

C.S. Mott Children's Hospital  
**National Poll on Children's Health**



**Cell Phone Use & Safeguards— Survey questions**

[FOR PARENTS WITH CHILD ≥ 9 YEARS ]

1. Does your [insert age of child]-year old have any of the following?

Own cell phone      yes      no

2. How often does your [insert age of child]-year old use the Internet in the following locations?

	Everyday or almost everyday	1-3 times per week	1-3 times per month	Never
Through their cell phone				

3. How concerned with are you with the amount of time your [insert age of child] -year old spends doing the following?

	Very concerned	Somewhat concerned	Not concerned	My child does not do this
Text messaging				

4. Do you and/or your spouse do any of the following with respect to your [insert age of child]-year old's use of the Internet and cell phone?

Block use of image messages on their cell phone    yes    no  
 Set limits on when they can use their cell phone    yes    no

**Parents were also asked demographic questions on child age and gender, and on their race/ ethnicity.**

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