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Spinal Column: Why Isn't There More Media Research?

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A few months ago, the American Academy of Pediatrics (AAP) made children, adolescents, and the media one of its top 3 strategic priorities for the next several years. Beginning with the Task Force on Children and Television, established in 1983, to the present Council on Communications and Media, the Academy has been one of the national leaders in trying to educate pediatricians, policy makers, and the general public on the many health issues related to media—aggressive behavior, early sexual activity, substance use and abuse, obesity, eating disorders, even school performance and attention-deficit disorder.¹ One of the most frequent stumbling blocks has been the lack of ongoing research on media effects involving children and adolescents, and the question is why?

Let's start with the federal government. The National Institute of Mental Health (NIMH) issued an extremely lengthy and comprehensive report on children and media—in 1982.² Since then, we have seen the development of the Internet, much more sophisticated video games, iPads, and cell phones. The media landscape today looks nothing like the landscape 30 years ago, yet no new report has been forthcoming. The 1982 NIMH report was a catalyst for further media research and for increased government funding (briefly). A new report would be most welcome.

The federal government has also not been very forthcoming with research funding for media research. Alone among government foundations have been the National Cancer Institute and National Institutes of Health, which have both sponsored major research at Dartmouth regarding smoking and the movies.³ Considering the fact that the media have the potential ability to influence virtually every health concern that pediatricians and parents have about children and teens, one would think it would be (a) well worth studying in exquisite detail and depth and (b) well worth funding media research. NIMH does not have a study section on children and media. Research proposals involving media studies are parceled out to sections with no media experts on them and no expertise in judging such research. Is there another aspect of child and adolescent development that is so universally neglected and ignored?

Private foundations are next. Millions of dollars from the Robert Wood Johnson Foundation go toward initiatives on substance abuse or obesity, but media can affect both significantly. Why not fund media research? Apart from the American Legacy Foundation sponsoring media studies on smoking, the only foundation that has done any significant funding was the Kaiser Family Foundation. For a decade or more, the Kaiser Family Foundation produced some of the most important studies in the field. But a few years ago, the Media Section was completely dismantled. Finally, it would be nice if the entertainment industry—with its billions of dollars earned each year—ponied up; but with the exception of the National Television Violence Study in the 1990s, it has never done so.

A few organizations have tried to pick up the slack. The Campaign for a Commercial-Free Childhood, CommonSense Media, The National Campaign to Prevent Teenage and Unwanted Pregnancy, the Yale-Rudd Center, and the National Center on Addiction and Substance Abuse have all produced significant media research on their own. So, one might ask, Is there a problem here?

The answer is a loud and urgent RUT-ROH. We are losing ground rapidly. If children and teens are spending an average of 7 hours a day with a variety of different media,⁴ doesn't media research deserve a bigger slice of the research pie? The last content analysis of media violence on American television was the in 1990s, the last content analysis of sex on TV was in 2005—these need to be ongoing studies. Rideout's analysis of media use among children and teens⁴ is already several years old and needs to be updated. Although the general public and even the Council on Communications and Media seem to have fixated on the impact of new media, there are less than a dozen studies currently on the impact of

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new media and new technology on child and adolescent behavior. Most studies being published now are content analyses—how many text messages does the average teen send per month? (answer: 3000)⁵ or how many pro-anorexia nervosa Web sites are there on the Internet? (answer: >100).⁶ Although this is useful information, it does not answer fundamental questions such as whether the Internet contributes significantly to eating disorders, or whether texting takes up so much time that it is now a risk factor for obesity, or how cyberbullying occurs and what can be done to curb it. In addition, we know very little about how individuals may vary in viewing the exact same media content, and not nearly enough about racial and ethnic differences in viewing and being affected by media. Even though there are thousands of studies on “old” or traditional media (TV, movies, music), important fundamental questions have gone unanswered: Is the significant link between screen time and obesity because of food ads, changes in eating behavior while watching a screen, displacement of more physical activities, or impact on sleep? Is media education truly effective in preventing aggressive behavior, substance use, and early sexual intercourse?

We need to know more, and we needed to know it about 10 or 20 years ago.

What can be done now to turn the tide? The answer is that with the American Academy of Pediatrics’ acceptance of the importance of media in its strategic plan, the Academy needs to join with other powerful public health groups like the American Medical Association and the American Public Health Association to pressure Congress into funding significant media research, creating an NIMH study section on Media, and publishing a new Media report. The Academy could also work with other organizations to urge private foundations to get off the funding *schneid*. Most important, we media experts within the Academy have not done an adequate job of either educating our brethren about media effects or the general public. Residency training programs need lectures on media influence. Academics need to recognize that a Grand Rounds on childhood obesity, adolescent substance abuse, or teen sex is not complete without at least mentioning media influence. Pediatricians in practice need to ask The Two Questions at all well-child and

well-adolescent visits: How much screen time do you spend per day? Is there a TV or Internet-connected device in your bedroom?⁷ We need to interact more with schools of journalism so that the next generations of newspaper and magazine reporters will not be as skeptical of the media research as the current generation seems to be. And we need to do a better job of educating parents—on a list of 100 things parents want to fight with their children about media seem to rank at about 136.

Media are not the leading cause of *any* major health problem in the United States, but they can contribute mightily.¹ It is time we walk the walk, not just talk the talk.

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