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ADDIS ABABA UNIVERSITY

COLLEGE OF HEALTH SCIENCES

DEPARTMENT OF PEDIATRICS AND CHILD HEALTH

**Screen Time, Associated Factors, and Language Development in
Young Children Attending Daycare in Addis Ababa, Ethiopia,
2025**

By: Dr. Meskerem Abebe (Resident year-3)

February, 2025

Addis Ababa, Ethiopia

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ACRONYMS/ABBREVIATIONS

AAP	American Academy of Pediatrics
AAU	Addis Ababa University
ASD	Autistic Spectrum Disorder
ASQ3	Ages and Stages Questionnaire edition 3
CDI	MacArthur-Bates Communicative Development Inventory scores.
CP	Cerebral Palsy
FCO	Female and Child Office
HC	Health Center
JFK	Jon F. Kennedy
PS	Primary School
SPSS	Statistical Package for Social Sciences
SS	Secondary School
ST	Screen Time
TASH	Tikur Anbessa Specialized Hospital
TV	Television
WHO	World Health Organization

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ABSTRACT

Background: Screen time refers to the duration spent using electronic devices. Increased screen time in young children is linked to language delays, particularly when exposure begins before age one. The AAP recommends no screen time for children under 2 and limits of one hour per day for those aged 2-5, supervised by caregivers. There is limited research on this topic within our population.

Objective: To assess the prevalence of excessive screen time, associated factors and its language outcome in children aged between 1- and 4-years attending daycare centers of Arada and Yeka sub cities, Addis Ababa, Ethiopia.

Methods: A cross-sectional study was conducted from January 15, to February 15, involving 332 randomly selected children aged 1 to 4 years in Addis Ababa, Ethiopia. Data were collected using a questionnaire, language outcome were screened by standardized ASQ3 tool and analyzed with SPSS version 30. Descriptive statistics summarized characteristics, while bivariable and multivariable regression analyses identified factors associated with excessive screen time, calculating odds ratios (OR) with 95% confidence intervals (CI). A p-value <0.05 was deemed statistically significant, with findings presented through texts, tables, and figures.

Results: In total, 306 children included in this study, yielding a response rate of 92.2%. The median age of the children was 40 months (interquartile range: 28–48). Excessive screen time was observed in 69.9% of the sample (95% CI: 64.8–75.1%; n = 214), while language delay was identified in 6.5% (n = 20). Factors associated with excessive screen time included age <2 years (AOR = 12.72; 95% CI: 3.22-50.35), having seldom to often supervision during electronics use (AOR (95% CI) of 2.38 (1.03,5.50) and 6.13 (2.79-13.16), respectively), Mother's screen time >2 hours per day (AOR = 2.39; 95% CI: 1.17-4.87), first-time exposure to media before twelve months and in the second year of life (AOR = 3.63; 95% CI: 1.16,13.16 and AOR = 3.90; 95% CI: 1.16,13.16), respectively). Chi-square analysis revealed a significant association between excessive screen time and language delay ($\chi^2 = 4.10$, p = 0.043).

Conclusion: These findings highlight a concerning prevalence of excessive screen time among young children, particularly those under two years old. Significant associations with language delay underscores the need for targeted interventions and parental guidance to mitigate screen exposure and promote healthy developmental outcomes. Addressing these factors may help reduce the risk of language delays in early childhood.

Key words: preschool children, screen time, language delay, associated factors, daycare centers, Ethiopia

1. INTRODUCTION

1.1 Background

The pervasive expansion of electronic media has fundamentally reshaped the environments in which children are raised. In this era of rapid technological advancement, young children are increasingly growing up in households characterized by readily available, portable, and interactive screen-based devices. All forms of media, especially visual media, play an increasing role in the lives of pediatric population (1,2).

According to the American Academy of Pediatrics (AAP) guidelines, children under the age of 2 should not have any screen time. For children aged 2 to 5 years, screen time should be limited to one hour per day, focusing on high-quality educational content and supervised by caregivers. A daily screen time of three hours is deemed excessive for this age group (3,4).

Typical language function relies on a complex, distributed neural network that integrates respiratory and auditory systems. Language development commences in utero, with an infant's first cry serving as an initial form of communication to express needs (5,6).

Speech and language development milestones are crucial during a period characterized by rapid language acquisition, heavily influenced by environmental stimulation and linguistic input from caregivers. Notably, infants aged 18 to 24 months experience a "word-learning explosion," where their vocabulary expands exponentially (7,8). Language serves as a fundamental medium for expressing and understanding complex ideas, acquired through both receptive and expressive forms from early childhood (8,9). Ultimately, speech and language are essential tools for sharing and exchanging information, thoughts, ideas, and emotions (10).

Language impairment is one of the most common developmental disorders in early childhood (11,12). Studies indicate that the prevalence of language and speech delays varies significantly, with rates reported as low as 11.9% in Iraqi children and as high as 65% in Ethiopian populations (12,13). Specifically, an Ethiopian study found that the overall prevalence of global developmental delay stands at 28.13%. Within this cohort, fine motor skills account for 30.53%, personal and social development comprises 21.15%, while problem-solving abilities contribute the least at 18.28% (14).

In the United States, a nationally representative survey indicates that 68% of children under the age of two use screen devices on a typical day (15,16). According to Varadarajan et al. in India, 73% of children under five years of age experience excessive screen time (17).

Several studies suggest a link between screen media use and developmental delays, especially in language (8,18–20). Higher amounts of screen time, and early exposure before the age of one, are significantly associated with delays in language acquisition and communication skills (17).

Several studies indicate a high prevalence of excessive screen time among children with speech and language delays. A 2022 cross-sectional study in Malaysia found that 90.3% of 62 children aged 1-5 years with speech and/or language delay had excessive screen time (15). Similarly, research in Mosul, Iraq, revealed that 82.9% of 237 toddlers with language delay were exposed to screens before the age of 24 months. The most frequently used devices were television (89%), tablets (75.9%), smartphones (22.4%), and PCs (0.1%) (21). In the UAE, Al Hosani et al. found that 90.3% of children with speech and language developmental delays use electronic devices⁸. Furthermore, according to Byeon, the prevalence of language delay in two-year-old toddlers who watch TV is 5.2% (9).

1.2 Statement of the problem

In the United States, excessive screen time among children is a prevalent issue, with 87% exceeding the recommendations set by the American Academy of Pediatrics (AAP) (11). This trend is also observed globally, as evidenced by a study indicating that 73% of Indian children under the age of 5 years engage in excessive screen time (17). Furthermore, a national survey in the U.S. reveals that 68% of children under the age of 2 years use screen devices on a typical day (15,16). Research by Meta van den Heuvel et al. indicates that approximately 46% of children under 2 years old in the U.S. use a mobile media device at least once. Similarly, nearly half (43.5%) of children aged 1 year from low-income urban populations in the U.S. use mobile media devices daily (22).

The findings from a Japanese study conducted in 2021 reveal significant insights into the screen time habits of children aged 1 to 4 years. Specifically, it was reported that 48.5% of these children engage in less than one hour of screen time daily, while 29.5% spend between one and two hours, 17.9% between two and four hours, and a small percentage, 4.1%, exceed four hours per day (23). Complementing this data, a Korean study indicates that the average daily television watching time for preschoolers is approximately 1.21 hours (9).

Further research from Germany in 2020 highlights that 24% of preschoolers aged 2 to 5 years experience high screen times of one hour or more each day, with television being the predominant medium consumed by these children (24). In Helsinki, a study conducted in 2022 found that preschool-aged children average about 79 minutes of daily screen time, which includes 44 minutes of independent screen use and 34 minutes spent viewing content with a parent. Notably, mothers reported an average daily screen time of 5 hours and 34 minutes, even during work hours (25).

Excessive screen media exposure is associated with language delays in children, especially when exposure is high and begins before the age of one (7,26–28). Early and excessive screen time, exceeding the recommendations of the AAP, is significantly associated with speech delays. Research indicates that screen time exceeding two hours per day is associated with delays in language acquisition. (7,27,28) Unsupervised screen use is also correlated with a higher percentage of children experiencing speech delays (29). Parental screen habits also influence children's screen time, as children tend to mirror the behaviors they observe in their caregivers (30,31).

Increased screen time is significantly associated with developmental delays, specifically in language acquisition and communication skills (27,32,33). Furthermore, studies suggest that increased screen media exposure is linked to negative outcomes in other developmental areas, including interpersonal, motor, cognitive, and psychosocial development (34,35).

In urban settings, many parents and guardians are exposing their children to electronic devices like cell phones and tablets, sometimes without fully understanding the implications (36,37). Evidence suggests a connection between this exposure and language-related challenges in children, particularly those with a history of substantial screen time. This observation leads to the question of whether early exposure to screen time adversely affects language development (8,18,20,38–40). Current research indicates a potential link between the use of screen media and speech delays, noting that children's screen habits often reflect those of their caregivers, and unsupervised screen use correlates with increased instances of speech delay (8,18,20,38–40). Given the malleable nature of young children's social and intellectual growth, there is a pressing need to investigate the relationship between screen time and language development (7,32). Moreover, local data on screen time prevalence, various socio-demographic factors, and the overall impact of screen time on language development in young children remains significantly lacking.

1.3 Significance of the study

This study aims to evaluate baseline information regarding the prevalence, impact, and associated sociodemographic factors of screen time on language outcomes. The findings from this research are significant for several reasons. The results will contribute to understanding how screen time exposure may lead to developmental delays in language acquisition, thereby informing strategies to improve language development in children. The study advocates for the incorporation of screen time assessments as a standard component of well-baby visits, promoting proactive monitoring and guidance for parents. The insights gained from this investigation will serve as a critical foundation for the development of future drafts and national guidelines concerning screen time recommendations. This research will provide a valuable resource for both digital media researchers and health professionals, facilitating further studies that explore the intricate relationship between screen time and child development.

2. LITERATURE REVIEW

2.1 Introduction

The use of electronic media has grown substantially worldwide. In this era of technological advancement, young children are increasingly growing up in environments with high availability, portability, interactivity, and functionality of screen devices (1,41). Health professionals and pediatricians advise that children younger than two years old should not have any screen time, while those aged two to five years should be limited to one hour per day of high-quality, educational programs, with caregiver supervision. This definition is based on the AAP guidelines, which state that children in this age group should be limited to a maximum of 1 hour per day of high-quality, educational programming, with caregiver co-viewing. Screen time exceeding three hours daily is considered excessive for children in this age group (1,41). The World Health Organization (WHO) defines excessive screen media use as any exposure to media devices for children aged 0–12 months, or more than one hour per day for children aged 2–7 years (42).

Language development begins in utero, with the first cry after birth marking an infant's initial communication of needs⁴. Speech and language development milestones are critical during this sensitive period of rapid language acquisition, as environmental stimulation and linguistic input are obtained from caregivers. Infants aged 18 to 24 months, in particular, experience a "word-learning explosion," characterized by an exponential increase in vocabulary (7,8). Language, encompassing both receptive and expressive communication through spoken or visual forms, is essential for expressing and understanding thoughts, ideas, emotions, and information (43).

2.2 Prevalence of language delay in children

Language impairments are among the most common developmental disorders in early childhood (11,12). Overall, the prevalence of speech and language disorders and developmental delays varies across different populations and studies. Studies show varying prevalence rates depending on the population studied and the criteria used for diagnosis. For example, one study found the prevalence of language delay in 2-year-old toddlers who watch TV to be 5.2% (9). Another study reported the prevalence of global developmental delay to be 28.13%, fine motor skills delay to be 30.53%, personal and social domain delay to be 21.15%, and problem-solving delay to be 18.28% (17). A further study found the prevalence of language and speech delay to be 65% in St. Paul, Ethiopia, and 11.9% elsewhere (12).

2.3 Global prevalence of excessive screen time in children

Screen time among children is a growing concern worldwide, with many exceeding recommended limits (17,44). In the United States, 87% of children surpass the screen time guidelines set by the American Academy of Pediatrics (AAP) (11). Research from India indicates that 73% of children under the age of five experience excessive screen time (17). Furthermore, a survey in the United States found that 68% of children under two years old use screen devices on a typical day (45).

Studies show that mobile media device usage is common among young children (46–48). Meta van den Heuvel et al. reported that, in the US, an average of 46% of children under two years old use a mobile media device at least once, while another similar study in the US found that nearly half (43.5%) of children aged one year from low-income urban settings use mobile media devices daily (22).

Screen time varies across different countries (17,37,44,48). A 2021 Japanese study reported that among children aged one to four years, 48.5% have less than one hour of screen time, 29.5% have one to less than two hours, 17.9% have two to less than four hours, and 4.1% have four or more hours of screen time (23). Research conducted at Lahore Doctors University Hospital in Pakistan found that 65.7% of participants use

mobile phones, 28.6% watch television, and 5.7% play video games, with screen time durations as follows: 20.4% use devices for one to three hours, 33.0% for three to six hours, 35.5% for six to nine hours, and 11.0% for more than nine hours daily (8).

Additional studies provide further insights. According to a Korean study, the average daily TV viewing time is 1.21 hours (9). In Germany (2020), 24% of preschoolers aged two to five years have high screen times (≥ 1 hour/day), with television being the most common medium (24). A recent research in Helsinki showed that the average daily screen time for preschool-aged children is 79 minutes, consisting of 44 minutes of individual screen time and 34 minutes of screen time with a parent. The study also noted that mothers average 5 hours and 34 minutes of daily screen time, including during working hours (25). In the USA, only 24% of toddlers from low-income homes are exposed to the AAP recommendation of an hour or less of media per day (49).

2.4 Impact of excessive screen time on language outcomes

Exposure to screen media, especially when initiated before the age of one and exceeding recommended time limits, is associated with language delay (8,18,19). Increased screen time correlates significantly with developmental delays, particularly in language acquisition and communication skills. Beyond language development, heightened screen media exposure is linked to negative outcomes across other developmental domains, including interpersonal, motor, cognitive, communication, and psychosocial development (17).

Toddlers who watch TV for more than two hours per day face a greater risk of language delay compared to those with less than one hour of daily screen time (9). A review of 11 articles revealed that a significant number of children exhibit excessive screen use, with one study reporting that 89.4% of participants exceeded recommended screen time limits (50).

Studies indicate that screen time exceeding two hours per day is associated with delays in language acquisition (21,28,50). A study by Aziz et al. found a notable correlation between speech delay and screen viewing in children who spend more than four hours per day in front of screens (21). Similarly, research by Schwarzer et al. revealed that screen time exceeding one hour per day is significantly associated with lower percentile ranks in cognition, language, and social-emotional skills (24).

However, some studies have not found a definitive link between screen time and language skills. Research focusing on highly educated families in the UK found no significant associations between television viewing or mobile device use and vocabulary size in children aged 6 to 36 months. Another study, spanning from preschool to the third grade, found no significant association between media use and receptive and expressive vocabulary. Additionally, a study by Dynia et al. suggested that adhering to the AAP recommendations for media exposure is not related to toddlers' language skills (49).

Research by McArthur et al. observed the strongest associations between extended screen time (≥ 3 hours/day) and internalizing problems, as well as at-risk delays in language acquisition (51). A cross-sectional study conducted in Malaysia in 2022, involving 62 children aged 1-5 years with isolated speech and/or language delay, revealed that 90.3% of them had excessive screen time (15). Similarly, a study by Al Hosani et al. in the UAE found that 90.3% of children with speech and language developmental delays use electronic devices (7). A study conducted in Mosul, Iraq, involving 237 toddlers with isolated language delay, found that 82.9% were exposed to screen media before the age of 24 months. The most common digital screen media used were television (89%), tablets (75.9%), and smartphones (22.4%) (21).

2.5 Determining factors of excessive screen time and language delay

According to Dewi et al., factors such as male gender, high screen time, and low socioeconomic status are associated with speech delays in Indonesian children (11). A study conducted in India found that excessive screen time is significantly linked to maternal screen usage, screen use at bedtime, birth order in children under two years, and school attendance in children over two years (17). Similarly, another study indicated that high maternal screen time (over five hours per day) correlates with increased media use by children (24).

Contrasting these findings, Fredrick et al. observed that the amount of parental viewing alongside their children did not significantly correlate with scores on the Communicative Development Inventory (CDI) for either infants or toddlers. Their research also revealed no significant relationship between any form of media exposure and CDI scores (19).

In a U.S.-based study, the relationship between television viewing and language outcomes was most pronounced for specific programs rather than total viewing time or broader content categories (52). The study highlighted that both higher individual screen time for children and their mothers was associated with weaker lexical skills and general language development (25,53). Furthermore, young children's exposure to age-inappropriate programming was negatively correlated with language and cognitive outcomes. Notably, interactive co-viewing emerged as a critical factor in enhancing toddlers' word learning from screens (54).

2.4 Conceptual framework

This is the conceptual framework developed specifically for this study by the principal investigator after reviewing related studies (13,55,56) in which this study is intended to focus. This framework aims to explore the multifaceted aspects influencing excessive ST among preschool children. The framework is believed to support the present study.

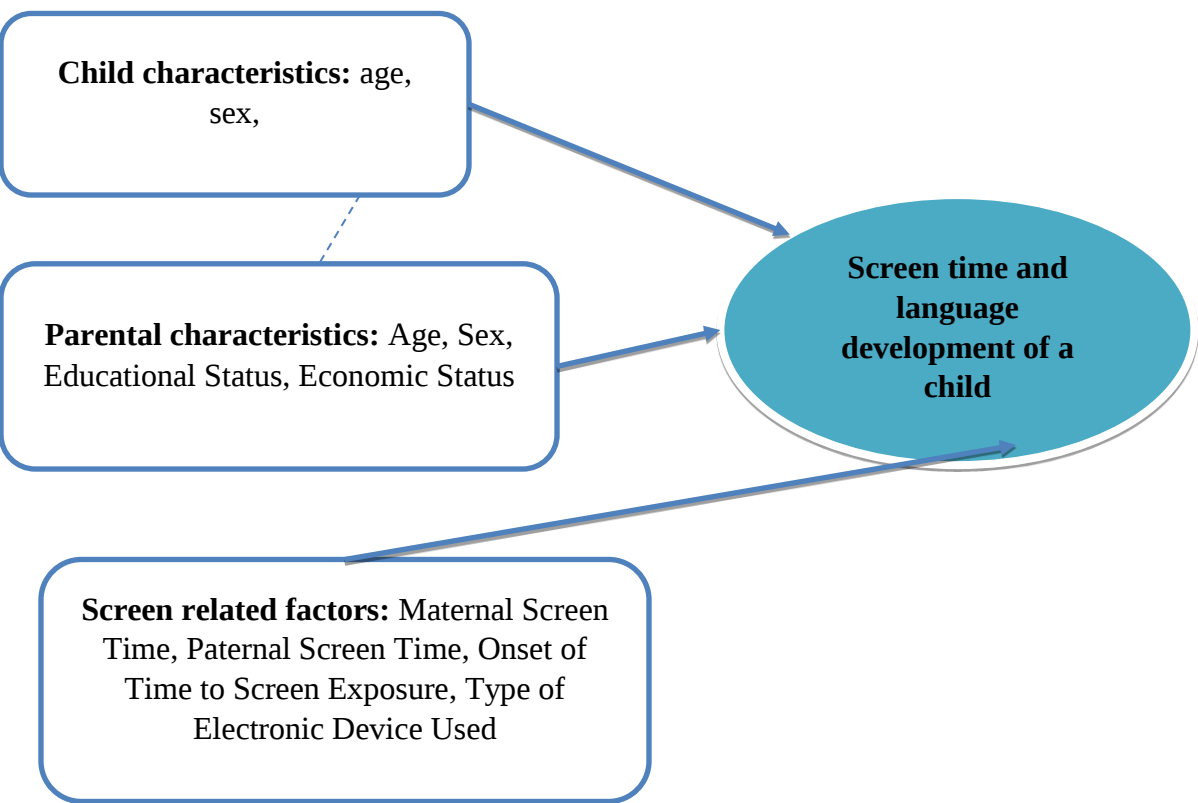


Figure 1. Conceptual framework for potential factors associated with screen time among children (13,55,56)

3. OBJECTIVES

3.1 General objective

- To assess the prevalence of excessive screen time and its association with language outcome in children aged between 1 and 4 years at Addis Ababa, Ethiopia.

3.2 Specific objectives

- To determine the prevalence of excessive screen time among children aged 1 to 4 years in daycare centers in Addis Ababa, Ethiopia.
- To determine the prevalence of excessive screen time among children aged 1 to 4 years in daycare centers in Addis Ababa, Ethiopia.
- To determine factors associated with excessive screen time among children aged 1 to 4 years in daycare centers in Addis Ababa, Ethiopia.
- To assess the level of language delay in children aged 1 to 4 years in daycare centers in Addis Ababa, Ethiopia.
- To determine the association between excessive screen time and language development outcomes in children aged 1 to 4 years in daycare centers in Addis Ababa, Ethiopia.

4. METHODS AND MATERIALS

4.1 Study area and period

The study was conducted in daycares of Addis Ababa City. The study period extended from January 15, to February 15, 2025.

4.2 Study design

A community-based, cross-sectional study was conducted.

4.3 Population

4.3.1 Source population

The source population for this study comprised all children aged one to four years attending daycare centers within Addis Ababa.

4.3.2 Study population

The study population consisted of children between one and four years of age enrolled in daycare centers located in the Arada and Yeka sub-cities of Addis Ababa. Data collection occurred across 10 daycare centers in Arada and 16 daycare centers in Yeka subcities.

4.4 Eligibility criteria

4.4.1 Inclusion criteria

- Children between the ages of 1 and 4 years enrolled in participating private and government daycare centers. Inclusion requires documented verbal or written consent from a parent or legal guardian.

4.4.2 Exclusion criteria

Children were excluded from participation if they meet any of the following criteria:

- Demonstrated language delay attributed to Autism Spectrum Disorder (ASD), identified genetic conditions, hearing impairment, cerebral palsy (CP), neurological disorders, congenital anomalies, or global developmental delay.
- Lack of written consent from a parent or legal guardian.

4.5 Sample size determination

We use a multistage sampling method because the population we are studying has different layers and levels. The minimum number of samples required for this study was determined by using a single population proportion formula, as follows:

$$n^0 = \frac{(Z_{\alpha/2})^2 p(1 - p)}{e^2}$$

n = the required sample size

p = the proportion of preschoolers having excessive ST=0.73 (17)

$Z_{\alpha/2}$ = the critical value at 95% confidence level = 1.96

e = precision (margin of error) = 5%

Accordingly,

$$n^0 = \frac{(1.96)^2 * 0.73(1 - 0.73)}{0.05^2}$$

$$n^0 = \frac{(1.96)^2 * 0.73(0.27)}{0.05^2}$$

$$n^0 = 302$$

The sample size becomes 332 after adding 10% for nonresponse rate.

4.6 Sampling procedure

We use stratified sampling procedure to determine our study population.

Out of 11 sub-cities in Addis Ababa, Arada and Yeka were selected as clusters using simple random sampling. Additionally, 7 out of 10 woredas in Arada and 6 out of 10 woredas in Yeka were chosen using the same method.

A total of 10 daycares from 24 in Arada and 16 daycares from 32 in Yeka were selected for the study using simple random sampling, with 604 preschoolers attending these daycares during the study period.

The final study samples for each daycare were determined using the proportion allocation formula, as shown below. The study samples for each daycare are illustrated in the diagram on the next page, with numbers listed next to each daycare, separated by hyphens

The formula for **proportional allocation** is:

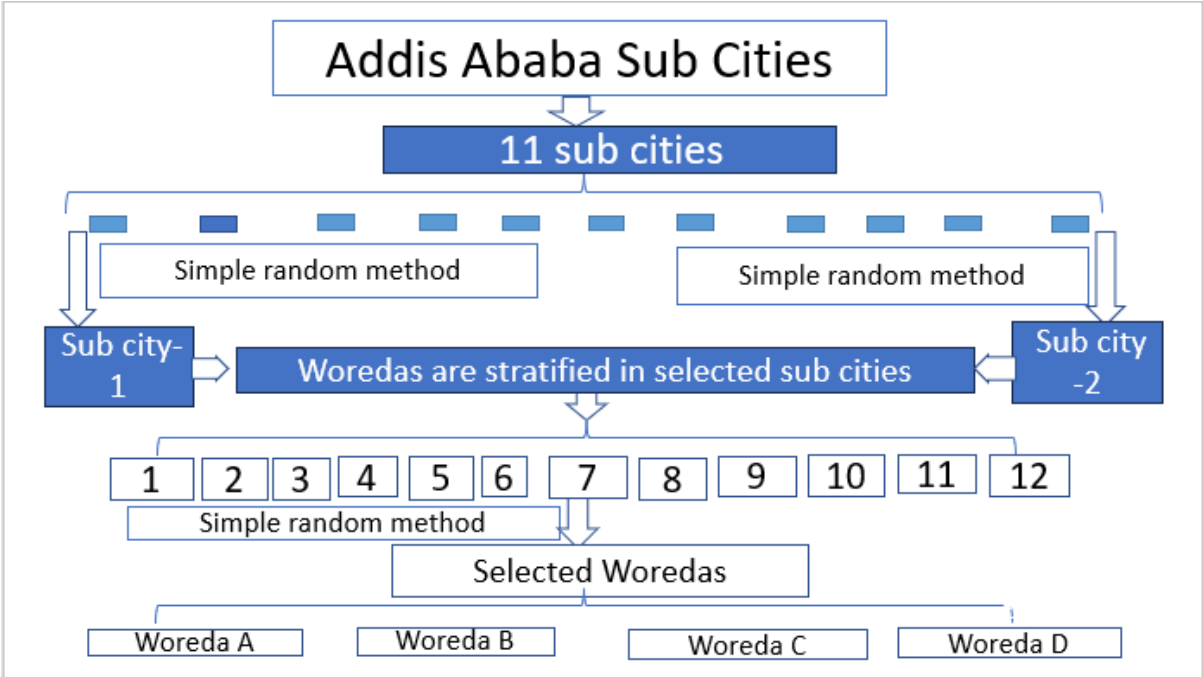
$$n_h = \frac{N_h}{N} \times n$$

Where:

- **n-h** = the sample size for subgroup **h**
- **N-h** = the population size of subgroup **h**
- **N** = the total population size (sum of all subgroups' sizes)
- **n** = the total sample size (sum of all samples across subgroups)

We used a systematic random sampling method to get the final study subjects, since we can select the final study samples based on specific numerical patterns from registration books or log books, where every third child from the total study population at each site was chosen.

A total of 146 preschool children were selected from 240 in Arada, and 186 preschoolers were chosen from 364 in Yeka.



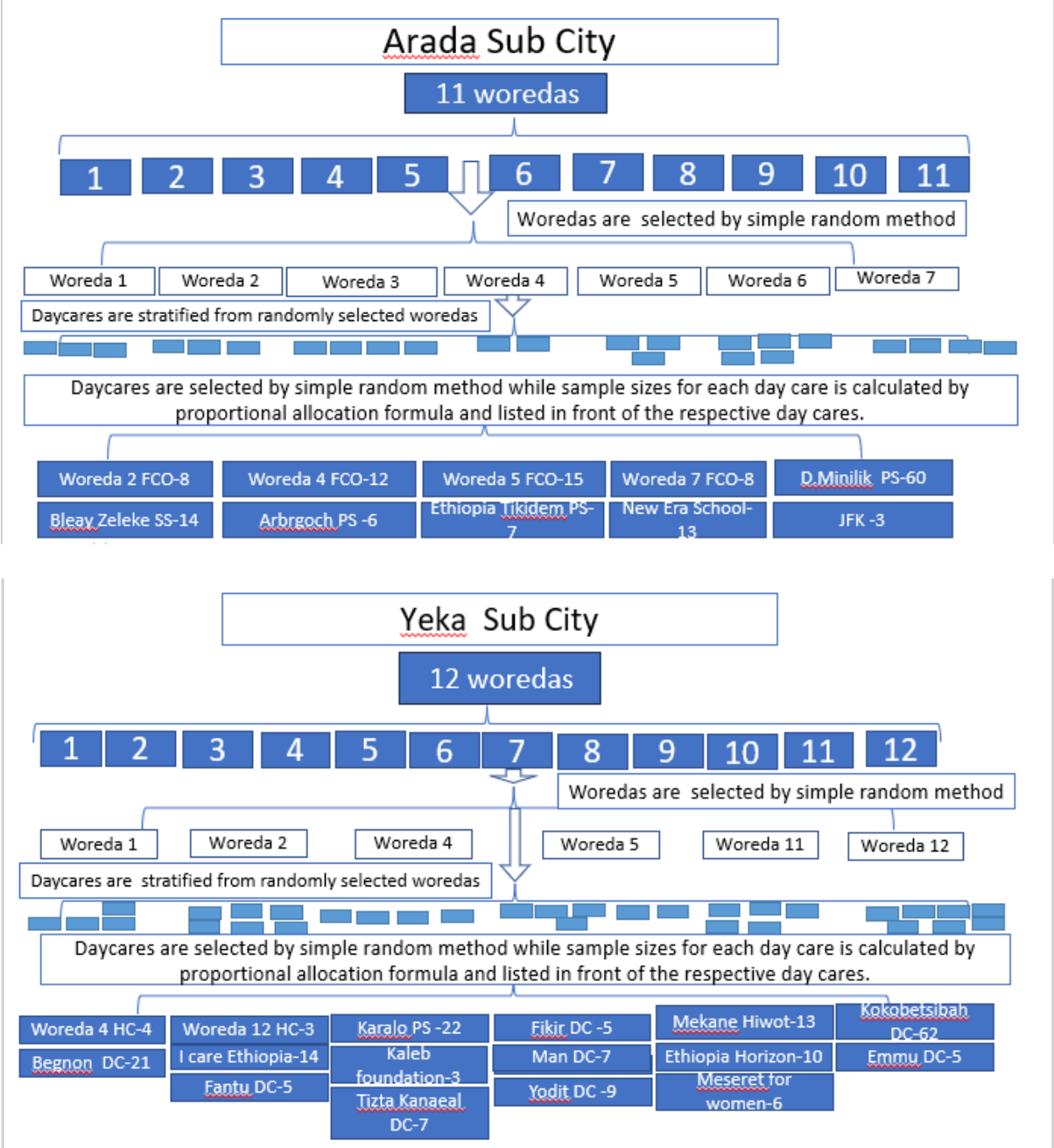


Figure 2. Schematic representation of the sampling technique

4.7 Variables in the study

4.7.1 Dependent variable

- Screen time of a child and language outcome

4.7.2 Independent variables

Parental Sociodemographic Factors: Age, Sex, Educational Status, Economic Status

Child Characteristics: Age of the child, Sex of the child

Screen Time Related Factors: Maternal Screen Time, Paternal Screen Time, Onset of Time to Screen Exposure, Type of Electronic Device Used, Content of the Video or Program Watched

4.8 Operational definitions

- **Screen time** refers to the duration of time individuals engage with any digital display, encompassing devices such as televisions, computers, and mobile devices (including smartphones and tablets).
- **Digital media** encompasses all forms of content that are delivered via the Internet or computer networks, accessible across various devices.
- **Excessive screen time:** For the purposes of this study, excessive screen time in preschool children is defined as exceeding the AAP recommendations. Specifically, it refers to any ST per day children aged between 1 year to 2 years; for those aged 2–4 years, it was defined as exceeding 1 hour of ST per day (4).
- **Early screen exposure** is defined as the initiation of screen-based media use by children prior to reaching the age of 2 years (57).
- **Language Delay:** Defined operationally as a child's score falling below the established cut-off point on the language subscale of the Ages and Stages Questionnaire, Third Edition (ASQ-3) screening tool, indicating the need for further comprehensive language assessment (58,59).

4.9 Data collection tools and techniques

Data was collected by trained health professionals and research assistants using structured, and validated questionnaires adapted from previous studies. The data collection took place at randomly selected private and government daycares.

Language assessment was conducted using the age-appropriate, parent-completed Amharic version of the ASQ3 tool, which has been validated for this purpose (58,59).

Data collectors received half-day training from their supervisors to ensure they are well-prepared for the task. A pre-test was administered to 5% of the total calculated sample size to evaluate the effectiveness of the questionnaires.

4.10 Data quality management

To ensure data quality, brief training was provided to data collectors and supervisor. The questionnaire was pretested in 5% of the calculated sample size at a daycare comparable to the selected study setting. Pretesting was done to minimize ambiguity of words and also for comprehensibility, appropriateness of language, sensitivity of questions and average duration of the interview. The feedback received after this process was used to modify and finalize the tool. Close supervision was provided during data collection, and filled questionnaires were double-checked daily for consistency and completeness by the data collectors and principal investigator before proceeding into data entry and statistical analysis.

4.11 Data processing and analysis

Data entry, coding and cleaning of the data were performed using Kobo Toolbox, and the statistical analysis was performed using Statistical Package for Social Sciences (SPSS) version 30. Frequency and cross tabulation are used to check for missed value and variables. The background characteristics of the children were computed using descriptive statistics such as mean $\pm$ standard deviation and median + interquartile range for continuous variables while percentage and frequencies for categorical ones. Binary and multiple logistic regressions were used to identify factors associated with the outcome variable – excessive screen time.

Bivariable logistic regression analysis was run to check variables associated with the dependent variable individually. Candidate variables yielding p-value <0.25 in the binary regression analysis were then exported into multiple logistic regression model for further analysis to compute odds ratio with corresponding 95% confidence intervals. A p value was considered statistically significant at the level of <0.05 . Moreover, chi square analysis was done to determine the association between screen time and language delay. The Hosmer-Lemeshow Goodness of Fit test was used to check whether the model adequately fits the data in this study. Finally, the study findings were presented using texts, diagrams, tables and figures.

4.12 Ethical considerations

Ethical clearance was obtained from the Ethical Review Committee of Pediatrics and Child Health Department, College of Health Sciences, Addis Ababa University. A support letter was sought from the department, and it was submitted to both subcities of women, children and social affairs bureau. A second support letter was sought from both Arada and Yek subcities women, children and social affairs office. Finally, those two letters from the department and from both subcities were submitted to each study facility to carry out the data collection. Following this step, the data collectors were introduced with the onsite daycare center officers. Before approaching each caregiver for interview, the purpose of the study was briefly explained to parents until it is well grasped, and informed written consent was obtained. During data collection, the caregivers were informed that the information collected would be kept anonymous and confidential, and that the data collected will be utilized only for this study.

4.13 Dissemination of the study findings

The findings of this study will be submitted to the Pediatrics and Child Health Department and the college's library, College of Health Sciences, Addis Ababa University, in partial fulfillment of the requirements for the specialty certificate in Pediatrics and Child Health. The outcome of this study will also be presented to higher officials of the daycare centers. Aside this, the outcome of this study will be presented at national and international conferences. Finally, the manuscript will be submitted to a peer-reviewed scientific journal for possible publication.

5. Results

5.1 Sociodemographic and household data of the studied children

In total, 306 preschool children were included in this study, resulting in a response rate of 92.2%. The median (interquartile range) age distribution of the children was 40 (28–48) months. Most children were over two years old (85.0%), with only 15.0% being two years or younger. The sample consists of a higher number of male children (53.9%) compared to female children (46.1%). The majority of children (57.8%) were primarily cared for by their mothers, followed by both parents (33.0%), fathers (6.9%), and grandmothers (2.3%). A significant proportion of the parents were married (74.1%), while divorced or separated parents accounted for 17.3%. Unmarried and widowed parents represent smaller segments at 3.9% and 4.6%, respectively. A predominant majority of the families identify as Christian (88.2%), with Muslims making up 11.8% (Table 1).

Most fathers (79.4%) are above 30 years old, and educational attainment varies, with 27.5% holding a degree or higher, while only 16.7% have completed primary school. A significant portion of mothers (67.3%) are also under 30 years old, with educational levels showing that 27.5% have only primary education and 18.3% have attained a degree or higher (Table 1).

More than half of the children do not have elder siblings (56.9%). The majority of families are relatively small, with 75.8% having fewer than five members. Monthly household income shows a diverse range; however, a notable portion (36.6%) earns less than 5000 Ethiopian Birr, indicating potential economic challenges faced by these families (Table 1).

Table 1. Sociodemographic and household details of children between one and four years of age enrolled in daycare centers, Addis Ababa, Ethiopia from January 15, to February 15 (n=306)

Variable	Frequency	Percent (%)
Type of guardian		
Mother	177	57.8
Father	21	6.9
Both parents	101	33.0
Grandmother	7	2.3
Marital status of the parent		
Unmarried	12	3.9
Married	227	7.4
Divorced/separated	53	17.3
Widowed	14	4.6
Child's age		
≤2 years	46	15.0
>2 years	260	85.0
Child's sex		
Male	165	53.9
Female	141	46.1
Parental religion		
Christian	270	88.2
Muslim	36	11.8
Paternal age		
≤30 years	63	20.6
>30 years	243	79.4
Paternal educational level		
Primary school	51	16.7
Secondary school	97	31.7
College diploma	74	24.2
Degree +	84	27.5
Maternal age		
≤30 years	206	67.3
>30 years	100	32.7
Maternal educational level		
Primary school	84	27.5
Secondary school	101	33.0
College diploma	65	21.2
Degree +	56	18.3
Presence of elder sibling(s)		
No	174	56.9
Yes	132	43.1
Family size		
<5	232	75.8
≥5	74	24.2
Average household monthly income		
<5000 ETB	112	36.6
5001–10000 ETB	95	31.0
10001–15000 ETB	36	11.8
15001–25000 ETB	45	14.7
>25000 ETB	18	5.9

ETB: Ethiopian Birr

5.2 Screen time related characteristics

The majority of households reported having a television only (55.6%), while other combinations of devices were less common. Specifically, 4.6% had smartphones, 14.1% had both televisions and computers, and 25.8% had televisions along with smartphones. In terms of television viewing, a significant portion of children (43.8%) watched less than one hour daily, while 29.4% watched between one to two hours. Notably, 16.7% did not watch TV at all, and 10.1% exceeded two hours (Table 2).

Screen time on smartphones was notably lower; 67.6% of children did not use phones at all, while only a small fraction spent more than one hour on them (22.5% for less than one hour and only 9.8% for more). For computer usage, a striking 98.7% of children were reported not to have any exposure, with minimal engagement observed in the remaining participants. Similar trends were observed with video games, where 97.1% of children did not engage in gaming activities at all (Table 2).

Only a small number spent time gaming (2.0% for two to three hours and 0.7% for more than three hours). Parental supervision varied; 34.6% of children were supervised "oftentimes," while a significant number (20.3%) were never supervised during screen time. Most parents (91.5%) believed that the digital content their children accessed was age-appropriate (Table 2).

Regarding parental regulation, a slight majority (58.5%) indicated they set limits on screen time for their children. The data also revealed that just over half (51.3%) of fathers spent less than two hours on screens daily, while mothers showed higher adherence to lower screen time limits with 68.3% spending less than two hours. In terms of early exposure to media, nearly half (48.7%) of the children were first exposed between 12 to 23 months, while 43.8% were exposed before twelve months (Table 2).

Table 2. Screen time related characteristics of children between one and four years of age enrolled in daycare centers, Addis Ababa, Ethiopia from January 15, to February 15 (n=306)

Variable	Frequency	Percent (%)
Type of electronic gadgets at home		
Television	170	55.6
Smart phone	14	4.6
Television + Computer	43	14.1
Television + Smart phone	79	25.8
Time spent by the child watching a TV		
0 hour	51	16.7
<1 hour	134	43.8
1–2 hours	90	29.4
>2 hours	31	10.1
Time spent by the child watching a phone		
0 hour	207	67.6
<1 hour	69	22.5
1–2 hours	17	5.6
>2 hours	13	4.2
Time spent by the child watching a computer		
0 hour	302	98.7
<1 hour	3	1.0
1–2 hours	1	0.3
Time spent by the child watching videogames		
0 hour	297	97.1
1–2 hours	1	0.3
2–3 hours	6	2.0
>3 hours	2	0.7
Child supervision during electronics use		
Never	62	20.3
Rarely	79	25.8
Seldom	39	12.7
Sometimes	20	6.5
Oftentimes	106	34.6
Age appropriateness of digital contents		
No	26	8.5
Yes	280	91.5
Parental regulation regarding digital use		
No	127	41.5
Yes	179	58.5
Paternal screen time		
<2 hours	157	51.3
≥2 hours	149	48.7
Maternal screen time		
<2 hours	209	68.3
≥2 hours	97	31.7
Timing of first media exposure		
<12 months	134	43.8
12–23 months	149	48.7
≥24 months	23	7.5

TV : Television

5.3 Prevalence of excessive screen time and language delay

In this study, out of a total sample size of 306, approximately 69.9% (214 children) were found to have excessive ST, while about 30.1% (n=92) did not. The level of language development among the preschoolers was predominantly normal, with 286 individuals (93.5%) falling into this category. Conversely, 20 children (6.5%) exhibited delayed language development according to ASQ-3 screening tool scores (Figure 3).

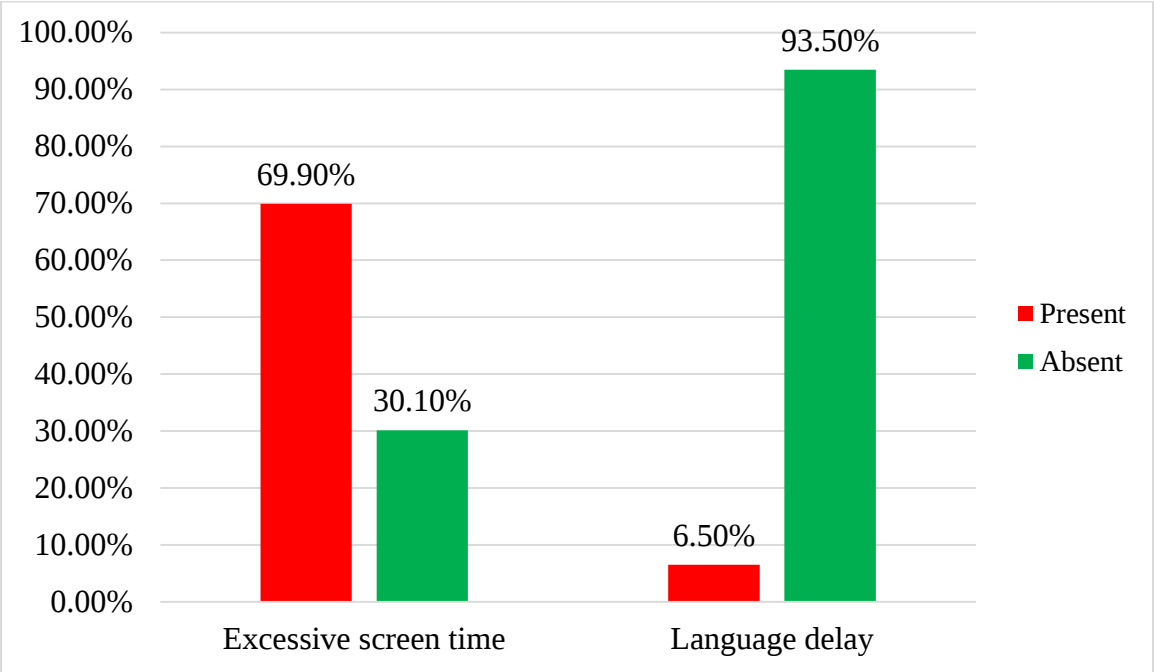


Figure 3. Prevalence of excessive screen time and language delay among children between one and four years of age enrolled in daycare centers, Addis Ababa, Ethiopia from January 15 to February 15, 2025 (n=306)

5.4 Factors associated with excessive screen time

In this study, twenty potential factors were considered in the regression analysis. These factors include the type of guardian, marital status of the parent, child's age, child's sex, parental religion, paternal age, paternal educational level, maternal age, maternal educational level, presence of elder sibling(s), family size, average household monthly income, type of electronic gadgets at home, child supervision during electronic device use, age appropriateness of digital contents, parental regulation regarding digital usage, paternal screen time, maternal screen time, and timing of first media exposure.

Six variables, namely child's age category, maternal educational level, type of electronic gadgets at home, child supervision during electronics use, maternal screen time, and timing of first media exposure were found to be candidates in binary logistic regression ($p\text{-value} < 0.25$). These variables were subsequently exported for further multivariable logistic regression to control for possible confounders. The Enter method was applied to include variables in the multivariable analysis. Consequently, the only factors that showed a statistically significant association with excessive ST were child's age category, child supervision during electronics use, maternal screen time, and timing of first media exposure (Table 3).

Specifically, children under two years old were significantly more likely to experience excessive screen time compared to those over two years, with an adjusted odds ratio (AOR) of 12.72 (95% CI: 3.22-50.35). Supervision during electronics use was associated with higher odds of excessive screen time (AOR = 2.38; 95% CI: 1.03,5.50 to AOR = 6.13; 95% CI: 2.79-13.16) (Table 3).

Mothers who spent more than two hours per day on screens had children with higher odds of excessive screen time (AOR = 2.39; 95% CI: 1.17-4.87). Early exposure to media before twelve months and in the second year of life was linked to an increased risk of excessive screen time later in life (AOR = 3.63; 95% CI: 1.16,13.16 and AOR = 3.90; 95% CI: 1.16,13.16), respectively). Finally, maternal education level showed some variation but did not have a statistically significant impact on excessive screen time after adjusting for other factors (Table 3).

Table 3. Factors associated with excessive screen time among children between one and four years of age enrolled in daycare centers, Addis Ababa, Ethiopia (n=306)

Variable	Excessive screen time		COR (95%CI)	AOR (95%CI)	P value
	Present	Absent			
Child's age category					
≤2 years	43	3	7.46(2.25,24.74)	12.72(3.22,50.35)	< 0.001
>2 years	171	89	1	1	-
Maternal educational level					
Primary school	52	32	1	1	-
Secondary school	68	33	1.27(0.69,2.32)	1.00(0.49,2.02)	0.992
College diploma	54	11	3.02(1.38,6.62)	1.47(0.59,3.67)	0.408
Degree +	40	16	1.54(0.74,3.19)	1.07(0.39,2.93)	0.895
Type of electronic gadgets at home					
Television	110	60	1	1	-
Smart phone	10	4	1.36(0.41,4.53)	1.17(0.24,5.75)	0.850
Television + Computer	30	13	1.26(0.61,2.59)	0.55(0.18,1.67)	0.291
Television + Smart phone	64	15	2.33(1.22,4.43)	1.85(0.85,4.01)	0.120
Child supervision during electronics use					
Never	30	32	1	1	-
Rarely	61	18	3.62(1.75,7.46)	2.38(1.03,5.50)	0.043
Seldom	25	14	1.90(0.84,4.34)	1.48(0.58,3.77)	0.410
Sometimes	13	7	1.98(0.70,5.63)	2.07(0.62,6.89)	0.237
Oftentimes	85	21	4.32(2.16,8.61)	6.13(2.79,13.16)	< 0.001
Maternal screen time					
<2 hours	98	59	1	1	-
≥2 hours	116	33	2.12(1.28,3.50)	2.39(1.17,4.87)	0.016
Timing of first media exposure					
<12 months	97	37	4.08(1.63,10.22)	3.63(1.08,12.19)	0.037
12–23 months	108	41	4.10(1.65,10.19)	3.90(1.16,13.16)	0.028
≥24 months	9	14	1	1	-

1: Reference category

5.5 Association between excessive screen time and language delay

In this study, the results indicate a statistically significant association between excessive screen time and language delay. The chi-square test revealed a p-value of 0.043 for this association ($\chi^2 = 4.10$). Specifically, among the children exposed to excessive screen time, there were significantly more cases with language delay (18) compared to those without (196). In contrast, fewer cases of language delay were observed when excessive screen time was absent (2), with a larger number of children not experiencing delays (90) (Table 4).

Table 4. Association between screen time and language delay among children between one and four years of age enrolled in daycare centers, Addis Ababa, Ethiopia from January 15 to February 15, 2025 (n=306)

Variable	Language delay		χ^2 (p value)
	Present	Absent	
Excessive screen time			
Present	18	196	4.10(0.043)
Absent	2	90	

6. Discussion

This study aimed to evaluate the prevalence of excessive screen time and its association with language outcomes among preschool children attending daycare centers in Addis Ababa, Ethiopia. The findings indicated that a significant majority (69.9%) of these children engaged in excessive screen time, indicating a high prevalence of excessive screen time among young children. Additionally, approximately 6.5% exhibited delayed language development. The study also identified several factors associated with excessive screen time among preschoolers, including younger age, supervision during electronics use, maternal screen time exceeding two hours per day, and early exposure to media. Furthermore, it revealed a correlation between excessive screen time and delayed language development.

This study showed that 69.9% (95%CI: 64.8–75.1%) of preschool children engaged in excessive screen time. The finding aligns with previous studies in India, where the corresponding prevalence of excessive ST were 69.4% and 73%, respectively (17,60). On the other hand, the present finding is quite different from what was reported in a Turkish study, in which 84.3% of toddlers aged 13-24 months, and 49.4% of toddlers aged 25-36 months had excessive ST (61). Additionally, the present finding was comparatively higher than what was obtained in another Indian study, in which 53.7% of the children had excess screen exposure (56).

Additionally, although assessed using a screening tool rather than a diagnostic tool, this study found that approximately 6.5% of participants exhibited delayed language development. Dewi PD et.al assessed 167 children aged 12- 24 months and found a prevalence of speech delay was 51% which is higher than this study (6.5%) [11]. This finding aligns with a previous report from India, Japan and the University of Michigan Health System, which indicates that around 10.8%, 4% and 5% to 10% of preschool-aged children experience delayed speech or language development respectively (17,23, 62).

The discrepancies in the magnitude of excessive ST and delayed language development observed between this study and previous research may be attributed to several factors. In particular, this variance might be due to differences in sample populations or specific criteria for what constitutes "excessive" use. Specifically, while this study used AAP definition of excessive screen time, Varadarajan et al. used the WHO guideline to define the same construct (17). Unlike this study, which included young children aging between one and four years, Pladiwal et al. included children aged 6 months to 6 years (56).

In line with previous reports (56), this study demonstrated that children younger than 2 years are more likely to engage in excessive screen time (ST). This may be attributed to the tendency of older children to replace screen time with healthier habits, such as physical play and social interactions, compared to toddlers. Additionally, the guidelines for defining excessive screen time are more stringent for children under 2 years of age (4).

Surprisingly, in contrast to other studies (39), this study found that supervision during electronics use was associated with higher odds of excessive screen time among preschool children. While it is essential to gather detailed information regarding the type of supervision provided, it is possible that the supervision in this study was an attempt by parents to mitigate problematic use of electronics, rather than serving as a preventive measure. In fact, supporting the present finding, Çaylan et al. reported that high overprotective parenting style was related to excessive screen exposure among Turkish children (63).

Additionally, maternal screen use was positively and significantly linked to increased risk of excessive ST in children. This is in agreement with the work of Varadarajan and others, who documented a similar finding (17). This relationship can be attributed to modeling behavior; children often mimic their parents' activities, leading to increased screen engagement when mothers spend significant time on screens (2).

Consistent with the previous findings (35,57), which indicate that children exposed to screens at an early age are more likely to develop patterns of excessive screen use as they grow older, this study suggests that early exposure to media before twelve months also plays a significant role. This early exposure is associated with an increased risk of excessive screen time later in childhood. Such early engagement can lead to habit formation, where the patterns established in infancy persist into later childhood, making it increasingly challenging for parents to regulate screen time as their children age (34,64).

Finally, this study confirmed that prolonged exposure to screens is associated with delayed language development in young children. This finding is somewhat anticipated, as several previous studies (27,28,32) have highlighted that excessive screen exposure negatively impacts language development in children. One of the primary mechanisms by which screen time affects language development is through the reduction of verbal interactions between children and their caregivers. Research indicates that children who spend excessive time on screens engage less in verbal dyadic interactions, which are crucial for fostering communication skills and linguistic development (65).

7. Strengths and Limitations

7.1 Strengths

- This study addresses a pressing concern regarding the impact of screen time on language development, particularly in the context of young children attending daycare. The relevance of this issue is underscored by the increasing global usage of screen time among children, including in Ethiopia, as well as the limited availability of data in the study setting.

7.2 Limitations

- The study employed a cross-sectional design, which may limit the ability to draw causal conclusions regarding the relationship between screen time and language development.
- Screen time was primarily assessed through parental reports. This reliance on parental reporting may introduce bias or inaccuracies concerning actual screen usage and interactions.
- The study's focus on a specific population—preschool children attending daycare—may not accurately represent the broader population of young children in Ethiopia. This limitation could lead to selection bias, as families who seek daycare may differ significantly from those who do not.

8. Conclusion and Recommendation

8.1 Conclusion

In conclusion, this study highlights a concerning trend of excessive screen time among preschool-aged children, with 69.9% of participants exceeding recommended limits. This behavior is notably linked to delayed language development in approximately 6.5% of the children assessed. Key factors associated with excessive screen time include younger age, supervision during media use, maternal screen time surpassing two hours daily, and early exposure to electronic devices.

8.2 Recommendation

Based on the findings obtained in this study, the following recommendations can be forwarded.

For Health Care Workers,

Health care workers including health extension workers should advise parents on the importance of limiting screen time and adhering to AAP guideline recommendations. They should also encourage mothers to limit their own screen time to foster a more engaging environment and balanced media use for their children.

For Daycare Centers,

They should implement policies that restrict screen time to no more than 1 hour per day for preschoolers, ensuring that it does not replace physical play or social interactions. Encourage outdoor activities and structured play as alternatives to screen time. Additionally, they should foster an environment that prioritizes physical activity over sedentary behavior. Encourage active play and provide opportunities for children to engage in non-screen-related activities throughout the day.

For Local Government Bodies,

Local government bodies should develop initiatives aimed at educating parents about the risks associated with excessive ST and its links to developmental delays along with providing resources on recommended ST limits and healthy media habits. Further, they should advocate for stricter regulations on ST in childcare settings, aligning local policies with national guidelines that recommend limiting screen exposure for young children. Furthermore, they should invest in community programs that promote physical activity and social interaction among preschool-aged children, reducing reliance on screens for entertainment.

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Annexes

8.1 Information and consent form of the study

Participant Information Sheet

First, we would like to thank you in advance for your cooperation and consent in participation in this study. Please read or listen when readout for you about general information of the study. If you have any question about the study, do not hesitate to contact us.

Background: A screen time refers to time spend in front of screen media (such as a computer, televisions, iPad, mobile devices, tablets and video games). The use of screen media is associated with language delay, especially related to high screen time and when screen time exposure starts before 1 year of age. The study will be conducted to determine the prevalence of ST, associated factors and its effect on language development among children aged 1 and 4 years.

Objectives: The aim of this study is to assess the prevalence of excessive screen time, associated factors and its language outcome in children aged between 1 and 4 years in 10 and 16 daycares of Arada and Yeka sub cities of Addis Ababa city respectively.

Benefit from the Study: There is no financial incentive for study participants. However, the finding of this study will provide valuable findings for health professionals and researchers to determine deleterious effect of excessive screen time on child development. It also contributes much for kids who would be identified “with language delay” from ASQ3 screening, as they would be linked to further health setups.

Confidentiality: The sample will be coded, confidential. No third party has access to your information.

8.2 Assurance of Principal Investigator

I, the undersigned agree to accept responsibility for the scientific ethical and technical conduct of the research planned to be conducted and for provision of required progress reports as per terms and conditions of the Research Publications Office in effect at the time of grant is forwarded as the result of this application.

Name of principal investigator: Meskerem Abebe

Date. _____

Signature _____

Tel. 0938882677

Note: If you have any question on this study, please contact us with the listed address.

Approval of the primary Advisor

This research proposal has been submitted with my approval as university advisor

Name of the primary advisors: _____

Date. _____

Signature _____

8.3 Written Informed Consent Form

I have been informed about the study which plans to assess the prevalence of excessive screen time, associated factors and its language outcome in children aged between 1 and 4 years in 10 and 16 daycares of Arada and Yeka sub cities of Addis Ababa, Ethiopia respectively.

The objective and the application of the study are briefly explained to me. I am also informed that all information contained within the questionnaire is to be kept confidential. Moreover, I have been well informed of my right to refuse information, decline to cooperate and drop out of the study if I want and none of my actions will have any bearing at all on my overall health care.

It is therefore with full understanding of the situation that I agreed to give the informed consent voluntarily to the researcher to give my blood for the mentioned study. I have had the opportunity to ask questions about the project and received clarification to my satisfaction in a language I understand.

Volunteer: Signature.....Date

Witness1: Signature.....Date.....

Witness2: Signature.....Date.....

የመ ረጃና የፈቃደኝነት ማረጋገጫ

ሀ. የጥናቱ መረጃ

እንደ ም ን አደሩ፣እንደ ምን ዋሉ፣እንደ ምን አመሹ (እንደ አስፈላጊነቱ)

እኔ ስሜ_____እባላለሁ። የመጣሁት ከአዲስአበባ ዮንቨርስቲ ጥቁር አንበሳ ሆስፒታል ነው። ታዳጊ ህጻናት ምን ያህል ግዜአቸውን በኤሌክትሮኒክስ ሚዲያዎች ላይ እንደሚያሳልፉ እና ይህ ጉዳይ የቋንቋ መዘግየት የሚያመጣ መሆን አለመሆኑን በሚመለከት አነስተኛ ጥናት ለማድረግ መረጃ እየሰበሰብኩ በመሆኑ አንዳንድ ጥያቄዎችን ላቀርብልዎት እፈልጋለሁ። ስምዎት ከመረጃው ጋር አይካተትም የሰጡኝን መረጃ ሁለ በሚስጥር እንደምጠብቅልዎ ቃል እገባለሁ። ይህንንም ለማድረግ ከእኔ ጋር ወደ ግማሽ ሰዓት እንቆያለን።ይህ ጊዜዎትን የሚይዝ ቢሆንም መላህጻናትን ሊጠቅም የሚችል በመሆኑ እንዲተባበሩኝ እጠይቅዎታለሁ።

የተወሰኑ ደቂቃዎች ባነጋግርዎ ፈቃደኛ ነዎት?

ፈቃደኛ ነኝ

ፈቃደኛ አይደለሁም

ለ. የፈቃደኝነት ማረጋገጫ

የምርምር ጥናቱ ክፍል የሆኑ መረጃዎችና ሂደቶች ተብራርተውልኛል።እኔም በተብራራልኝ መንገድ ተረድቻለሁ።ምርምሩ ምንም አደጋ የማያስከትል በመሆኑ በሚያደርጉት ተሳትፎ የካሳ ክፍያ አይኖረውም። ስለዚህ በዚህ የምርምርጥናት ላይ ለመሳተፍ ፈቃደኛ መሆኔን በፊርማዬ አረጋግጣለሁ።

ፊርማ_____

ቀን_____

8.4 Data collection questionnaire and ASQ3 language assessment tool

Screen time questionnaire

PART I. PERSONAL DETAILS (23 items)

1. What is the name of the child? _____
2. Who is the primary caregiver of the child?
1) Mother 2) Father 3) Grandfather 4) Grandmother 5) Other _____
3. What is the marital status of the parents?
1) Married 2) Widowed/ Widower 3) Divorced 4) Separated
5) Never married 6) Others please specify _____
4. What is the date of birth of the child: ____/____/_____ **OR**
Approximate age (in completed years) of the child _____
5. Gender of the child: 1) Boy 2) Girl 3) Others
6. Address: _____
7. What is your place of residence?
1) Urban 2) Resettlement colony 3) Urbanized village
8. Total number of rooms in the house: _____ rooms
9. Do you have a garden/ park area in/ near the house where the child can play? Yes =1 No =2
10. What is your Religion 1) Christian 2) Muslim 3) Wakefena4) Judaism 5) Others
specify _____
11. What is your family type? 1) Nuclear family 2) Joint family 3) Family with 3 generations
(maternal/ paternal cousins)

12.	Relation	Age	Education	Occupation	Income
12.01	Father				
12.02	Mother				
12.03	Head of the family (if other than the father)				
12.04	Elder/ younger sister/ brother				
12.05	Elder/ younger sister/ brother				
12.06	Elder/ Younger sister/ brother				

13. What is the socio-economic status of the family as per Kuppuswamy (refer to the guide)

14. What is the total number of family members _____

Monthly family income 1) $\geq$ 50,000 ETB 2) 25,000-50,000 ETB 3) 15,000-25,000 ETB

4) 10,000-15,000 ETB 5) 5000-15,000 ETB 6) $\leq$ 5000ETB

15. Per capita income of the family _____

16. Child care facilities or services attended

	Number of days per week	Duration/ day (total hours)
16.1 Informal child care (like, family members, nanny)		
16.2 Formal care like (anganwadi play-way etc.)		
16.3 With the parents at home		

17 Do you own the following things?

	Yes =1 or No=2	Is the gadget usually placed in the room where the child sleeps/ plays?
17.01 TV set with cable/ satellite connection		
17.02 Computer		
17.03 Mobile phone without internet		
17.04 Smart phone with internet		
17.05 Hand-held devices on which video-games can be played (tablet)		
17.06 Internet connection (broadband/ WiFi)		No answer expected here

PART II. SCREEN TIME EXPOSURE AND HOME MEDIA ENVIRONMENT (27 items)

18 Types of activities performed by the child, their duration and frequency 	Watches	Uses a smart	Uses other	Writes/ draws	Reads/ Read by	Others
	TV	phone	gadgets, specify	colors	someone	specify
18.01 Frequency of performing the activity in a given week: 1) Never 2) Rarely (less than once) 3) seldom (1-2 times) 4) sometimes (3-4 times) 5) Often (5 times or more)						
18.02 Average duration on working/ school days per day (min)						
18.03 Average duration on holidays per day (in min)						
18.04 Whether the child does the above said activity supervised in a week 1) Never 2) Rarely (less than once) 3) seldom (1-2 times) 4) sometimes (3-4 times) 5) Often (5 times or more)						
18.05 At what initial age was the child first exposed for any type of screen media? (put in months or year)						
19 Which programs/ videos did the child watch yesterday		A	B	C	D	
20 What was the duration of these programs/ videos? (put in hour or minute)						
21 How much was the total average screen time of the child spends on screen media by yesterday (put in hour)						
22 Do you think the placement of TV in the room where the child plays/ sleeps can increase or decreases your child's screen time? If no, skip to question 24					Yes =1	No =2

23 If yes, then for how long is the TV switched on in the in the room where the child plays/ sleeps

24 Do you have any rules regarding when, where, what & how to watch digital screen? (If no please skip to question 26)	Yes =1	No =2
24. If yes then, what rules do you have for the child at home?		
24.1) Only children's channel allowed		
24.2) The child isn't allowed any media gadget 1h before sleep		
24.3) The child is allowed only watch supervised by adults		
24.4) The child isn't allowed to sit near the TV		
24.5) The child is allowed to watch only for a restricted duration _____ min		
24.6) Any other reasons please specify		

25. Caretaker's media related factors

	Mother	Father
25.01 Average duration of screen time per day		
25.02 In a week what is the frequency of media gadget usage 1) Never 2) Rarely (less than once) 3) Seldom (1-2 times) 4) sometimes (3-4 times) 5) Often (5 times or more)		
25.03 Gadgets used 1) TV 2) Computer 3) Laptop 4) Tablet 6) Smart phone 7) Mobile phone		
25.04 Average time spent with the child at home		

PART III. PHYSICAL ACTIVITY RELATED QUESTIONS (10 items)

26. 01 Average duration of outside play per day on working/ school days (min)		27. What was duration of the following outdoor activities that the child performed yesterday			
26.02 Average duration on holidays of outside play per day (in min)		27.01 Jogged quickly	Yes =1	No =2	27.05 Hopped easy
					Yes =1 No =2

26.03 Total duration		27.02 Tumbled moderately			27.06 Hopped moderately		
		27.03 Danced			27.07 Hopped hard		
		27.04 Climbed			27.08 Others		

PART IV. MEDIA RELATED BEHAVIORS (15 items)

28 In a week, how frequently does the child watch this content on media gadgets at home?	Never =1	Rarely (less than once) =2	Seldom (1-2 times) =3	Sometimes (3-4 times) =4	Often (5 times or more) =5
28.1. The child uses for completing their homework assignments?					
28.2. The child uses video calling applications to talk to the family/ friends (skype, whatsapp etc.)					
28.3. The child uses for learning poems, rhymes, ABC etc. online					
28.4. The child uses to learn maths, numbers, tables online.					
28.5. The child uses to recognize shapes/ sounds/ colors when shown online					
28.6. The child learns various sciences online					
	Never =1	Rarely (less than once) =2	Seldom (1-2 times) =3	Sometimes (3-4 times) =4	Often (5 times or more) =5
28.7. The child learns to draw, write online?					
28.8. The child plays video-games?					
28.9. The child uses digital media gadgets to watch stories					
28.10. The child to watch adult programs (soap opera, news, sports, movies etc.)					
28.11. The child uses to learn letters, words, vocabulary, language online					

PART V. MEDIA LITERACY OF THE PARENTS (11 items)

30 What do you think are the good things that the child learns from these digital screens?

	Yes =1	No =2
30.1 The child is learning good habits		
30.2 The child is Increasing his/ her knowledge		
30.3 The child is learning new skills		
30.4 It's good for my child's growth & development		
30.5 No positive effects		
30.6 Any others specify _____		

31 What do you think are the problems when watching these screens excessively?

	Yes =1	No =2
31.1 The child starts imitating what he watches		
31.2 The child develops sleep problems		
31.3 The child might start eating unhealthy food		
31.4 The child might become aggressive		
31.5 The child isolates himself/ herself		
31.6 It might Impairs the child's concentration		
31.7 It might cause behavior problems		
31.8 It might impair the child's eyesight		

31.9 It's not good for my child's growth/development		
31.10 No negative effects		
31.11 Any others specify _____		

ክፍል I. የግል መረጃ (23 ጥያቄዎች)

1. የልጅዎ ስም ማን ነው? _____

2. የልጅዎ ዋና አሳዳጊ ማን ነው?

1. እናት 2) አባት 3) ምንድ አያት 4) ሴት አያት 5) ሌላ _____

3. የወላጆቹ የትዳር ሁኔታ እንዴት ነው?

1. ያገቡ 2) ባል/ ሚስት የሞተባቸው 3) የተፋቱ 4) የተለያዩ 5) ያላገቡ 6) ሌሎች ሁኔታዎች ካሉ እባክዎን ይግለጹ _____

4. ልጅዎ የተወለደበት/ችበት የልደት ቀን መቼ ነው? _____ / _____ / _____ ወይም የልጁ ግምታዊ እድሜ (በተሞላ ዓመት) _____

5. የልጅዎ ፆታ ምንድን ነው? 1) ወንድ 2) ሴት

6. አድራሻ:

7. የመኖሪያ ቦታዎ ምንድን ነው?

1. ከተማ 2) የትፈናቃይ ዳግም ማቋቋሚያ ያሰፈር 3) የተከበረ መንደር

8. በቤቱ ውስጥ ያሉ ክፍሎች ጠቅላላ ቁጥር: _____ ክፍሎች

9. ልጅዎ ሊጫወት/ልትጫወት የሚችልበት/የምትችልበት የአትክልት ስፍራ/ፓርክ በአካባቢው ወይም በቤት ውስጥ /በአቅራቢያው አለዎት?

አለ = 1 የለም = 2

10. ሃይማኖትዎ ምንድን ነው? 1) ክርስቲያን 2) ሙስሊም 3) ዋቄፈና 4) አይሁድ 5) ሌሎች ካሉ ይግለጹ _____

11. የቤተሰብዎ አይነት ምንድን ነው? 1) የአባውራ/እማውራ ቤተሰብ 2) የጋራ ቤተሰብ 3) ትውልድ ያለው ቤተሰብ (እናት/አባት/አጎቶች)

12	ግንኙነት	ዕድሜ	ትምህርት	ሙያ	ገቢ
12.01	አባት				
12.02	እናት				
12.03	የቤተሰብ ዋና አስተዳዳሪ ራስ (አባት/እናት)				
12.04	ታላቅ/ታናሽ/ወንድም				
12.05	ታላቅ/ታናሽ/ወንድም				
12.06	ታላቅ/ታናሽ/ወንድም				

12. የቤተሰብ ማህበረ-ኢኮኖሚያዊ ደረጃ ምንድን ነው? _____ ዝቅተኛ/መካከለኛ/ከፍተኛ

13. የቤተሰብ አባላት ጠቅላላ ቁጥር ስንት ነው? _____

የቤተሰብ ወርሃዊ ገቢ 1) $\geq 50,000$ ብር 2) 25,000-50,000 ብር 3) 15,000-25,000 ብር 4) 10,000-15,000 ብር 5) 5000-15,000 ብር 6) ≤ 5000 ብር

14. ቤተሰብ በአንድ ሰው የሚገኘው የነፍስ ምክንያት ገቢ _____

15. ልጅዎ ልጅ የሚንከባከቡ ተቋማት ይሄዳል/ች ወይም አገልግሎቶችን ያገኛል/ች

	በሳምንት ምን ያክል የቀናት ብዛት	አማካኝ ቆይታ በቀን/(ጠቅላላ ሰዓት)
16.1 መደበኛ ያልሆነ የልጅ እንክብካቤ (እንደ ቤተሰብ አባላት፣ ተከፋይ ልጅ ተንከባካቢ)		
16.2 መደበኛ እንክብካቤ እንደ (ህጻናት ማቆያ፣ ወዘተ)		
16.3 ከወላጆች ጋር በቤት ውስጥ		

17 እነዚህ ነገሮች በቤት ውስጥ ይኖራችኋል?

	አዎ = 1 የለም = 2	የኤሌክትሮኒክ መሣሪያው ልጁ በሚተኛበት/በሚጫወትበት ክፍል ውስጥ በተለምዶ ይቆያል?
17.01 የኬብል/ሳተላይት ግንኙነት ያለው የቴሌቪዥን		
17.02 ኮምፒውተር		
17.03 ኢንተርኔት ያለው ስማርት ስልክ		
17.04 ኢንተርኔት የሌለው የሞባይል ስልክ		
17.05 የቪዲዮ ጨዋታዎችን መጫወት የሚችሉ በእጅ የሚያዙ መሳሪያዎች (ጡባዊ)		
17.06 የኢንተርኔት ግንኙነት (ብሮድባንድ/ዋይፋይ)		ለዚህ ምንም መልስ አያስፈልግም

ክፍል II. የስክሪን ጊዜ መጋለጥ እና የቤት ሚዲያ አካባቢ (27 ንጥሎች)

18ልጁ የሚያደርጋቸው የእንቅስቃሴ ዓይነቶች፣ቆይታ ጊዜ እና ድግግሞሽ	ቴሌቪዥን ይመለከታል	ስማርት ስልክ ይጠቀማል	ሌሎች መሳሪያዎችን ይጠቀማል፤	ይጽፋል/ይሳላል/ይቀባል	ያንባል/ለአንድ ሰው ያንባል	ሌሎችካሉ ይግለጹ
18.01 በሳምንት ውስጥ እንቅስቃሴውን የማከናወን ድግግሞሽ፡ 1)ፈጽሞየለም 2) በጣምአልፎአልፎ (አንድጊዜናከዛበታች) 3) አልፎአልፎ (1-2 ጊዜ) 4) አንዳንድጊዜ (3-4 ጊዜ) 5) ብዙጊዜ (5 ጊዜወይምከዚያበላይ)						
18.02ልጅዎ በሥራ/ትምህርት ቀናት በቀን መሳሪያው ጋር ምን ያህል አማካይ የቆይታ ጊዜአለው/አላት(በደቂቃ)						
18.03 ልጅዎ በባላት ቀናት በቀን ምንያል ከመሳሪያው ጋር አማካይ የቆይታ ጊዜአለው/አላት(በደቂቃ)						
18.04 ልጁዎ በሳምንት ውስጥ ከላይ የተጠቀሱት እንቅስቃሴዎች ሲከሰቱ/ስትከሰቱ የሚቆጣጠረው/ራትነበረ? 1)ፈጽሞ የለም 2) በጣም አልፎአልፎ (አንድናበታች) 3) አልፎአልፎ (1-2 ጊዜ) 4) አንዳንድጊዜ (3-4 ጊዜ) 5) ብዙጊዜ (5 ጊዜወይምከዚያበላይ)						
18.05ልጅዎ እነዚህን አይነት ስክሪን ሚዲያዎች ለመጀመሪያ ጊዜ ያየው/ችዉ በስንትእድሜው/ሞነበር? (በወርወይምበዓመትያስቀምጡ)						
19ልጅዎ ትላንትና የተመለከታቸው/የተመለከተችዉ ፕሮግራሞች/ቪዲዮዎች ምን ምን ነበሩ?	ሀ		ለ	ሐ	መ	
20ልጅዎ እነዚህን ፕሮግራሞች/ቪዲዮዎች ለምን ያህል ጊዜአየ/ች? (በሰዓትወይምበደቂቃያስቀምጡ)						
21ልጅዎ ትላንትና በሁሉም አይነት ስክሪን ሚዲያ ላይያሳልፈው/ያሳለፈችዉ አጠቃላይ አማካይ የስክሪን ጊዜምንያህልነበር? (በሰዓት/በደቂቃያስቀምጡ)						
22ልጅዎ የሚጫወትበት/የሚተኛበት ክፍል ውስጥ ቴሌቪዥን ማስቀመጥ የልጁምን የስክሪን ጊዜ ይጨምራል ወይስ ይቀንሳል ብለውያስባሉ? አይ ከሆነ ወደጥያቄ 24ይዝለሉ					አዎ=1	አይ=2

23 አዎ ከሆነ ቴሌቪዥኑ ልጅዎ የሚጫወትበት/የሚተኛበት ክፍል ውስጥ ለምን ያህል ጊዜ ይበራል?

24 ልጅዎ ዲጂታል ስክሪን መቼ፣የት ምን እና እንዴት እንደሚመለከት/እንደምትመለከት በተመለከተ የሚከተሉት ህግ አለዎት? (አይ ከሆነ ወደጥያቄ 26 ይዝለሉ)	አዎ=1	አይ=2
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24 አዎ ከሆነ ለልጅዎ በቤት ውስጥ ምን ዓይነት ህጎች አሉዎት?		
24.1 ለልጆች የሚሆን ቻናል ብቻይፈቀዳል		
24.2 ልጅ ከመተኛቱ/ቷ 1 ሰዓት በፊት ምንም አይነት የሚዲያ መሳሪያ እንዲጠቀም አይፈቀዱም		
24.3 ልጅ በአዋቂዎች ቁጥጥር ስር ሆኖ/ና ብቻ እንዲመለከት/እንድትመለከት ይፈቀዳል		
24.4 ልጅ ቴሌቪዥን አጠገብ እንዲቀመጥ አይፈቀድም		
24.5 ልጁ ለተወሰነ ጊዜ ብቻ እንዲመለከት ይፈቀዳል _____ ደቂቃ		
24.6 ሌሎች ምክንያቶች ካሉ እባክዎን ይግለጹ		

25 የአሳዳጊዎች የሚዲያ ተዛማጅ ጉዳዮች

	እናት	አባት
25.01 በቀን የስክሪን ጊዜ አማካይ ቆይታ		
25.02 በሳምንት ውስጥ የሚዲያ መሳሪያ ጥቅም ላይ የዋለበት ድግግሞሽ 1) ፈጽሞ የለም 2) በጣም አልፎ አልፎ (አንድና በታች) 3) አልፎ አልፎ (1-2 ጊዜ) 4) አንዳንድ ጊዜ (3-4 ጊዜ) 5) ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ)		
25.03 የሚጠቀሙባቸው የሚዲያ መሳሪያዎች 1) ቴሌቪዥን 2) ኮምፒውተር 3) ላፕቶፕ 4) ታብሌት 5) ስማርትስልክ 6) ስማርትዩልፕን የሞባይል ስልክ		
25.04 ከልጅዎ ጋር በቤት ውስጥ የሚያሳልፉት አማካይ ጊዜ ምን ያህል ነው (በሰአት/ደቂቃ ይጻፉ)		

ክፍል III. የአካል እንቅስቃሴ ጋር የተያያዙ ጥያቄዎች (10 ንጥሎች)

26.01 በሥራ/ትምህርት ቀናት በቀን ውጭ ለመጫወት የሚወጣው አማካይ ቆይታ ጊዜ (በደቂቃ)		27.0 ልጅዎ ትላንትና የሠራቸው/ችው የሚከተሉት የውጭ እንቅስቃሴዎች ቆይታ ጊዜ ምን ያህል ነበር?					
26.02 በበዓላት ቀን በቀን ውጭ ለመጫወት የሚወጣው አማካይ ቆይታ ጊዜ (በደቂቃ)		27.01 በፍጥነት ርጠ	አዎ = 1	አይደለም = 2	27.05 ቀላ ልዘለላዎች ንዘለለ	አዎ = 1	አይደለም = 2
26.03 ጠቅላላ ድምር		27.02 በመጠኑ ተንከባለለ			27.06 መጠነኛ ዘለላዎችን ዘለለ		
		27.03 ጨፈረ			27.07 ከባድ ዘለላዎችን ዘለለ		
		27.04 ዛፍ ላይ ወጣ			27.08 ሌሎች ካሉ ይገልጽ		

ክፍል IV. ከሚዲያ ጋር የተያያዙ ባህሪዎች (15 ንጥሎች)

28 ልጅዎ በሳምንት ውስጥ በቤት ውስጥ በሚዲያ መሳሪያዎች ይህንን የሚከተለውን ይዘት ምን ያህል ጊዜ ይመለከታል/ትመለከታለች? ፈጽሞ የለም = 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.1. ልጅዎ የቤት ሥራውን ለማጠናቀቅ በሚዲያ መሳሪያዎች ይጠቀማል/ትጠቀማለች? 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.2. ልጅዎ ከቤተሰብ/ወዳጆች ጋር ለመነጋገር የቪዲዮ ጥሪ መተግበሪያዎችን ይጠቀማል/ትጠቀማለች (ስካይፕ፣ ዋትስአፕ ወዘተ) 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.3. ልጅዎ ግጥሞችን፣ ዜማዎችን፣ አቢሲዳዎችን፣ ወዘተ በአንላይን ይማራል/ትማራለች 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.4. ልጅዎ ሂሳብ፣ ቁጥሮችን፣ ሠንጠረዦችን ወዘተ በአንላይን ይማራል/ትማራለች። 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.5. ልጅዎ ቅርጾችን፣ ድምፆችን፣ ቀለሞችን ወዘተ በአንላይን ላይ ሲያይ/ስታይያውቃል/ታውቃለች 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29.6. ልጅዎ የተለያዩ ሳይንሶችን በአንላይን ይማራል/ትማራለች 1 = በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.7. ልጅዎ መሳል፣ መጻፍ ይማራል/ትማራለችህ? 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.8. ልጅዎ የቪዲዮ ጨዋታዎችን ይጫወታል/ች? 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.9. ልጅዎ ታሪኮችን ለመመልከት የዲጂታል ሚዲያ መሳሪያዎችን ይጠቀማል/ች 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.10. ልጅዎ የአዋቂ ፕሮግራሞችን ይመለከታል/ትመለከታለች (አፔራ፣ ዜና፣ ስፖርት፣ ፊልም ወዘተ) 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.11. ልጅዎ ፊደላትን፣ ቃላትን፣ የቃላት ዝርዝር፣ ቋንቋን በአንላይን ይማራል/ች 1 በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

28.12. ልጅዎ መዝናናት ሲፈልግ/ስትፈለግ (መዝናኛ/ማስታወቂያዎች፣ቤቢ ቲቪ፣ፎቶ ማንሳት ወዘተ) ስክሪን ሚዲያ ይመለከታል/ትመለከታለች 1= በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29 ልጅዎ ቴሌቪዥን ሲመለከት/ስትመለከት ከሚከተሉት የቱን ያደርጋል/ታደርጋለች?

29.1 ሀ) ስለ ፕሮግራሙ/ፊልሙ ይናገራል/ትናገራለች 1=በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29.1ለ) ስለ ሌላ ነገር ይናገራል/ትናገራለች 1 =በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29.1ሐ) ከስክሪኑ ላይ ካለው ገፅፀሪ ጋር ያዎራል/ይነጋገራል/ትነጋገራለች 1= በጣም አልፎ አልፎ (አንድና ጊዜበታች) = 2 አልፎአልፎ (1-2 ጊዜ) = 3 አንዳንድጊዜ (3-4 ጊዜ) = 4 ብዙጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29.2ታሪኩን/ገፅፀሪውን ይጫወታል/ች 1 = በጣምአልፎአልፎ (ከአንድ ጊዜ በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) = 5

29.3ይዘምራል/ች 1 = በጣም አልፎ አልፎ (አንድ ጊዜና በታች) = 2 አልፎ አልፎ (1-2 ጊዜ) = 3 አንዳንድ ጊዜ (3-4 ጊዜ) = 4 ብዙ ጊዜ (5 ጊዜ ወይም ከዚያ በላይ) =

ክፍል V. የወላጆች የሚዲያ አዋቂነት (11 ንጥሎች)

30. ልጅዎ ከእነዚህ ዲጂታል ስክሪኖች የሚማራቸው ጥሩነገሮች ምን እንደሆኑ ያስባሉ?

30.1 ልጅ ጥሩ ልምዶችን እየተማረ/ችነው።አዎ = 1 አይደለም = 2

30.2 ልጅ እውቀቱን እያሳደገ/ችነው።አዎ = 1 አይደለም = 2

30.3 ልጅ አዳዲስ ክህሎቶችን እየተማረ/ችነው።አዎ = 1 አይደለም = 2

30.4 ለልጅ እድገትና መዳበር ጥሩ ነው።አዎ = 1 አይደለም = 2

30.5 ምንም አይነት አዎንታዊ ውጤቶች የሉትም።አዎ = 1 አይደለም = 2

30.6 ሌሎችካሉይግለጹ _____

31. ልጅዎ እንኚህን ስክሪኖች በከፍተኛ ሁኔታ ሲመለከት/ስትመለከት ምን ችግሮች ይፈጥራል ብለዉያስባሉ?

31.1 ልጅ የሚያየውን/የምታየውን መኮረጅ ይጀምራል/ትጀምራለች።አዎ = 1 አይደለም = 2

31.2 ልጅ የእንቅልፍ ችግር ይፈጥራል/ች።አዎ = 1 አይደለም = 2

31.3 ልጅ ጤናማ ያልሆነ ምግብ መብላት ይጀምር/ትጀምርይሆናል።አዎ = 1 አይደለም = 2

31.4 ልጅ ጠበኛ ሊሆን/ልትሆን ይችላል/ትችላለች።አዎ = 1 አይደለም = 2

31.5 ልጁ ራሱን/ራሷን ከሰዉ ያርቃል/ታርቃለች።አዎ = 1 አይደለም = 2

31.6 የልጅን ትኩረት ሊጎዳ ይችላል።አዎ = 1 አይደለም = 2

31.7 የባህሪ ችግር ሊያስከትል ይችላል።አዎ = 1 አይደለም = 2

31.8 የልጅን የዓይን እይታ ሊጎዳይችላል።አዎ = 1 አይደለም = 2

31.9 ለልጅ እድገት/መዳበር ጥሩ አይደለም።አዎ = 1 አይደለም = 2

31.10 ምንም አሉታዊ ውጤቶች የሉትም።አዎ = 1 አይደለም = 2

31.11 ሌሎች ይግለጹ _____

የዕድሜና የዕድገት ደረጃ መጠይቅ

በሚቀጥሉት ገጾች ልጆች ሊያደርጓቸው የሚችሉ ተግባራት ትተዘርዝረዋል። የእርሶዎም ልጅ የተጠቀሱትን ተግባራት ማድረግ ጀምሮ ይሆናል ወይም ገና ሊሆንም ይችላል። ከእያንዳንዱ ጥያቄ ፊትለፊት ልጄዎ ድርጊቱን ሁልጊዜ አልፎ አልፎ ያደርግ እንደሆነ ወይም ማድረግ አለጀመረ እንደሆነ (x) ምልክት በማድረግ ይመልሱ። ስለትብብሮዎ እናመሰግናለን።

ጥያቄውን ከመመለስዎ በፊት ከልጄዎ ጋርድርጊቱን ይሞክሩ።

ይህንን መጠይቅ መሙላት ለራስዎና ለልጄዎም በመዝናኛ መልክዎ ድርጉ።

ልጄዎ በደንብ ማረፉንና መመገቡንዎ ረጋግጡ።

የልጄዎ ስም ማን ነው? _____

የልጄዎ ዋና አሳዳጊ ማን ነው?

ልጄዎ የተወለደው/ችው መቼ ነው ? ቀን/ወር/አ/ም _____

መጠይቁ የተሞላበት ቀን _____

የ 9 ወርመጠይቅ (ከ 9 ወር 1 ቀንእስከ 9 ወር 30 ቀን)

ተ.ቁ.	ተግባቦት	አዎሁልጊዜ	አልፎአልፎ	ገናነዉ
1	ልጄዎ ዳ፣ ካ፣ ጋ ና ባ የሚሉድምጾችንያወጣል?			
2	ልጄዎየሚያወጣቸዉንድምጾችቢያስመስሉልጄዎያንነደግሞአስመስሎይላል?			
3	ልጄዎሁለትተመሳሳይድምጾችንለምሳሌዳዳ፣ ጋጋ፣ ወይምባባይላል? (ድምጾቹምንምትርጉምየሌላቸዉሊሆኑይችላሉ)			
4	የሕጻናትጨዋታእንዲይያሳይብጠይቁልጄዎያሳያል? (እንቅስቃሴዉንሳያሳዩ) ለምሳሌአየሁህ/አየሁሽ፣ ቻዎቻዎወዘተ			
5	ልጄዎአንድቀላልትዕዛዝይፈጽማል? (በሰዉነትእንቅስቃሴሳይጠቁሙ) ለምሳሌ ና፣ ስጠኝ፣ አስቀምጥወዘተ			
6	ልጄዎሦስትቃላቶችንይላል?ለምሳሌባባ፣ ማማ፣ ዳዳ (ልጄዎሁሌአንድንነገርወይምአንድንሰዉለመግለጽየምጠቀምበትነዉቃል)			

የ 12 ወርመጠይቅ (ከ 11 ወር 1 ቀንእስከ 12 ወር 30 ቀን)

ተ.ቁ.	ተግባቦት	አዎሁልጊዜ	አልፎአልፎ	ገናነዉ
1	ልጄዎሁለትተመሳሳይድምጾችንለምሳሌዳዳ፣ ጋጋ፣ ወይምባባይላል? (ድምጾቹምንምትርጉምየሌላቸዉሊሆኑይችላሉ)			
2	የሕጻናትጨዋታብያንስአንድእንዲይያሳይብጠይቁልጄዎያሳያል? (እንቅስቃሴዉንሳያሳዩ) ለምሳሌአየሁህ/አየሁሽ፣ ቻዎቻዎ፣ እጅማጨብጨብወዘተ			
3	ልጄዎአንድቀላልትዕዛዝይፈጽማል? (በሰዉነትእንቅስቃሴሳይጠቁሙ) ለምሳሌ ና፣ ስጠኝ፣ አስቀምጥወዘተ			
4	ልጄዎሦስትቃላቶችንይላል?ለምሳሌባባ፣ ማማ፣ ዳዳ (ልጄዎሁሌአንድንነገርወይምአንድንሰዉለመግለጽየምጠቀምበትነዉቃል)			
5	ልጄዎኳስ (ጫማ፣ ባርኔጣወዘተ) እንዲያሳይብጠይቁወደቁሶቹይመለከታል? (ቁሶቹአጠገቡመኖራቸዉንያረጋግጡ፣ ቁሶቹንየሚያወቁከሆነአዎሁልጊዜብለዉይመልሱ)			
6	ልጄዎአንድንነገርስፈልግበእጁበመጠቆምፍላጎቱንይገልጻል?			

የ 18 ወር መጠይቅ (ከ 17 ወር ከ1 ቀን እስከ 18 ወር 30 ቀን)

ተ.ቁ.	ተግባራት	አዎ ሁልጊዜ	አልፎአልፎ	ገናነወ
1	ልጄዎ አንድ ነገር ስፈልግበት ጥያቄዎን ማሳተፍን ይገልጻል?			
2	ልጄዎ የለመደውን መጫወቻ ወይም ዕቃ ከሌላ ክፍል ሄዶ እንዲያመጣብደዝኩት ሄዶ ያመጣል? (ለምሳሌ እንዲህ ብለው መጠይቅ ይችላሉ፤ ካስህየኩት ነው? ልብስ ህንጻውን ያመሳለሉትን)			
3	ልጄዎ ዳዳ እና ማማ ከሚለው በተጨማሪ ስምንት ወይ ከዚያ በላይ ቃላቶችን ይላል?			
4	ልጄዎ ሁለት ቃላት የያዘ ረፍተኛ ነገር ቢናገሩ ኮርጂ ይናገራል? (ይምሳሌ እማብይ፣ አባዬ ተጫወት፣ ቤት ሂድ፣ ይሄምን ድር ነው? ብለው ብናገሩ ልጄዎ ድግም ሎዎታል?)			
5	ወደ ሥዕሎች ሳይጠቁሙ ድመቲቱን አሳየኝ፤ ወሻወየኩት ነው? ብሎ ልጄዎት ክክለኛውን ሥዕል ይጠቁማል? (አንዱን ብቻ በትክክል ከለየ ይበቃል)			
6	ልጄዎ ሁለት ወይም ሦስት የተለያዩ ሃሳቦችን የምገልጹ ቃላትን ተጠቅሞ ይናገራል? (ለምሳሌ ወሻወሽ፣ እማቤት መጣች፣ ድመቲ ሄደች) (ተመሳሳይ ሃሳብ የምገልጹ ቃላቶች ከሆኑ አይቆጠሩም ለምሳሌ ቻዎቻዎ፣ ሁሉ ሄዱ፣ እሺ፣ ይህምን ድር ነው?)			

የ 24 ወር መጠይቅ (ከ 23 ወር 1 ቀን እስከ 25 ወር 15 ቀን)

ተ.ቁ .	ተግባራት	አዎ ሁልጊዜ	አልፎ አልፎ	ገናኘው
1	ወደ ሥዕሎች ሳይጠቁሙ ድመቲቱን አሳየኝ፤ ወሻወየኝ ነው? ብሉል ጆዎት ክክለኛውን ሥዕል ይጠቁማል? (እንዲያው ብቻ በትክክል አለየደበቃል)			
2	ልጆቼ ሁለት ቃላት የያዘዋል ረፍተኛ ገርብና ገሩ ከርጃ ይናገራል? (ይምሳሌ እማብ ይገኛል፤ አባዬ ተጫውት፤ ቤት ሂድ፤ ይህም ንድር ነው? ብለው ብናገሩልኝ ይደግፈሉኝ?)			
3	በመጠቆም ወይም በሰውነት እንቅስቃሴ ፍንጭሳይ ሰጠልኝ ወይም ከሚከተሉት ቢያንስ ሦስት ፅሁፍ ይፈጽማል? A/ መጫዎች ህንጠረዴ ዛጋ አስቀምጥ ----- ለ/ በሩን ዘጋ ----- ሐ/ ፎጣ አምጣልኝ ----- መ/ ሽሚ ዝህን ፈልግ ----- ሠ/ እጄን ያዝ ----- ረ/ መጽሐፍ ህንጠረዴ -----			
4	ወደ ሥዕሎች (ድመት፣ ከብያ፣ ባርኤጣ፣ ኳስ፣ ወዘተ) እያመለከቱ ይህም ንድር ነው? ብሉል ጆዎ ቢያንስ አንዱን በትክክል ይጠራል?			
5	ልጆቼ ሁለት ወይም ሦስት የተለያዩ ሃሳቦችን የምገልጹ ቃላትን ተጠቅሞ ይናገራል? (ለምሳሌ ወሻወሽ፣ እማቤት መጣች፣ ድመቷ ሄደች) (ተመሳሳይ ሃሳብ የምገልጹ ቃላቶች ከሆኑ አይቆጠሩም ለምሳሌ ቻዎቻዎ፣ ሁሉ ሄዱ፣ አሺ፣ ይህም ንድር ነው?) ከምናገራቸው ምሳሌ ይሰጡ			
6	ልጆቼ ቢያንስ ሁለት ቃላትን በአግባቡ ይጠቀማል? ለምሳሌ እኔ፣ የኔ፣ አንተ፣ አንቺ፣ ወዘተ			

የ 30 ወርመጠይቅ (ከ 28 ወር 16 ቀን እስከ 31 ወር 15 ቀን)

ተ. ቁ.	ተግባሩ	አዎ ሁል ጊዜ	አልፎ አልፎ	ገናን ወ
1	ወደ ሥዕሎች (ድመት፣ ከባድ፣ ባርነጣ፣ ኳስ፣ ወዘተ) እያመለከቱ ይህም ንድር ነው? ቢሉል፣ ጆም ቢያንስ አንዱን በትክክል ይጠራል?			
2	በመጠቀም ወይም በሰውነት እንቅስቃሴ ፍንጭ ሳይሰጡል፣ ጆም ከሚከተሉት ቢያንስ ሦስቱን ትዕዛዞች ይፈጽማል? A/ መጫወት ህንጠረጴዛላይ አስቀምጥ ----- ለ/ በሩንዝጋ ----- ሐ/ ፎጣክም ጣልኝ ----- መ/ ሸሚዝ ህንፈልግ ----- ሠ/ እጅን ያዝ ----- ረ/ መጽሐፍ ህንጠረጴዛላይ -----			
3	ልጆቻችንን ጫወት፣ ዓይኑን፣ ጸጉሩን፣ እግሩን፣ ጆሮውን እና የመሳሰሉትን የአካል ክፍሎችን እንዲያሳይቡ፣ ጠይቁ ቢያንስ ሰባቱን ያሳያል? (የራሱን፣ የእርሶን ወይም የአሻንጉሊትን አካል ክፍሎች ልጠቁም ይችላል፤ ሦስቱን ብቻ የሚያመለክት ከሆነ አልፎ አልፎ ብለው ይመልሱ)			
4	ልጆቻችን በትዕዛዝ ይሰሩት ቃላትን የያዙ ዓረፍተ ነገሮችን ይላል? እባክዎ ጥቂት ምሳሌዎችን ይጥቀሱ			
5	በመጠቀም ወይም በሰውነት እንቅስቃሴ ፍንጭ ሳይሰጡል፣ ጆም ንመጽሐፉን ህንጠረጴዛላይ አስቀምጥ፤ እንዲሁም ጫማ ህንጠረጴዛላይ አስቀምጥ፤ ብለው ብያዙል፣ ጆም ሁለቱንም ትዕዛዞች በትክክል ይፈጽማል?			
6	በመጽሐፍ ላይ የሉ ሥዕሎችን ልጆቻችን እየተመለከተ በሥዕሉ እየሆነ ወይም እየተደረገ ያለውን ነገር ብጠይቁ በትክክል ይናገራል? (ለምሳሌ እየጮኸ፣ እየሮጠ፣ እየበላ፣ እያለቀሰ ወዘተ) (ልጁ/ወሻወጡን እያደረገ ነው? ብለው መጠይቅ ይችላሉ)			

ተ. ቁ.	ተግባቦት	አዎሁልጊዜ	አልፎአልፎ	ገናን ወ.
1	ልጆቻችንንጫወጥ፤ ሳይኑን፤ ጸጉሩን፤ እግሩን፤ ጆሮወን እና የመሳሰሉትን የአካል ክፍሎችን እንዲያሳይቢጠይቁቢያን ስብሳብ እንያሳያል? (የራሱን፤ የእርሶን ወይም የአሻንጉሊትን አካል ክፍሎች ልጠቁም ይችላል፤ ሦስቱን ብቻ የሚያመለክት ከሆነ አልፎ አልፎ ብለው ይመልሱ)			
2	ልጆቻችን ወይም አራት የተለያዩ ሃሳቦችን የምንገልጽ ቃላትን የያዙ ዓረፍተነገሮችን ይናገራል? እባኮቻችን ሳይሰጡ፡፡			
3	በመጠቆም ወይም በሰውነት እንቅስቃሴ ጥራት ሳይሰጡ ልጆቻችን ጽሑፍን ጠረጴዛ ያይዛል እስቀምጥ፤ እንዲሁም ጫማህን ወንበር ሥር እስቀምጥ፤ ብለው ብያዙ ልጆቻችን ሁለቱንም ቅጥፍቶቻችን ክክል ይፈጽማል?			
4	በመጽሐፍ ላይ የሥዕሎችን ልጆቻችን የተመለከተ በሥዕሉ እየሆነ ወይም እየተደረገ ያለውን ነገር ብጠይቁበት ክክል ይናገራል? (ለምሳሌ እየጮኸ፤ እየሮጠ፤ እየበላ፤ እያለቀሰ ወዘተ) (ልጁ/ወሻው ምን እያደረገ ወይን ብለው መጠይቅ ይችላሉ)			
5	በልብስ ላይ ያለዚህ እንዴት ወደ ላይና ወደ ታች እንደሚሳብ ልጆቻችን ያሳዩት፤ እይይህ ወደ ላይና ወደ ታች ይሄዳል ይበሉት፡፡ ዚህም ሀልላይ አድርሰውት ወደ ታች ሳይበሉት፤ እንደገና ዚህም ሀልላይ መልሱትና ዚህም ወደ ላይ ሳይበሉት፡፡ ይህንን ብዙ ጊዜ ደጋግመው ያደርጉት፤ ዚህም ሀልላይ በማድረግ ወደ ላይና ወደ ታች ይሳቡት፡፡ ልጆቻችን በተደጋጋሚ ዚህም ወደ ላይ ሳይበሉት ወደ ላይ ይስባል? ወደ ታች ሳይበሉት ወደ ታች ይስባል?			
6	ልጆቻችንም ህማኑ ወይ ብለው ብጠይቁት የራሱን የአካሉን ክፍል ይናገራል?			

የ 48 ወር መጠይቅ (ከ 45 ወር 1 ቀን እስከ 50 ወር 30 ቀን)

ተ. ቁ.	ተግባሩ	አዎ ሆኖ	አልፎ አልፎ	ገናኝ ወ.
1	ልጄዎ ከሚታወቁ ነገሮች ምድብ ቢያንስ ሦስት ይጠራል? ለምሳሌ ልጄዎን ልትብላዉ ከምትችላቸዉ ነገሮች መካከል የተወሰኑትን ጥራብሉት ብስኩት፤ እንቁላል፤ እንጆራ የመሳሰሉትን ይጠቅሳል፤ ወይም ከእነሱ ሦስት መካከል የተወሰኑትን ከምጥራብሉ ላም፤ ዉሻ እና ዝሆን ይላል?			
2	ልጄዎ የሚከተሉትን ጥያቄዎች ይመልሳል (እንዲያውም መልስ ከሆነ አልፎ አልፎ ብለዉ ይመልሱ) ስርብ ህምን ታደርጋለህ? (ተቀባይነት ያላቸዉ መልሶች ምግብ እፈልጋለሁ፤ እበላለሁ፤ የሚበላ ነገር አጠይቃለሁ፤ መክሰስ እበላለሁ) እባክዎ የልጁን መልስ ይጻፉ ----- ስደክም ህምን ታደርጋለህ? (ተቀባይነት ያላቸዉ መልሶች እንቅልፍ እተኛለሁ፤ አርፋለሁ፤ ወደ መኝታ እሄዳለሁ፤ ጋደም አላለሁ፤ እቀመጣለሁ) እባክዎ የልጁን መልስ ይጻፉ -----			
3	ልጄዎ ከተለመዱ ቁሳቁሶች ቢያንስ ሁለቱን ይጠራል? ለምሳሌ ስለኪስ ህንገረኝ ብሉክ ብነዉ፤ እወራዉራለሁ፤ ትልቅ ነዉ ይላል			
4	ልጄዎ ነገሮችን በብዙ ቁጥር የምግልጽ፤ ኃላፊ ጊዜ እና አሁን እየተደረጉ ያሉ ነገሮችን የምወክሉ ቃላቶችን ይጠቀማል? ለምሳሌ ሁለት ድመቶችን አያለሁ፤ እየተጫወቱ ኩነዉ፤ ኪሱን መታሁ፡፡			
5	በመጠቀም ወይም በመድገም ፍንጭ ሳይሰጡ ልጄዎ ስትያልተገናኙት ዕዛዞችን በትክክል ይፈጽማል? ልጄዎ ትዕዛዞችን መፈጸም ከመጀመሩ በፊት ሁሉንም ትዕዛዞችን ይስጡ፡፡ ለምሳሌ አጨብጭብ፤ ወደ በሩሂድ፤ ቁጭበል፤ ወይም እስክር፣ ጥብስ፣ መጽሐፍን ግለጥ፤ ቁም			
6	ልጄዎ በዓረፍተ ነገር ውስጥ መግባት ያለባቸዉን ሁሉንም ቃላት በመጠቀም የተሟላ ሰረፍተ ነገር ይናገራል? ለምሳሌ እኔ ወደ ሽርሽር እየሄድ ኩነዉ፡፡ የምጫወት በትመጨወቻ አለ? አንተም ትመጣለህ?			

Baby's first name:Baby's last name:.....

Baby's date of birth:.....

City:.....

Date ASQ completed:.....

Relationship to baby:.....

Important Points to Remember:

☐✓ Try each activity with your baby before marking a response.

☐✓ Make completing this questionnaire a game that is fun for you and your baby.

☐✓ Make sure your baby is rested and fed.

☐✓ Please return this questionnaire by _____.

Notes:

Ages & Stages Questionnaires ®Month Questionnaire12

12 Month Questionnaire through 12 months 30 days 11 months 0 days

COMMUNICATION

1. Does your baby make two similar sounds, such as “ba-ba,” “da-da,” or “ga-ga”? (The sounds do not need to mean anything.)
2. If you ask your baby to, does he play at least one nursery game even if you don’t show him the activity yourself (such as “bye-bye,” “Peekaboo,” “clap your hands,” “So Big”)?
3. Does your baby follow one simple command, such as “Come here,” “Give it to me,” or “Put it back,” without your using gestures?
4. Does your baby say three words, such as “Mama,” “Dada,” and “Baba”? (A “word” is a sound or sounds your baby says consistently to mean someone or something.)
5. When you ask, “Where is the ball (hat, shoe, etc.)?” does your baby look at the object? (Make sure the object is present. Mark “yes” if she knows one object.)
6. When your baby wants something, does he tell you by pointing to it?

Ages & Stages Questionnaires® Month Questionnaire 14

COMMUNICATION

1. Does your baby say three words, such as “Mama,” “Dada,” and “Baba”? (A “word” is a sound or sounds your baby says consistently to mean someone or something.)
2. When your baby wants something, does she tell you by pointing to it?
3. Does your baby shake his head when he means “no” or “yes”?
4. Does your baby point to, pat, or try to pick up pictures in a book?
5. Does your baby say four or more words in addition to “Mama” and “Dada”?
6. When you ask her to, does your baby go into another room to find a familiar toy or object? (You might ask, “Where is your ball?” or say, “Bring me your coat,” or “Go get your blanket.”)

Ages & Stages Questionnaires® Month Questionnaire

16 Month Questionnaire 15 months 0 days through 16 months 30 days

COMMUNICATION

1. Does your child point to, pat, or try to pick up pictures in a book?
2. Does your child say four or more words in addition to “Mama” and “Dada”?
3. When your child wants something, does she tell you by pointing to it?
4. When you ask your child to, does he go into another room to find a familiar toy or object? (You might ask, “Where is your ball?” or say, “Bring me your coat,” or “Go get your blanket.”)
5. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as “Mama eat,” “Daddy play,” “Go home,” or “What’s this?” does your child say both words back to you? (Mark “yes” even if her words are difficult to understand.)
6. Does your child say eight or more words in addition to “Mama” and

“Dada”

Ages & Stages Questionnaires® Month Questionnaire 18

18 Month Questionnaire 17 months 0 days through 18 months 30 days

COMMUNICATION

1. When your child wants something, does she tell you by pointing to it?
2. When you ask your child to, does he go into another room to find a familiar toy or object? (You might ask, “Where is your ball?” or say, “Bring me your coat,” or “Go get your blanket.”)
3. Does your child say eight or more words in addition to “Mama” and “Dada”?
4. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as “Mama eat,” “Daddy play,” “Go home,” or “What’s this?” does your child say both words back to you? (Mark “yes” even if her words are difficult to understand.)
5. Without your showing him, does your child point to the correct picture when you say, “Show me the kitty,” or ask, “Where is the dog?” (He needs to identify only one picture correctly.)
6. Does your child say two or three words that represent different ideas together, such as “See dog,” “Mommy come home,” or “Kitty gone”?

Ages & Stages Questionnaires® Month Questionnaire 20

20 Month Questionnaire 19 months 0 days through 20 months 30 days

COMMUNICATION

1. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as “Mama eat,” “Daddy play,” “Go home,” or “What’s this?” does your child say both words back to you? (Mark “yes” even if her words are difficult to understand.)
2. Does your child say eight or more words in addition to “Mama” and “Dada”?
3. Without your showing him, does your child point to the correct picture when you say, “Show me the kitty,” or ask, “Where is the dog?” (He needs to identify only one picture correctly.)
4. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, “What is this?” does your child correctly name at least one picture?
5. Without your giving him clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?
 - a. “Put the toy on the table.” d. “Find your coat.”
 - b. “Close the door.” e. “Take my hand.”
 - c. “Bring me a towel.” f. “Get your book.”
6. Does your child say two or three words that represent different ideas together, such as “See dog,” “Mommy come home,” or “Kitty gone”?

Ages & Stages Questionnaires® Month Questionnaire 22

22 Month Questionnaire through 22 months 30 days 21 months 0 days

COMMUNICATION

1. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, "What is this?" does your child correctly name at least one picture?
2. Without your giving him clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?
 - a. "Put the toy on the table." d. "Find your coat."
 - b. "Close the door." e. "Take my hand."
 - c. "Bring me a towel." f. "Get your book."
3. When you ask your child to point to her nose, eyes, hair, feet, ears, and so forth, does she correctly point to at least seven body parts? (She can point to parts of herself, you, or a doll. Mark "sometimes" if she correctly points to at least three different body parts.)
4. Does your child say 15 or more words in addition to "Mama" and "Dada"?
5. Does your child correctly use at least two words like "me," "I," "mine," and "you"?
6. Does your child say two or three words that represent different ideas together, such as "See dog," "Mommy come home," or "Kitty gone"?

Ages & Stages Questionnaires® Month Questionnaire 24

24 Month Questionnaire 23 months 0 days through 25 months 15 days

COMMUNICATION

1. Without your showing him, does your child point to the correct picture when you say, "Show me the kitty," or ask, "Where is the dog?" (She needs to identify only one picture correctly.)
2. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as "Mama eat," "Daddy play," "Go home," or "What's this?" does your child say both words back to you? (Mark "yes" even if her words are difficult to understand.)
3. Without your giving him clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?
 - a. "Put the toy on the table." d. "Find your coat."
 - b. "Close the door." e. "Take my hand."
 - c. "Bring me a towel." f. "Get your book."
4. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, "What is this?" does your child correctly name at least one picture?
5. Does your child say two or three words that represent different ideas together, such as "See dog," "Mommy come home," or "Kitty gone"? (Don't count word combinations that express one idea, such as "byebye," "all gone," "all right," and "What's that?") Please give an example of your child's word combinations:

YES SOMETIMES NOT YET

COMMUNICATION (continued)

6. Does your child correctly use at least two words like "me," "I," "mine," and "you"?

COMMUNICATION

1. Without your giving him clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?
 - a. "Put the toy on the table." d. "Find your coat."
 - b. "Close the door." e. "Take my hand."
 - c. "Bring me a towel." f. "Get your book."
2. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, "What is this?" does your child correctly name at least one picture?
3. When you ask her to point to her nose, eyes, hair, feet, ears, and so forth, does your child correctly point to at least seven body parts? (She can point to parts of herself, you, or a doll. Mark "sometimes" if she correctly points to at least three different body parts.)
4. Does your child correctly use at least two words like "me," "I," "mine," and "you"?
5. Does your child make sentences that are three or four words long?
Please give an example:
6. Without giving your child help by pointing or using gestures, ask him to "put the book on the table" and "put the shoe under the chair." Does your child carry out both of these directions correctly?

COMMUNICATION

1. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, "What is this?" does your child correctly name at least one picture?
2. Without your giving him clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?
 - a. "Put the toy on the table." d. "Find your coat."
 - b. "Close the door." e. "Take my hand."
 - c. "Bring me a towel." f. "Get your book."
3. When you ask your child to point to her nose, eyes, hair, feet, ears, and so forth, does she correctly point to at least seven body parts? (She can point to parts of herself, you, or a doll. Mark "sometimes" if she correctly points to at least three different body parts.)
4. Does your child make sentences that are three or four words long?
Please give an example:
5. Without giving your child help by pointing or using gestures, ask him to "put the book on the table" and "put the shoe under the chair." Does your child carry out both of these directions correctly?
6. When looking at a picture book, does your child tell you what is happening or what action is taking place in the picture (for example, "barking," "running," "eating," or "crying")? You may ask, "What is the dog (or boy) doing?"

Ages & Stages Questionnaires® Month Questionnaire 33

33 Month Questionnaire through 34 months 15 days 31 months 16 days

COMMUNICATION

1. When you ask your child to point to his nose, eyes, hair, feet, ears, and so forth, does he correctly point to at least seven body parts? (He can point to parts of himself, you, or a doll. Mark “sometimes” if he correctly points to at least three different body parts.)

2. Does your child make sentences that are three or four words long?

Please give an example:

3. Without giving your child help by pointing or using gestures, ask her to “put the book on the table” and “put the shoe under the chair.” Does your child carry out both of these directions correctly?

4. When looking at a picture book, does your child tell you what is happening or what action is taking place in the picture (for example, “barking,” “running,” “eating,” or “crying”). You may ask, “What is the dog (or boy) doing?”

5. Show your child how a zipper on a coat moves up and down, and say, “See, this goes up and down.” Put the zipper to the middle, and ask your child to move the zipper down. Return the zipper to the middle, and ask your child to move the zipper up. Do this several times, placing the zipper in the middle before asking your child to move it up or down. Does your child consistently move the zipper up when you say “up” and down when you say “down”?

6. When you ask, “What is your name?” does your child say his first name or nickname?

Ages & Stages Questionnaires® Month Questionnaire 36

36 Month Questionnaire through 38 months 30 days 34 months 16 days

COMMUNICATION

1. When you ask your child to point to her nose, eyes, hair, feet, ears, and so forth, does she correctly point to at least seven body parts? (She can point to parts of herself, you, or a doll. Mark “sometimes” if she correctly points to at least three different body parts.)

2. Does your child make sentences that are three or four words long?

Please give an example:

3. Without giving your child help by pointing or using gestures, ask him to “put the book on the table” and “put the shoe under the chair.” Does your child carry out both of these directions correctly?

4. When looking at a picture book, does your child tell you what is happening or what action is taking place in the picture (for example, “barking,” “running,” “eating,” or “crying”)? You may ask, “What is the dog (or boy) doing?”

5. Show your child how a zipper on a coat moves up and down, and say, “See, this goes up and down.” Put the zipper to the middle and ask your child to move the zipper down. Return the zipper to the middle and ask your child to move the zipper up. Do this several times, placing the zipper in the middle before asking your child to move it up or down. Does your child consistently move the zipper up when you say “up” and down when you say “down”?

6. When you ask, “What is your name?” does your child say both her first and last names?

COMMUNICATION

1. Without giving your child help by pointing or using gestures, ask him to “put the book on the table” and “put the shoe under the chair.” Does your child carry out both of these directions correctly?
2. When looking at a picture book, does your child tell you what is happening or what action is taking place in the picture (for example, “barking,” “running,” “eating,” or “crying”)? You may ask, “What is the dog (or boy) doing?”
3. Show your child how a zipper on a coat moves up and down, and say, “See, this goes up and down.” Put the zipper to the middle, and ask your child to move the zipper down. Return the zipper to the middle, and ask your child to move the zipper up. Do this several times, placing the zipper in the middle before asking your child to move it up or down. Does your child consistently move the zipper up when you say “up” and down when you say “down”?
4. When you ask, “What is your name?” does your child say both her first and last names?
5. Without your giving help by pointing or repeating directions, does your child follow three directions that are unrelated to one another? Give all three directions before your child starts. For example, you may ask your child, “Clap your hands, walk to the door, and sit down,” or “Give me the pen, open the book, and stand up.”
6. Does your child use all of the words in a sentence (for example, “a,” “the,” “am,” “is,” and “are”) to make complete sentences, such as “I am going to the park,” or “Is there a toy to play with?” or “Are you coming, too?”

COMMUNICATION

1. Does your child name at least three items from a common category?

For example, if you say to your child, “Tell me some things that you can eat,” does your child answer with something like “cookies, eggs, and cereal”? Or if you say, “Tell me the names of some animals,” does your child answer with something like “cow, dog, and elephant”?

2. Does your child answer the following questions? (Mark “sometimes” if your child answers only one question.)

“What do you do when you are hungry?” (Acceptable answers include “get food,” “eat,” “ask for something to eat,” and “have a snack.”)

Please write your child’s response:

“What do you do when you are tired?” (Acceptable answers include “take a nap,” “rest,” “go to sleep,” “go to bed,” “lie down,” and “sit down.”) Please write your child’s response:

3. Does your child tell you at least two things about common objects? For example, if you say to your child, “Tell me about your ball,” does she say something like, “It’s round. I throw it. It’s big”?

4. Does your child use endings of words, such as “-s,” “-ed,” and “-ing”?

For example, does your child say things like, “I see two cats,” “I am playing,” or “I kicked the ball”?

YES SOMETIMES NOT YET

COMMUNICATION (continued)

5. Without your giving help by pointing or repeating, does your child follow three directions that are unrelated to one another? Give all three

directions before your child starts. For example, you may ask your child,

“Clap your hands, walk to the door, and sit down,” or “Give me the pen, open the book, and stand up.”

6. Does your child use all of the words in a sentence (for example, “a,” “the,” “am,” “is,” and “are”) to make complete sentences, such as “I am going to the park,” or “Is there a toy to play with?” or “Are you coming, too?”

Ages & Stages Questionnaires® Month Questionnaire 54

54 Month Questionnaire through 56 months 30 days 51 months 0 days

COMMUNICATION

1. Does your child tell you at least two things about common objects? For example, if you say to your child, “Tell me about your ball,” does she say something like, “It’s round. I throw it. It’s big”?

2. Does your child use all of the words in a sentence (for example, “a,” “the,” “am,” “is,” and “are”) to make complete sentences, such as “I am going to the park,” “Is there a toy to play with?” or “Are you coming, too?”

3. Does your child use endings of words, such as “-s,” “-ed,” and “-ing”?

For example, does your child say things like, “I see two cats,” “I am playing,” or “I kicked the ball”?

4. Without giving your child help by pointing or repeating directions, does he follow three directions that are unrelated to one another? Give all three directions before your child starts. For example, you may ask your child, “Clap your hands, walk to the door, and sit down,” or “Give me the pen, open the book, and stand up.”

5. Does your child use four- and five-word sentences? For example, does your child say, “I want the car”? Please write an example:

6. When talking about something that already happened, does your child use words that end in “-ed,” such as “walked,” “jumped,” or “played”?

Ask your child questions, such as “How did you get to the store?” (“We

walked.”) “What did you do at your friend’s house?” (“We played.”)