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16 Attorneys for Amicus Curiae Common Sense Media

17 UNITED STATES DISTRICT COURT  
18 NORTHERN DISTRICT OF CALIFORNIA  
19 SAN JOSE DIVISION

20 VIDEO SOFTWARE DEALERS and  
21 ENTERTAINMENT SOFTWARE  
22 ASSOCIATION,

23 Plaintiffs,

24 v.

25 ARNOLD SCHWARZENEGGER, in his  
26 official capacity as Governor of the State of  
27 California; BILL LOCKYER, in his official  
28 capacity as Attorney General of the State of  
California; GEORGE KENNEDY, in his  
official capacity as Santa Clara County  
District Attorney; RICHARD DOYLE, in his  
official capacity as City Attorney for the City  
of San Jose, and ANN MILLER RAVEL, in  
her official capacity as County Counsel for  
the County of Santa Clara.

Defendants.

No. C 05 4188 RMW RS

**DECLARATION OF THOMAS N.  
ROBINSON, M.D., M.P.H.**

Date: May 12, 2006

Time: 9:00 a.m.

Courtroom: 6

Before the Honorable Ronald M. Whyte

Case No. C 05 4188 RMW RS

DECLARATION OF THOMAS N. ROBINSON, M.D., M.P.H.

1 I, Thomas N. Robinson, declare:

2 1. I am an Associate Professor of Pediatrics and of Medicine, in the Division  
3 of General Pediatrics and the Stanford Prevention Research Center at Stanford University School  
4 of Medicine, and Director of the Center for Healthy Weight at Lucile Packard Children's Hospital  
5 at Stanford. I make this declaration in opposition to plaintiffs' motion for summary judgment. I  
6 know the following facts of my own knowledge, and if called as a witness, could and would  
7 testify competently thereto.

8 2. I received my B.S. and M.D. from Stanford University and my M.P.H. in  
9 Maternal and Child Health from the University of California, Berkeley. I completed my  
10 internship and residency in Pediatrics at Children's Hospital, Boston and Harvard Medical School,  
11 and then returned to Stanford for post-doctoral training as a Robert Wood Johnson Clinical  
12 Scholar. I joined the faculty at Stanford in 1993, was appointed Assistant Professor in 1996, and  
13 promoted to Associate Professor with tenure in 2003. I was a Robert Wood Johnson Foundation  
14 Generalist Physician Faculty Scholar, am a member of the Institute of Medicine's Committees on  
15 Prevention of Obesity in Children and Adolescents and Progress in Preventing Childhood  
16 Obesity, and am Principal Investigator on numerous prevention studies funded by the National  
17 Institutes of Health. I am also Board Certified in Pediatrics, a fellow of the American Academy  
18 of Pediatrics, and practice General Pediatrics at Lucile Packard Children's Hospital at Stanford.

19 3. I co-authored a study titled "Effects of Reducing Children's Television  
20 and Video Game Use on Aggressive Behavior" (Robinson, T., Wilde, M., Navracruz, L., Haydel,  
21 F., Varady, A.), published in January 2001 in *Archives of Pediatrics and Adolescent Medicine*  
22 The abstract for this study summarized it as follows: "An intervention to reduce television,  
23 videotape and video game use decreases aggressive behavior in elementary schoolchildren. These  
24 findings support the causal influences of these media on aggression and the potential benefits of  
25 reducing children's media use."

26 4. The study is described in the layman's terms in paragraphs 5 through 7.

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1           5.       Using a randomized, controlled experimental design our research team  
2 studied third and fourth grade students in two matched elementary schools. The two schools were  
3 randomly chosen to be either an experimental intervention school or a control (comparison)  
4 school. When the study began, data were collected on the levels of aggressiveness for each group  
5 using the following four measures: peers’ assessment of aggressiveness; parent reports of  
6 aggressiveness; playground observations of aggressive behavior; and the participants’ perceptions  
7 that the world is ‘mean and scary.’

8           6.       After these data were collected, the third and fourth graders in the  
9 experimental group (one school) received a media reduction curriculum from their regular  
10 classroom teachers, where they received training in school about self-monitoring their media use,  
11 and reducing the amount of time they spent watching television and videotapes and playing video  
12 games. The control group (the other school) received no intervention.

13           7.       Approximately eight months after the study began, our research team  
14 repeated the aggressiveness measurements. Compared to children in the control group, the  
15 children in the experimental group that received the curriculum consequently reduced their media  
16 use, and exhibited statistically significant reductions in the primary measure of aggressive  
17 behavior, peer ratings of aggression, and in directly observed acts of verbal aggression on the  
18 playground. Differences in other secondary measures, directly observed physical aggression on  
19 the playground, parent reports of aggression and perceptions of a mean and scary world, were not  
20 statistically significant but all were in the same direction (decreased in the group that received the  
21 curriculum compared to the control group).

22           8.       In the article, we, the authors, noted that “because the intervention targeted  
23 reduction of media use alone, without substituting alternative behaviors or activities, these results  
24 are also additional evidence for the causal effects of the media on children’s aggressive  
25 behavior.”

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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on April 17, 2006 at Atlanta, Georgia.



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Thomas N. Robinson, M.D., M.P.H.

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