

Behavioral Interventions that Aim to Reduce Recreational Sedentary Screen Time among Children



Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force (Task Force) recommends behavioral interventions to reduce recreational sedentary screen time among children aged 13 years and younger based on strong evidence of effectiveness.

Facts about Screen Time and Children

Approximately 17% of all US children and adolescents aged 2-19 years are obese.¹

Sedentary time spent with screen media, especially TV viewing, is associated with obesity among children and adolescents.²

The American Academy of Pediatrics (AAP) recommends no more than 2 hours per day of screen time for children 2 years and older and none for children younger than 2 years.³

What are Behavioral Screen Time Interventions?

Behavioral screen time interventions aim to reduce recreational, not school-related or work-related, sedentary screen time by teaching behavioral self-management skills to initiate or maintain behavior change.

There are two types of behavioral screen time interventions

1. Screen-time-only interventions, which only focus on reducing recreational sedentary screen time.
2. Screen-time-plus interventions, which focus on reducing recreational sedentary screen time and increasing physical activity and/or improving diet.

Both screen-time-only and screen-time-plus interventions teach behavioral self-management skills through one or more of the following components: classroom-based education, tracking and monitoring, coaching or counseling sessions, and family-based or peer social support.

Major Findings

Behavioral screen time interventions are effective at improving or maintaining children's weight. In addition, there were small improvements in diet and increasing physical activity.

When screen-time-only interventions were used, screen time decreased by a median of 82.2 minutes per day.

For screen-time-plus interventions, screen time decreased by a median of 21.6 minutes per day.

Learn More

Summary of Evidence and Task Force Finding
www.thecommunityguide.org/obesity/behavioral.html

CDC, Childhood Overweight and Obesity
www.cdc.gov/obesity/childhood/index.html

Mobilizing Funding Support to Battle Overweight and Obesity
www.thecommunityguide.org/CG-in-Action/Obesity-MD.pdf

The Community Preventive Service Task Force (Task Force) is an independent, nonfederal, unpaid body of public health and prevention experts. It is congressionally mandated to identify community preventive programs, services, and policies that save American lives and dollars, increase longevity, and improve quality of life. The Community Guide is a collection of all the evidence-based findings and recommendations of this Task Force. Find more information at www.thecommunityguide.org.

The Centers for Disease Control and Prevention provides administrative, research, and technical support for the Community Preventive Services Task Force.

1Ogden CL, Carroll MD, Kit BK, Flegal KM. Prevalence of childhood and adult obesity in the United States, 2011-2012. *JAMA* 2014;311(8):806-14.

2Tremblay MS, LeBlanc AG, Kho ME, Saunders TJ, Larouche R, Colley RC, et al. Systematic review of sedentary behaviour and health indicators in school-aged children and youth. *International Journal of Behavioral Nutrition & Physical Activity* 2011;8:98.

3American Academy of Pediatrics. Children, adolescents, and television. *Pediatrics* 2001;107(2):423-6.