

Use of Media by School-Aged Children and Adolescents: A Policy Statement from the AAP

Key Points for Practice

- Physicians should work with families and school employees to aid in awareness regarding the benefits and harms of media use.
- Physicians should be aware of options for identifying sexting, cyberbullying, problematic Internet use, and Internet gaming disorder.
- Physical activity and sleep guidelines should be followed and encouraged by physicians with the aid of a family media use plan.

From the AFP Editors

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A collection of Practice Guidelines published in AFP is available at <http://www.aafp.org/afp/practguide>.

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Children and adolescents are exposed to a variety of broadcast (e.g., television, movies) and interactive (e.g., social media, video games) media. Those eight years or older watch an average of more than two hours of television each day, including via streaming (e.g., Netflix) and social media (e.g., YouTube). Overall, the use of media has continued to increase in adolescents, in part because of increased use of mobile devices.

Children and adolescents can benefit from media use, including by being exposed to new ideas and data. Other potential benefits include promoting community participation, enabling partnerships with other students for homework or other projects, facilitating communication with long-distance family and friends, and improving access to support systems. However, there are also harms associated with media use, including health-related concerns such as an increased risk of obesity and sleep disturbances. Overuse of online media and video games can lead to problematic Internet use and Internet gaming disorder, with symptoms such as fixation on the activity, waning interest in offline relationships, failed efforts at reducing use, and withdrawal. Evidence has also indicated that there is a negative effect on learning when media is used while engaging in academic tasks.

The American Academy of Pediatrics (AAP) has released a policy statement on the

use of media in children and adolescents five to 18 years of age.

Recommendations

Physicians should work with families and school employees to aid in awareness regarding the benefits and harms of media use, and should promote media literacy. They should be aware of options for identifying sexting, cyberbullying, problematic Internet use, and Internet gaming disorder. Although cyberbullying is similar to traditional bullying, it has additional challenges, including anonymity for those bullying and being able to bully anytime. There are harmful social, academic, and health concerns for the bullies, as well as the person who is bullied.

Physical activity and sleep guidelines should be followed and encouraged by physicians with the aid of a family media use plan. Additional information on these plans can be found at <http://www.HealthyChildren.org/MediaUsePlan>. Families should create and follow a plan, which should focus on the types and amounts of media each family member should use, as well as outline proper behaviors and hourly limits. Children and adolescents should be encouraged to get the suggested one hour of physical activity per day and eight to 12 hours of sleep per night; to not sleep with devices in the bedroom; and to avoid using devices at least one hour before going to bed. According to one study, adolescents who watch more than five hours of television per day have a five times greater risk of being overweight compared with those watching two hours or less. In addition, there is a relationship between the risk of obesity and having a television in the bedroom, and between a risk of sleep disturbances and declining school performance and media use around or after bedtime.

Practice Guidelines

Families should discourage using media for entertainment while performing academic tasks, and should have assigned times (e.g., during meals) and places (e.g., bedrooms) that media use is not allowed. Positive activities (e.g., reading, talking) that have the potential to aid in development and health should also be encouraged. When children are in the care of others, the family's rules on media use should continue to be enforced. Families should help choose and view media with children, so that it can be used for learning and creativity, which in turn can be shared with the family and community.

Social media, chat rooms, e-mail, and online gaming have allowed for easier and greater child exploitation. In addition, adolescents' knowledge of online privacy varies; the possibility of privacy violations and of content being distributed without permission are risks that should be considered when using social media. Families should continually communicate about social responsibility and rights online, as well as safety online (e.g., how to treat others, cyberbullying, sexting, online solicitation, personal privacy). There should be a group of trusted adults (e.g., family, teachers) with whom children can discuss problems and engage on social media. Finally, although social media can be of benefit socially, some parents can be too focused on it and, therefore, miss chances to connect with their child, resulting in negative effects.

At the government, organization, and industry level, the risks and benefits of media should continue to be evaluated, ideally with longitudinal and robust studies, including new methods for gaining additional insight on the effects of media exposure and use. To ensure that guidelines on media use are up to date, persons working in education and legislation should be consistently informed about the results of this research. In addition, the importance of developing ways to decrease damaging media use, as well as to prevent and address these experiences, should be recognized.

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