

RESOLUTION

Subject: Study and Recommendations on Screen Time and Digital Learning in K–12 Education

Submitted by: Lexington Medical Society

Referred to: Reference Committee

WHEREAS, excessive recreational and educational screen time among children and adolescents has been associated in the medical literature with increased risks of sleep disturbance, anxiety, depression, reduced physical activity, attention difficulties, and adverse effects on social-emotional development; and

WHEREAS, the rapid expansion of one-to-one device programs and digital instruction in K–12 education has occurred without consistent evidence-based standards regarding appropriate duration, developmental appropriateness, or health impacts; and

WHEREAS, growing research suggests that younger children benefit from direct interpersonal instruction, hands-on learning, physical activity, and reduced reliance on digital devices in educational settings; and

WHEREAS, physicians have an important role in advocating for evidence-based educational and public health policies that promote the physical, cognitive, and emotional well-being of Kentucky's children; now, therefore, be it

RESOLVED, that KMA encourage the Department of Education to follow evidence-based recommendations regarding age-appropriate use of digital devices in Kentucky schools, including consideration of screen time limits, best practices for digital instruction, and opportunities to increase in-person, hands-on learning.

References:

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2. American Academy of Pediatrics. "Media and Young Minds." *Pediatrics*, vol. 138, no. 5, 2016.
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3. Lazonder, Ard W., et al. "Longitudinal Assessment of Digital Literacy in Children: Findings from a Large Dutch Single-School Study." *Computers & Education*, vol. 143, 2020, article 103681.
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