

Voices of Parents, Guardians, and/or Caregivers of Children Under Six Years Old Regarding Screen Use During the Pandemic and Post-Pandemic: A Qualitative Study

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ABSTRACT

Objectives: To explore the perspectives of parents, guardians, and/or caregivers of children under six years old residing in the Metropolitan Area of Buenos Aires (AMBA) regarding screen use during the pandemic and post-pandemic period.

Materials and Methods: An exploratory study with a qualitative approach. We reviewed the responses to an open-ended question, "Would you like to add any comments about something we have not asked?" from a voluntary and anonymous online survey directed at families of children under six years old. We analyzed the narratives from the responses using content analysis, organized into two stages: exploration and classification of the material, followed by processing and interpretation of the obtained results.

Results: Seventy-two individuals responded to the question during the pandemic and 88 during the post-pandemic period. Benefits and usefulness were considered positive aspects. We rated risks and developmental consequences as negative aspects in both periods. Regarding reflections, the narratives ranged from an awareness of technology use in a child's life to a sense of guilt for using these resources in parenting.

Conclusion: The results reveal both positive and negative aspects, such as its use for education and its risks for psychomotor and cognitive development, respectively.

As for the reflections, observations ranged from a sense of guilt for using these resources in parenting to an awareness of the importance of technology in present-day reality.

Keywords: screen time, children, COVID-19, parents, caregivers, qualitative analysis.

Voces de padres, tutores y/o cuidadores de niños menores de seis años con relación al uso de pantallas durante la pandemia y pospandemia. Estudio cualitativo

RESUMEN

Objetivos: conocer las voces de padres, tutores y/o cuidadores de niños menores de seis años que residen en el Área Metropolitana de Buenos Aires (AMBA), con relación al uso de pantallas, durante el período de pandemia y pospandemia.

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Materiales y métodos: estudio exploratorio, con enfoque cualitativo. Se revisaron las respuestas a una pregunta abierta “¿Quisiera agregar algún comentario sobre algo que no hayamos preguntado?” de una encuesta voluntaria y anónima en línea, que estuvo dirigida a familiares de niños menores de seis años. El proceso de análisis de las narraciones provenientes de las respuestas se llevó a cabo a través del análisis de contenido, el cual se organizó en dos etapas: exploración y clasificación del material y tratamiento de los resultados obtenidos y su interpretación.

Resultados: respondieron a la pregunta 72 personas en la pandemia y 88 en la pospandemia. Beneficios y utilidad fueron considerados aspectos positivos. Riesgos y consecuencias del desarrollo, negativos en ambos períodos. En cuanto a las reflexiones, las narrativas varían desde la conciencia de la tecnología en la vida de sus niños hasta cierta culpabilidad por usar estos recursos en su crianza.

Conclusión: los resultados muestran aspectos positivos y negativos, como su uso para la educación y los riesgos para el desarrollo psicomotor y cognitivo, respectivamente. En cuanto a las reflexiones, fueron observadas desde cierta culpabilidad por usar estos recursos en la crianza de sus niños hasta la conciencia de la importancia de la tecnología en la realidad actual.

Palabras clave: tiempo de pantalla, niños, COVID-19, padres, cuidadores, análisis cualitativo.

INTRODUCTION

The impact of the COVID-19 pandemic has disrupted family dynamics in households worldwide. While the use of technology has been steadily increasing for decades, during the lockdown, adults, young people, and children were forced to stay at home and use electronic devices more than they used to—whether as a means of communication with family and friends, as a tool to support remote education, or as a necessity to carry out work-related activities. Additionally, during the pandemic, the inability to engage in outdoor recreational activities caused a substantial increase in screen exposure among younger children¹⁻³.

Screen use refers to the length of time children are exposed to any electronic device, such as televisions, computers, tablets, and mobile phones, regardless of the purpose of their use. The use of these devices among children has attracted the interest of many researchers, highlighting both positive aspects (such as maintaining school activities and communicating with distant family members) and negative aspects (such as delays in psychomotor development). During the pandemic, the benefits of technology use became evident, as it enabled the continuation of education remotely¹. In addition, Fisch et al. argue that if content is appropriate, it impacts positively on children's vocabulary and social behavior².

However, the Information and Communication Technologies (ICT) Subcommittee of the Argentine Society of Pediatrics and the World Health Organization (WHO) discourage screen use before 18 months of age. Furthermore, a study by Barr et al. demonstrated that children under two years old exposed to adult-targeted programs may experience cognitive developmental issues^{3,5}.

Although studies comparing children's use of electronic screens and the effects of the pandemic

already exist, it is crucial to understand the opinions of the adults responsible for these children. That will provide relevant information to comprehend why they provide screens to their children and how they perceive their use (both positive and negative effects)^{6,7}. Another key question is whether, or to what extent, the COVID-19 pandemic may have influenced these aspects. Such data will allow for a comparison between the two periods and the development of projects that address the population's needs. In this context, the present qualitative study aims to explore the perspectives of parents, guardians, and/or caregivers of children under six years old residing in the Metropolitan Area of Buenos Aires (AMBA) regarding screen use during the pandemic and post-pandemic periods.

MATERIALS & METHOD

We conducted an observational and exploratory study with a qualitative approach. We used the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist to design and report the study⁸. All international ethical standards for research involving human subjects, as outlined in the Declaration of Helsinki, as well as national standards for patients and personal data protection, were followed^{9,10}. The study met the approval of the Research Ethics Committee at Professor Alejandro Posadas National Hospital (394 EUPeS0/20), and all participants signed informed consent forms.

Through non-probability convenience sampling, we invited participants to enroll in the study through links providing access to an online survey created with the Google Forms[®] tool. We sent out the links by email and social media. This survey, previously developed by the same research team as part of another project, included parents, legal guardians, and caregivers of children who completed the questionnaire, provided online consent

by selecting the “yes” option, and confirmed they were responsible for children under six years of age by also selecting the “yes” option.

For data collection, we reviewed responses to an open-ended question: “*Would you like to add any comments about something we did not ask?*” from the above survey, whose objective was to characterize screen use habits, sedentary behavior, and physical activity in children under six years of age in the AMBA region⁶. We collected data in two moments: PANDEMIC (social, preventive, and mandatory isolation between August and October 2020) and POST-PANDEMIC (from August to October 2022). The survey consisted of 31 questions that explored the sociodemographic characteristics of respondents and their habits regarding screen use, sedentary behavior, and physical activity in children under six years of age in the AMBA region.

When they finished the second-period survey, they downloaded an Excel[®] spreadsheet with the answers for each form. As answering the open-ended question was optional, we discarded responses consisting of dashes, periods, or blank spaces.

We analyzed the responses using content analysis, organized into two stages: an initial phase of exploration and classification of the material, then a processing phase of the obtained results and interpreting the respondents’ narratives. In the first phase, two team members (MAR and ELC, licensed in Kinesiology and Physiotherapy, with training in qualitative methodologies) conducted a general review of the responses from each sheet, grouping them into different themes. Subsequently, they created an initial table categorizing the various themes into recording units based on their recurrence to facilitate the comparison between the pandemic and post-pandemic periods. To enhance the visual accessibility in the categorization of the answers, we chose to mark each one with a different color: red for responses explicitly opposing the use of screens, green for responses explicitly in favor of the use of screens, blue for comments related to the structure and evaluation of the survey; pink for comments reflecting personal experiences; and orange for reflections on the use of screens. The responses corresponding to the pink and blue colors were excluded from the analysis process as they were not relevant to the objectives of the study.

In the second stage, we conducted a more in-depth data analysis, allowing the selection of excerpts that reflected the participants’ views. Through virtual meetings, MAR and ELC shared their interpretations of each narrative, emphasizing the identification of meanings that would facilitate the construction of ideas faithfully representing the respondents’ thoughts.

From these narratives, we identified content that revealed both positive aspects (benefits and usefulness) and negative aspects (risks and unfavorable consequences), along with their reflections on children’s use of screens. Critical reading, analysis, and subsequent interpretation

of this material enabled, as a final product, the creation of comparative tables of the respondents’ voices during the pandemic and post-pandemic periods.

RESULTS

Seventy-two people responded to the question during the pandemic, and 88 responded during the post-pandemic period. Table 1 presents the sociodemographic characteristics of the participants, along with the age and gender of their children.

We created two tables to summarize the results of this study. Figure 1 contrasts the positive aspects (6 during the pandemic and five during the post-pandemic period) with the negative effects (5 in each period) of using electronic screens by children under six years old, using responses categorized in green and red, respectively. During the pandemic, respondents highlighted that screens were helpful as learning tools, served as entertainment devices, and allowed for pedagogical continuity when there were no in-person school classes. Thus, during the post-pandemic period, respondents coincided with the positive use of screens for children’s educational and entertainment purposes. However, in both periods, they expressed concern that the indiscriminate use of digital devices could cause alterations in children’s psychomotor development, delays in language acquisition, and an increased risk of sedentary behavior. Figure 2 presents the voices of parents, guardians, and/or caregivers based on the researchers’ interpretations of responses categorized in orange (reflections on digital screen use). The thematic units are displayed and justified with textual excerpts taken directly from each survey.

We observed that respondents stated that the pandemic promoted the use of screens despite their dissatisfaction, understanding that living in the digital age forces us to make screens part of our daily lives. Similarly, during the post-pandemic period, this tendency to integrate screens into children’s daily lives continued, with respondents expressing concern about the lack of information from healthcare professionals regarding the effects of excessive screen use during childhood.

DISCUSSION

The analysis of the voices of the parents, guardians, and caregivers participating in the study highlights both the negative and positive aspects of screen use during the pandemic and post-pandemic periods. Regarding their reflections, it is worth noting that their narratives range from an awareness of technology’s role in their children’s lives to a sense of guilt for using these resources in their upbringing. That demonstrates that caregivers construct their perspective about screen use based on their daily experiences.

The main positive aspects expressed by the participants were related to education and the advantages of technology for learning in both periods studied. Different organizations have been discussing the increased use of technology to promote learning. For this reason, the American Academy of Pediatrics mentions

Table 1. Sociodemographic characteristics of the participants

VARIABLE		PANDEMIC N = 72 (%)	POSPANDEMIC N = 88 (%)
GENDER	Male	14 (19.4%)	17 (19.3%)
	Female	57 (79.2%)	71 (80.7%)
	Other	1 (1.4%)	-
AGE	21-30 years	10 (13.8%)	5 (5.8%)
	31-40 years	44 (61.2%)	52 (59%)
	41-50 years	16 (22.3%)	30 (34%)
	51 years or more	2 (2.7%)	1 (1.2%)
PLACE OF RESIDENCE	Almirante Brown	1 (1.4%)	-
	Avellaneda	-	2 (2.4%)
	Berazatagui	2 (2.7%)	-
	CABA	15 (20.8%)	29 (32.9%)
	Cañuelas	1 (1.4%)	-
	Esteban Echeverría	1 (1.4%)	-
	Ezeiza	-	1 (1.1%)
	Florencio Varela	3 (4.2%)	-
	General Las Heras	-	1 (1.1%)
	Hurlingham	1 (1.4%)	3 (3.5%)
	Ituzaingó	4 (5.5%)	13 (14.7%)
	José C. Paz	1 (1.4%)	1 (1.1%)
	La Matanza	21 (29.2%)	11 (12.5%)
	La Plata	-	1 (1.1%)
	Lomas de Zamora	1 (1.4%)	-
	Malvinas Argentinas	-	1 (1.1%)
	Merlo	2 (2.7%)	4 (4.6%)
	Moreno	-	1 (1.1%)
	Morón	11 (15.3%)	8 (9%)
	San Isidro	-	3 (3.5%)
San Miguel	-	4 (4.6%)	
San Vicente	-	1 (1.1%)	
Tres de Febrero	8 (11.2%)	1 (1.1%)	
Otro Partido	-	3 (3.5%)	
LEVEL OF EDUCATION	Incomplete primary educ.	1 (1.4%)	-
	Complete primary educ.	-	-
	Incomplete secondary educ.	1 (1.4%)	2 (2.4%)
	Complete secondary educ.	7 (9.8%)	8 (9%)
	Incomplete tertiary educ.	5 (6.9%)	4 (4.6%)
	Complete tertiary educ.	9 (12.5%)	18 (20.4%)
	Incomplete university educ.	18 (25%)	12 (13.6%)
	Complete university educ.	31 (43%)	44 (50%)
CHILD'S GENDER	Male	37 (51.4%)	43 (48.2%)
	Femaloe	35 (48.6%)	45 (51.8%)
CHILD'S AGE	Less than 1 year	2 (2.7%)	3 (3.4%)
	1 year and 1 day to two years	11 (15.3%)	5 (5.7%)
	2 years and 1 day to 3 years	9 (12.5%)	9 (10.2%)
	3 years and 1 day to 4 years	15 (20.9%)	19 (21.6%)
	4 years and 1 day to 5 years	13 (18%)	21 (23.9%)
	5 years and 1 day to 6 years	22 (30.6%)	31 (35.2%)

SCREEN USE IN CHILDREN UNDER 6 YEARS			
Positive aspects (benefits and usefulness)		Negative aspects (risks and unfavorable consequences)	
Pandemic	Pospandemic	Pandemic	Pospandemic
Facilitating learning: identifying colors, recognizing animals, numbers, letters, body knowledge, healthy habits, and words in other languages.	The use of electronic devices at an early age can be educational: learning numbers, colors, reading, and writing.	Risk of affecting psychomotor and cognitive development: language development.	Increase of the problem in word production.
Entertainment and distraction so parents can work or rest.	It is a form of entertainment.	Appearance of changes in attitudes: increased anger and frustration.	Alteration in behavior.
Attending virtual classes or completing preschool tasks.	A way of communication for learning.	Children miss moments of play and learning by using screens.	Inappropriate for children with developmental disorders.
Share family moments: dancing and children's songs, watching movies.	Use of television to dance and sing.	The use of screens causes sedentarism and impoverishment of movement.	Concern about the posture of children adopted during screen use.
Develop artistic skills with specific apps. For example: acting through the TikTok app.	Use of tablets with number and letter games that help with the child's motor skills.	They generate addiction.	It is inappropriate.
Work tool: online store.			

Figure 1. Positive and negative aspects of screen use.

in one of its reviews that children over 2.5 years can learn and understand through educational television programs¹¹. According to a study by Fisch et al., effective learning depends on program content, as educational programs contribute positively to vocabulary, literacy, social behavior, and academic knowledge². However, Barr et al. demonstrated that infants under two might be adversely affected in their cognitive development—especially language and executive brain function—if what we see on television is designed for adult audiences.⁵

Isolation during the COVID-19 pandemic forced school-aged children to use technological devices for pedagogical continuity, which parents perceived as a challenge and a benefit offered by the screens. A study by Schleicher on the impact of the pandemic on education highlighted the fundamental role of online platforms that enabled real-time classes and videos for remote teaching to mitigate the global education crisis.

Another positive aspect of screen use mentioned in the surveys was its utility as a distraction and entertainment

strategy for children, allowing parents to carry out various activities, ranging from work responsibilities to domestic tasks.

As for the negative aspects, we emphasize their impact on children's psychomotor development. Madigan et al. found that longer exposure to screens at 24 months could be associated with lower performance on developmental tests at 36 months. Similarly, greater screen exposure at 36 months was associated with lower test scores at 60 months.¹² These findings are similar to those of Lin et al., who found that infant cognitive, language, and motor delays were significantly associated with the time spent watching television¹³. In addition to these results, it is necessary to consider parental opinions about screen use related to psychomotor development, as studied by Pedrouzo et al.¹⁴. They conducted a survey and found that more than half of the parents considered it beneficial, while a small number thought it was harmful¹⁴. This stance about screen use could be a determining factor in shaping their behavior, specifically whether they choose to expose their child to this type of technology.

VOICES OF PARENTS, CAREGIVERS, AND/OR GUARDIANS		
Period	What do we interpret they feel or think?	Justification
Pandemic	Children belong to the technological era, so living among screens makes it difficult to prevent children from using them.	<ul style="list-style-type: none"> • "In my understanding, children nowadays are born knowing how to use screens, making it impossible to forbid them." • "It's not healthy, but they are from the technological era... it's not the best, but sometimes it's inevitable". • "Denying children technology is denying them the future... There is nothing wrong with it..." • "The use of electronic devices is harmful in childhood... but we are in the 21st century, and with a pandemic (with all that it implies). For this reason, we give a small space (for entertainment with children's cartoons)".
	The lockdown favored screen use. Parents feel obligated to offer screens to children so they can work, handle household tasks, and/or rest. Indeed, it is observed that they are not satisfied with doing so, expressing frustration and guilt. However, they state they cannot find another way to organize themselves.	<ul style="list-style-type: none"> • "During quarantine, this use has increased. It is not the usual activity." • "(...) But during this period of isolation, since there isn't much space at home, ideas run out, and sometimes the energy to entertain them as well." • "Both of us are working. It's the only option. It doesn't make me happy, and I feel frustrated by the confinement situation." • "Currently, it's impossible for me. Also, as a mother, it bothers me that he spends so many hours in front of screens, but it's very challenging for him and me not to use them." • "Before becoming a mother, I thought I would never give them access to devices, and I ended up being a prisoner of it."
Pospandemi	Parents/mothers/caregivers understand the risks or harms of screen use, but they see it as something inevitable in this generation.	<ul style="list-style-type: none"> • "I find it inappropriate, but it's a form of entertainment. They were born in the technological era." • "The use of screens is inevitable since we are a virtual generation, and they were born in that era." • "I know that using screens is not good for children, but sometimes it's the resource I use when I need to get something done." • "I never agreed with cell phone or TV use before age 5/6. But the pandemic threw everything off balance." • "I know it's not good for them to use screens, but sometimes it's the only way I find to be able to work." • "We try to avoid screen use for our child as much as possible, although it becomes very challenging, especially when they are with other kids who do use them."
	How parents/mothers/caregivers feel about the available information on screen use	<ul style="list-style-type: none"> • "My son is 5 months old... his pediatrician already warned us about screen use, so we avoid him being in front of them because of his age." • "There should be more information about how harmful screen use is..." • "No professional specifically warned me about the negative effects of early use of electronic screens." • "I think pediatricians should advise against using screens for babies, at least until they are 2 years old." • "...the access to information we have and the professional advice shared through various media have contributed to our awareness of the negative consequences it can bring."
	Influence of the environment	<ul style="list-style-type: none"> • "Sometimes, when other children around are using screens, it's hard to prevent our child from wanting to do the same." • "Sometimes it's difficult to explain to our children that other kids use screens without limits and they do not." • "...if adults don't use them frequently, they won't either." • "Having an older sister with access to technology makes it hard not to expose her." • "We try to avoid screen use for our child as much as possible, although it becomes very hard, especially when they are with other kids who do use them."
Proposals from parents for screen use	<ul style="list-style-type: none"> • "Screens, in some way, have become established in our lives worldwide, and with COVID, we cannot go against the system, but it is our responsibility as parents to monitor how our children use them." • "I think it's essential to limit the use of electronic screens, but avoiding them is wrong since the world is more and more around technology." <p>incorrecto ya que el mundo ronda cada vez más en base a la tecnología."</p>	

Figure 2. Voices of parents on screen use

The findings of this study suggest that parents face a dilemma between recognizing the risks of excessive screen use and the pressing need to provide children with these devices to carry out various work and domestic tasks, to the extent that they suggest that children are growing up in the technological era, as they are digital natives, making it difficult to restrict their access to these devices completely. The act of “occupying” children with this activity exposes them to its associated harms. This issue is present in both periods but was more prominent during the pandemic, likely due to the increased use of technological resources to maintain family connectivity with their social, work, and academic environments. It is also important to highlight how the environment influences the choice of screens over other entertainment options. Being surrounded by subjects who use them, the children are encouraged to use them. Consequently, it seems inevitable that this conflictive situation creates a certain amount of guilt in parents. Based on the recovery of experiences, we estimate that their challenge lies in finding a balance between the advantages and disadvantages of screen exposure.

One of the narratives that deserves recognition is the concern of parents regarding the lack of available information about screen use. They specifically mention not having received advice or warnings from health professionals. The American Academy of Pediatrics and the Canadian Pediatric Society recommend that pediatricians incorporate a “family technology use plan” into their consultations, following the guidelines for each stage of child development. For this reason, Melamud et al. propose that coherent guidance within a family context, coupled with more robust evidence about the long-term impacts of digital technology use, will enable pediatricians to provide adequate support to families¹⁵. Indeed, it is necessary to understand the role of health professionals as educators, who, by assuming the social responsibility of informing families, must train themselves to provide timely recommendations about screen use tailored to each situation.

The fact that children under six years old use screens as a means of entertainment or to avoid boredom hinders their access to the experiences offered by their surroundings, limiting their ability to explore their creativity, physical space, and psychomotor possibilities through play. It is crucial to inform families that essential executive functions for academic success, such as creative and flexible thinking, emotional regulation, and impulse control, are best learned through social play and family interaction as opposed to a single situation screen-based, which is related to changes in children’s temperament, including anger and frustration, due to not obtaining immediate results¹⁶.

Just as nutrition and vaccination schedules are crucial, healthcare professionals should—within the framework of Primary Care and Health Promotion—include pediatric consultations and control questions that guide the use of screens by their patients and/or caregivers. They should also provide specific advice on what

adaptations or modifications to make to daily childcare routines. Similarly, they should promote physical activity and sleep guidelines appropriate to each age, as per WHO recommendations, to avoid improper postures caused by screen use and placement, which increase sedentary behavior and may also lead to screen addiction.

It would be valuable to incorporate professional experiences in neurodevelopment and ensure timely referrals to specialists such as kinesiologists and physical therapists who can assess and provide specific recommendations tailored to each case in a listening space where they evaluate the child’s context, family, and routines. During this critical time for habit formation, families play a significant role, making it essential for pediatric professionals to provide support throughout the process¹⁷. In the same way that nutrition and vaccination schedules are relevant, healthcare professionals should—from the perspective of Primary Care and Health Promotion—include questions in pediatric consultations and check-ups that guide the use of screens in their patients or consulting physicians and provide more specific advice about what adjustments and/or modifications should take place in children daily care routines. Similarly, they should promote physical activity and sleep guidelines according to each age, following WHO recommendations, to avoid incorrect postures, both from holding screens and their placement, which increase sedentary behavior and could lead to addiction.

It would be interesting to incorporate professional experiences in neurodevelopment, making timely referrals to specialists, such as kinesiologists and physical therapists, who can assess and provide specific guidelines depending on the case, in a setting of attentive listening where they evaluate the child, their family, their routines, and context. During this habit-forming stage, families play a significant role, making it essential for pediatric professionals to provide support throughout the process.¹⁷

As part of the actions aimed at promoting development, the objective is to strengthen protective factors (breastfeeding), storytelling, reduce screen time, promote play, facilitate progressive autonomy, etc.; foster parenting skills among caregivers; train healthcare personnel; and reinforce environmental aspects that stimulate the child: proper positioning (supine posture for sleeping and prone posture during wakefulness), and habits of reading and play¹⁸.

This study presents some limitations. The first is that the question from the original survey, which enabled the reflection that is the subject of this study, was optional, so not all participants answered it. Additionally, although there was no limit on the number of characters per response, the fact that many participants completed the survey on their mobile phones may have led to shorter answers due to the constraints of typing on such keyboards. Despite these issues, the main strength of this study lies in its ability to highlight, through a qualitative methodological approach, the position of families regarding this undeniable need for electronic screens. Future studies could assess the long-term consequences

of technological advancements and how much/how this affects the relationship between families in practice.

CONCLUSION

The voices of parents, guardians, and/or caregivers of children under six years old residing in AMBA regarding the use of screens during the pandemic and post-pandemic period reveal both positive and negative aspects, such as their use for education and the risks to psychomotor and cognitive development, respectively. Reflections ranged from a sense of guilt for relying on these resources in raising their children to an awareness of the importance of technology in today's reality.

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