

BabySmart #3: Dr. Beatriz Gil-Stewart, MD, A Physician's Point of View

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Local pediatric physician Dr. Beatriz Gil-Stewart was the guest for BabySmart #3. Born in Columbia, South America, she emigrated to the U.S. when she was five. She operates Oconee Pediatrics with her pediatrician husband. She sees 25-30 newborns a month; about 50 percent are on Medicaid. Dr. Gil-Stewart is very proactive with BabyRead and has been a major source of BabyRead family referrals during the past year. *City Talk's* Riley Johnson was the host. Caren von Hippel, BabyRead's founder and Director, and Kathy Whitmire interviewed Dr. Gil-Stewart.

Dr. Gil-Stewart's Background – No Hablo Ingles. Ms. von Hippel introduced Dr. Gil-Stewart. She is a bilingual BabyRead reader volunteer. In response to Ms. von Hippel's query about her background, Dr. Gil-Stewart said she didn't understand English when she came to the U.S., so she did a lot of "daydreaming". She did attend English to Speakers of Other Languages (ESOL) classes in lieu of other classroom teaching but was always behind. **She definitely sees the benefits of pre-school learning.**

Why Is Reading Important? Dr. Gil-Stewart said preparation really starts in pregnancy. **Throughout the interview she referenced research about the importance of face-to-face interaction and bonding to expand an infant's knowledge.** Dr. Gil-Stewart stated the standards have really gone up since she was a child. **Kids need to be able to be ready to read in English at the end of kindergarten. She said the window for learning a new language is 0 – 9 years old which is why schools are introducing additional languages earlier.** She noted this really isn't a conflict with other learning. Ms. von Hippel reiterated a child can easily learn 3 or 4 different languages if exposed early.

Ms. Whitmire added establishing a routine like eating together and having conversations are important. Talking and reading about the world around him or her are connecting words with objects.

What Are the Disadvantages of Media Exposure? Dr. Gil-Stewart cited an Academy of American Pediatrics (AAP) statement in May 2018 concerning children and media. **It noted a positive connection with reading and a negative connection with screen time.** She mentioned a related November 4, 2019 *New York Times* article by Perri Klass, M.D., ("There's Evidence That High Levels of Screen Time in Preschoolers May Hinder Brain Development") concerning excessive screen time. Dr. Klass is National Medical Director of the Reach Out and Read (ROR) Reading and Discovery Center. **Key points: media can displace many important activities, family time, face-to-face interaction, outdoor play, exercise, unplugged down time and sleep. Young children learn best from two-way back and forth interactions for language development and face-to-face conversation.** FaceTime interactions with relatives can be helpful. Screens are one-way interactions. They are moving too fast for young minds to get the most out of viewing them. **AAP recommends no electronics for toddlers under 18 months other than video exchanges with relatives. For 18-24 month-old children, AAP recommends limited time and only with parents present. For 2-5 year-olds, they recommend no more than 1 hour a day of quality programming and co-viewing; the parents can explain what they are learning about while sharing family time.** Dr. Gil-Stewart recommended turning off the television when you aren't watching it because it gets in the way of face-to-face time. Turning the TV off encourages more family time and leads to positive behavior like better eating habits and healthier sleep.

Brain Scan Studies. Dr. Gil-Stewart also mentioned a Journal of the American Medical Association (JAMA) Pediatrics study¹ from November 2019 by John Hutton and others ("The Association Between Screen-Based Media Use and Brain White Matter Integrity in Preschool-Aged Children"). The peer-

reviewed study used brain scans to assess the impact of screen time. It reinforced the need to minimize screen time in preschoolers. **Their findings indicated high screen exposure led to poorer expressive language, and children did worse on tasks involving language processing and rapidly naming objects.** Dr. Gil Stewart quoted the study: **“It may have more to do with what screen time is replacing in a child’s life.”** Dr. Gil-Stewart said screen time may not be bad in general but reiterated that you don’t want to squeeze out interactions, relationships and engagements such as singing, playing, asking questions, answering questions and reading. She reiterated parents are so important in the early years. Ms. von Hippel commented kids too often see cell phones as toys, especially when there are older children present. **She cautioned that children model parents’ behavior** and parents need to be conscientious about squeezing out interaction time. Kids see adults using cell phones, think it’s a good idea, and want to do it too. **Heed the AAP – be a good role model and limit media time.**

Ms. Whitmire said she sees parents using cell phones for babysitting purposes. Those kids are having greater difficulty learning to self-regulate, e.g., being still and at peace.

Reading and Ear Infections. Dr. Gil-Stewart said children with ear infections have fluid behind the tympanic membrane. Fluid dampens the sound if it stays there. **Sustained ear infections can affect speech in the infant’s first year. Pediatricians are aware of that and do checks during primary care visits.** They also work with Ear, Nose and Throat (ENT) specialists to address the concerns and reduce the impact on speech development if infections persist.

The interview concluded with contact information.

¹“Associations Between Screen-Based Media Use and Brain White Matter Integrity in Preschool-Aged Children”, published online November 4, 2019. Corrected on March 23, 2020.