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"Clueless": Why Do Pediatricians Underestimate the Media's Influence on Children and Adolescents?

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7 “CLUELESS”: Why Do Pediatricians Underestimate the Media’s Influence on Children
8 and Adolescents?
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11 One erect penis on a US screen is more incendiary than a thousand guns.
12 *Newsweek* critic David Ansen (1)
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15 By baring a single breast in a slam-dunk publicity stunt of two seconds’ duration,
16 [Janet Jackson] also exposed just how many boobs we have in this country. We
17 owe her thanks for a genuine public service.
18 *New York Times* critic Frank Rich (2)
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21 The media have arguably become the leading sex educator in America today.
22 That’s not good news, considering the fact that more than 70% of primetime shows
23 contain sexual content, yet only 15% discuss the risks of sex.(3) How significant is the
24 influence of media on teens’ sexual attitudes and behaviors? For 50 years, researchers
25 have explored the connection between media violence and real-life aggression in children
26 and adolescents.(4) More than 1,000 studies show a connection.(5) In fact, according to
27 one leading researcher, “the controversy is over.”(6) Now, we have a second major study
28 showing a strong connection between sexual content in all media and onset of sexual
29 activity among teens.(7) Is there much doubt that research on the impact of sex in the
30 media is going to parallel the media violence research? The media represent a powerful
31 teacher of children and adolescents.(8) As such, the media cut across virtually every
32 concern that parents and pediatricians have about young people – sex, violence,
33 homicide, suicide, obesity, eating disorders, school problems, drug use. The only
34 questions are: (1) Why don’t pediatricians “get it”? and (2) What can pediatricians (and
35 parents) do about it?
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48 In the first study, published just last year, RAND researchers found that watching
49 sexual content on TV predicts and may accelerate adolescents’ sexual initiation.(9)
50 Teens who watched the most sexual content had a 2x increased risk of initiating
51 intercourse the following year or of significantly advancing in noncoital activity. The
52 national survey of nearly 1800 12-18 year-olds employed a 1-year follow-up survey, to
53 yield data that are as close to “cause-and-effect” as researchers can probably get, given
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3 the sensitivity of the subject and the lack of funds for costly long-term follow-up studies.
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5 Now Brown and her colleagues have gone well beyond the RAND study in looking at all
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7 media that teens typically use (except, sadly, the Internet).(7) This time, a 2-year
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9 longitudinal study was performed, in an effort to try to capture the transition from
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11 precoital sexual activity to intercourse. In-depth, at-home surveys of more than 1,000 12-
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13 14 year-olds were conducted. The preteens and teens were questioned via audiotapes and
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15 headphones and touch-screened their answers on a laptop computer – the most elegant
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17 form of questionnaire research when studying adolescents. The authors then constructed
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19 a Sexual Media Diet (SMD) using TV, movies, music, and magazines, content-analyzing
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21 the sexual content, and examining the young people’s exposure. They also examined a
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23 variety of precoital sexual behaviors, including oral sex. Like the RAND study, this
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25 study found approximately a two-fold risk for those White teens exposed to a heavy diet
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27 of sexy media.

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29 Other studies have found similar results but have lacked the longitudinal
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31 perspective that allows cause-and-effect inferences.(10,11) Here’s what we now know,
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33 in addition to the two studies mentioned above (12):

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35 • Like adults, teenagers believe that the media influence everyone but themselves.
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37 This is known as the “third-person effect” and is well documented in the
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39 communications literature.(13) For example, in a national survey of more than
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41 500 teens, nearly three-fourths believed that sexual content on TV influences
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43 teens their own age, but fewer than one-fourth believed that their own behavior is
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45 ever influenced by the media.(14)
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47 • The media represent a powerful source of information for teens about sex,
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49 particularly because schools and parents are not always eager to tackle the subject
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51 adequately. In a 2004 survey of 519 teens, ages 15-17, the media far outranked
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53 parents or schools as the primary source for information about birth control.(15)
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55 With the increasing popularity of abstinence-only sex education programs, the
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57 media remain one of the few places where birth control information can be
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59 accessed.
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61 • The media represent the only easily accessible form of sex education left to
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63 teenagers. A 2004 survey of 530 parents found that nearly half of parents of

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3 middle-schoolers and one-fourth of parents of high-schoolers had never discussed
4 birth control with them.(16) A related survey of 275 school principals nationwide
5 found that 10% of schools did no sex education, 58% of schools made no effort to
6 talk about sexual orientation, and 68% of schools did not include parents in sex
7 education programs. Of the 90% of schools that have sex education programs,
8 30% were abstinence-only, 47% were so-called “abstinence-plus” (where
9 abstinence is stressed but birth control can at least be mentioned), and only 20%
10 were comprehensive.(17)

- 11 • The media makes sexual intercourse seem like normative behavior, even for
12 teens. “Everyone does it” on TV and in the movies, or so it seems; yet the need
13 for birth control, the risks of pregnancy or sexually transmitted infections, or the
14 need for responsibility are rarely discussed. In this way, the media function as a
15 “super-peer,” putting additional pressure on young people to have sex at a young
16 age.(12) In a 1999 survey of 2100 teenage girls, only 11 year-olds said that they
17 do not feel pressure from the media to have sex.(18)

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Media research is not easy to do, and this new study is “as good as it gets” (to
continue the movie-title motif begun by the title of this commentary). The Sexual Media
Diet is a unique and clever idea conceived by the authors and is the best attempt, to date,
to capture the entire media milieu of the average adolescent. Unfortunately, Internet use
was not included because of sampling difficulties. Studies show that 70% of all 15-17
year-olds have “accidentally” stumbled across pornography online.(19) Sex on the
Internet is now a \$500 million dollar industry.(20) In future studies, it would be ideal to
capture not only Internet use but access to X-rated magazines and films as well. Again,
studies show that most 13-15 year-old teenage males have seen an X-rated film or men’s
magazine.(21) Future studies might also lower the initial age for participation of Blacks
(since their sexual initiation is lower) to perhaps 10-12 years of age, with follow-up at 12-
14 years, and include Hispanic and Native American youth as well. But unless you have
actually tried to do research that deals with sex, teenagers, and the media, you have no
idea of how difficult and aggravating it is (22). This study is world-class!

Where do we go from here? Everyone must share some responsibility –
pediatricians, parents, teachers, the entertainment industry, and state and Federal

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3 governments – if we are to be successful in helping teenagers delay the onset of sexual
4 intercourse until an age when they can be more responsible about relationships and birth
5 control. (Remember that sex is not like drugs. We want our children to have happy,
6 healthy sex lives – when they are older, not when they are 13. We never want our kids to
7 use cocaine or methamphetamine or ecstasy. “Just Say No” doesn’t really work the same
8 way for sex as for drugs. Perhaps “Just Say ‘Later’” might be more appropriate.)
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12 Pediatricians. Since the media cut across virtually every health concern that
13 pediatricians have, you would think that pediatricians would be lining up at CME
14 conferences around the country to learn more about media effects. But they are not.
15 Despite the fact that talks on media are usually quite entertaining, many doctors do not
16 feel that the research is “academic” enough. Social science research is very different
17 from medical research, yet at times, it can be equally important. Much of the media
18 research can be found in social science journals that are foreign to physicians, although
19 both *Pediatrics* and *Archives of Pediatrics and Adolescent Medicine* have done an
20 admirable job of publishing media research in the past several years. Pediatricians are
21 busy, and they probably do not watch a lot of TV themselves, certainly not “teen shows.”
22 Or, they may recall a gentler, kinder media from the 1950s and 1960s when wardrobe
23 malfunctions never occurred on live TV. For whatever reason, pediatricians are often
24 loathe to include media counseling in their office visits with parents.(23) Perhaps this is
25 because pediatricians are being called upon to do an entire litany of counseling with
26 parents but are never afforded enough time or reimbursed sufficiently. Whatever the
27 reason, clearly this needs to change. Two simple questions would take only a few
28 seconds and might give the pediatrician insight into a child or adolescent’s media usage:
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32 (1) How much time do you spend in an average day with different media?
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34 (2) Is there a TV set or Internet connection in your bedroom?
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37 Parents. The research is clear about parents’ role in teens’ sexual activity. If
38 parents discuss their expectations that teens will delay intercourse, teens have to take that
39 opinion into serious consideration and may, in fact, begin intercourse later. However, if
40 parents do not discuss sex with their children and teens – particularly the need for
41 responsibility and the need for birth control – then the media will pick up the slack.
42 Parents, too, can be “clueless” about their teens’ sexual activity. In one study, 58% of
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3 middle school students attending an Adolescent Clinic were sexually active, while 98%
4 of their parents thought otherwise.(24) Good communication can yield rich dividends,
5 but it takes time and effort. Parents also need to be on the front lines of supporting
6 effective and comprehensive sex education in their communities, not abstinence-only
7 programs that do not work.(25,26)
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11 Teachers. Of any professional group, teachers are usually the most receptive to
12 the notion that the media can be an extremely important influence on young people.
13 Consequently, teachers should be at the forefront of the effort to establish good media
14 literacy programs in schools.(27) In addition, teachers need to push for media literacy
15 ideas and techniques to be added to existing drug prevention and sex education
16 programs.(28)
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23 The Entertainment Industry. The 6 major TV networks need to recognize that
24 with their free use of the airwaves comes a certain responsibility to the public health.
25 This includes making and airing shows which model sexual responsibility, especially
26 teen-oriented shows, and airing advertisements for birth control products. Two national
27 studies have documented that the majority of American adults (even Catholics) favor the
28 airing of birth control ads, yet several national networks continue to shy away from any
29 controversy.(29,30) Despite recent declines, the U.S. continues to have the highest
30 teenage pregnancy rate in the Western world (31). Not coincidentally, it is the only
31 country that still subscribes to the old-fashioned notion that making birth control
32 available to teenagers increases their sexual activity. In fact, there are now at least eight
33 peer-reviewed, controlled clinical trials demonstrating that giving teens freer access to
34 condoms, for example, does nothing more than increase the use of condoms among those
35 who are already sexually active.(32-39) That does not influence the 6 major networks,
36 however. Three of them refuse to air ads for OCPs, and a different 3 refuse to air ads for
37 condoms.(40) Yet all of the national networks run frequent ads for erectile dysfunction
38 drugs, including mentions of “4-hour erections.” Between January and October, 2004
39 alone, drug companies spent \$343 million advertising Viagra, Levitra, and Cialis.(41)
40 Such ads need to be confined to after 10 p.m. when children should not be watching TV.
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Media can be pro-social: An episode of *Friends* that dealt with condom use was very effective in reaching an adolescent audience.(42) But all too often, teen shows seem like “Happy Days With Hormones,” according to one national TV critic.(43)

The cable industry appears to be immune to regulation, but that does not dismiss them of similar responsibility. Hollywood writers, directors, and producers need to exercise greater care in how they portray sexuality, especially in movies that target teenagers. Recording artists and music video producers also need to recognize their potential role-modeling influence, and video game manufacturers need to exercise greater caution in how they rate the sexual content in their games (witness the recent “elevation” in rating of *Grand Theft Auto: San Andreas Fault* from “M” to “Adults Only”).(44)

Government. Finally, state and local governments have a major responsibility to the public to fund sex education programs that are documented to be effective and are endorsed by organizations like the American Academy of Pediatrics. To date, abstinence-only programs do not meet these criteria.(25,26) In an era when doctors are being held to evidence-based standards, the Federal government needs to be held to similar standards. In 2005, a proposed \$170 million will be spent by the Federal government to support abstinence-only sex education programs that are ineffective and unwise.(45) Similarly, government websites need to contain accurate and authoritative information about birth control and avoid scare tactics.(46) Meanwhile, the government needs to urge the Internet Corporation for Assigned Names and Numbers to approve a new “.xxx” domain because it would allow parents much greater ability to block children’s access to pornographic websites.(47)

All in all, Americans need to recognize the power of media to teach children and teens about sex and sexuality. If parents and schools do not provide sufficient information to satisfy teens, the media will pick up the slack. And American media are most decidedly not abstinence-only. As one author sadly notes (48):

I’ve often wondered what it would be like if we taught young people swimming the same way we teach sexuality. If we told them that swimming was an important adult activity, one they will all have to be skilled at when they grow up, but we never talked with them about it. We never showed them the pool. We just allowed them to stand outside closed doors and listen to all the splashing. Occasionally, they might catch a glimpse of partially clothed people going in and out of the door to the pool and maybe they’d find a hidden book on the art of swimming, but when they asked a question

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3 about how swimming felt or what it was about, they would be greeted with blank or
4 embarrassed looks. Suddenly, when they turn 18 we would fling open the doors to the
5 swimming pool and they would jump in. Miraculously, some might learn to tread water,
6 but many would drown.
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14 REFERENCES

- 15
16
17
18 1. Ansen D: A handful of tangos in Paris. Newsweek, September 13, 1999, p. 66.
19
20
21 2. Rich F: My hero, Janet Jackson. The New York Times, February 15, 2004, section 2, p. 1.
22
23
24 3. Kunkel D, Biely E, Eyal K et al: Sex on TV 3. Menlo Park, CA: Kaiser Family Foundation,
25 2003.
26
27
28
29 4. Strasburger VC: Children, adolescents, and the media. Curr Prob Pediatr Adolesc Health Care
30 2004; 34:54-113.
31
32
33
34 5. Hogan M: Adolescents and media violence: six crucial issues for practitioners. Adolesc Med
35 Clin 2005; 16:249-268.
36
37
38
39 6. Anderson C, Berkowitz L, Donnerstein E et. al: The influence of media violence on youth.
40 Psychological Science in the Public Interest 2003; 4:81-110.
41
42
43
44 7. Brown JD, L'Engle KL, Pardun CJ et al: Sexy media matter: exposure to sexual content in
45 music, movies, television and magazines predicts Black and White adolescents' sexual behavior.
46 [This issue]
47
48
49
50 8. Strasburger VC, Wilson BJ: Children, adolescents, and the media. Thousand Oaks, CA: Sage,
51 2002.
52
53
54
55 9. Collins RL, Elliott MN, Berry SH et al: Watching sex on television predicts adolescent
56 initiation of sexual behavior. Pediatr 2004; 114:e280-289.
57
58
59
60

- 1
2
3
4
5 10. Brown JD, Newcomer SF: Television viewing and adolescents' sexual behavior. J Homosex
6 1991; 21:77-91.
7
8
- 9
10 11. Peterson JL, Moore KA, Furstenberg Jr FF: Television viewing and early initiation of sexual
11 intercourse: is there a link? J Homosex 1991; 21:93-118.
12
13
- 14 12. Strasburger VC: Adolescents, sex, and the Media: Oooo, baby, baby. Adolesc Med Clin
15 2005; 16:269-288.
16
17
- 18 13. Buckingham D: After the death of childhood: growing up in the age of electronic media.
19 Cambridge (UK): Polity Press, 2000.
20
21
- 22 14. Kaiser Family Foundation: Teens, sex and TV. Menlo Park, CA: Kaiser Family Foundation,
23 2002.
24
25
- 26 15. Kaiser Family Foundation/Seventeen Magazine: Sex smarts: birth control and protection.
27 Menlo Park, CA: Kaiser Family Foundation, 2004.
28
29
- 30 16. National Public Radio/Kaiser Family Foundation/Kennedy School of Government: Sex
31 education in America: general public/parents survey. Menlo Park, CA: Kaiser Family
32 Foundation, 2004.
33
34
- 35 17. National Public Radio/Kaiser Family Foundation/Kennedy School of Government: Sex
36 education in America: principals' survey. Menlo Park, CA: Kaiser Family Foundation, 2004.
37
38
- 39 18. Haag P: Voices of a generation: teenage girls on sex, school, and self. Washington, DC:
40 American Association of University Women Educational Foundation, 1999.
41
42
- 43 19. Rideout V: Generation Rx.com: how young people use the internet for health information.
44 Menlo Park, CA: Kaiser Family Foundation, 2001.
45
46
- 47 20. Donnerstein E: The internet. In: Strasburger VC, Wilson BJ: Children, adolescents, and the
48 media. Thousand Oaks, CA: Sage, 2002, pp. 301-321.
49
50
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5 21. Malamuth N, Huppin M: Pornography and teenagers: the importance of individual
6 differences. *Adolesc Med Clin* 2005; 16:315-326.
7
- 8
9
10 22. Strasburger VC: Tuning In To Teenagers. *Newsweek*, May 19, 1997, p. 18-19.
11
- 12
13 23. Gentile DA, Oberg C, Sherwood NE et. al: Well-child visits in the video age: Pediatricians
14 and the American Academy of Pediatrics' guidelines for children's media use. *Pediatr* 1004;
15 114:1235-1241.
16
17
- 18
19 24. Young TL, Zimmerman R: Clueless: Parental knowledge of risk behaviors of middle school
20 students. *Arch Pediatr Adolesc Med* 1998; 152:1137-
21
22
- 23
24 25. Hauser D: Five years of abstinence-only-until-marriage education: assessing the impact.
25 Washington, DC: Advocates for Youth, 2004. Available at www.advocatesforyouth.org.
26 Accessed September 20, 2005.
27
28
- 29
30 26. Borawski EA, Trapl ES, Lovegreen LD et al: Effectiveness of abstinence-only intervention in
31 middle school teens. *Am J Health Behav* 2005; 29:423-434.
32
33
- 34
35 27. American Academy of Pediatrics: Committee on Public Education: Media education. *Pediatr*
36 1999; 104:341-343.
37
38
- 39
40 28. McCannon R: Adolescents and media literacy. *Adolesc Med Clin* 2005; 16:463-480. 29.
41 Harris L and Associates: Attitudes about television, sex and contraception advertising. New
42 York: Planned Parenthood Federation of America, 1987.
43
44
- 45
46 29. Harris L and Associates: Attitudes about television, sex and contraception advertising. New
47 York: Planned Parenthood Federation of America, 1987.
48
49
- 50
51 30. Kaiser Family Foundation: Condom ads on TV: unwrapping the controversy, June 19, 2001.
52 Available at www.kaisernetwork.org. Accessed September 20, 2005.
53
54
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42
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46
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56
57
58
59
60
31. Abma JC, Martinez GM, Mosher WD, Dawson BS: Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, 2002. National Center for Health Statistics. *Vital Health Stat* 2004; 23(24).
32. Sellers DE, McGraw SA, McKinlay JB: Does the promotion and distribution of condoms increase sexual activity? Evidence from an HIV prevention program for Latino youth. *Am J Publ Health* 1994; 84:1952-1959.
33. Wolk LI, Rosenbaum R. The benefits of school-based condom availability: Cross-sectional analysis of a comprehensive high school-based program. *J Adolesc Health* 1995; 17:184-188.
34. Furstenberg FF Jr, Geitz LM, Teitler JO, Weiss CC. Does condom availability make a difference? an evaluation of Philadelphia's health resource centers. *Fam Plann Perspect* 1997; 29:123-127.
35. Guttmacher S, Lieberman L, Ward D, Freudenberg N, Radosh A, Des Jarlais D: Condom availability in New York City public high schools: relationships to condom use and sexual behavior. *Am J Public Health* 1997; 87:1427-1433.
36. Jemmott JB III, Jemmott LS, Fong GT. Abstinence and safer sex: HIV risk-reduction interventions for African American adolescents. *JAMA* 1998; 279:1529-1536.
37. Schuster MA, Bell RM, Berry SH, Kanouse DE: Impact of a high-school condom availability program on sexual attitudes and behaviors. *Fam Plann Perspect* 1998; 30:67-72.
38. Kirby D, Brener ND, Brown NL, Peterfreund N, Hillard P, Harrist R: The impact of condom distribution in Seattle schools on sexual behavior and condom use. *Am J Public Health* 1999; 89:182-187.
39. Blake SM, Ledsky R, Goodenow C, Sawyer R, Lohrmann D, Windsor R: Condom availability programs in Massachusetts high schools: Relationships with condom use and sexual behavior. *Am J Publ Health* 2003; 93:955-962.
40. Sharigan S. TV's last taboo. Available at <http://www.prospect.org>.

1
2
3 Accessed July 21, 2005.
4

5
6 41. Snowbeck C: FDA tells Levitra to cool it with ad. Business News, Post-Gazette.com.
7 Available at <http://www.post-gazette.com>. Accessed on July 20, 2005.
8
9

10
11 42. Collins RL, Elliott MN, Berry SH et al: Entertainment television as a healthy sex educator:
12 the impact of condom-efficacy information in an episode of *Friends*. *Pediatr* 2003; 112:1115-
13 1121.
14
15

16
17 43. Tucker K: Kids these days. *Entertainment Weekly*, Dec. 17, 1999, p. 21-25.
18
19

20
21 44. Common Sense Media: Grand Theft Auto reclassified. July 20, 2005. Available at
22 www.common sense media.org. Accessed on September 20, 2005.
23
24

25
26 45. Kristof ND: Bush's sex scandal. *The New York Times*, February 16, 2005, section A, p. 21.
27
28

29
30 46. Kaiser Family Foundation: HHS abstinence website for parents of teens contains inaccurate,
31 misleading information, review says. July 14, 2005. Available at www.kaisernet network.org.
32 Accessed September 20, 2005.
33
34

35
36 47. Jesdanun A: Internet oversight board OKs new domains. ABC News.com, September 16,
37 2005. Accessed on September 16, 2005.
38
39

40
41 48. Roberts E: Teens, sexuality and sex: our mixed messages. *Television & Children* 1983; 6:9-
42 12.
43
44
45
46
47
48
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