

The Use of Screens in the Context of the COVID-19 Pandemic – Some Guidelines

May 27, 2020

Notice

This document was drafted in response to a request made in the context of the COVID-19 public health emergency. Produced in a short period of time and based on knowledge resulting from a quick search and summarized and non-exhaustive review of the scientific and grey literature available, the findings presented in this document may need to be revised depending on the evolution of scientific knowledge related to the current pandemic.

Summary

Following a request from the Ministère de la Santé et des Services sociaux, this document aims to review the knowledge and recommendations surrounding the use of screens by children and young people and to propose orientations with regard to the main messages that should be conveyed when raising public awareness about the risks associated with the overuse of screens in the context of a pandemic. Particular attention is placed on the effects of screens on young people, given that they are increasingly exposed to them in their various living environments and that they are the target of most of the existing recommendations.

Key messages

- ▶ Information and communication technologies have become ubiquitous in Quebec society. Exposure to screens begins at an increasingly early age and children and adolescents use them both at home and at school, for educational and recreational purposes.
- ▶ Despite the usefulness and undeniable beneficial effects of screens, their excessive use is associated with numerous impacts on the physical, developmental, and psychosocial health of children and adolescents. Some documented risks include: physical inactivity, obesity, sleep disorders, eye problems, social isolation, conduct and emotional disorders, relationship problems, language delays, attention disorders, and educational difficulties.
- ▶ Due to the COVID-19 pandemic, physical distancing measures have had to be put in place by governments. Lockdowns, working from home, school closures, and bans on gatherings and activities outside the home have all contributed to increased screen time among families.
- ▶ Although screens facilitate the pursuit of studies and work, offer a variety of digital entertainment, and help maintain family and social ties during the health crisis, their risks remain present. Consequently, several health organizations and associations have issued recommendations to regulate the use of screens among youth and thus reduce the associated risks, which could be exacerbated by the increased use of screens in the context of a pandemic.

- ▶ To cope with the “new normal” in terms of screen use, the key elements to remember in light of these recommendations are:
 - ▶ Even if the time devoted to screens is increasing, it is important to preserve in children and adolescents’ daily routine the activities that are necessary for their healthy development.
 - ▶ Parents should remain vigilant about the content to which their children are exposed and supervise the younger ones in particular, so that screen time remains a positive experience.
 - ▶ Parental supervision should be defined according to the age and abilities of the child.
 - ▶ A parent-child agreement regarding the use of screens should be established. This agreement must recognize the temporary and exceptional nature of the pandemic situation.

Context

The use of information and communication technologies (ICT) has grown considerably in recent decades in all industrialized countries. The usefulness and beneficial effects of ICT in different areas, such as work, education, health, and leisure, are undeniable. In the context of a pandemic, this is even more true: screens are essential for working from home, for education, for staying informed, and for maintaining social relations. However, the excessive use of screens has significant negative impacts on health. How then can we continue our activities and those of our children in the context of a pandemic while mitigating the negative effects of screens?

At the request of the Ministère de la Santé et des Services sociaux, this document has been produced to propose guidelines regarding the main messages that should be conveyed in order to raise public awareness about the risks of overusing screens in the context of a pandemic. After a brief description of the uses of screens in Quebec, the main associated health risks that have been documented in children and adolescents will be presented, followed by recommendations by age group issued by different health organizations. The changes observed in the use of screens during the COVID-19 pandemic will then be discussed, based on the available data. Finally, some guidelines for reducing the harmful effects of overexposure to screens in the context of a pandemic will be presented, as well as some available resources. Particular attention is placed on the effects of screens on young people, given that they are increasingly exposed to them in their various living environments and that they are the target of most of the existing recommendations.

The place of screens in our society

In 2019, the vast majority of adults in Quebec (95%) owned at least one electronic device (e.g., 81% had a laptop or desktop computer, 77% a smartphone, and 55% a tablet) and families with children were more likely to own video game consoles, smart TVs, or media players⁽¹⁾. Furthermore, Quebec households are increasingly connected, with the home internet connection rate rising from 73% in 2009 to 93% in 2019⁽¹⁾. Due to the ubiquity of electronic devices and media, exposure to screens begins at an increasingly early age. Screens are part of the daily lives of children and adolescents, who use them both at home and at school and for educational and leisure purposes. According to a recent survey conducted among Quebec parents on the screen uses of their children aged 6 to 17, 96% of them use one or more electronic devices at home or elsewhere, the tablet being the most common device⁽²⁾. In general, screens are used more by youth aged 13 to 17 than by those aged 6 to 12, and some devices, including video game consoles, are used more by boys than by girls⁽²⁾.

For the purposes of this document, screens include any electronic device that provides access to online or offline content, whether used for recreational, school, work, or utility purposes, e.g., television, computer, smartphone, tablet, or video game console.

According to the World Health Organization (WHO), the excessive use of screens has significant negative impacts on public health⁽³⁾. These impacts include consequences for physical health such as physical inactivity and obesity, sleep disorders, musculoskeletal disorders, vision and hearing problems, as well as the risk of accidents, injuries, and infections. They also include consequences for psychosocial health, including harassment and cyberbullying, social withdrawal or isolation, aggressive behaviour, risky sexual behaviour, as well as family problems and difficulties at school or work⁽³⁾.

Various health organizations and associations around the world have developed recommendations to regulate the use of screens by young people in order to prevent the associated risks. This is the case of the Canadian Paediatric Society^(4,5), the American Academy of Pediatrics^(6,7), the Académie des sciences, the National Academy of Medicine and the Académie des technologies en France⁽⁸⁾, and the WHO⁽⁹⁾, to name a few. The recommendations are generally broken down by age, proposing time limits and supervision adapted to the level of maturity and development of the young person. In the majority of cases, the recommendations are aimed at parents, suggesting that the use of screens should be supervised in the family environment.

Screen risks and recommendations for young children, school-aged children, and adolescents

The Canadian Paediatric Society has reviewed the evidence for associations between screen use and various physical, psychosocial, and developmental health indicators of young children aged 0 to 5 years⁽⁴⁾, as well as school-aged children (5–12 years old), and teenagers (up to 19 years old)⁽⁵⁾. The main identified risks associated with the exposure and use of screens are presented below, followed by the recommendations that have been set by age group. However, it should be kept in mind that these risks may vary depending on the context of use (e.g., active or passive), the frequency and duration of use, as well as the content viewed. Although the majority of studies reveal links and associations, it remains difficult to establish direct causality.

Young children aged 0 to 5 years

Paying attention to this age group is important because early experiences are critical in establishing healthy lifestyle habits, and overexposure to screens can lead to overuse later on⁽⁴⁾.

Risks for physical health	Risks for psychosocial health	Risks for developmental health
<ul style="list-style-type: none"> ▶ Poor eating habits. ▶ Overweight status that can be maintained over the course of a life. ▶ Reduction in the duration and quality of sleep. 	<ul style="list-style-type: none"> ▶ Increases likelihood of victimization, social isolation, proactive aggression, and antisocial behaviours in adolescence. ▶ Decreases ability to regulate behaviour. 	<ul style="list-style-type: none"> ▶ Language delays and attention disorders. ▶ Hinders cognitive development and the development of executive functions (e.g., inhibition, planning). ▶ Reduces short-term memory and early math and reading skills. ▶ Distracts the child from his or her games or interactions with parents.

Parental use of screens can also lead to consequences for the psychosocial development of young children⁽⁴⁾, in particular:

- ▶ by reducing face-to-face contact, which represents more enriched learning opportunities;
- ▶ by increasing negative exchanges or aggressive parental responses to inappropriate behaviour in the child.

Faced with these findings, and in order to promote healthy development in young children, the Canadian Paediatric Society has established four principles, intended for parents and health professionals, which should guide the supervision of screen use⁽⁴⁾:

1. **Minimize** screen time (no exposure for children under the age of two and less than an hour a day for children aged 2 to 5) and maintain periods without any use, especially before bedtime.
2. **Mitigate** risk by being present and by monitoring content;
3. **Be mindful** to the use of screens so that they do not replace real, dynamic interactions with a caring adult, which remain the best source for learning and development;
4. **Adults should model healthy screen use** by, for instance, replacing screen time with other activities such as reading or playing outside, or by turning off devices during family time.

School-age children and adolescents

Risks for physical health	Risks for developmental and psychosocial health	
Children/adolescents (5–19 years old)	Children (5–12 years old)	Adolescents (up to 19 years old)
<ul style="list-style-type: none"> ▶ Decreased duration and quality of sleep, which affects learning, memory, mood, and behaviour in young people. ▶ Increased physical inactivity, increased risk of obesity, and development of cardiometabolic diseases. ▶ Decreased time spent in physical activity. ▶ Presence of eye problems, headaches, and fatigue. ▶ Presence of repetitive strain injuries and musculoskeletal disorders. ▶ Accidents due to texting while driving. 	<ul style="list-style-type: none"> ▶ Exposure to inappropriate content. ▶ Decreased opportunities for learning, playing, and interacting with family members. ▶ Development of conduct disorders. ▶ Presence of symptoms of depression. ▶ Simultaneous use of multiple screen-enabled devices, known as “multitasking”, can affect learning and academic achievement (e.g., reading, problem solving). ▶ Social inequalities associated with differing access to quality learning resources and the devices to access them. 	<ul style="list-style-type: none"> ▶ Anxiety related to body image and eating disorders. ▶ Feelings of depression. ▶ Conduct or emotional disorders, hyperactivity, and relationship problems. ▶ Online risk-taking (e.g., talking to strangers, disclosing personal information). ▶ Eroded family connectedness due to lack of family time. ▶ Multitasking impairs certain learning abilities (attention, memory) and academic results, and is associated with increased impulsivity.

It is important to note that harmful behaviours online, such as sexting or cyberbullying, were not included in the review conducted by the Canadian Paediatric Society⁽⁵⁾. However, spending more time on the internet could make children and adolescents more vulnerable to various risks, including predation and online sexual exploitation, cyberbullying, and sharing images of a sexual nature⁽¹⁰⁾.

To support the healthy development of children and adolescents, the Canadian Paediatric Society invites clinicians to guide families according to four principles⁽⁶⁾:

1. **Manage** the use of screens by limiting time and content, supervising uses to guarantee security (passwords, parental controls, etc.), and raising awareness of acceptable and unacceptable uses online;
2. Encourage **meaningful** screen use: ensure healthy lifestyle habits; favour educational content and on-screen activities that are active or social; encourage parental presence and participation in a child’s screen-based activities; equip the child or adolescent to recognize problematic content or behaviours;

3. **Model healthy screen use:** encourage parents to self-assess their screen habits; encourage family screen-free time (e.g., mealtimes); remind people of the dangers of texting and wearing headphones while driving; avoid screens in the bedroom and one hour before bedtime; turn off screens when not in use;
4. **Monitor for signs of problematic use:** monitor whether screen use is interfering with healthy lifestyle habits (sleep, social interactions, physical activity) or whether the young person exhibits boredom and displeasure in the absence of a screen, strong opposition to screen time limits, or negative emotions after using screens.

The uses of screens during the COVID-19 pandemic

The COVID-19 pandemic has disrupted the lives of individuals in many countries throughout the world⁽¹¹⁾. Physical distancing measures had to be put in place by governments to prevent the spread of the novel coronavirus⁽¹²⁻¹⁵⁾. This forced a large part of the population to remain locked down at home for several weeks.

While the lockdown has disrupted many lifestyles, it has also increased the consumption of digital entertainment in our society. According to a survey conducted by Statistics Canada between March 29 and April 3, 2020, three-quarters of Canadians aged 15 to 49 spent more time on the internet, 66% of them spent more time watching television, and 35% of them spent more time playing video games, compared to before the health crisis⁽¹⁶⁾. This increased screen time in adults could influence the screen time of children and adolescents.

Globally, the closure of daycare centres and schools has forced more than 1.5 billion children and adolescents to stay at home, contributing to an increase in screen time among youth, for recreational purposes as well as for educational purposes when distance learning is possible⁽¹⁷⁻¹⁹⁾. According to a study carried out in China with 2,500 children and adolescents aged 6 to 17, total screen time (recreational and educational) increased significantly between January and March 2020, i.e., between the declaration of the public health emergency and during the pandemic⁽²⁰⁾. Total screen time passed from 610 to 2,340 minutes per week, an increase of nearly 30 hours per week. Total recreational screen time passed from 170 to 450 minutes per week, an increase of nearly 5 hours per week⁽²⁰⁾. In Canada, a study among young people aged 10 to 17 shows that the most popular activities they engaged in during the lockdown were those using electronic devices, namely: watching television, movies, or series (activity reported by 88% of them), playing video games (74%), calling or texting friends (65%), and spending time on social media (58%)⁽²¹⁾. Other activities, such as walking, reading, drawing, or listening to music, seemed to be less popular among young Canadians in the context of the lockdown⁽²¹⁾.

The ban on gatherings and activities outside the home has also contributed to an increase in screen time for families. The use of videoconferencing apps has become one of the only ways to maintain family and social ties and to avoid isolation⁽²²⁾. Furthermore, the governments of various countries have recommended that employers favour working from home, when possible, as another physical distancing measure^(23,24). This situation brings new challenges for employers and, more particularly, for parents. Having to combine their professional and parental responsibilities may have led parents to use screens to keep their children occupied. This activity seems to require little supervision, but could over time erode usual parenting rules and parenting styles⁽²⁵⁾.

In short, ICTs undeniably contribute to the pursuit of studies and work, and offer a variety of leisure activities for individuals who must respect physical distancing measures due to the current health crisis. However, the risks associated with screens remain present and have potentially risen through the increased use of screens during the COVID-19 pandemic.

Some ways to reduce the harmful effects of screens in the context of a pandemic

Faced with the current COVID-19 situation and concerns about the increase in screen time in society, several organizations and health associations have issued recommendations to regulate the use of digital devices and reduce the harmful effects screens have on public health, and more particularly on children and youth during the lockdown. UNICEF⁽²⁶⁾, the American Academy of Pediatrics⁽²⁷⁾, and the American Academy of Child and Adolescent Psychiatry⁽²⁸⁾ remind us that an increase in screen use is inevitable, hence the importance not only of limiting uses, but also of making them positive and constructive. These associations suggest that parents:

- ▶ structure the use of screens by establishing a plan and schedule for their use. This plan should be made jointly with the children, according to their abilities and age. For example, young children will need more supervision than adolescents, who may have more autonomy in establishing their own uses;
- ▶ should not let screen use interfere with basic needs, such as sleeping or meals;
- ▶ maintain a daily routine and screen-free family activities, such as board games and walking outdoors;
- ▶ monitor the content viewed by children and youth and encourage them to think critically about it;
- ▶ keep up to date with educational activities and homework and, if necessary, contact teachers;
- ▶ use social media to stay connected to friends and family;
- ▶ use media as a family experience and make it a common activity, for example by watching a film together;
- ▶ when possible, promote uses of screens that include physical activity (e.g., active video games or virtual exercise sessions);
- ▶ adjust one's workload and be vigilant about one's own media use and consumption, as regular exposure to media coverage could cause stress in children and youth;
- ▶ avoid blaming children and youth, or oneself, for the extra time devoted to screens.

In conclusion, to cope with the “new normal” in terms of screen use, the key elements to remember in light of these recommendations are:

- ▶ Even if the time devoted to screens is increasing, it is important to preserve in the daily routine of children and adolescents the activities necessary for their healthy development, such as sleep, physical activity, and social and family interactions.
- ▶ Parents should remain vigilant about the content to which their children are exposed and supervise particularly the younger ones, so that screen time remains a positive experience.
- ▶ Parental supervision should be defined according to the age and abilities of the child.
- ▶ A parent-child agreement regarding the use of screens should be established. This agreement must recognize the temporary and exceptional nature of the pandemic situation.

Available resources

- ▶ WHO recommendations to protect one's mental health
- ▶ UNICEF tips for safe media use, a parent's guide to helping children through the pandemic, and an expert perspective on screen time in the context of COVID-19
- ▶ Conseils du Ministère de la Santé et des Services sociaux pour l'encadrement des enfants à la maison [Advice from the Ministère de la Santé et des Services sociaux for the supervision of children at home] (in French)
- ▶ Ressources de Habilo Médias (informations, jeux, activités) pour les parents et les éducateurs pendant la COVID-19 [Resources from Habilo Médias (information, games, activities) for parents and educators during COVID-19] (in French)
- ▶ Advice for Parents from the American Academy of Pediatrics
- ▶ Advice for parents from Common Sense Media
- ▶ Campagne PAUSE de CAPSANA [CAPSANA's PAUSE campaign] (in French)
- ▶ [Tips for choosing sources of information from the Mental Health Commission of Canada](#)
- ▶ Collectif surexposition écrans (COSE) – Confinement et temps d'écrans : comment trouvez le juste milieu [Overexposure to Screens Collective (COSE) – Lockdown and Screen Time: How to Find the Right Balance] (in French)

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The Use of Screens in the Context of the COVID-19 Pandemic – Some Guidelines and Social Cohesion

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