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Interviewee: Pediatrician

Interviewer: Okay. So before we start, do you have any questions, comments, suggestions, ideas? I'm running out of it nouns.

Interviewee: Go for it.

Interviewer: Okay. All right. So again, I'm Interviewer and this is [inaudible 00:01:30] and we're trying to understand the kinds of messages that parents and other adult caregivers are getting about screens and kids. And at this point in the study in the three-year project, we're only in the first year. We don't really know what those messages are yet. We're just in the information gathering process so that we can try to understand these messages and figure out a way to harness them for the educational benefit of our communities. There are no right or wrong answers. We're just trying to learn from you. So we'd like to chat with you about any advice you provide to families about using various electronic devices such as TVs, smartphones, laptops. iPads, e-readers, desktops and game consoles. Basically anything with a screen. In what ways do you help parents or other caregivers with decisions about their children's screen media practices and do you intentionally address this topic or discuss it when it's asked in your interactions with your patients, I would think, and their parents? Start there.

Interviewee: Start there, awesome. So to start with, do I intentionally say it? I'd say yes, I do. But I would put forth that that probably is not the practice of most clinicians. I have a predisposition of doing that because it's an interest of mine and I think that it is at the forefront of a lot of parents' minds. We do a lot of recommendation providing as pediatricians and we see it as one of our primary goals of the well child visit. At the end

of the day most kids are well and so we spend a lot of time making sure of that fact, but most of the actual work we do and things that we pride ourselves on is making sure that they stay well. And so there is a high regard seen in the field for providing anticipatory guidance. And at the very core of that is anticipatory, thinking about things before the parents are even worried or concerned about them. And that is had to beat the case anymore in terms of screen media.

Interviewee: It's in the news, parents are hearing about it, they're worried about it. And even if they don't even make any steps at regulating it, it's something that at least they've heard that they should be concerned about. So it's kind of a unique beast because, there's not a lot of solutions and parents have recently heard that it's something that they should be worried about and they don't know how to fix it. And so I like to take a moment and bring that to all of my visits for young kids, for older kids, for school aged kids. It kind of affects everyone in different ways and then you tailor the conversation to kind of meet that need. But, well I don't have any research data. I haven't polled pediatricians, but I'm part of the Council of the American Academy of Pediatrics on Communications.

Interviewee: I have helped to draft the recommendations that come out of that group and I have worked with many, many, many, many clinicians and the feeling in the field is that we don't know how to distill what's coming out of the recommendations into our practice anymore. It used to be hard and fast rules, so we'd say no screen time under two, everybody above two gets two hours. That's all you get. At the end of the day it was very easy to say, you know, it's like an easy little tidbit, like, "Put your kid in a car seat." But it's more nuanced anymore. It's all about content. It's all about sharing the screen with your kid. It's all about what you're exposing them to and it's not hard and fast rules about age and time anymore. And so pediatricians have no idea what to do with that.

And so I would say I do. I don't know what to do with that, but I do talk about it to the best that I'm able and kind of muddle through with parents. Usually while I'm doing other things, I'm listening to their heart. I'm listen to their lungs, I'm pushing on their belly, and we're talking about screens, but I don't think that that's common practice.

Interviewee: All pediatricians find something to talk about. It's not that they're not talking about anything. It's just they're spending more time talking about something else, but I feel strongly about this that's because it's what I spend my time thinking about outside of work, but because I think it's what's at the forefront of parents' minds. They're hearing scary things on the news and I think it needs to be talked about.

Interviewee: I'm glad I have this in front [print-out of the interview questions] of me cause then I can remind myself after I get on a long tangent what you really asked me. [crosstalk 00:07:26] And so you asked me, "Do I talk about it and then in what ways do I talk about it?" So I'm gonna say this and it's gonna sound like a plug for an article I just wrote, but I basically just distilled my own thoughts that I do into an article myself and [person's name 00:07:47] who was the lead author on the AAP recommendations. We just wrote a piece on how we do it and how we think other people should do it. It's coming out in July in, what do you call that, in *The Journal Pediatrics*, but I'm happy to share [crosstalk 00:08:05] the draft with you guys. And basically what we've kind of worked on doing is children using the device in the room. So the way I do it, as I say, "Hey, what are you playing? What do on you there?"

Interviewer: Oh, and it [inaudible 00:08:17] with them?

Interviewee: Oh, so you know, cause they're always on their devices. All the kids, all the parents, you know, they come to the pediatrician's office obviously they expect to wait.

Interviewer: Oh, the parents, too?

Interviewee: Oh yeah. I've had to pull more parents than not away from their phones to talk to me, often. More often than not. And so I'll start with the kids and say, "What are you playing? What are you doing?" And then I'll turn to the mom and say, "I know it's tough to have kids. Kids are so proficient on their phones these days. What kind of rules do you make for your family about being on the phone at home? Is that tough for you?" And if they seem to think, "Well, you know he does his thing or something," you know, there's kind of a wider range. You get the parents who are crazy proud that their kids can flip through pictures on their phone. They're like nine months and they have the physical skills to flip through pictures or do whatever.

Interviewee: You know, there are two year olds and they can play Candy Crush or there, you know. But they're proud that they have the fine motor skills basically is what it boils down to. That they make that equivalent to knowledge and how, you know, like, "Oh my God, he's so smart. Kids, they're so smart with technology these days." Or, "Oh my God, we really struggle with the phone. Like they're constantly on it. They don't want to put it down. It's a fight every night." Or, "We really worked hard. We've got rules, we've got this." So you figure out from that, using that device in the room. Like what's their environment around technology in that family? What kind of conversations are they having? Cause that'll pour out. If it's something they're concerned about their worries will pour right out of their mouth at once. And I not only like to talk about what the kids are doing on the phone, but what are the parents do and on the phone so then I'll follow it up because it's a little more sensitive. Right?

Interviewee: We're going from something that parents monitoring to discussing their own behavior. So then we follow up with, "You know, do you find it tough to put down your phone sometimes, especially like at family times? I know these are ages, you know, like the

conversation we had and you know these are ages that we should enjoy so much, but as a parent, sometimes we need a break. Right? And so like how do you monitor what you do on your phone? Do you worry about that?" And you have a conversation, and it can take two or three minutes. It's not a very long thing. It's only a 15-minute appointment.

Interviewee: So, but that's kind of how I frame. It is really just framing it around the device in the room and using whatever they tell me to provide a nugget. You know, if I'm lucky, I get to see that family again and again over time. And so yeah, it's a conversation that we continue and for me, I make sure I document it. Like, you know struggling with getting the kid off Facebook or struggling with monitoring what you do, videos they're watching, so that the next time I can bring it up and and talk about it some more.

Interviewer: Wow, interesting. I realized that I got so excited looking at the interview guide and forgot to ask the basics. Can you tell us a little bit about what you do, how you interact with parents?

Interviewee: So, I am a general pediatrician. I see patients here at our main hospital site and I see patients out at [town name] on the border of Delaware and Philadelphia counties. And I also see patients in the urgent care clinic here at our main hospital. I see general pediatric patients. I also work in our foster care clinic and see foster parents' patients. I do that for about 20 to 30% of my time. The rest of my time is research, which is great, and the other part of my life is that I'm a mom of a two-year-old and a five-year-old, both girls. The five-year-old's starting kindergarten in the fall.

Interviewer: Is she excited?

Interviewee: Yes. She's super excited. So we're looking forward to kind of how to continue to encourage her learning.

Interviewer: Let's see. So what devices are most frequently mentioned by parents, those that they use and those that their children use?

Interviewee: So I would say that the parents I work with are very representative of the data that's coming out about what families of lower socioeconomic status use. Most families that I talk to are on phones and are using their smartphone as the primary device in their home. I think I would say largely the folks I work with have access to at least one or two Internet accessible devices in their home. Whether it is a laptop on a WiFi system or a tablet on a WiFi system, but when it comes to what device they're kids are more routinely using to access their digital content it's usually a smartphone device.

Interviewer: That's interesting.

Interviewee: It's all about access. We've done really well at making smart phones accessible and not so well at partnering it with broadband, high speed Internet accessibility. There are programs, you know, that you're great-ish programs throughout the city, but either folks aren't looped into them or they have too many loopholes to access them and so folks turn to data plans and things like that that they can get more reliably and affordably to access the information that they need.

Interviewer: Interesting. You said that often people bring smart phones or devices to their appointments?

Interviewee: Yeah.

Interviewer: What kind of the things do the kids bring?

Interviewee: I would say in the population I serve kind of above 12 to 13 is when I start to see kids having their own phone.

Interviewer: Interesting, okay.

Interviewee: I don't know what that's like, whether that's like normal or what, but I would say if I'm doing ... I encountered that because above 13 is when I do like a private interview with the kids. And so if I'm kicking the parent out, usually I'll say like, "Oh, can you just text your parents to tell them they can come back to the room." And more often than not, that kid has a phone. When younger than that, I generally don't see them on their own device. They're borrowing their parents device and then I'd say a small fraction will come with tablet devices, but that's not the norm, at least in the population I serve.

Interviewee: I think if I went to different practice, I might see something else in different neighborhoods, suburban neighborhoods, but in the inner city folks it's like I said, mostly the smartphones, and they are either borrowing their parents or while they're sitting there or have their own if they are pre-teens and later.

Interviewer: Interesting. Let's see. What kinds of questions do parents ask in relation to these devices?

Interviewee: Yeah, that's a great question. So I would say if I'm putting it in a context that I see patients one to two days a week, depending on the week, then I would say about once a month I'll get a parent ask me outright before I can say anything about tech, about what they should be doing.

Interviewer: Interesting.

Interviewee: Much more frequently, and it may just be because I talk about it first. If I never talked about it, maybe they would ask about it by the end but much more frequently it's, I bring up the topic and then the parent to kind of engage us around that conversation. And the questions they're asking is, "Am I doing the right thing?" I have no idea what the right answer is. And, "Am I going to mess up my kids?" [crosstalk 00:18:03] and that's the question here. Right? And that's the question that they ask about a lot of

things. Like, "Am I doing the right thing?" "Am I talking about this too soon?" "Should I get vaccines?" "Should I give them this medicine?" "Am I going to break my kid?" That's what every parent wants to know. Like, "Am I going to break my kid?"

Interviewer: No.

Interviewee: And no is the answer, but the question should be, and this is a question parents don't know how to ask, is, "How can I do right by my kid?" And that's what I tried to empower them with. You're not going to break your kid. Your kid will in their own way be fine, but you can give them advantages, and that's where it can be challenging. And so the questions that parents know to ask, they want concrete advice. They want, like, "Here's the app you should use." "Here's how you can restrict your kids' access to x, y, and z." And the information I want to provide is more, you know, "You teach a man to fish or you teach... you know."

Interviewee: So if I give you one app, you know that kid's going to be bored with that app in five minutes. If I teach you how to find a good app, if I teach you how to limit time, then that's more actionable, and so that's where I try to keep my advice. But I don't think parents are there as to how to ask for that or who to ask for that, so they don't. They're more like, "What app would you recommend?" Or, "How do I get my kid to stop watching gift unwrapping videos on YouTube?"

Interviewer: An unusual choice.

Interviewee: Yeah, really concrete stuff. Well, that's what most of them are watching. The school age kids.

Interviewer: Oh, you mean the shopping videos?

Interviewee: Yeah. Like those they open toys, you know so like-

Interviewer: Really?



Interviewee: Oh yeah.

Interviewer: I've never heard of those.

Interviewee: Oh, like Google.

Interviewer: It's people who don't know what is in the box opening them?

Interviewee: No they ... I mean there are tens of thousands of, an entire channels of people who buy kids' toys and they did just hands in the video and toys and they're opening and being like, "Look, there's this piece of plastic on here and this there. And look, if I take out this little character, they do this and just making toys move." It is pervasive. I'm considering writing an article entirely on these unwrapping videos.

Interviewer: Do you know what is about it that appeals to the kids?

Interviewee: I showed them to my own kids and my own kids liked to them, too. So, and they have-- I was thinking, "Well, if you don't have access to a lot of toys, maybe you want to watch other people play with them." But my kids have tons of toys. Maybe they didn't have the toy that is there. So I think that there's something about kids who, you know they get excited about different types of toys and what's in there and kind of feel, well here's a little bit of vicarious experience and kind of seeing other kids do it. But it's absolutely mind numbing and there's nothing you're getting out of it. And certainly it's not a facilitator of conversation between a parent and a kid. And so my gut is yeah, it's a waste of your time.

Interviewee: And that content so often I'll tell parents, well, you know if you use the YouTube kids app, you can guarantee that your kid is not going to have access to content that is dangerous or malicious or has inappropriate content. But you know those type of things it's not that it's all going to be educational great stuff. It's those types of things are still in there. And yeah, I at least in the populations I work with, it's I have that conversation

probably once or twice a week just to kind of organically without even bringing it up myself because that's what the kid is watching when they're in the room. Gift unwrapping videos, toy unwrapping videos.

Interviewer: So basically toys, huh?

Interviewee: Yeah.

Interviewer: I hadn't heard of that. And is that pretty much the two to five age range, or what ages do [inaudible 00:22:21]?

Interviewee: Yeah, I would say probably going up a little bit like early school age, so like six, seven, somewhere in there were like three to seven. Kids who were really into playing with toys.

Interviewer: [inaudible 00:22:38] interesting.

Interviewee: Exactly.

Interviewer: That's a new one for me. Let's see. So what do you think are some of the needs of parents making decisions about their children's use of electronic devices? And you've already discussed this quite a lot, but what is it that parents struggle the most with?

Interviewee: Yeah. I think that they struggle with what is the right thing and then how do I implement that in a tech saturated, busy culture and life? You know, there's kind of lots of contracts here. There's society and society is, there's technology everywhere and kids are encouraged to use technology and a lot of different realms of their lives. There's constructive, of the family and the parent. A parent who is already stressed and has a million other things to do and it's just looking for a way to give their kids something that amuses them so that they can achieve tasks x, y and z. And then, excuse me. And then there's every other resource. You know, schools and libraries and things like that, that

are also infiltrated with technology and encouraging kids to use tech and in a lot of different ways.

Interviewee: There's the child themselves who interacts with different peers and peers are doing this and now it's part of culture and I want to know how to do this. You know, I don't want to be left behind. And so how do you navigate something that we know can have some detrimental effects? And parents are beginning to hear and you know, popular media can have some detrimental effects in the scope of these forces within society. And I think that that's what they struggle with: "What am I supposed to do? You know, because I still need to make dinner and take care of my four other kids and you know, all the other things and I need to maintain my own sanity and my kid is demanding the tablet. What is it that I'm supposed to do?" And so I think that that is the resounding question is they want concrete solutions and on the other side, it's concrete solutions that we don't necessarily have yet.

Interviewer: Okay, let's see. Are there any specific resources for parents you recommend?

Interviewee: So the AAP person in me should say that I [crosstalk 00:25:09] to the parents to the media toolkit, and the answer is that I don't.

Interviewer: Really?

Interviewee: We had a conversation, email conversation going on in our lifts about like, who actually uses this? Because I spent a lot of money to make it. And it's not being used all that much. The guidelines are, I think, great, but then the resources that they put there for parents on like how to assess your house's media use and things like that are just-- They're rote exercises that don't provide parents with what I just talked about, with the answers they need that are actionable. There are exercises you should do with your family and that's great, but very rarely have I met a family who was like, we're going to

have a family meeting and approach this systematically and assess our technology use. You know, those are the things you do at work. Those are not the things that you do over on your dinner table. And so more often than not, I tell parents to go to common sense media if they're looking for particular apps to use because that's what they want.

Interviewee: They want app recommendations and those are there and I tell them while they're there, sign up for the emails because you might forget that we had this conversation and they will ping your inbox. And even if you read one, every once in a while, you will get some evidence based suggestions on how to talk to your kids about media. And I get the emails and I think that they're great. So that is one concrete resource I tell them to go to. I rarely, unless I'm asked a very specific question, will point them in a direction of a particular app because I don't see that as my job. And so I tend to stay away from saying like, you should go to PBS kids or you should do that or they should do this because I don't think that that's a useful way for them to kind of think about it. And then I really don't have a resource outside of that.

Interviewee: I wish there was a resource. I wish I could create a resource that really provided parents with like several actionable tidbits that they can say, this is what I should think about when I'm trying, you know for kids in this age range for kids in that age range. So it's specific to you know, things that I can send them for you know similar resources in terms of reading and learning and things like that. It doesn't exist for screen media.

Interviewer: I think even with your particular population, do you find any literacy or educational barriers on behalf of parents and guardian-

Interviewee: Oh, yeah.

Interviewer: Or even the kids themselves?

Interviewee: And so that's always kind of a big concern, but what I find is those parents with those with lower literacy, those with lower health literacy and fluency and literacy of reading as well, is that they want to do better by their kids. And so those parents are really concerned even more so than those who might be a little bit more proficient in because they want to make sure that their kids have advantages that they might not have had.

Interviewer: That's nice.

Interviewee: Yeah, it is nice.

Interviewer: And it's also unfair.

Interviewee: And also unfair. I mean, that's one of the reasons I got into pediatrics as opposed to adult medicine. Everybody wants to do right by their kids in their own way. Most people, most people.

Interviewer: Let's see. You already suggested, we're wondering what additional information would help you work with parents better? You already suggested that there isn't a place you can send parents. Any other ideas, or from, a parents' perspective, how can we help?

Interviewee: Yeah, so I think something really concrete. So lately I've been trying to provide some of that verbally on my own, but I don't have a physical resource, but you know, recommendations I'll make them you know, I'll say things like, you know, instead of putting your kid in front of the television for an hour or two, you know set a concrete time when you turn on the television. Say we're going to watch this for a half an hour so that there are goals and rules and try it out as an experiment. What you might find is that your kids are more compliant and then able to transition nicely to play with toys or imaginative play more easily as opposed to setting an unrestricted time that then ends abruptly that they didn't expect. And so say I talk them through kind of concrete guidelines like that.

Interviewee: The recommendations that I've pulled from a lot of different resources and personal experience, that can help them to say, okay, this is what I'm going to try the next time I'm in this conundrum because it gives them something actionable that they can do as opposed to like wax and poetic about why you should sit next to your child every time they look at a screen. I mean, that's great. And I think that would be wonderful in an ideal world and you should probably have a great conversation with them every single time that they watch a television show.

Interviewee: So, I look forward to a time when we have resources that kind of put screen media in the context of evidence and real world parenting. And I strongly believe that there is an intersection there.

Interviewer: That sounded really good. Let's see. [inaudible 00:31:01] time. Is there anything else that you'd like to tell us from your professional aspect?

Interviewee: No, not so much. I mean I kind of hinted on, you know as a pediatrician and then the kind of working within the guidelines. I believe that the guidelines are based on the best evidence that we have. And so I support the way that they were put out and the way that they were written but they're a challenge to implement. And I think as a pediatrician, I see it as my job and I see it as something that I guess trained to do. We're trained to provide that kind of guidance. I'm contrasting that because that was kind of the key thing that came out of talking to librarians was that that might not be the training.

Interviewer: Absolutely not. So can you talk a little bit about the training that you had or that is going on now, if you know? On [inaudible 00:32:18].

Interviewee: Yeah, so I finished med school in 2011, residency in 2015.

Interviewer: That's a [crosstalk 00:32:29] changed since then, yeah.

Interviewee: But what we know is that med students aren't taught, because it's very broad. So there's not a lot of focus in providing preventative care guidance.

Interviewer: Oh, interesting.

Interviewee: And in medical education when you're a resident, and I can only speak for pediatrics, we see it as, like I said, the entirety of our jobs. So we are trained at Saint X's. I think it was a large chunk of my outpatient training, how to talk to parents about how to keep their kids safe and healthy. Because like I said, most kids are healthy. And so we spend some of our time, you know talking about really intense ... All of the pathology that we spent a long time on and a lot of money learning but-- There are some people that do that all the time. You talk to an oncologist, they probably spend most of their time doing that. But as a general pediatrician, we are trained to spend the majority of our time talking to parents about how to keep their kids safe and healthy. And that comes from practical hands on training. There's no real like lecture curriculum about it.

Interviewer: Interesting.

Interviewee: About how to do that. It's all, you know ,when you're a resident and you're seeing patients in your clinic and as a resident you're assigned to patients and then we do as you see them and then you take, you know, the story of that patient and that precept back to you know, attending physician, a certified physician. And they say, "Oh, did you ask about this? Did you ask about that?" And then depending on your level of training, you go back in the room together and they model some of the things that you should or shouldn't have asked. And you do that for three years. And so that is kinda how we get ingrained with that kind of level of training. I mean, and coming from Saint X's where it's such a vibrant community in need of that level of guidance, I think we got [inaudible

00:34:38]. We were particularly strong at that because that's the strength of that hospital. And so that's how we learn.

Interviewer: Interesting.

Interviewee: It's through just kind of verbal instruction and on the job training.

Interviewer: My son was in Saint X's in intensive care for a week when he was two and a half. So I know it very well.

Interviewee: Very well. Right?

Interviewer: It was good.

Interviewee: It's quite the place. It's like [crosstalk 00:35:02] own community. Yeah.