

Children, Adolescents, and Media in the U.S.: What are the Next Steps to Take?

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Abstract

Children and adolescents in the United States now spend >7 hours per day with a variety of different media. Little attention is paid by many parents, educators, and government officials to media effects on young people. This commentary suggests 10 different ways that American society can deal with the impact of media on children and adolescents more effectively.

Keywords: Media; TV; Media research; Children and media

Commentary

Most U.S. medical and public health organizations now agree that (a) children and teens spend too much time with a variety of different media (>7 hours a day) [1] (b) media can have significant effects on a variety of different health issues like aggressive behavior, obesity, sexual activity, substance use, and sleep [2,3] and (c) very little is being done to counteract negative media effects and maximize positive media effects. So the question is: what can and should be done?

Here is a Top Ten list

1. More funded research. It is somewhat astounding to learn that when children and teens now spend more time with media than they do in any other activity except sleeping that more money isn't being put towards media research [4]. The Federal government funds a few studies on media and tobacco and alcohol use but there is no funding for basic effects research. Private foundations are completely missing in action (Kaiser Family Foundation did a splendid job for many years but dumped their Media and Health section a few years ago with no explanation why). There are thousands of studies on "old" media (e.g., TV, movies), but much more research is needed on the impact of new technology [5].

2. A dedicated National Institute of Mental Health (NIMH) study section. One of the reasons why the Federal government isn't funding much media research is that the NIMH does not have a dedicated study section for Children, Adolescents, and the Media. Grant proposals for media research are vetted by researchers who know very little about media, hence proposals are rarely funded.

3. A new NIMH report. The last NIMH report was issued in 1982 – long before the Internet, cell phones, iPads, and social networking sites. It served to stimulate research and funding for research. A new 2017 report is desperately needed that would summarize existing knowledge and provide the impetus for new studies.

4. A public health organization super-group. The American Academy of Pediatrics (AAP) cannot continue to carry on the mission of educating the public, Federal officials, and funders alone. It should

have the cooperation of the American Medical Association, the American Psychological Association, the American Association for Child & Adolescent Psychiatry, and other medical and public health groups. A super-group would be far more successful in lobbying Congress and in interacting with the entertainment and advertising industries. It might also be successful in placing the topic of children and media in film schools and journalism schools around the country.

5. Greater dialogue with Hollywood and Madison Avenue. The AAP's stance in the past three decades has been criticized as being largely negative regarding the quality of American media. Unfortunately, that has merely reflected the mostly unhealthy media diet that American children view. But both Hollywood and Madison Avenue need to understand that the AAP recognizes that there are also some extraordinarily good media out there for children and teens as well. It's time to establish an ongoing dialogue about how prosocial media can be maximized and negative effects can be minimized without treading on anyone's First Amendment rights.

6. Updating schools. Many schools are 10 years behind the times in how they treat media and media issues like sexting and cyber bullying [6]. Often, school officials think that if they have a computer lab, or every student is furnished with an iPad, that the school is keeping up-to-date. Instead, the entire paradigm of teaching and learning needs to change [6] – the emphasis should be placed on teaching young people critical thinking skills, including how to sift through the incredible amount of information available to them at their fingertips. Media education is a must [7]. In addition, principles of media literacy should be incorporated into every school's sex education and drug prevention programs [7].

7. Updating parents. On a list of 50 things parents are willing to dispute with their children, the media rank at #93. Many parents feel that their kids are "safe" if they are in their living room watching TV or in the bedroom (with a whole variety of media technology usually available to them). Given the power of media effects, nothing could be further from the truth.

8. Updating the U.S. Supreme Court. The recent California video game decision (Schwarzenegger v. Entertainment Association, 2012) shows that even the most learned jurists in the country misunderstand media effects [8]. Justice Scalia compared Homer's Odyssey and

Grimm's Fairy Tales with first-person shooter video games. The Court decreed that it is proper to restrict sexual content to children and teens but not violent content because the former is so much more harmful. Only in the U.S. is the myth still present that sexual content is more harmful than violent content. If the Supreme Court justices don't understand media effects on children, how can anyone expect legislators, educators, and parents to understand?

9. Controlling screen time. The AAP has repeatedly called for parents to limit total entertainment screen time to < 2 hours per day. That figure currently stands at >7 hours a day (and >11 hours a day with technology in the bedroom) [1]. The simple act of limiting media time could pay rich health dividends.

10. Physician education. Many physicians still do not understand very much about media effects or take the time to counsel their patients [9]. Teaching medical students and young physicians about media use and media effects is vital and should be a part of every medical school curriculum and every residency training program. National continuing education programs should highlight media issues (as should teacher training programs).

Media can be powerfully prosocial or potentially harmful in large quantities for children and adolescents [10]. Much more can and should be done to harness the positive power of media and to protect children and teenagers against harmful media effects.

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