

The impact of media on vulnerable children and adolescents

Position statement 72



Background

The scope of media has broadened dramatically over the last few decades, particularly with the advent of digital technology, and the resultant increase in exposure to media in all its forms. In addition to television, movies and newspapers, the vast array of electronic and digital forms of media allow for rapid access of information, gaming, and instant communication. Media can be accessed from an increasing number of different and often highly portable sources. This has created a climate in which there is rapid and potentially constant access to the digital world.

This statement seeks to identify the many positive benefits of media but recognises that there are areas of concern. Those working clinically with children, young people and their families and carers need to be aware of the range of issues that media impacts upon, in order to provide balanced and optimal advice and support. The Faculty of Child and Adolescent Psychiatry (FCAP) has particular concerns regarding the impact of media on children and young people with identified mental health difficulties, but recognise all children are potentially vulnerable.

Positive impacts of media

There are many positive aspects of media based technology which impact on children and young people. FCAP would seek to endorse these and support the access to such benefits for all children and young people.

Examples of general benefits of media include:

1. Social media sites which provide young people with opportunities to stay connected with friends and family, and develop technical and creative skills. These sites can lead to connection to a more diverse group of people through international links on the internet, providing a greater understanding of global issues. There is also evidence that media can have positive effects on social skills in children.
2. Education can be enhanced in a number of ways through various media interfaces. Students can collaborate on group projects, or exchange ideas about homework. There is evidence engagement via computer and/or internet delivery of material allows children and young people a greater ability to grasp educational material. The internet provides the ability for access to information on an almost inexhaustible range of topics. This access to technology provides young people with skills that will be needed in years to come in a digital world.
3. Although there are concerns that spending time in front of TV or on the computer is linked to obesity, there is also evidence that video games can be used to increase physical activity in children, although playing sports and spending time outdoors should still be encouraged as a primary activity.

Examples of e-health related benefits of media include:

4. The internet provides information about health problems of relevance to young people such as stress, anxiety, depression and physical disorders such as sexually transmitted diseases. This may lead to a positive benefit in terms of changing their health-care seeking behaviour. There is evidence that mobile phones can lead to a number of positive health effects in adults and in children for a variety of clinical scenarios including quicker diagnosis and management, better stress management, enhanced quit rates from smoking, enhanced medication adherence and improved attendance at medical appointments.

5. In mental health there is a growing body of evidence supporting the effectiveness of interventions delivered by computer for a number of mental health problems, which can be provided in a timely manner, in privacy, and at the individual's discretion. For some young people this may be a preferable way of accessing help for mental health problems, and may provide a way to overcome various barriers, including stigma, that lead to poor uptake of mental healthcare by many young people. Computerised interventions may be used to increase access to treatment in areas where there are workforce shortages.

The lives of children and young people who have access to media technology and who take advantage of opportunities such as these will be enriched. For those potential benefits that arise from using media to improve health this may also be the case – although it is important that such developments are additional to services that exist – and not seen as a replacement. Arguably children and young people who do not have such access may be disadvantaged. Technology however is a two-edged sword. There are a number of negative effects but the way forward is to use the technology wisely to maximise health benefit and minimize harm.

Problematic impact of media

The primary focus of concern regarding problematic use of media is with children and young people identified as having mental illness, as they are likely to be more adversely affected by negative influences. However, it is recognised that all children and young people are potentially at risk. Although not an exhaustive list, problems associated with media can include:

1. Problem Internet Use (PIU)

Whilst there is no formal internationally agreed definition on what constitutes PIU, a sensible working definition is: *the pervasive long term and heavy use by a person of internet and computer-based technologies, including gaming, that is out of keeping with one's educational, social or occupational role, and that results in a clinically significant negative impact on schooling, work, relationships or general wellbeing and health [1].*

PIU exists on a spectrum of severity, from mild to severe, and not all forms (indeed, possibly the majority) would rate severely enough to be considered a 'mental health problem' or a 'mental illness', and so not require formal psychiatric or psychological input. However, some international authors and commentators consider that, in its most severe form, PIU could be considered an 'addictive' condition, as it can show key features such as dependence, mood alteration, tolerance, withdrawal, harm to psycho-social function. People experiencing problematic use at this level may require input from mental health or addiction services.

At this point in time we have no clear understanding of the developmental impact of media on children and young people [2]. We do not know if there is any impact of exposure of the brain to "internet addiction". We do know that those who are socially phobic find a lot of benefit from the internet in terms of their ability to access the world outside of their home. They may feel that they can be agents in the world from within their own home. However, this is at the risk of them then feeling that their social needs are satisfied through the virtual world, such that their motivation to change is reduced.

2. Sexualization of children

Public concern of the perceived rise in sexual content in the media, the impact of role modelling particularly on adolescent and child females, plus the evidence for increased exposure of young people to the media, has led to major inquiries in a number of developed Western countries including the USA, Australia and UK. Most concern has been expressed by the American Psychological Association in 2007 which documented evidence of the increasing level of sexualization in the media, both anecdotal and evidence based [3]. In addition the report found evidence for adverse effects on psychological functioning mainly in adult women.

The Australian Senate (2008) completed an extensive inquiry into the sexualization of children in the contemporary media [4]. Amongst a number of its findings were concerns over the classification of music videos with sexual imagery, better advice on magazine covers in relation to content, better accountability for advertising standards. In the UK, a recent report on the Impact of the Commercial World on Children's Wellbeing (2010) focused on the issue of media childhood sexualization [5]. On the whole, the report adopted a cautionary tone, highlighting poor research to date and the lack of evidence in either direction of causality. Please refer to RANZCP position statement 58 - *sexualisation of children in the contemporary media* for further information.

3. Cyberbullying

Bullying is recognised as a common problem affecting a significant number of children and young people. It can lead directly to mental illnesses such as depression and anxiety. In addition, those already suffering from a mental illness will be more at risk from the impact of bullying, with possible exacerbation of their illness.

The access to mobile phones and social media websites has resulted in an increase in the number of children continuing to be bullied at a distance from those responsible for bullying them. This has led to a reduction in the number of places in which a young person experiencing bullying feels safe, and can lead to a significant increase in the level of distress they experience. Additionally, the rapid sharing of inappropriate information through websites can significantly enhance the distress.

Where a young person has been subjected to cyber bullying, the dissemination of the act of bullying through media can also exacerbate the mental health impact on that person, leading, for example, to a worsening of depression or anxiety. There have been instances where the level of distress caused by cyber bullying has contributed to increased suicidal thinking – and potentially to completion of suicide.

“Sexting” is a particular form of cyber bullying which takes place around sexual themes. This can include the displaying of compromising images of children and young people. This is a particular area of concern. The developmental immaturity of some young people means they may engage in transmitting images of themselves of a sexual nature without due consideration about how widely that material may be disseminated. In other circumstances images of a sexual nature may be transmitted specifically to cause distress. Those with identified mental health problems, especially if they have low self esteem and are seeking acceptance within a peer group may be particularly vulnerable in this regard, both in terms of engaging in sending images, and from the impact of distress where the images are then used inappropriately.

Young people who engage in this kind of cyber bullying may be charged with criminal offences. Some will not be aware this is a potential outcome, and again this can lead to significant distress. Psychiatrists and other mental health professionals will have a role in working with young people and their families affected by these issues.

4. Aggression

There is concern that increased access to violent movies and games – especially at an early age – can lead to increased violence and aggression in children and adolescents. While there is no direct causal link between watching violent material and acting in a violent manner [6], the extent to which exposure to violence encourages aggression, and minimises the impact of aggression – especially where it is played out in a fantasy world, remains a particular issue. Parents may not always be aware of the content of the games and movies their children and adolescents have, or of their level of exposure[7]. There is additionally debate about the rating of such material. Clearly the extent to which households monitor the viewing habits of their children and young people is important.

Starting to address some of the problems

As problematic internet use (internet addiction) is a relatively new condition, there are no well-established forms of assessment and treatment. Emerging problems are generally poorly understood at primary care level. It is important to note that the condition covers a broad spectrum, from mild forms to very severe forms, and that not all types will need to be seen by a specialist such as a psychologist or

psychiatrist. It is also clear that internet problems are often associated with other mental health disorders, such as depression, anxiety, distress and substance abuse. There may also be an association with ADHD (attention-deficit and hyperactivity disorder) and Asperger's disorder. All these conditions can be addressed and treated successfully by a professional, so it is important that a child or teenager with PIU be screened for these disorders too.

As PIU, or internet addiction, is a relatively new disorder and it has not as yet been formally recognised as a mental health disorder, research into treating it is still at the early stages. Certainly, there is no current research of a quality or scale comparable to the treatment of, for example, depression or schizophrenia.

Small scale studies from the USA, Europe, and East Asia have been published in scientific journals which use cognitive behavioural therapy and motivational-type therapies, working with the individual, with a group, or with the family. Results from these trials appear very encouraging, but further research is required. See the 'Internet Addiction' text referenced below, for full details.

Recommendations

The changes brought to society by the rapid development of media based technology are profound and far reaching and will continue to be so. There are many benefits from these developments – which are going to continue at an increasing pace. These recommendations are made in the light of this knowledge – and with an understanding that they will need regular review as development progresses.

1. That all working in mental health, as well as in related health and educational fields, are aware of the positive benefits of media, and encourage use in a way that encourages development.
2. Children and young people from disadvantaged backgrounds may not have ready access to the benefits of media and so could potentially be disenfranchised and disempowered as citizens in this regard. It is important as technology becomes ever more present in day to day life, that all are able to access it easily. Access and affordability are therefore important issues to be addressed.
3. There should be an awareness that problematic use, where it leads to significant social isolation and withdrawal, can impact adversely on normal development. Whilst problematic use is not formally recognised as a disorder within classification systems such as DSM, clinicians should be alert to its existence and seek to offer guidance and support as necessary.
4. Responsibility for media literacy and appropriate and safe use of technology exists at several levels - family, school, community and government.
5. Parents, carers and those working with young people are aware of the benefits and potential problems associated with media use. They should be encouraged to educate themselves about these topics where they feel lacking in knowledge, and should be empowered to help young people set reasonable limits around media usage in a way that enhances their development and minimizes problematic use. Netsafe is an organisation in New Zealand that provides cybersafety advice for parents and educators. A free 'Hector's World' application can be downloaded from their site that allows children to hide unpleasant or scary material [8].
6. That there is a broadening of education about media literacy in schools to cover issues of cyber safety. Work is already being done in this regard by the Australian Government through **cybersmart.gov** and in New Zealand through Netsafe (**netsafe.org.nz**). RANZCP would recommend that educational input is started at a young age – as soon as children start using technology. This means they will be empowered to use technology appropriately, and to be able to identify misuse – particularly where it impacts negatively on them. Additionally, the Australian Government has recently published a report *High-Wire Act: Cyber-Safety and the Young* which highlights many of these and other issues. FCAP supports this government initiative.
7. Workers in the field should seek, as part of assessment of any mental health difficulties, to assess a person's use of media. This would help highlight those situations where problematic use may be an issue, but also open up the possibility of using media based interventions as a way of offering support.

8. The sexualization of children through the media is a particular concern. RANZCP would seek to support measures taken at state and federal level, as well as internationally, to minimize this, in order to afford better protection of children and young people.
9. Psychiatrists are particularly well placed to help work with children and young people with mental health problems where negative media experiences play a role. Their particular expertise in developmental psycho pathology, and a treatment focus that is holistic, means they always consider a young person in the context of their family and community. They can make comprehensive assessments and offer guidance about appropriate therapeutic options.
10. Much more research is needed in this field. Australia and New Zealand – as wealthy nations – have many children and young people who access technology easily. Arguably however, research lags significantly behind other countries, especially China and Europe. It is well recognised that there are problems – but there is no formal research agenda to explore these. It is important that the impact of technology is understood within these contexts so that best advice and support can be given
11. The support of the Children's Commissioner in Australia and New Zealand, or similar role in the different jurisdictions, to oversee development in this area would be particularly helpful, as they this would provide a powerful voice to advocate for children and young people in this regard, and to monitor that what developments take place have their best interest in mind. Such a role would cross different departments within government to ensure that this remains a topic that is addressed regularly,

Suggested Further Reading

Cyberbia - the dangerous idea that's changing how we live and who we are. (2009) – James Harkin

Real Wired Child (2007) – Michael Carr-Gregg

Grand Theft Childhood (2008) – Lawrence Kutner/ Cheryl Olson

Cyber Junkie (2011) – Kevin Roberts

Internet Addiction: A handbook and guide to evaluation and treatment (2011) – Young, Abreu et al.

RANZCP Position Statement 58 – Sexualisation of children in the contemporary media (2008) [\[to access click here\]](#)

RANZCP Submission to the Senate Joint Select Committee Inquiry into Cyber-Safety (2011) [\[To access click here\]](#)

References:

1. Tam, P., *Virtual addiction: A 21st century affliction*. Finance Matters, 2011(Summer): p. p. 6.
2. Cao, F. and L. Su, *Internet Addiction among Chinese Adolescents: prevalence and psychological features*. Childcare, Health and Development, 2007. **33**(3): p. 275-281.
3. American Psychological Association, *Report on the Task Force on the sexualization of girls* 2007.
4. Australian Federal Government, *Sexualisation of children in the contemporary media* 2008.
5. Buckingham, D., *Impact of the Commercial World on Children's Wellbeing*. 2010, Department for Children, Schools and Families,
6. Porter, G. and V. Starcevic, *Are Violent Video Games Harmful?* . Australasian Psychiatry, 2007. **15**(5): p. 422-26.
7. Gentile D et al, *Pathological Video Game Use among Youths: a 2yr longitudinal study* . PEDIATRICS online, January 17th 2011
8. Netsafe. *Netsafe*. 2011 [cited; Available from: <http://www.netsafe.org.nz/>.]

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