PSHE talks for schools by Dr Aric Sigman

The Facts about Alcohol
A new approach to alcohol education based on Dr Sigman's book Alcohol Nation: How to protect our children from today's drinking culture

Managing Screen Time and Screen Dependency
Pupils of all ages are watching more recreational screen media than ever before and many are finding it difficult to stop. But ICT or screen media should be a tool, not a burden or health risk, explains Dr Sigman.

Body Image and the Pressures of Physical Appearance
Dr Sigman advises on how to prevent body dissatisfaction and eating disorders in both girls and boys, based on his biology paper 'A Source of Thinspiration? - the biological landscape of media, body image and dieting' and his new book on the subject.

Parenting the Demanding Generation
Based on his book The Spoilt Generation, Dr Sigman explains how and why authoritative parenting leads to better-adjusted and more competent children, the importance of authority and boundaries in child development, and standing up to demanding children.

Talks for all year groups both single sex and co-ed, parents and teachers
www.aricsigman.com
MANAGING DISCRETIONARY SCREEN TIME

Not for publication, Internet or general public dissemination

Dr Aric Sigman

The recent briefing report by Public Health England recommends ‘rationing children’s non-homework screen time’. The NHS advises parents to ‘Decrease screen time … Drag the kids away from the TV, computer and games console’. The Chief Medical Officer in her Annual Report: Our Children Deserve Better: Prevention Pays (2013) has a dedicated section entitled:

‘Screen time: Evidence suggests that extended screen time per day has an effect on health which is independent of the sedentary aspect … Mechanisms to reduce this effect include age-specific maximum times set by parents. Source: Sigman, A. Time for a view on screen time. Arch Dis Child 2012;97:11 935-942.’

The US Department of Health (2016) considers discretionary screen time (DST) as one of its key national ‘health improvement priorities’ and a key ‘disease prevention objective’, and along with the Australian Department of Health, and the American Academy of Pediatrics (AAP) strongly advises parents to limit out of school non-homework discretionary ST to a maximum of 2 hours per day for children aged 2 - 18yrs.

The associations between recreational ST and health occur generally beyond 2 hours per day. Yet the average child is exposed to three times this amount. Therefore, reducing total daily ST for children could provide significant advantages for children’s health and well-being. Although popular phrases such as ‘striking a balance’ or ‘everything in moderation’ may sound reassuringly sensible, one of the main obstacles to reducing our children’s ST is the vagueness of the terms ‘moderation’ and ‘excessive’. Such terms are now being defined by considering ST as simply another form of consumption measured in units of hours/minutes consumed per day: a simple public health concept to grasp and act upon.

There is good evidence that children’s ST can be reduced through parental measures. Considering the existing empirical research and position of medical bodies and governments in other countries, the following guidance on recreational ST (e.g., before and after school) are only ideals for parents. Even if they are not adhered to, it is important to establish such ideals as a reference point to work from.

- Where possible, encourage no screens in children’s bedrooms.
- Parents of younger children should be advised to choose screen material with a slower pace, less novelty and more of a single narrative quality.
- Parents should be encouraged to monitor and control the time their children spend on hand-held computer games/media/Smartphones with justification that ST is now officially a health and development issue not merely a lifestyle/cultural one.
- Multitasking with different devices or windows open while studying should be strongly discouraged.
• Ideal discretionary ST limits are:
  – 3–7 years: 0.5–1 h/day
  – 7–12 years: 1 h
  – 12–15 years: 1.5 h
  – 16+ years: 2 h

Parents must take into consideration how much time their children are spending doing homework on computers before coming to a decision on discretionary ST for their child.

• Parents should be aware of the role modelling influence their own viewing habits may have on their children along with the potential influence of background or ‘passive’ media.
• If challenged by their children, parents can justify their own adult screen time because of the simple fact that parents’ brains and bodies are not still developing – they are fully formed and screen time does not have the same effects on them.
• Schools can feel justified in adopting a guidance position on the amount of recreational screen time children spend out of school and communicate this to pupils and parents. Home life affects academic achievement.
• Where possible IT Departments can advise parents on reducing Internet access and closing down functions on various devices.

ADVICE FOR CHILDREN
• AIM FOR 2HRS PER DAY MAX OF SCREEN ENTERTAINMENT
• TAKE BREAKS EVERY HALF HOUR - EVEN FOR HOMEWORK
• PROTECT STUDY TIME –
  - do one thing at a time
  - switch other devices/social media alerts off
  - anti-distraction apps: SelfControl, Freedom
• HAVE A NO-SCREEN GAP BEFORE SLEEP (EXCEPT KINDLE E-BOOKS)

ADVICE FOR PARENTS
• REDUCE CHILD’S EXPOSURE
• ESTABLISH RULES/LIMITS
• CONSIDER ACCESS/AVAILABILITY e.g. bedroom
• CONSIDER BLUE LIGHT/BEDROOM USE (GLASSES/FILTERS)
• BACKGROUND NOISE: PASSIVE VIEWING
• MONITOR USE
• PARENTAL ROLE MODELLING
• SCREEN-FREE DINNERS
  - tech device ‘basket’
• TURN OFF WIFI AT NIGHT/SWITCH TO ETHERNET
• STOP PAYING PHONE RENT
ALTERNATIVES TO SCREEN TIME

- PHYSICAL ACTIVITY
- SOCIAL ACTIVITY
- HOBBIES
- ‘DOPAMINE-PRODUCING’ PASTIMES

Further Reading


Dr Aric Sigman PSHE Talks

The Facts about Alcohol

Body Image and Pressures of Physical Appearance

Parenting the Demanding Generation

Electronic Media Today: Managing Screen Time Preventing Screen Dependency

Further information: www.aricsigman.com

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Wired on technology

Today’s children have an ‘unhealthy’ dependency on electronic media. Dr Aric Sigman says pull the plug

References
Sigman, A. The Impact of Screen Media on Children: A Eurovision for Parliament (2012)
Cloud, C. et al. eds. Improving the Quality of Childhood in Europe, Volume 3 (2012)
European Parliament Working Group on the Quality of Childhood in the European Union

TEACHERS HAVE been bedazzled by promises that ICT in the classroom and home will enhance learning and prepare children for the future. However, professionals in the field of adolescent health are becoming concerned by an unforeseen side-effect of ICT: technology overuse and dependency.

The recent international study The World Unplugged asked university students in 10 countries to abstain from using electronic media, excluding landline phones, for a full day. A clear majority in every country failed. The researchers noted that many pupils employed the rhetoric of addiction, dependency and depression when reporting their reactions to the lack of media, with many also reporting mental and physical symptoms of distress. In April, the Turkish Ministry of National Education hosted the 1st International Congress of Technology Addiction in Istanbul.

While scientists disentangle the semantics of “addiction”, “dependence” and “habit formation”, one thing is clear: whether children are formally “addicted” to screen technology or not, many of them overuse technology and have developed an unhealthy dependency on it. This is potentially bad for their health, well-being and education.

Teachers have been led to believe that if children are only viewing “educational” or “appropriate” material on screen, they won’t be subject to the negative effects of too much screen time. This is untrue. While purveyors of software and technology and the researchers funded by them stress the distinctions between various products, the child’s brain and body do not: heavy exposure to the medium has effects that transcend the quality of the message on the screen.

High levels of early screen time appear to be more likely to lead to a long-term lifestyle of the same, which is considered an independent risk factor for disease, irrespective of the educational value or appropriate or inappropriate content of what is on the screen.

Level of exposure
The US Department of Health cites reducing screen time as one of its key “health improvement priorities”; the Australian Department of Health and Ageing and the American Academy of Pediatrics and others all advise parents to limit out-of-school discretionary screen time to a maximum of two hours per day for children aged 2-18. In the UK, by the age of 10 children have regular access to an average of five different screens at home, regularly engaging in two or more forms of screen-viewing at the same time. Children of all ages are watching more screen media than ever before.

Altering the brain’s reward circuitry
The neurotransmitter dopamine is released in response to the novelty and stimulation of what is seen on the screen, so increases quickly in the brain while the child is playing computer games. But dopamine is also a key component of the brain’s reward system and heavily implicated in the formation and maintenance of addictions. While genes play a role in the way dopamine is produced or used, thereby influencing a person’s susceptibility to dependency or addiction, there are now concerns that extensive computer game playing among children may lead to long-term changes in the brain’s reward circuitry that resemble the effects of substance dependence.

Managing screen time
ICT should be a tool, not a burden or health risk. Excessive screen time in the home affects the child in school and so a joined-up approach is necessary to get a handle on the excessive levels of discretionary screen time children are currently enjoying. By the age of 7 the average child born today will have watched the equivalent of a full year of screen media. By the age of 80 they will have spent 17.6 years doing the same. Someone must take responsibility for these numbers. Schools must consider how much screen time is necessary.

Preventing dependency
There are many contributory factors to a child’s total daily exposure to, or “consumption of”, technology: their age, frequency of use, amount of exposure, ease of access and the effects of parental role-modelling. All are factors that contribute to the risk of dependent overuse of technology. Preventing or reducing this risk now requires a reduction in the level of total screen exposure.

There is good evidence that children’s screen time can be reduced through simple, obvious measures: raising parental awareness, child education and school-based education for pupils and teachers. Parents should also reduce screen time and introduce limits: it is common sense.

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