

Original article

The association between screen time and communication in preschool children

**Ana Madžar Čančar¹,
Sladjana Čalasan¹,
Bojana Vuković¹,
Sanja Živanović¹,
Ajla Mahmutović Babić²**

¹University of East Sarajevo,
Faculty of Medicine Foča, Foča,
Republic of Srpska,
Bosnia and Herzegovina

²Public Institution Centre for
Social Work Cazin,
Bosnia and Herzegovina

Primljen – Received: 26/12/2025
Prihvaćen – Accepted: 24/06/2026

Corresponding author:
Ana Madžar Čančar, Speech
language pathologist
Stepe Stepanovića 3, 73300 Foča
anam10000@gmail.com

Copyright: ©2026 Ana Madžar Čančar et al.
This is an Open Access article distributed
under the terms of the Creative Commons
Attribution 4.0 International (CC BY 4.0) license.

Summary

Introduction. The term *screen time* refers to the total amount of time spent in front of various screens on a daily basis. Given the negative consequences that excessive screen exposure can have on various developmental domains of early childhood, the World Health Organization (WHO) has issued specific recommendations regarding the amount of screen time permitted for young children. The primary aim of this study was to examine the association between daily screen exposure duration and communication outcomes in preschool-aged children.

Method. The sample consisted of 200 preschool children aged 48 to 60 months, of both sexes. The Ages & Stages Questionnaires (ASQ-3) was used to assess child development, along with a specially designed sociodemographic questionnaire. Kruskal–Wallis and Mann–Whitney U tests were used. The study was conducted in preschool institutions in the eastern region of Republic of Srpska between April and June 2024.

Results. The Mann–Whitney U test showed a statistically significant difference ($p = 0.007$; $p = 0.014$). The results indicate that 39% of preschool children are exposed to screen time beyond WHO-recommended limits. A statistically significant difference was observed in communication scale achievements in favor of children who were exposed to screens for less than one hour per day or not exposed at all, compared to children whose screen use exceeded the recommended duration.

Conclusion. Attention should be directed toward further identification of factors contributing to excessive screen use and toward developing clear guidelines for parents regarding permitted screen time, desirable content, appropriate technology, and shared screen-related activities for preschool children.

Key words: screen time, communication, preschool children

Introduction

Due to advances in science and technology and the increasing presence of electronic devices in everyday life, digital media and screens increasingly permeate almost every aspect of children's lives at all ages [1]. Over the past 20 years, children's screen time has been steadily

increasing, while the age at which children are first exposed to screens has been decreasing [2]. In response to these changes, the term *screen time* has been increasingly used in scientific literature. Screen time is most commonly defined as the total amount of time spent in front of screens, regardless of the type of digital device used [3]. Researchers agree that preschool children spend more time in front of screens than is recommended for their age and contrary to WHO guidelines for children under five years of age. According to WHO guidelines [3], screen time is not recommended for children under two years of age, while for children aged two to five years it should not exceed one hour per day (television viewing and computer games). Despite the clarity of these guidelines, the frequency and duration of children's exposure to digital devices in practice often significantly exceed recommended limits. Empirical data from various countries confirm this trend. For example, a study conducted among children aged three to seven years in China found that 14.2% of participants spent more than two hours per day in front of screens on weekdays, increasing to 26.7% on weekends [4]. Similar patterns were observed in Canada, where a study by the Canadian Paediatric Society showed that only 15% of preschool children met the recommendation of limiting screen time to one hour per day, with television being the dominant form of media exposure among children aged three to five years [5]. Results from a Finnish study further indicate the global prevalence of this phenomenon, reporting an average daily screen time of 111 minutes among children aged three to six years, clearly exceeding recommended limits [6]. Consistently, Lee et al. [7] found that only 15% of preschool children adhered to WHO screen time recommendations, confirming a persistent discrepancy between guidelines and actual behavior across different sociocultural contexts.

Early exposure to digital screens has prompted numerous researchers to examine the effects

of prolonged screen time on both overall development and specific developmental domains, particularly communication, which has been the focus of most studies to date [8]. Excessive screen time reduces the quantity and quality of parent-child interaction, thereby limiting opportunities for practicing language skills and reducing adult verbal stimulation [9]. Consequently, children often exhibit underdeveloped expressive vocabulary and impaired phonological processing [10]. These findings are supported by Madigan et al. [8], who used the Ages and Stages Questionnaires (ASQ) and reported that increased screen time at 24 and 36 months was associated with deviations from developmental norms at 36 and 60 months. Nevertheless, some authors suggest that screen exposure does not necessarily have exclusively negative effects on language development and that well-designed content and joint media engagement by parents and children may contribute to the improvement of certain language competencies [11]. Children exposed to educational content demonstrate better communication outcomes than those who consume entertainment-oriented content, highlighting the importance of content type [12].

While international literature provides abundant evidence on the impact of screen time on communication development, findings within the local sociocultural context remain limited and sporadic. Therefore, the aim of this study was to examine the association between daily screen exposure duration and communication outcomes in preschool-aged children. We hypothesized that children exceeding the WHO-recommended screen time would show lower communication scores.

Methods

Sample

The sample consisted of 200 preschool children aged 48, 54, and 60 months, of both sexes. The sample was evenly distributed by sex, with

100 boys (50%) and 100 girls (50%). Regarding age distribution, 45 children (22.5%) were 48 months old, 66 children (33%) were 54 months old, and 89 children (44.5%) were 60 months old. Exclusion criteria included below-average intellectual functioning (as reported by parents or from medical records), severe hearing or visual impairment, and significant motor or physical disabilities.

Instruments

The standardized *Ages & Stages Questionnaires* (ASQ-3) was used to assess child development from 1 to 66 months of age. The ASQ-3 screening system consists of 21 questionnaires, each containing 30 developmental items grouped into five domains: communication, gross motor skills, fine motor skills, problem-solving, and personal-social development. For the purposes of this study, only the communication subscale was used. Items were age-specific, and three questionnaires corresponding to ages 48, 54, and 60 months were applied. Parents or guardians served as informants. Responses were coded as *Yes*, *Sometimes*, or *No*, converted into numerical scores, summed, and compared with established norms.

Parents were asked separately for weekdays and weekends: 'How many hours per day does your child typically spend in front of screens (TV, tablet, mobile phone, computer)?' The response categories were: less than 1 hour, 1 hour, 2 hours, more than 2 hours. Data from weekdays were used for the analysis.

The study was conducted as a cross-sectional study. Approval was obtained from the Ministry of Education and Culture of Republic of Srpska and the Ethics Committee of the Faculty of Medicine in Foča. Only children whose parents provided written informed consent were included. Parents were free to withdraw at any time and were provided with contact information for clarification if needed.

Statistical Analysis

Statistical analyses were performed using SPSS version 24.0. Analysis of distribution normality indicated non-normal data distribution (Kolmogorov–Smirnov test: $K-S = .320$; $df = 200$; $p < .001$), therefore non-parametric statistics were applied. The Kruskal–Wallis test was used to examine group differences, followed by Mann–Whitney U tests for pairwise comparisons. For multiple comparisons, Bonferroni correction was applied, setting statistical significance at $p \leq 0.017$, while the general level of statistical significance was set at $p \leq 0.05$. Results are presented in tables.

Results

Table 1 presents the distribution of achievements on the communication scale in relation to the age of the participants (48, 54, and 60 months). According to the obtained results, in the 48-month age group no developmental delays were identified; six participants were classified in the monitoring zone, while 39 participants demonstrated development consistent with expected developmental norms. In the 54-month age group, developmental delays were identified in three participants, eight participants were classified in the monitoring zone, and 55 participants showed development in accordance with expected developmental norms. Among participants aged 60 months, two showed developmental delays, 11 were in the monitoring zone, and 76 demonstrated typical communication development. At the level of the total sample, 85% of participants showed typical development, 12.5% were in the monitoring zone, and 2.5% had identified delays in the area of communication (Table 1).

Table 1. Distribution of children's achievements on the communication scale (ASQ-3) in relation to participants' age (48, 54, and 60 months)

	Deviation		Monitoring zone		Typical development		Total	
	N	%	N	%	N	%		
48 months	0	0%	6	3%	39	19.5%	45	22.5%
54 months	3	1.5%	8	4%	55	27.5%	66	33.0%
60 months	2	1.0%	11	5.5%	76	38%	89	44.5%
Total	5	2.5%	25	12.5%	170	85%	200	100%

Table 2 presents the distribution of daily screen exposure duration for the entire sample in relation to WHO recommendations. According to the results, 24% of children spend less than one hour per day in front of screens or do not use screens at all, which is consistent with WHO recommendations. Additionally, 37% adheres to the maximum recommended duration of one hour per day. However, 39% of children exceeded the recommended screen time, indicating excessive daily screen exposure (Table 2).

Table 2. Daily screen exposure duration

WHO Recommendations	N	%
Less than 1 hour / no screen	48	24%
Up to 1 hour (recommended)	74	37%
Above recommended	78	39%
Total	200	100%

Note: 'Above recommended' refers to >1 hour per day, as WHO recommends ≤1 hour for children aged 2–5 years.

Table 3 presents differences in participants' achievements on the Communication scale in relation to the duration of their daily screen exposure. To examine differences among groups formed according to screen exposure duration and in accordance with WHO recommendations (less than 1 hour or no screen exposure; up to the recommended 1

hour; above the recommended duration), the Kruskal–Wallis test was applied. A statistically significant difference was found in communication assessment scores ($\chi^2 = 9.798$, $p = 0.007$) with respect to children's daily screen exposure. Subsequent post hoc analysis using the Mann–Whitney U test with Bonferroni correction of the alpha level ($p < 0.017$ considered statistically significant) indicated a statistically significant difference in communication scale achievements between children whose screen exposure was within the recommended limits and those whose screen use exceeded the recommended duration ($U = 2224.500$, $p = 0.007$). The mean rank values indicate that children exposed to screens within the recommended limits demonstrated better communication outcomes than those exposed to screens beyond the recommended duration. In addition, the statistically significant difference was observed between children who were exposed to screens for less than one hour per day or not at all and those who exceeded the recommended screen time ($U = 1433.500$, $p = 0.014$), indicating that children with less than one hour of screen exposure or no screen exposure achieved better communication outcomes than children whose screen use exceeded the recommended limits. No statistically significant difference was observed between the categories of children exposed to screens within the WHO-recommended limits (Table 3).

Table 3. Differences in participants' achievements on the Communication scale in relation to the duration of daily screen exposure

Scale	Daily screen exposure	Med.	Mean rank	Min.	Max.	Mann–Whitney U test	< 1 hour (or no screen time)	Recommended screen time: 1 hour
Communication	< 1 hour (or no screen time)	60.00	111.03	15	60.00	U Z p		1709.500 -.423 .673
	Recommended screen time: 1 hour	60.00	108.54	30	60.00	U Z p	1709.500 -.423 .673	
	Above the recommended allowance (> 1 hours)	55.00	86.39	20	60.00	U Z p	1433.00 -2.446 .014	2224.50 -2.697 .007

a) **Bonferroni correction** $\alpha = 0.017$; p-values: <1h vs 1h = 0.673; <1h vs >1h = 0.014; 1h vs >1h = 0.007.

b) **Higher mean** rank indicates better communication outcome.

Discussion

The primary aim of our study was to examine the association between the duration of screen exposure and communication outcomes in preschool children. Our results show that 24% of participants spend less than one hour per day in front of a screen or do not use screens at all, which is consistent with the recommendations of the World Health Organization (WHO) regarding permitted use of digital devices. Additionally, 37% of participants adhere to the recommended maximum of one hour per day, which is also in line with these guidelines. A concerning finding is that 39% of participants spend more time in front of screens than recommended, indicating excessive use of digital devices, i.e., excessive daily screen exposure among preschool children aged 48, 54, and 60 months, but causality cannot be inferred due to the cross-sectional design.

The obtained data are consistent with findings from numerous international studies indicating a high percentage of preschool children exceeding the WHO guidelines on recommended daily screen exposure [1–2, 4–8, 14–17]. For example, Cliff et al. [18] report that only 17.3%

of children comply with WHO guidelines, while similar percentages (15%) are reported by the Canadian Paediatric Society [5] and by Lee et al. [7]. An Irish study reports that 42% of children spend more than two hours per day in front of screens [19]; although the Irish study used a higher threshold (>2 hours) compared to our study (>1 hour), both indicate a substantial proportion of children exceeding guidelines. These data confirm that excessive screen exposure is a globally present phenomenon and that the results of our research do not represent an isolated case, but rather part of a broader behavioral pattern in early childhood.

Regarding the developmental aspect, the results of our study show that participants exposed to screens within the recommended limits (≤ 1 hour per day) achieve significantly better results on the communication scale compared to participants whose exposure exceeded the WHO guidelines. These findings directly indicate an association between prolonged screen time and poorer communication outcomes at an age when communication skills are developing intensively.

Similar findings have been reported in previous studies [8, 15, 20–24]. A longitudinal

cohort study using the Ages and Stages Questionnaire Third Edition (ASQ-3) demonstrated that prolonged screen time at 24 months predicts lower developmental outcomes at 36 months, and that extended screen time at 36 months leads to lower achievements at 60 months [15]. Madigan et al. [8] also confirmed that increased screen exposure in early childhood predicted developmental delays, with longer exposure (more than two hours per day) being associated with poorer results on the communication scale. In this context, the results of our study further confirm the consistency of these findings in a population of children aged 48–60 months.

From a developmental perspective, the period between 48 and 60 months is characterized by intensive vocabulary expansion, refinement of morphosyntactic structures, and the development of pragmatic skills, making this age particularly sensitive to environmental factors. According to the literature, language domains: lexicon, phonology, morphosyntax, and pragmatics are acquired primarily through interaction with adults [13]. Prolonged screen exposure may reduce the quantity and quality of such interactions, thereby limiting opportunities for active practice of communication skills [9]. Additionally, background media exposure may negatively affect expressive language, executive functions, and attention [20, 25]. Data reported by Ofcom [26] indicate that children aged three to four years spend the majority of their media time watching television (85%), and findings from regional studies [27] suggest that passive television viewing remains the dominant form of media exposure. Such a form of exposure, particularly without parental interaction, may increase the risk of language delay [20].

Findings by Collet et al. [25] further indicate that the frequency and content of screen exposure are significant factors, with children exposed to screens in the morning before preschool being three times more likely to develop language disorders. This likelihood was

further increased when parent–child discussions about screen content were rare or absent. However, the literature also presents differing results [28–30]. Some studies report no significant association between total screen time and expressive vocabulary [29], while Zhang et al. [30] highlighted an association with working memory but not with expressive language. Nevertheless, given that receptive language development precedes expressive language, potential delays in speech comprehension may indirectly affect speech production, particularly during the sensitive preschool period.

However, results should be interpreted in light of limitations: the cross-sectional design does not allow causal inferences, the assessment of communication and screen time relied on parent reports, and we did not control for parental education, content type, or interaction quality. Furthermore, the ASQ-3 has not been validated for the population of Republic of Srpska.

Taking into account the obtained results, as well as findings from previous studies, it can be concluded that prolonged screen exposure represents a potential risk factor for communication development in children aged 48–60 months. Therefore, consistent adherence to WHO guidelines regarding permitted screen time is of particular importance, as well as attention to content quality and the presence of joint parent-child media engagement.

Conclusion

The results of this study indicate a significant association between the duration of daily screen exposure and communication outcomes in preschool children. The significant difference was found between children whose screen exposure was within the recommended guidelines and those who exceeded them, with better results on the communication scale achieved by children with shorter or moderate exposure. At the same time, it is

concerning that a substantial percentage of children spend more time in front of screens each day than recommended, highlighting the need for systematic preventive action.

Attention should be directed toward further identifying the factors contributing to excessive screen use and toward developing

clear guidelines for parents regarding permitted duration, appropriate content, suitable technology, and joint activities related to preschool children's screen time. Future longitudinal studies should include objective screen time measures and control for parental education and interaction quality.

Funding source. This article is the result of the project entitled "Examination of the Screenization Phenomenon and Its Impact on Early Growth and Development in Children", co-funded by the Ministry of Scientific and Technological Development and Higher Education of Republic of Srpska and the Faculty of Medicine Foča, University of East Sarajevo. The project is registered under reference number 19.032/961-85/23.

Ethical approval. The Ethics Committee of the Faculty of Medicine Foča, University of East Sarajevo, Republic of Srpska, Bosnia and Herzegovina, approved the protocol and informed voluntary consent was obtained from all individual respondents and non decline to participate. The research was conducted according to the Declaration of Helsinki.

Conflicts of interest. The authors declare no conflict of interest.

References:

1. Muppalla SK, Vuppapapati S, Pulliahgaru AR, Sreenivasulu H. Effects of excessive screen time on child development: an updated review and strategies for management. *Cureus* 2023;15(6):e40608. doi: 10.7759/cureus.40608.
2. Byrne R, Terranova CO, Trost SG. Measurement of screen time among young children aged 0–6 years: A systematic review. *Obes Rev* 2021;22(8):e13260. doi: 10.1111/obr.13260.
3. World Health Organization. Guidelines on physical activity, sedentary behaviour and sleep for children under 5 years of age [Internet]. Geneva: World Health Organization; 2019 [cited 2025 Feb]. Available from: <https://apps.who.int/iris/handle/10665/311664>
4. Li C, Cheng G, Sha T, Cheng W, Yan Y. The relationships between screen use and health indicators among infants, toddlers, and preschoolers: a meta-analysis and systematic review. *Int J Environ Res Public Health* 2020;17(19):7324. doi: 10.3390/ijerph17197324.
5. Barnes JD, Cameron C, Carson V, Chaput JP, Faulkner GE, Janson K, et al. Results from Canada's 2016 ParticipACTION report card on physical activity for children and youth. *J Phys Act Health* 2016;13(11 Suppl 2):S110–S116. doi: 10.1123/jpah.2016-0300.
6. Määttä S, Kaukonen R, Vepsäläinen H, Lehto E, Ylönen A, Ray C, et al. The mediating role of the home environment in relation to parental educational level and preschool children's screen time: a cross-sectional study. *BMC Public Health* 2017;17(1):688. doi: 10.1186/s12889-017-4694-9.
7. Lee EY, Hesketh KD, Hunter S, Kuzik N, Rhodes RE, Rinaldi CM, et al. Meeting new Canadian 24-hour movement guidelines for the early years and associations with adiposity among toddlers living in Edmonton, Canada. *BMC Public Health* 2017;17(Suppl 5):840. doi: 10.1186/s12889-017-4855-x.
8. Madigan S, Browne D, Racine N, Mori C, Tough S. Association between screen time and children's performance on a developmental screening test. *JAMA Pediatr* 2019;173(3):244–50. doi: 10.1001/jamapediatrics.2018.5056.
9. Khan KS, Purtell KM, Logan J, Ansari A, Justice LM. Association between television viewing and parent-child reading in the early home environment. *J Dev Behav Pediatr* 2017;38(7):521–7. doi: 10.1097/DBP.0000000000000465.
10. Martinot P, Bernard JY, Peyre H, De Agostini M, Forhan A, Charles MA, et al. Exposure to screens and children's language development in the EDEN mother-child cohort. *Sci Rep* 2021;11(1):11863. doi: 10.1038/s41598-021-90867-3.

11. Posokhova I. Razvoj govora i prevencija govornih poremećaja u djece: priručnik za roditelje. Zagreb: Ostvarenje; 2008.
12. Madžar Čančar A, Čalasan S, Vuković B, Mićević J, Živanović S. The impact of the type of digital content on the communication of preschool children. *Multidisciplinary Approaches in Education and Rehabilitation (MPER)* 2025;7(10):86–94. doi:10.59519/mper7208
13. Mustonen R, Torppa R, Stolt S. Screen time of preschool-aged children and their mothers, and children's language development. *Children (Basel)* 2022;9(10):1577. doi: 10.3390/children9101577.
14. Bozzola E, Spina G, Ruggiero M, Memo L, Agostiniani R, Bozzola M, et al. Media devices in preschool children: the recommendations of the Italian pediatric society. *Ital J Pediatr* 2018;44(1):69. doi: 10.1186/s13052-018-0508-7.
15. Duch H, Fisher EM, Ensari I, Font M, Harrington A, Taromino C, et al. Association of screen time use and language development in Hispanic toddlers: a cross-sectional and longitudinal study. *Clin Pediatr (Phila)* 2013;52(9):857–65. doi: 10.1177/0009922813492881.
16. Lauricella AR, Wartella E, Rideout VJ. Young children's screen time: The complex role of parent and child factors. *J Appl Dev Psychol* 2015;36:11–7. doi:10.1016/j.appdev.2014.12.001.
17. Veldman SLC, Altenburg TM, Chinapaw MJM, Gubbels JS. Correlates of screen time in the early years (0–5 years): A systematic review. *Prev Med Rep* 2023;33:102214. doi: 10.1016/j.pmedr.2023.102214.
18. Cliff DP, McNeill J, Vella SA, Howard SJ, Santos R, Batterham M, et al. Adherence to 24-hour movement guidelines for the early years and associations with social-cognitive development among Australian preschool children. *BMC Public Health* 2017;17(Suppl 5):857. doi: 10.1186/s12889-017-4858-7.
19. Beatty C, Egan SM. Screen time in early childhood: A review of prevalence, evidence and guidelines. *An Leanhb Óg* 2020;13(1):17–31.
20. Massaroni V, Delle Donne V, Marra C, Arcangeli V, Chieffo DPR. The Relationship between Language and Technology: How Screen Time Affects Language Development in Early Life—A Systematic Review. *Brain Sci* 2023;14(1):27. doi: 10.3390/brainsci14010027.
21. Byeon H, Hong S. Relationship between television viewing and language delay in toddlers: evidence from a Korea national cross-sectional survey. *PLoS One* 2015;10(3):e0120663. doi: 10.1371/journal.pone.0120663.
22. Chonchaiya W, Pruksananonda C. Television viewing associates with delayed language development. *Acta Paediatr* 2008;97(7):977–82. doi: 10.1111/j.1651-2227.2008.00831.x.
23. Madigan S, McArthur BA, Anhorn C, Eirich R, Christakis DA. Associations between screen use and child language skills: a systematic review and meta-analysis. *JAMA Pediatr* 2020;174(7):665–75. doi: 10.1001/jamapediatrics.2020.0327.
24. Rithipukdee N, Kusol K. Factors associated with the suspected delay in the language development of early childhood in southern Thailand. *Children* 2022;9(5):662. doi: 10.3390/children9050662.
25. Collet M, Gagnière B, Rousseau C, Chapron A, Fiquet L, Certain C. Case control study found that primary language disorders were associated to screen exposure at 3.5–6.5 years of age. *Acta Paediatr* 2018;108(6):1103–9.
26. Ofcom. Children and parents: media use and attitudes report 2022 [Internet]. London: Ofcom; 2022 [cited 2025 Feb]. Available from: <https://www.ofcom.org.uk/media-use-and-attitudes/media-habits-children/children-and-parents-media-use-and-attitudes-report-2022/>
27. Madžar Čančar A, Čalasan S, Vuković B, Živanović S, Mastilo B, Bakoč A, et al. Screen time in preschool-aged children. *Multidisciplinarni pristupi u edukaciji i rehabilitaciji* 2024;6(7):57–65.
28. Singh SJ, Mohd Azman FNS, Sharma S, Razak RA. Malaysian parents' perception of how screen time affects their children's language. *J Child Media* 2021;15(4):588–96. doi: 10.1080/17482798.2021.1938620
29. Vohr BR, McGowan EC, Bann C, Das A, Higgins R, Hintz S, et al. Association of high screen-time use with school-age cognitive, executive function, and behavior outcomes in extremely preterm children. *JAMA Pediatr* 2021;175(10):1025–34. doi: 10.1001/jamapediatrics.2021.2041.
30. Zhang Z, Adamo KB, Ogden N, Goldfield GS, Okely AD, Kuzik N, et al. Associations between screen time and cognitive development in preschoolers. *Paediatr Child Health* 2022;27(2):105–10. doi: 10.1093/pch/pxab067.

Povezanost vremena provedenog pred ekranom sa komunikacijom kod djece predškolskog uzrasta

Ana Madžar Čančar¹, Slađana Čalasan¹, Bojana Vuković¹, Sanja Živanović¹, Ajla Mahmutović Babić²

¹Univerzitet u Istočnom Sarajevu, Medicinski fakultet Foča, Foča, Republika Srpska, Bosna i Hercegovina

²Javna ustanova Centar za socijalni rad Cazin, Cazin, Bosna i Hercegovina

Uvod. Pod terminom ekranizacija (*screen time*) podrazumijeva se ukupno vrijeme provedeno ispred različitih ekrana na dnevnom nivou. S obzirom na negativne posljedice koje pretjerana izloženost ekranima može ostaviti na različite razvojne domene djece ranog uzrasta, Svjetska zdravstvena organizacija (WHO) je dala određene preporuke o dozvoljenom vremenu koje ispred ekrana mogu provesti djeca ranog uzrasta. Osnovni cilj istraživanja bio je ispitivanje povezanosti između dužine dnevne izloženosti ekranima i postignuća u oblasti komunikacije kod djece predškolskog uzrasta.

Metod. Uzorak je činilo 200 djece predškolskog uzrasta, od 48 do 60 mjeseci starosti, oba pola. U istraživanju je korišćen standardizovani instrument Ages & Stages Questionnaires (ASQ-3) koji se koristi za procjenu razvoja djece na uzrastu od jednog mjeseca do 66 mjeseci i posebno konstruisan sociodemografski upitnik. Istraživanje je realizovano u predškolskim ustanovama na području istočne regije Republike Srbije, od aprila do juna 2024. godine.

Rezultati. Naši rezultati pokazuju da je 39% djece predškolskog uzrasta izloženo uticaju ekrana više od dozvoljenih smjernica WHO. Uočena je značajna razlika u postignućima na skali komunikacije u korist djece koja su bila izložena ekranima manje od jednog sata dnevno ili uopšte nisu koristila ekrane, u odnosu na djecu koja su ekrane koristila duže vremena od preporučenog.

Zaključak. Pažnju bi trebalo usmjeriti ka daljem identifikovanju faktora koji dovode do prekomjernog korišćenja ekrana i kreiranju jasnih smjernica namijenjenih roditeljima o dozvoljenom vremenu, poželjnim sadržajima, adekvatnoj tehnologiji i zajedničkim aktivnostima vezanim za screen time kod djece predškolskog uzrasta.

Ključne riječi: ekranizacija, screen time, komunikacija, djeca predškolskog uzrasta