

Media Violence: Advice for Parents

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By the time they reach age 18, American children will have seen 16,000 simulated murders and 200,000 acts of violence (American Psychiatric Association, 1998). Media violence can be hazardous to children's health, and studies point overwhelmingly to a causal connection between media violence and aggressive attitudes, values and behaviors in some children (Congressional Public Health Summit, 2000). Through education in clinics, schools, and primary care offices, pediatric nurses can minimize the impact of media violence. They can obtain comprehensive media histories on children and families. They can teach children and parents about the effects of media violence and advise them how to avoid exposure. Nurses can also encourage the entertainment industry to exercise more responsibility in the ways they entertain children.

American children watch an average of 28 hours of television a week. By the time they reach age 18, they will have seen 16,000 simulated murders and 200,000 acts of violence (American Psychiatric Association, 1998). These numbers exclude time spent watching movies, playing video/computer games or online interactive media, and listening to music — all of which may contain violent content. Since the deregulation of broadcasting in 1980, there has been a proliferation of media content that encourages violent and other antisocial behaviors (Javier, Herron, & Primavera, 1998).

Media violence can be hazardous to children's health. Six medical organizations, including the American Academy of Pediatrics and the American Medical Association, recently released a joint statement on the impact of entertainment violence on children. They stated that studies point overwhelmingly to a causal connection between media violence and aggressive attitudes, values and behaviors in some children (Congressional Public Health Summit, 2000). Children's exposure to media violence needs to be recognized by parents and professionals in order to intervene.

Pediatric nurses are in key positions to minimize the impact of media violence. In primary care settings, as well as community and hospital settings, nurses often engage children in discussions to assess the child's physical and psychosocial health. They can obtain children's media violence exposure histories as part of their assessments in order to educate children and parents about the effects of exposure to media violence. Pediatric nurses can offer advice to parents on how to avoid violence exposure. They can also play a role in encouraging the entertainment industry to exercise more responsibility in the ways they entertain children. The purpose of this article is to identify the common effects of media on children and provide advice for parents that pediatric nurses can incorporate into their teaching.

The Effects of Media on Children

Media violence can have several measurable negative associative effects on children. These include seeing violence as an effective way of solving conflicts, developing desensitization towards violence in real life, viewing the world as a violent and mean place, and developing a greater tendency for violent and aggressive behavior later in life (American Academy of Pediatrics, 2000). For example, it was reported that the perpetrators of recent school shootings were exposed to and enamored by various forms of violent media (Strasburger & Grossman, 2001).

More than 3,500 studies, including laboratory experiments, naturalistic studies, correlational studies, and longitudinal studies, discuss the impact of media violence on children, with only a few demonstrating no effect (Strasburger & Grossman, 2001; Wartella, Olivarez, & Jennings, 1998). Media violence viewing is consistently associated with higher levels of antisocial behavior, ranging from trivial violence toward toys to serious criminal violence (Cantor, 2000). Experts even suggest that the evidence linking media violence to aggressive behavior is stronger than the evidence linking smoking to lung cancer (Bushman & Huesmann, 2001).

While most adults realize that media violence is fabricated, children are more vulnerable. Preschoolers cannot distinguish the difference between reality and fantasy. Developmentally, their magical thinking makes what they view on television programs seem real. They believe that the fictional characters act and feel as portrayed, and that they somehow live in their television or other fantasy world in between shows. Even school-age children have difficulty understanding that actors play characters created by writers.

Children between the ages of 8 and 12 appear to be particularly sensitive to television violence, as are children with emotional, behavioral, learning, or impulse control problems (American Academy of Child & Adolescent Psychiatry, 1999). But,

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Table 1. TV Influences on Children

- TV encourages short attention-spans and hyperactivity with its use of snappy attention-getting devices.
- TV causes a confusion of values.
- TV creates uncertainty about what is real and unreal in life.
- TV promotes use of products that may be unhealthy or dangerous.
- TV produces loss of interest in the less exciting but more necessary classroom or home activities.
- Heavy TV watching decreases school performance by interfering with studying, reading, and thinking time. If children lose sleep because of late night TV watching, they will not be alert enough to learn well as the following day.
- TV increases aggressive behaviors with its use of violent program content, loud music and camera tricks.
- TV increases passive acceptance of aggressive behavior as a way to deal with problems.
- TV escalates anxiety, fear and suspicion of others.
- TV de-emphasizes the complexity of life, especially being consequenced for negative behavior.
- TV conveys stereotyped images.
- TV increases – not causes – emotional problems such as conduct disorders.
- Children who watch too much TV spend less time conversing with family members.
- Heavy TV viewers have difficulty developing their imaginations and a playful attitude, and they tend to be more restless and have more behavior problems in school.
- TV advertising encourages children to demand material possessions. Seeing materialism as the American Way, children will not only pressure parents to make purchases, but they will also have an additional motivation for aggression by wanting what other children have and pressuring the others to give it to them.

Sources: Miller, A. (1997). Family television viewing - how to gain control. *Childhood Education*, 74(1), 38-42; Muscari, M. (2002). *Not My Kid: 21 Steps to Raising a Nonviolent Child*. Scranton, PA: Ridge Row Press/University of Scranton Press.

according to the American Psychiatric Association (1998), children as young as 14 months imitate the violent behavior they see on TV. Exposure increases the chance that children will endorse aggressive attitudes, act violently immediately afterward, or demonstrate aggressive behavior in school. When faced with a stressful situation, they are more likely to identify with violent cues such as verbalizations of revenge or angry voice tone, and respond in an aggressive manner. Children who identify with aggressive heroes are more likely to be more aggressive. They learn that violence is effective, courageous, socially acceptable and rewarded, and they get caught in the aggression cycle. Aggressive children prefer aggressive programming (American Academy of Pediatrics, 1995).

Pediatric nurses should obtain a media exposure history when they assess children. This includes asking parents if their children have a TV or computer in their bedrooms, what types of media their children use, how many hours per day they use them, and what type of content they view. Nurses should ask parents if they watch TV and other media forms with their children, and if they have any rules regarding viewing (such as no TV until homework is complete) (Strasburger & Grossman, 2001).

Television

Television has been linked with numerous social and behavioral influences on children, and parents need to learn to gain control over their children's TV viewing (see Table 1). More than half of children aged 2 to 18 have

a TV in their bedrooms, and the average 1-year-old watches six hours of TV per week despite the American Academy of Pediatrics recommendation that they watch none (2001). TV remains the single most important medium in the lives of young people, but the three-year National Television Violence Study found the following: two-thirds of all programming contains violence; children's programs contain the most violence; the majority of all entertainment programming contains violence; violence is often glamorized; and the majority of perpetrators go unsanctioned (Federman, 1998).

TV delivers information in short, fast-moving bits of imagery and talk to keep viewers' attention. Small children are fascinated by these images, but they lack the cognitive skills needed to understand them. They cannot make connections, and tend to focus on the more intense scenes, such as violent moments, rather than important images and story components. TV violence is graphic, realistic, and intensely involving, and it shows inequity and domination as most victims are women, children and the elderly. These aggressive acts lead to a heightened arousal of the viewer's aggressive tendencies, bringing feelings, thoughts and memories to consciousness and can cause outwardly aggressive behavior (Miller, 1997).

Nurses need to instruct parents to watch TV *with* their children, to discuss what they see, and to teach them how to use the TV to their child's advantage (KidsHealth, 1999; Miller, 1997; Muscari, 2002). Recommendations that pediatric nurses can give to parents include:

- Remove the TV set from children's bedrooms permanently.
- Do not use the TV as a baby-sitter.
- Do not use TV as a reward or punishment. Both make TV more important to children.
- Set limits on TV watching time. The American Academy of Pediatrics recommends limiting viewing time to 1 to 2 hours per day on school days and 2 to 3 hours a day on weekends and holidays. Allow for additional time for educational programs, and limit preschoolers to no more than 1 hour of non-educational TV per day.
- Turn the TV off during conversations and meal time. Do not arrange family/living room furniture with the TV as the focal point.

Table 2. TV Parental Guidelines

- Ban TV before homework completion prior to television viewing. Provide a quiet place for children to do their homework, without the distraction of television. If children have academic difficulties, decrease their viewing time to 1 hour or less a day.
- Plan viewing together in advance. Use the television rating system to determine which shows are appropriate (see Table 2). Discuss reasons for both approving and disapproving shows.
- Preview programs first whenever possible. Screen new shows intended for children.
- Forbid shows with graphic violence.
- Watch programs with children to help them interpret what they see. Observe children as they watch and make note of their mood, whether they are sad, confused, worried, happy, or bored. Discuss their reactions, and foster critical thinking skills.
- Role play as if you are television critics and review the programs together. Rate them on a scale of 1 to 10 on various themes, such as violent content and advertising messages.
- Clarify confusing issues. Discuss how the characters are not injured in the story because they are just actors, and that real people would be severely injured or killed in similar real life circumstances.
- Use V-chip technology to block children from watching inappropriate material on TV. V-chips read electronically coded ratings for programs to deny access if a program meets the limitations you set. It may not block material from news and sports programs, unedited movies on premium cable channels (e.g., HBO, SHOWTIME), and Emergency Broadcasting Systems (www.vchippeducation.org provides further information).
- Provide alternative activities, especially reading.
- Set an example. Children will not learn self-discipline if parents do not exhibit self-discipline in their television viewing. Watch only family programs, and spend your free time doing alternate activities.
- When children see a violent event on TV ask them why they think the character acted in a violent manner. Ask if the character could have chosen another way to react. Point out that violence is

The following categories apply to programs designed for the entire audience.

TVY All Children.

This program is designed to be appropriate for all children. Whether animated or live-action, the themes and elements in this program are specifically designed for a very young audience, including children from ages 2 - 6. This program is not expected to frighten younger children.

TVY7 Directed to Older Children.

This program is designed for children age 7 and above. It may be more appropriate for children who have acquired the developmental skills needed to distinguish between make-believe and reality. Themes and elements in this program may include mild fantasy violence or comedic violence, or may frighten children under the age of 7. Therefore, parents may wish to consider the suitability of this program for their very young children. Note: For those programs where fantasy violence may be more intense or more combative than other programs in this category, such programs will be designated TV-Y7-FV.

The following categories apply to programs designed for the entire audience.

TVG General Audience.

Most parents would find this program suitable for all ages. Although this rating does not signify a program designed specifically for children, most parents may let younger children watch this program unattended. It contains little or no violence, no strong language and little or no sexual dialogue or situations.

TVPG Parental Guidance Suggested.

This program contains material that parents may find unsuitable for younger children. Many parents may want to watch it with their younger children. The theme itself may call for parental guidance and/or the program contains one or more of the following: moderate violence (V), some sexual situations (S), infrequent coarse language (L), or some suggestive dialogue (D).

TV14 Parents Strongly Cautioned.

This program contains some material that many parents would find unsuitable for children under 14 years of age. Parents are strongly urged to exercise greater care in monitoring this program and are cautioned against letting children under the age of 14 watch unattended. This program contains one or more of the following: intense violence (V), intense sexual situations (S), strong coarse language (L), or intensely suggestive dialogue (D).

TVMA Mature Audience Only.

This program is specifically designed to be viewed by adults and therefore may be unsuitable for children under 17. This program contains one or more of the following: graphic violence (V), explicit sexual activity (S), or crude indecent language (L).

Note: Used with permission from the TV Parental Guidelines Monitoring Board.

not the way to solve problems. Discuss the consequences of the violent act shown and discuss what would happen in real life. Look for examples of nonviolent problem solving.

Movies

The Motion Picture Academy of America (MPAA) rating system (see Table 3) was designed to enable parents to better choose which films are more suitable for their children.

However, it does not often indicate violence levels. A content analysis of animated G-rated films by Yokota and Thompson (1999) suggested that a significant amount of violence exists in these films - 55% of the violence associated with good or neutral characters dueling with bad ones.

Much of the discussion related to television applies to movies. In addition, parents can check their newspaper or movie Internet sites to investigate movie ratings and content before

Table 3. Motion Picture Association of America (MPAA) Voluntary Movie Rating System

G	GENERAL AUDIENCES	All ages admitted.
PG	PARENTAL GUIDANCE SUGGESTED	Some material may not be suitable for children.
PG-13	PARENTS STRONGLY CAUTIONED	Some material may be inappropriate for children under 13.
R	RESTRICTED	Under 17 requires accompanying parent or adult guardian.
NC-17	NO ONE 17 AND UNDER ADMITTED	

Note: Used with permission of the MPAA.

their children see them. As a general rule of thumb, parents should think twice before taking their young children to a film that carries a rating inappropriate for their ages (Muscari, 2002).

Parents cannot police teenagers who yearn to slip into a risqué, R-rated coming-of-age film. However, parents can have a heart-to-heart discussion with them about why they find such films objectionable. If, on the other hand, they find out that their teen has already attended an R-rated movie without their knowledge, they should discuss it with them. Parents should impose consequences agreed upon in advance if teens attend against their parents' expressed instructions.

Video Games (e.g., Nintendo, Sega, Playstation, Computer Software)

Video games were introduced in the 1970s and quickly became a preferred childhood leisure activity. Today's children average 90 minutes of game time per day in this now \$10 billion dollar industry (Federman, Carbone, Chen, & Munn, 1996). Results from early research were inconclusive, however, experts feel that the mechanical, interactive quality of "first-person shooter" games make them potentially more dangerous than TV or movies (Strasburger & Grossman, 2001).

Many of the young school shooters, including those at Columbine, were obsessed with video games, and some had little to no experience with real guns prior to their shooting sprees (Strasburger & Grossman, 2001). One of the Columbine killers even reprogrammed one of his games so that it looked like his home neighborhood, complete with the homes of people he hated (Grossman & Degaetano, 1999). The 14-year-old killer in Paducah, Kentucky, never moved his feet as he fired once at each of his victims, as if they were

popping up on a screen. The Columbine killers methodically moved from room to room, stalking and killing their victims, laughing. A hallmark of video game, as well as movie and TV violence, known as "funny violence" (Strasburger & Donnerstein, 2000; Strasburger & Grossman, 2001).

Nurses can help parents protect their children from the negative effects of today's high tech, fast paced, violent video and games (Muscare, 2001). Common sense activities to advise parents include:

- Look for the ratings on the front of the video game package. Most North American video and computer game makers utilize the Entertainment Software Rating Board (ESRB) system (found at www.esrb.org) implemented in 1994, which classifies games according to age-based categories. The Canadian Interactive Digital Software Association (CIDSA) assigns the ESRB ratings in Canada. These ratings are easy to find on games by Nintendo, Playstation, and Sega.
- Evaluate games for their potential impact on children before buying them.
- Examine the game's box carefully and read the description. The back of the package contains content descriptors designated by the ESRB that describe violence, language, sexual content, and other descriptors such as use of alcohol or drugs. For example, "mild animated violence" means that the game contains pixelated/animated characters involved in unsafe or hazardous acts or violent situations. Definitions of these descriptors can be found at www.esrb.org (Entertainment Software Rating Board, 1998).

Music and Music Videos

Music is an important influence as

the adolescent's identity develops because it helps define important social and subcultural boundaries. Most children interpret their favorites songs as being about love, growing-up, life's struggles, fun, cars and other typical teen topics. Music is not typically a danger to adolescents whose lives are happy and healthy. However, there are a small number of teens whose preference for music with a seriously destructive theme may be a marker for alienation, depression, drug and alcohol abuse, and other risk-taking behaviors (American Academy of Pediatrics, 1996).

Music lyrics have changed drastically since rock and roll emerged more than 40 years ago. Heavy metal and rap have caused the greatest concerns as music lyrics have become increasingly explicit, especially with reference to sex, drugs and violence. Many lyrics not only condone but encourage violent acts, especially toward women, and glorify guns, rape and murder. MTV and VH1 bring music videos into most American homes. A comprehensive analysis of music videos found that nearly one-fourth of all MTV videos portray overt violence and depict individuals carrying weapons (DuRant, Rich, Emans, Rome, Allred, & Woods, 1997). Children may not be able to understand the garbled words of some songs, but they will certainly have no difficulty comprehending the disturbing and often violent images flashing in a number of music videos. When they hear the song again on the radio or compact disk player, they will flashback to the video scenes (American Academy of Pediatrics, 1996).

Unlike other media forms, there is no content-labeling system for music. To protect children from being inundated with inappropriate music and music videos, nurses can teach parents to be aware of drug-oriented, sexually explicit or violent lyrics on compact disks, tapes, music videos and

media on the Internet. Parents should take an active role in their children's music exposure and purchases. Parents should monitor their children's exposure to MTV, VH1 and other music video channels. They can also listen to the music with their children and discuss lyrics as necessary – provided they both can understand them (Muscarì, 2002).

The Internet

The rapid growth of Internet access allows children to be just a "click" away from a plethora of libraries, encyclopedias, current events coverage, and other valuable resources. Unfortunately, without even trying, they can also access sites filled with violence, racism, pornography, and even instructions to make explosives. Educating parents on the tools available to set guidelines and monitor their children's use of the Internet requires nurses to be familiar with the technology and the content.

The ESRB, the same organization that rates video games, provides similar labeling for the Internet community. Just as the role of the ESRB is to provide parents and consumers with objective information so they can make informed decisions regarding software, the ESRBi provides similar labeling information for the Internet community. ESRBi issues ratings providing information on the age appropriateness of a site, as well as information regarding the site's content. It is the only interactive entertainment rating service that does both (www.esrb.org). The ESRBi offers information on the age appropriateness of chat rooms, bulletin boards, multiplayer games, and/or any space that provides open forums or interactive exchanges, as well as information on the site's contents. When children enter a site marked "I" it is possible there may be others using the site who have differing opinions, use harsh language, or who may influence game play. (Entertainment Software Rating Board, 1998). If parents use the ESRBi system with an enabled Platform for Internet Content Selection (PICS) compatible browser, they can block sites that are inappropriate according to the levels they set on their computer. Parents can screen rated sites based on their preferences using the ESRBi provided information.

Similar to the ESRB video game rating system, the ESRBi also offers content descriptors. These, however, are specific to Internet sites and include general descriptors (violence, nudity, sexual themes), information descrip-

tors (informational, edutainment, survey information, financial information), and potentially sensitive areas (language, drugs, weapon making, intolerance). Detailed information on descriptors can be found at www.esrb.org (Entertainment Software Rating Board, 1998).

The Internet is an exciting and helpful tool, but it can also be very dangerous. Nurses need to support parents in their efforts to keep their children safe. They should not assume that children will be protected by the supervision or regulation of the online services (Muscarì, 2002; United States Department of Education, 1997). Nurses should advise parents to:

- Keep the computer in a room that the whole family uses, and make the Internet a family activity. It should not be in a child's bedroom.
- Set up a master account with an Internet Service Provider (ISP), commercial provider – AOL, EPIX, MSN, or other provider. They should not give children the password to the master account, and they should create a separate screen name for children so they can block access to inappropriate sites.
- Use blocking software to allow you to control children's access to certain areas on the Internet. Different products offer various levels of parental control, so each should be investigated carefully to choose the one best for that particular family. This can be done a number of ways:
 1. Parents can ask their ISP or online service provider (OSP) what type of parental controls they have available. Most offer some type of control, including site blocking, restrictions on incoming e-mail and chat rooms, and children's accounts that access specific services. Parents can check with the member services section of their ISP or OSP for help with customizing controls and filters.
 2. Parents can use child-friendly search engines such as Ah-Ha.com. These have built in filters that prevent entry to inappropriate sites.
 3. Parents can get filtering software such as ZeekSafe, GuardDog, or Net Nanny. Filtering software uses specific key words to block sites containing said words. These products limit access to inap-

propriate material, prevent the threat of cyber strangers, and deny the misuse of personal information. Some can be customized to provide a choice of actions if and when violations occur. A major problem of filtering is that it blocks sites that are not offensive. For example, the key word "sex" may block a site on "sextuplets," as well as sites with health information.

4. Blocking software prohibits access to designated sites based on a "bad site" list composed by an ISP or OSP or the computer owner. List updates vary by manufacturer, but the number of sites published daily far exceeds the ability of any software company to keep their "bad site" list current. Thus, some violent or adult content sites will get through the blocking software.
5. To find software to download, parents can contact their ISP or search the Internet using keywords such as "parental controls" or "protective software."
6. Be aware that children can outsmart many of the parental controls and filtering services. Therefore, nothing can replace parental supervision and involvement.
 - Limit the amount of time children spend online. Parents can print out a "Family Contract for Online Safety" for them and their children to sign at www.SafeKids.com.
 - Establish clear and concise rules for using the computer. Post them near the computer.
 - Help children find useful, positive Web sites and bookmark them.
 - Protect children from exploitation, especially in chat rooms. Children should treat people online as they would any other stranger. They should use their screen name only, and never give out any personal information. If parents have any concern that their children have been contacted by a pedophile, they should report it to their state police immediately.
 - Talk to children about the issues that concern them, such as violence and exploitation. This way children will know how to respond should they encounter these things. Children should take their parents for a trip through cyberspace so that par-

Table 4. Examples of Chat and E-mail Vocabulary, Symbols, and Emoticons

Vocabulary	Meaning
2U2	To you, too
AFK	Away from keyboard
CYAL8R	See you later
F2F	Face to face
FOAF	Friend of a friend
IYKWIM	If you know what I mean
L8R	Later
LOL	Laughing out loud
M or F	Male or female, or person who asks that question
POS	Parent over shoulder
OLL	Online love
TTYL	Talk to you later
WU?	What's up?
WYSIWYG	What you see is what you get
Symbols	Meaning
/ga	Go ahead
/	Denotes end of message
?	Person is asking a question
!	Person has a comment
Emoticon	Meaning
:@ or :-@	Angry
>:->	Devilish wink, lewd remark
:*)	Drunk
}) or }-)	Evil
:-)	Girl flirting
[]:*	Hugs and kisses
:*) or :-*)	Kiss
:x or :-x	Kissing
:-@	Kiss, French
:-9	Licking his/her lips
:P or :-P	Tongue out
8:-)	User is a little girl
;) or ;-)	Winking
:} or :-}	Wry smile

Table 5. Television Station Addresses

ABC 2040 Avenue of the Stars Century City, CA 90067
CBS 51 West 52nd Street New York, New York 10019
FOX 20th Century Television (Production) PO Box 900 Beverly Hills, CA 90213-0900
NBC 30 Rockefeller Plaza New York, New York 10112

of the video game package. Most North American video and computer game makers utilize the ESRB system (found at www.esrb.org), implemented in 1994, which classifies games according to age-based categories. The CDSA assigns the ESRB ratings in Canada. These ratings are easy to find on games by Nintendo, Playstation, and Sega.

Get Involved

The Federal Trade Commission (FTC) reported that several entertainment companies were violating their own self-regulatory codes by targeting young consumers. They found that 35 of movies rated R for violence were targeted to children under age 17; 15 of 55 music recordings with parental advisory labels expressly identified "teenagers" as part of their target audience; and 83 of 118 games with a Mature rating were targeted to children under 17. The FTC did not propose legislation but did ask the entertainment industry to take action by expanding industry codes to prohibit marketing inappropriate content to younger children and sanction companies that do not comply, to do a better job of checking consumer identification at the retail level, and to increase education efforts (Teinowitz, 2000).

Nurses can help by becoming more politically active. Nurses can support the Children's Television Act of 1990 and additional regulations made in 1996 to help ensure the airing of television programs specifically designed for children. This act requires broadcasters to air educational and infor-

ents can learn how their children navigate the web.

- Keep tabs on their children's Internet usage. If children log off when a parent enters the room, or a parent suspects a child may be doing something inappropriate, parents can find the children's history trail. To do so, they should sign on to their ISP, right click on their Windows Start button and click on Explore. They then find the main hard drive (probably C), and look over the folders until they find History. They can click it open to find out the sites their children child visited. The site names are usually obvious, but if parents are not sure about the content of one, they can double-click it to go to the site.
- Purchase tracking software to track where their children go online. These programs allow

parents to monitor the length of time children spend on the Internet, time of day sites were visited, sites visited, and time spent offline but on the computer. School systems use these to track where students go online.

- Monitor email and chat activity. Parents should familiarize themselves with some of the common vocabulary (such as POS which means "parent over shoulder") to understand the types of conversations that children may have online (see Table 4). Although many symbols and abbreviations are benign, the unfamiliar language may provoke needless concern and nurses can help parents know how to get involved to protect their children from the negative effects of today's high tech, fast paced violent video games.
- Look for the ratings on the front

mational children's programming for at least 3 hours per week and to limit advertising time during children's programming. These shows must be labeled E/I (educational and informational) on the television screen (American Academy of Pediatrics, 2001).

Nurses can also write to television networks, movie studios, and software and video game companies and ask them to use better judgment in their handling of violence. They can especially write to television stations to ask them to self-regulate children's programs, and to restrict their marketing of violent programs to limit your child's exposure to violence (see Table 5). Violence is a health problem, and nurses can take part in prevention by minimizing children's exposure to media violence.

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