On media violence and aggression

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Youth violence takes many forms, including tragic mass shootings. But there also are daily occurrences of youth engaging in nonfatal acts of violence and aggression. In 2015, there were 841,100 nonfatal victimizations (theft and violent victimization) at school among students ages 12 to 18 years. Many factors contribute to youth violence, including poverty, substance abuse, gangs, access to weapons, and mental illness. However, one factor often is ignored — the media violence fed to children, particularly in the form of violent videogames.

Most parents are unaware of the violent and addictive nature of many videogames. Nor do parents know about the hundreds of research studies documenting the harmful effects of media violence on young people. The Society for the Psychological Study of Social Issues reviewed 60 years of research on media violence and released this statement: “These reviews make it clear that media violence research has provided one of the largest and most well-understood bodies of scientific evidence in all of social and behavioral science. … What is supported by the vast body of research is the following: Media violence is an important causal risk factor for increased aggression and violence in both the short- and long-term. Moreover, media violence is one of the few known risk factors that parents, caregivers, and society in general can reduce at very little cost.”

In 2015, the American Psychological Association (APA) resolution on violent videogame effects stated that “scientific research has demonstrated an association between violent videogame use and both increases in aggressive behavior, aggressive affect, and aggressive cognitions and decreases in prosocial behavior, empathy, and moral engagement.”

Why is the public unaware of this research? After the Sandy Hook massacre, a CNN reporter interviewed Craig Anderson, PhD, a professor of psychology at Iowa State University and director of the Research Center on Violence, and asked him that question. Anderson responded, “It is the strategy of the television, movie, and videogame industries to keep the general public confused about media research. But there is no confusion about the research. The research is clear; media violence is a causal risk factor for violence.”

In 2011, a study of children and adolescents found that between 7.6% and 9.9% of students suffered from pathological videogame use, which can result in depression, anxiety, social phobias, and lower school performance.

What can clinicians do to help families prevent and address problems related to unhealthful media use?

1. Ask questions about media use, including amount and content. The American Academy of Pediatrics (AAP) recommends asking two media questions at every well-child visit: “How much recreational screen time does your child or teenager consume daily?” and “Is there a TV set or an Internet-connected electronic device in their bedroom?” The AAP also recommends an in-depth media history for patients with indications of related problem behaviors. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) included internet gaming disorder as a possible addition to later editions. It provided nine potential diagnostic criteria that may indicate a pathologic addiction, including preoccupation with games, withdrawal symptoms, and unsuccessful attempts to control game playing. These nine criteria may provide a starting point in talking with patients.

2. Educate parents and patients about violent media effects and screen addictions. Resources include the AAP website on media use (www.healthychildren.org) and the Boston Children’s Hospital/Harvard Medical School Research Center on Media and Child Health (www.cmch.tv).

3. Encourage families and children to develop healthful media habits. Healthful habits include:
   • spending a week “screen free,” either in conjunction with the National Screen Free Week
organized by the Campaign for a Commercial Free Childhood (www.screenfree.org) or at a convenient time for the family

- establishing a time budget for media entertainment
- keeping media in family areas and removing screens (including smartphones) from bedrooms
- keeping mealtimes free of all screens.

The AAP recommends no screen time for children under 18 months and a maximum of 1 hour per day of high-quality media for children ages 2 to 8 years. Their website (www.healthychildren.org) has many resources, including a media calculator to help older children and adolescents establish healthful media plans. The AAP recommends keeping videogame playing time to a maximum of 1 hour a day.

4. Urge families to check ratings and decrease or eliminate media violence, especially violent videogames. Parents should not rely solely on industry ratings in evaluating media content. This is especially true for videogames. The nonprofit organization Common Sense Media (www.commonsensemedia.org) provides independent ratings and recommendations. In 2007, researchers reviewed the effects of violent videogames and found that parents have an important role: “Parents seem to be in a powerful position. Setting limits on the amount and content of screen media appears to be a protective factor for children.”

5. Refer patients or their caregivers to psychologists with expertise in media addiction, if there are concerns about significant mental health problems related to media. In Wired Child: Reclaiming Childhood in a Digital Age, psychologist Richard Freed notes that when a child is addicted to videogames, trying to limit his or her access to games or the internet “frequently results in threats of, or actual, violence. Doors are broken down, parents are bullied, moms and dads are pushed or hit, and the police may need to be called.”

6. Teach children media literacy. Television shows, internet content, and mobile phone applications can be effective teaching tools. However, children often are unaware of underlying messages, making them susceptible to manipulation. Media literacy provides kids and adults alike with the ability to access, analyze, and evaluate media, empowering them to make smarter entertainment choices. Media literacy resources and curricula are available at the Take the Challenge Now website (www.TaketheChallengeNow.net).

In conclusion, these problems won’t go away if we don’t take action. And the medical community can support and encourage families. The AAP has made it clear: “Although media violence is not the only cause of violence in American society, it is the single most easily remediable contributing factor.”