



Study of Impact of Media on growing children and adolescents

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Introduction : The influence of the media on the psychosocial development of children is profound. Thus, it is important for physicians to discuss with parents their child's exposure to media and to provide guidance on age-appropriate use of all media, including television, radio, music, video games and the Internet.

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The objectives of this statement are to explore the beneficial and harmful effects of media on children's mental and physical health, and to identify how physicians can counsel patients and their families and promote the healthy use of the media in their communities.

While violence is not new to the human race, it is an increasing problem in modern society. With greater access to firearms and explosives, the scope and efficiency of violent behavior has had serious consequences. We need only look at the recent school shootings and the escalating rate of youth homicides among urban adolescents to appreciate the extent of this ominous trend. While the causes of youth violence are multifactorial and include such variables as poverty, family psychopathology, child abuse, exposure to domestic and community violence, substance abuse and other psychiatric disorders, the research literature is quite compelling that children's exposure to media violence plays an important role in the etiology of violent behavior. While it is difficult to determine which children who have experienced televised violence are at greatest risk, there appears to be a strong correlation between media violence and aggressive behavior within vulnerable "at risk" segments of youth. In this article, I will briefly review the impact of media violence on children and adolescents, and indicate the vital role physicians can play in helping to diminish this powerful cause of violent behavior.

Television : Television has the potential to generate both positive and negative effects, and many studies have looked at the impact of television on society, particularly on children and



adolescents . An individual child's developmental level is a critical factor in determining whether the medium will have positive or negative effects. Not all television programs are bad, but data showing the negative effects of exposure to violence, inappropriate sexuality and offensive language are convincing . Still, physicians need to advocate continued research into the negative and positive effects of media on children and adolescents.

Learning : Television can be a powerful teacher . Watching *Sesame Street* is an example of how toddlers can learn valuable lessons about racial harmony, cooperation, kindness, simple arithmetic and the alphabet through an educational television format. Some public television programs stimulate visits to the zoo, libraries, bookstores, museums and other active recreational settings, and educational videos can certainly serve as powerful prosocial teaching devices.

Violence : The amount of violence on television is on the rise . The average child sees 12,000 violent acts on television annually, including many depictions of murder and rape. More than 1000 studies confirm that exposure to heavy doses of television violence increases aggressive behaviour, particularly in boys

Nutrition : Because television takes time away from play and exercise activities, children who watch a lot of television are less physically fit and more likely to eat high fat and high energy snack foods . Television viewing makes a substantial contribution to obesity because prime time commercials promote unhealthy dietary practices . The fat content of advertised products exceeds the current average Canadian diet and nutritional recommendations, and most food advertising is for high calorie foods such as fast foods, candy and presweetened cereals

Sexuality : Today, television has become a leading sex educator in Canada. Between 1976 and 1996, there has been a 270% increase in sexual interactions during the family hour of 2000 hours to 2100 hours . Television exposes children to adult sexual behaviours in ways that portray these actions as normal and risk-free, sending the message that because these behaviours are frequent, 'everybody does it'. Sex between unmarried partners is shown 24 times more often than sex between spouses



Alcohol and smoking : Canada's two largest breweries spend \$200 million on advertising each year . On an annual basis, teenagers see between 1000 and 2000 beer commercials carrying the message that 'real' men drink beer. Convincing data suggest that advertising increases beer consumption , and in countries such as Sweden, a ban on alcohol advertising has led to a decline in alcohol consumption .

Over the past 30 years there has been extensive research on the relationship between televised violence and violent behavior among youth. Longitudinal, cross-sectional, and experimental studies have all confirmed this correlation. Televised violence and the presence of television in American households have increased steadily over the years. In 1950, only 10% of American homes had a television. Today 99% of homes have televisions. In fact, more families have televisions than telephones. Over half of all children have a television set in their bedrooms. This gives a greater opportunity for children to view programs without parental supervision. Studies reveal that children watch approximately 28 hours of television a week, more time than they spend in school. The typical American child will view more than 200,000 acts of violence, including more than 16,000 murders before age 18. Television programs display 812 violent acts per hour; children's programming, particularly cartoons, displays up to 20 violent acts hourly.

How does televised violence result in aggressive behavior? Some researchers have demonstrated that very young children will imitate aggressive acts on TV in their play with peers. Before age 4, children are unable to distinguish between fact and fantasy and may view violence as an ordinary occurrence. In general, violence on television and in movies often conveys a model of conflict resolution. It is efficient, frequent, and inconsequential. Heroes are violent, and, as such, are rewarded for their behavior. They become role models for youth. It is "cool" to carry an automatic weapon and use it to knock off the "bad guys." The typical scenario of using violence for a righteous cause may translate in daily life into a justification for using violence to retaliate against perceived victimizers. Hence, vulnerable youth who have been victimized may be tempted to use violent means to solve problems. Unfortunately, there are few, if any, models of nonviolent conflict resolution in the media. Additionally, children who watch televised violence are desensitized to it. They may come to see violence as a fact of life and, over time, lose their ability to empathize with both the victim and the victimizer.



There are other, new forms of violence to which children and adolescents are exposed. In one recent study, it was demonstrated that 15% of music videos contain interpersonal violence. Still another new source of violent exposure is access to the Internet and video games. There is little data on the incidence of violence on the Internet; however, there is concern about sites that may advocate violence, provide information on the creation of explosive devices, or reveal how to acquire firearms. There is also little research on the impact of violent video games. We do know, however, that they are extensive and have a role-modeling capacity. The fact that the child gets to act out the violence, rather than to be a passive observer, as when viewing television or movies, is especially concerning to experts.

Conclusion : Child and adolescent psychiatrists, pediatricians and other physicians can have a major impact on the effects of media violence. The American Academy of Pediatrics (AAP) has created a list of recommendations to address television violence. It suggests that physicians talk openly with parents about the nature and extent of viewing patterns in their homes. Parents should limit television to 1-2 hours daily and watch programs with their children, enabling them to address any objectionable material seen. Physicians should make parents and schools "media literate," meaning they should understand the risks of exposure to violence and teach children how to interpret what they see on television and in the movies, including the intent and content of commercials. In doing so, children may be increasingly able to discern which media messages are suitable. Schools and homes should teach children conflict resolution. The American Academy of Child and Adolescent Psychiatry, along with medical organizations, has been a strong advocate for television ratings and installation of chips to block certain programs. Physicians, in their role as health promoters, should become more active in educating the media to become more sensitive to the impact of violence on youth. We should be speaking up to the networks, cable vendors, local stations, federal agencies, and our political officials to help insure that programming decisions are made with an eye open to the potential consequences to the viewing audience, and that when violence is present, there are adequate warnings provided to the public. The arena of media violence is a new frontier where physicians can promote health through public education and advocacy.

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