

Study #2064

Interviewer: _____

South Nassau Truth in Medicine Poll

Respondent's Phone Number:

March 2018

LJR Custom Strategies

Date: _____

RECORD FROM SAMPLE:

Phone Type:

Cell	63%
Landline	37

Zip: _____

Hello, I'm calling from FL Research, a national public opinion firm. I want to emphasize that this is not an attempt to sell anything or solicit funds. We're conducting a short survey in your area and this phone number is on my list. May I please speak with:

(IF THE TELEPHONE NUMBER ENDS IN AN EVEN NUMBER:)

The youngest woman living at this household who is 18 years old or older and is home at this time.

(IF NO WOMAN IS THERE, INTERVIEW ANY MAN.)

(IF THE TELEPHONE NUMBER ENDS IN AN ODD NUMBER:)

The youngest man living at this household who is 18 years old or older and is home at this time.

(IF NO MAN IS THERE, INTERVIEW ANY WOMAN.)

(IF AVAILABLE) Before we begin, I want to assure you that your responses will be kept anonymous, and all data will be analyzed in the aggregate only.

1. First, do you live in one of the five boroughs of New York City or Nassau (**NASS aw**) or Suffolk (**SUFF ick**) Counties?

Yes	100%	CONTINUE
No	<u>X</u>	TERMINATE
Not Sure/Refused	<u>X</u>	TERMINATE

2. In which one do you live? (**DO NOT READ LIST**)

Bronx/Bronx County	9%	CONTINUE
Brooklyn/Kings County	14	CONTINUE
Manhattan/New York County	6	CONTINUE
Nassau County	21	CONTINUE
Queens/Queens County	19	CONTINUE
Staten Island/Richmond County	8	CONTINUE
Suffolk County	25	CONTINUE
Not sure/Refused	<u>X</u>	TERMINATE

3. Do you have children under age 18 who live in your household?

Yes	100%	CONTINUE
No	<u>X</u>	TERMINATE
Not Sure/Refused	<u>X</u>	TERMINATE

4. How many times per week does your family eat dinner together?

0-4	34%
5-6	29
7	36
Not sure/Refused	1
MEAN	5.21

Please tell me how many of each of the following devices you have in your household. **(RANDOMIZE)**

5. Televisions

0-1	10%
2	26
3	36
4+	27
Not sure/Refused	-
MEAN	2.89

6. Desktop and laptop computers

0-1	48%
2	37
3+	14
Not sure/Refused	1
MEAN	1.65

7. Tablets

0-1	31%
2	40
3+	28
Not sure/Refused	1
MEAN	2.00

8. Smartphones

0-2	34%
3	34
4+	32
Not sure/Refused	1
MEAN	3.00

Now I'd like to ask you some questions about your children's screen time. If you have more than one child under age 18, please respond about your experience with:

(IF PHONE NUMBER ENDS IN ODD NUMBER:) your oldest child.

(IF PHONE NUMBER ENDS IN EVEN NUMBER:) your youngest child.

9. First, could you please tell me the exact age of the child we are speaking about?

0-6	16%
7-10	23
11-13	25
14-17	33
Not sure/Refused	2

10. On the average day, how much screen time does your child use for non-academic purposes?

0-1 hour	13%
2 hours	18
3 hours	23
4 hours	20
5+ hours	22
Not sure/Refused	5
MEAN	3.41

11. Which one type of device does your child use the most for non-academic purposes? **(READ LIST RANDOMLY)**

Television	28%
Computer	7
Tablet	29
Smartphone	33

(DON'T READ)

Other (Vol.)	3
Not sure/Refused	1

12. On the average day, how much screen time does your child use on that particular device?

0-1 hours	18%
2 hours	23
3 hours	25
4 hours	15
5+ hours	14
Not sure/Refused	5

MEAN 3.07

13. Do you use the parental control settings on any of your household devices?

Yes	38%
No	62
Not sure/Refused	1

14. Do you take any measures to try to restrict your children's screen time?

Yes	54%	ASK Q.15
No	45	SKIP TO Q.16
Not sure/Refused	-	SKIP TO Q.16

15. Would you say your efforts to reduce screen time for your children are very successful, somewhat successful, not very successful, or not successful at all?

Very successful	25%
Somewhat successful	22
Not very successful	4
Not successful at all	2
Not sure/Refused	1
Don't try to restrict screen time	46

16. **(ASK EVERYONE)** Are you aware of the American Academy of Pediatrics' recommendations for how much screen time kids should use?

Yes	46%	ASK Q.17
No	53	SKIP TO Q.18
Not sure/Refused	1	SKIP TO Q.18

17. Did you hear about these recommendations from your pediatrician or somewhere else?

Pediatrician	13%
Somewhere else	24
Not sure/Refused	9
Haven't heard recommendations	54

**NOW I'D LIKE TO ASK YOU A FEW LAST QUESTIONS
FOR COMPARISON PURPOSES ONLY.**

18. **(ASK EVERYONE)** First, what is your age?

18-34	18%
35-44	48
45+	32
Refused	2

19. Are you of Latino, Hispanic, or Spanish origin?

Yes	26%
No	73
Not sure/Refused	1

20. And finally, what is your racial background – are you white, black or African American, American Indian, Asian or of some other race? If you are multi-racial, please indicate all races that comprise your racial background. **(ACCEPT UP TO SIX RESPONSES)**

White	46%
Black/African American	28
American Indian	-
Asian	4
Other	9
Latino/Hispanic/Spanish (vol.)	26
Not sure/Refused	2

THANK YOU. YOU HAVE BEEN MOST HELPFUL.

**THIS INFORMATION IS TO BE RECORDED AFTER
THE INTERVIEW HAS BEEN COMPLETED.**

21. Respondent's Gender:

Male	48%
Female	52