**Literature Review**

According to Olszewski (2015), screened electronic devices are quite effective at capturing children’s and parent’s attention. Now, an integral part of the daily lives of people, screened electronic devices such as computers, entertainment centers, gaming devices, laptops, smartphones, and tablets serve as portable offices, entertainment centers, and a means to stay connected with others. Research focusing on television viewing, the older and more traditional type of screen time, has suggested that television is positively correlated with aggression, attention problems, obesity, and poor academic performance (Olszewski, 2015). It is suspected that screen time, which includes all screened devices, may have potentially child developmental, educational, parent-child relational, and social consequences. The exposure to electronic devices has increased exponentially in the past decade, suggesting some urgency to investigate, measure, and understand this phenomenon and its potential impact, particularly on children. New technologies in the lives of people have not only altered communication, study, and work patterns.

Screen time, as defined by investigators, not only includes television, but can be described as the total time spent engaged in visual media activities, which includes engagement with devices such as television, video, computer, electronic games, hand-held devices, and other visual devices (Mayo Clinic, 2015).

The explosion of digital technology ownership in the last five years has created a dramatic shift in how youth and families use technology (Rainie and Smith, 2015). Further, the increased access to new digital media (e.g. smartphones and tablets) devices has contributed to a rapid rise in average screen time exposure for children. Total daily screen time across devices in children 8-to 18-years old has risen from five to approximately eight hours (Rideout et al., 2015), far exceeding the American Academy of Pediatric’s (AAP) recommendation of two hours or less.

Excessive screen time in childhood is associated with behavioral health problems. However, the process by which screen time increases these problems has not been elucidated. One potential mechanism of this association is youth sleep quality: There are established individual associations between youth screen time and compromised sleep duration and quality as well as between sleep and a variety of childhood behavioral health outcomes (e.g., internalizing, externalizing, & peer problems). The mechanisms by which higher levels of screen time cause sleep disturbances have been attributed to environmental, psychosocial, and biological causes. One of these environmental sources is the use of screen-based activities, which often delays bedtime or truncates total sleep time. One psychosocial source may be arousal due to the content of the media, interfering with the ability to fall and stay asleep. And finally, one potential biological mechanism is the effect of screen light on both circadian rhythm and alertness.

The presence of electronics devices in the bedtime after the bedtime was more likely to result sleep deficiency (Buxton et al. 2015). Reducing the electronic gadget before the time for sleeping is, according to Buxton et al, one of the intervention goals of the Public Health to promote well known sleep hygiene practices of families and individuals.

Household rules and regular sleep routines help children to have adequate sleep. The restrictions for caffeine, established regular time for sleep, and other household sleep hygiene and activities protects the children from having inadequate sleep and it also increase the quantity of the sleep time.

Results shows that children who slept near a small screen have fewer minutes of sleep compared to children who doesn’t. Shorter sleep time durations are concluded to be one of the effects of sleeping in a room with a small screen or a TV. Sleep environment is considered to be one of the factors of the duration of time for sleeping. (Falbe et al. 2015).

Children’s screen access in bedroom before the sleep time, without parent’s or guardian’s restrictions and/or guidance, must be reduced or must be rethink cautiously. The sleep environment, with a presence of small screen or TV, shows a significant relationship to having insufficient rest or sleep.

In this article previous research on associations between screen time and psychological well-being between children and adolescents has been conflicting, leading some researchers to question the limits of screen time suggested by medical organizations. (Twenge & Campbell, 2019).

Rather than set a time limit for children ages 6 and older, the AAP advises implementing consistent limits on time spent and the types of media used. The author stated Psychological well-being was progressively reduced from 1 h a day of screen time to 7 or more hours a day of screen time, particularly among adolescents, across a diverse range of well-being measures, including self-control measures, relationships with caregivers, emotional stability, diagnoses of anxiety and depression, and mental health treatment. In addition, between screen time and well-being may have significant clinical consequences for students and adolescents' personal health and for providing guidance for specific screen time limits for older children and adolescents. (Twenge & Campbell, 2019).

It has been revealed that teens who spend more than 7 hours a day on screens were significantly more likely to have been struggling with anxiety or depression—a substantial finding as those spending one hour. Overall, among teenagers, the link between screen time and well-being was greater than among young kids. (Twenge & Campbell, 2019).

In the article “Reduced screen time for young highly recommended for well-being” the author states that teens who spend more than 7 hours a day on screens were significantly more likely to have been struggling with anxiety or depression—a substantial finding as those spending one hour. Overall, among teenagers, the link between screen time and well-being was greater than among young kids. (Twenge & Campbell, 2019).

However, according to Ferguson 2017, the author stated that there is only a small connection between excessive screen time and higher levels of depression and misbehavior among adolescents. Most likely, even though children spend hours playing video games or watching TV, spending a huge amount of time in front of a screen will not harm the health of the kids. Therefore, Ferguson believes the strict focus of policymakers and advocacy organizations on minimal screen time is not needed (Ferguson, 2017).

In the article written by Hulick (2020), The American Academy of Pediatrics changed its screen-time guidelines in 2015. The group suggested a recommendation for screen time before which was 2 hours or less per day. While the study for this matter was continuous, they found out that there is no right time limit for screen time. Instead, the Academy suggests that making sure that any sleep or active time won’t get replaced by screen time. The guidelines also advise parents to put aside their gadgets while spending time with their kids.

In the article written by Mocon-Ciriaco (2020), According to the Department of Health (DOH), “students may experience health concerns related to increased screen time such as fatigue, headache, lack of motivation, and avoidance/procrastination among others”. In addition, the department discuss that to avoid such concerns schools must adopt a combination of asynchronous online teaching in consideration of the guidelines for screen time given by particular age as recommended by American Academy of Pediatrics and Word Health Organization.