that will affect practice. We and our partners



will create and distribute information through organizations' communications vehicles, expand our partnership base, and work with partner organizations to develop and implement place-based pilot interventions in selected communities around the country.

Year 2: Deepening the Work

In Year 2, CCFC will continue to expand the partnership base and make presentations at conferences and meetings. We will evaluate results of Year 1 pilots and revise materials for dissemination based on our findings. We will disseminate these materials and begin to conduct trainings based on validated practices identified in Year 1. We will continue to distribute information through participating organizations' regular communications vehicles.

Year 3: Fruition

In Year 3, CCFC will continue to expand the partnership base. CCFC and its partners will report and disseminate results of the project through a variety of media. We will continue to provide training, disseminate materials, support organizations in their efforts, and evaluate results. The ultimate goal is to assure that the reduction of screen time has become embedded in the culture of these organizations.

Strategic Focus Areas and Detailed Plan

The following represents the formal articulation of our strategic plan. It is important to note that, as part of creating this plan, CCFC has unexpectedly already achieved the first two strategies identified.

Strategic Focus Area #1

Identify key organizations whose work affects children, with a special focus on children from low-income and underserved communities.

Long-term goal: A group of key organizations is identified as partners.

Tactics: Identify national and regional organizations working in a range of sectors including health, early childhood, education, and community development whose focus is on children from before birth to age 5. Organizations whose members run local chapters or affiliates, engage in advocacy, provide direct service, or provide professional development are the most desirable partners. Target organizations that have a particular focus on children from low-income communities and affect significant numbers of children, both directly and indirectly. Include organizations with a special focus on and relationships with African-American and Latino communities. Conduct interviews with key personnel to determine the level of organizational interest and the organization's characteristics for productive partnership in this effort.



Measurable objective: At least 15 organizations are approached about participation in the project. Of those, representatives from at least 10 are interviewed to gain a thorough understanding of their policies and practices, how information is disseminated to their staff and constituents, and how organizational change occurs.

This outcome has been achieved. Seventeen organizations were approached and representatives from 11 were interviewed.

Strategic Focus Area #2

Persuade key influencers in organizations identified for initial participation that reducing screen time is important and will further their organizational missions.

Long-term goal: Leaders of major organizations whose work affects children understand the importance of reducing screen time and the relationship between reducing screen time and their organizational mission. They commit their organizations to work with the project and to actively incorporate the goal of reducing screen time for children 0 to 5 into organizational policies and practices.

Tactics: Identify leaders in the target organizations able to influence organizational policies and practice. Convene a meeting of these leaders to discuss the importance of, and possibilities for, reducing screen time, and provide evidence-based arguments for the need to reduce screen time for children 0 to 5. Help leaders identify the relationship of reduced screen time to achievement of each organization's mission. Provide examples of successful interventions for reducing screen time.

Measurable objectives: Leaders from at least 10 organizations from the health, early childhood, education, and community development sectors commit to working toward incorporating reducing children's screen time into their organizations' policies and practices.

This objective has been achieved. To date, leaders from 11 organizations have made this commitment.

Having achieved the goals of the first two strategic focus areas, the plan continues with Strategic Focus Area #3.

Strategic Focus Area #3

For organizations that don't already promote reducing screen time, we will work with leaders to identify strategies for educating other staff and constituents in their organizations and professional communities about the importance of reducing screen time for children 0 to 5, its contribution to achieving their mission, and its attainability as a goal.

Long-term goal: Members of partner organizations effectively disseminate knowledge of the potential negative consequences of excessive screen time for children 0 to 5, persuade other decision-making or implementation staff within their organization and their professional communities that thoughtfully reducing children's screen time will further their mission, and persuade these colleagues that it is an achievable goal.

Tactics: Through interviews, identify the specific means by which each organization communicates with, and disseminates



information to, its staff and constituents (e.g. listservs, newsletters, presentations and/or workshops at national and regional conferences, fact sheets, video and phone conferences, and webinars). Help organizations develop and implement a dissemination plan based on their existing channels of communication.

Measurable objectives: At least seven partner organizations report that their staffs have embraced the need to reduce children's screen time and recognize its relationship to their own goals for the populations they serve. These organizations have developed the necessary supporting policies.

Strategic Focus Area #4

Work with each organization or cohort to develop action plans that incorporate reducing screen time into their policies and practice.

Long-term goal: Members and constituents of partner organizations have some familiarity with evidence-based data about the negative impact of excessive screen time and the developmental benefits of alternative activities. They begin to incorporate this knowledge in their practice as organizationally appropriate.

Tactics: Institute trainings, including those that train-the-trainer; initiate meetings and present at the national, regional, and local level; develop resources and tools appropriate to the organizational type and its audience; and help organizations develop outreach and communications plans to inform and support their constituents in reducing screen time for children 0 to 5 as appropriate to the organizations' communities and audiences.

Measurable objectives: At least five partner organizations report that their staffs or members have increased the priority of reducing early childhood screen time, actively incorporated this goal into their work, and support the development of policies and practices to support this goal.

Strategic Focus Area #5

Work with partner organizations to pilot and evaluate a place-based intervention using a multi-pronged, culturally sensitive, developmentally-appropriate approach to integrate screen-time reduction messages and interventions throughout early childhood.

Long-term goal: Organizations that influence early childhood care practice include systematic messages about, and concrete suggestions for, reducing children's screen time at home, in early childhood care and education, and in other settings. These organizations help parents and other child care providers in formal and informal settings know that screen-time reduction for children 0 to 5 creates positive results for long-term development.

Tactics: Expose parents to systematic screen-time reduction messages from a variety of trusted sources. These will incorporate activities across multiple sectors including OBGYN and pediatric care settings and other service providers, such as community health educators, child care providers, and early childhood educators. Select three communities where partner organizations have a strong presence. Work with representatives of these partner organizations to create culturally sensitive materials and organization-specific, place-based model interventions to reduce screen time for children 0 to 5 in health care, child care, early childhood education, and other community



settings. Implement previously developed organizational plans, communications plans, and other organization-appropriate interventions. Help build a model community of practice among organizations at this level to be extended geographically.

Potential settings and interventions include:

- OBGYN/prenatal education: information about the negative impact of excessive screen time and the benefits of hands-on play and face-to-face interactions with caring adults for infants and toddlers and recommended screen time practices for expecting parents.
- Pediatric care settings: as recommended by the AAP, counseling on home and child care environmental settings and screen time practices during scheduled well-visit appointments.
- Community health education practices: parent training and educational program to promote screen-free bedrooms and practices to support limits on screen time.
- Child care and early childhood education settings: implementation of policies, practices, curricula and parent engagement activities to promote age-appropriate limits on screen time.

Measurable Goals: Partner organizations have created strategic plans for helping parents and caretakers reduce screen time. They have piloted and evaluated interventions to test the effectiveness of their strategies. Screen-time exposure for children 0 to 5 is reduced by at least 25% in the target audiences of pilot community interventions.

Strategic Focus Area #6

Support organizations engaged in proactive efforts to include screen time limits in local, state, and national policies and standards affecting child care and early childhood settings.

Long-term goal: National, state, and local agencies responsible for standards and licensure requirements for child care and early childhood education will incorporate recommendations for screen-time limits for children 0 to 5.

Tactics: Reach out to organizations already committed to screen-time reduction. Provide draft language, negotiating strategies, and evidence-based background documents. Identify potentially important and sympathetic institutional decision-making targets, and develop samples and other tools to help organizations effectively advocate to incorporate screen-time limits in documents and legislation that impact early childhood care and education.

Measurable Goals: Seven states whose child care policies do not include limits on screen time have now done so.

Strategic Focus Area #7

Throughout this process we will identify funding sources to support the goals described above and develop a plan to sustain the effort.

Long-term goal: Obtain sustainable funding to support increased knowledge of the impact of screen time on young children, effective models of organizational change for screen-time reduction, and interventions to achieve reduction of screen time for children 0 to 5.

Tactics: Work with partner organizations, known funders with an interest in early childhood wellbeing, and the Foundation Center to identify potential funding sources. Develop proposal templates for partner organizations and proposals for CCFC's extended support of the goals of this initiative.

Measurable objectives: One or more funding sources have committed resources to implement the three-year plan and sustain this effort in the long term.

On a large scale, reducing screen time and promoting activities known to benefit development requires a systemic, evidence-based, concerted and collaborative effort by organizations and others serving young children, including identifying, validating, and sharing effective practices.

Conclusion

The excessive time many young children spend with screen media has potentially negative consequences for their health and wellbeing. While recognizing that some media content may be useful in teaching preschoolers, it is generally agreed that hands-on experience is best for early learning and development and that reducing young children's overall screen time is both a crucial and attainable goal.

Through implementation of this three-year strategic plan, CCFC and its partners will help key organizations serving young children to adopt policies and practices designed to reduce screen time and promote activities known to be beneficial to children's health, development, and learning.

Seven strategies will help us accomplish our mission:

1. Identify key organizations whose work affects children, with a special focus on children from low-income and underserved communities;
2. Persuade key influencers in organizations identified for initial participation that reducing screen time is important and will further their organizational missions;
3. Work with leaders of organizations not already addressing screen time to identify strategies for convincing other staff in their organizations and professional communities of the importance of reducing screen time for children 0 to 5, its contribution to achieving their mission, and that it is attainable;
4. Work with each organization or cohort of similar organizations to develop individual organizational action plans to enable members to raise the priority of reducing early childhood screen time and to incorporate reducing screen time into their practice;
5. Work with potential pilot partner organizations to implement and evaluate the impact of a place-based intervention using a multi-pronged approach to integrate screen-time reduction messages and interventions throughout early childhood;
6. Support organizations engaged in proactive efforts to include screen-time limits in local, state, and national policies and standards affecting child care and early childhood settings;
7. Identify funding sources to support the focuses above and develop a plan to sustain this effort.

Appendix

Evidence-based Approaches to Reducing Children's Screen Time

Obesity Prevention in Child Care⁵⁸

Seventy-seven children ages 2.6 through 5.5 years in 16 preschool and/or child care centers in rural upstate New York received a seven-session program designed to reduce television viewing as part of a health promotion curriculum, including parent education. Before the intervention, the intervention and control groups viewed 11.9 and 14.0 hours per week of television and videos, respectively. Afterward, children in the intervention group decreased their television/video viewing by 3.1 hours per week, whereas children in the control group increased their viewing by 1.6 hours per week. The percentage of children watching television/videos more than 2 hours per day also decreased significantly from 33% to 18% among the intervention group.

An Australian Community-wide Intervention Program⁵⁹

This study focused on 1,040 Australian children ages 0 to 5 in the city of Geelong. Community capacity building and environmental (political, sociocultural, and physical) changes were implemented to increase healthy eating and active play in early childhood care and educational settings. The intervention included a curriculum in child care settings and preschools, teacher training, parent education, and a public education campaign. At follow up, screen media was used significantly less in the intervention group than in the control group.

Obesity Prevention Effectiveness Trial⁶⁰

Children ages 3 to 5 in 18 Head Start programs administered by the Chicago Public Schools were involved in a 14-week weight-loss curriculum that included a screen-time reduction component. The curriculum included parent education. Children participating in the intervention decreased their screen time by an average of 27.8 minutes per day.

Statewide Intervention to Reduce Television Viewing in WIC Clients⁶¹

In Washington State, 10,000 WIC clients participated in an intervention to reduce their children's viewing to less than 2 hours a day. After parent training, printed handouts, and exposure to posters in clinics, the number of children watching less than 2 hours a day increased from 64.2% to 70.5%.

Screen-time Reduction in Child Care Settings (Preliminary Results)⁶²

Training on screen-time reduction for registered family child care providers was developed following recommendations from a 2010 assessment of child care environments. A coalition of community organizations worked with Child Care Resource & Referral in Portland, Oregon, to provide a collaborative screen-time reduction project with seven registered family child care providers. Child care providers were engaged through a combination of information sharing, best practice training, on-site individual coaching, assistance with policy creation, financial assistance with materials needed to reduce the amount of screen time exposure, and focus group activities.

Although pre- and post- self-assessment data is not yet available, comments from participants demonstrate a shift in attitude as well as concrete shifts in behaviors regarding screen time. Participants described noticing a link between screen time and the behavior of children in their care and talked about their new awareness that screen time in care on top of screen time at home is excessive. Caretakers described their own behavior changes, including creating a policy about screen time, discussing screen time in parent interviews, providing alternatives for children and modeling for parents, and including their site's limits on screen time in their marketing.

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Campaign for a Commercial-Free Childhood

The Campaign for a Commercial-Free Childhood supports parents' efforts to raise healthy families by limiting commercial access to children and ending the exploitive practice of child-targeted marketing. CCFC is home to Screen-Free Week, the national celebration where children, families, and whole communities turn off screens and turn on life. In working for the rights of children to grow up—and the freedom of parents to raise them—without being undermined by corporate interests, CCFC promotes a more democratic and sustainable world. For more information, visit www.commercialfreechildhood.org.

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