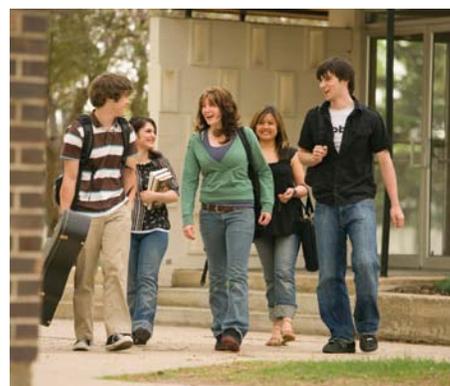


Creating Healthy Opportunities: Conversations with Adolescent Health Experts



An Interview with Jane Brown, PhD, Conducted by Karen Brown

A PROJECT OF THE PARTNERS IN PROGRAM PLANNING FOR ADOLESCENT HEALTH (PIPPAH) INITIATIVE

Creating Healthy Opportunities: Conversations with Adolescent Health Experts

Author and Interviewee Biographies

KAREN BROWN

Karen Brown is a public radio reporter and freelance writer who specializes in health care. Her work frequently appears on NPR and in national magazines and newspapers. She has also produced several radio documentaries on mental health topics, including childhood bipolar disorder, siblings of the mentally ill, and post-traumatic stress disorder. She has won numerous national awards, including the Edward R. Murrow Award and Daniel Schorr Journalism Prize, as well as journalism fellowships, most recently the 2008-09 Kaiser Media Fellowship in Health. Her work is featured online at www.karenbrownreports.org.

JANE BROWN, PHD

Jane Brown is the James L. Knight Professor in the University of North Carolina, Chapel Hill School of Journalism and Mass Communication, and an expert in the effects of the media on sexual health and the use of media to promote health. She has been involved with a number of interventions using mass media to improve public health, including a 10-city evaluation of a media campaign to keep adolescents from starting to smoke cigarettes, and a state-wide campaign to reduce sexual violence among adolescents. She just completed a NICHD-funded R01 longitudinal assessment of the influence of the sexual content in American

media on North Carolina adolescents' sexual beliefs and behaviors. Brown is the co-editor or co-author of four books, including *Sexual Teens*, *Sexual Media* (Erlbaum, 2002) and is on the editorial board of six journals in communication research, adolescent and sexual health. She has served on the national boards of Advocates for Youth, the Trojan Sexual Health Advisory Council, and the CHHD-W Population Sciences Committee (PSC) study section. She currently is on the Research Advisory Committee for The National Campaign to Prevent Teen and Unplanned Pregnancy, and the Board for Children, Youth and Families of the Institute of Medicine.

Acknowledgements

“Creating Healthy Opportunities: Conversations with Adolescent Health Experts,” was commissioned by the Partners in Program Planning for Adolescent Health (PIPPAH) initiative of the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration (HRSA). The views presented are those of the interviewees and do not necessarily represent the views of the MCHB, HRSA, or any individual PIPPAH grantee. Copyright 2010, PIPPAH grantees.

PIPPAH grantees include the following organizations:

- American Academy of Pediatrics
- American Bar Association Center on Children and the Law
- American College of Preventive Medicine
- CityMatCH, Board of Regents, University of Nebraska Medical Center
- Healthy Teen Network
- National Association of County and City Health Officials
- National Conference of State Legislatures
- National Institute for Health Care Management (NIHCM) Foundation

THIS INTERVIEW IS AN EXCERPT FROM THE SERIES “CREATING HEALTHY OPPORTUNITIES: CONVERSATIONS WITH ADOLESCENT HEALTH EXPERTS.” THE SERIES INCLUDES INTERVIEWS WITH ANGELA DIAZ, MD, MPH, SHAY BILCHIK, JD, RICHARD KREIPE, MD, JANE BROWN, PHD, AND ABIGAIL ENGLISH, JD.

Creating Healthy Opportunities: Conversations with Adolescent Health Experts

PROFILE:

Jane Brown, PhD

JAMES L. KNIGHT PROFESSOR, UNIVERSITY OF NORTH CAROLINA, CHAPEL HILL
SCHOOL OF JOURNALISM AND MASS COMMUNICATION



"[People think that] 'at least when I have my child sitting inside watching TV, I'm not concerned that they're going to be shot walking down the street or dealing drugs, or getting pregnant.' What I say is, the media influence all these other issues."

Jane Brown has been monitoring sexuality in the media since the 1980s, when MTV first started using gyrating, scantily-clad actors to sell music albums. Since then, the amount of sexuality-soaked fare in the media, either targeted at or accessible to teens, has been steadily rising. Look no further than popular sitcoms, teen dramas, or clips on YouTube. Even seemingly innocuous advertising can be steeped in sex; a recent Burger King advertisement shows a seductive customer enjoying a whopper to an exaggerated degree, and teen star Miley Cyrus set off a firestorm of media commentary when she appeared wearing nothing but bed sheets on the cover of *Vanity Fair*.

"Sex is used to sell everything," says Brown, a professor at the School of Journalism and Communication at the University of North Carolina, Chapel Hill.

The more young adolescents are exposed to these images of unbridled sexuality, Brown maintains, the more likely they are to have sex at an early age. By studying a group of one thousand 12 to 14 year olds, Brown's research team found that those with a heavy sexual media diet were twice as likely to have sex before age sixteen than their counterparts who hadn't been exposed to those images to the same degree.

"I think the media are putting unprotected, risky sexual behavior high on an adolescent's agenda. 'Look – everyone else is doing it, why aren't you?'" she says. "What we know from social learning theory is that if attractive, familiar, similar models are engaged in behavior from which they reap rewards, or they aren't punished, then young viewers will be more likely to engage in similar behavior."

"Young people... are not ready to have happy sexual relationships," says Brown. "It's too emotionally charged for who they are, where they are in their maturation."

She says adolescents are primed, developmentally, to start creating their own self-identity around their sexuality, so they are vulnerable to messages in the media, but the media do not always treat their power responsibly. Quite the opposite, in many cases.

"The media portray sex, but rarely portray commitment, or even love," she says. Nor does the popular media portray or discuss the risks of sexually transmitted diseases or unwanted pregnancy – both of which could derail a young person's entire life path. Brown cites a Rand Corporation study that shows higher rates of teen pregnancy among 12 to 17 year olds who watched sexually graphic media earlier. "What the initial longitudinal studies have shown is that there is a connection," says Brown. "And now we need to spend more time trying to figure out exactly how that happens."

Since Brown started her research in the 1980s, the media landscape has exploded well beyond TV, movies, and magazines. Digital media has revolutionized adolescents' relationship with the media. Social networking sites like Facebook and MySpace have given power to adolescents to create their own media and connections, but the Internet has also given them much wider access to potentially harmful messages.

One notable example is online pornography. Brown's most recent study looked at the relationship between exposure to pornography and adolescent behavior. "Kids who had seen pornogra-



“One of the key questions is: what’s missing in this? Especially in the persuasive messages, what aren’t they telling you? So, for example, we want adolescents to know that the advertisements leave out that if you use this credit card you’re going to go into debt, or if you drink this beer, you’re going to get a beer belly, or if you smoke these cigarettes, you’re going to get cancer.”

phy by the time they were 12-14, were more likely to have engaged in oral sex and sexual intercourse by the time they were 16,” Brown says. “And the boys who had seen it by the time they were 14 were more likely to also have perpetrated sexual harassment in their schools, like pulling a bra strap, or calling girls and boys sexual names.”

Adolescents may be vulnerable to negative media messages, Brown says, but they are also smart enough to immunize themselves against them – if given the right tools. One of the most hopeful tools is media literacy: teaching young people how to deconstruct the media, to look at it skeptically, to tease out what’s real and what’s not.

Brown points to two organizations that are developing media literacy materials – National Association of Media

Literacy Education (NAMLE), and American Coalition of Media Education (ACME). She says they’ve created media guides around such topics as body image, gender roles, and substance abuse, among others, and they encourage young people to look critically at all media, from dramas to advertising. “One of the key questions is: what’s missing in this? Especially in the persuasive messages, what aren’t they telling you? So, for example, we want adolescents to know that the advertisements leave out that if you use this credit card you’re going to go into debt, or if you drink this beer, you’re going to get a beer belly, or if you smoke these cigarettes, you’re going to get cancer.”

Advocates would like media literacy to become integrated into regular school curricula, but that’s been particularly challenging in recent years. “The schools

are so beleaguered and so full of things they need to do, especially teaching to the end-of-grade tests, that we’re having better success getting into after school programs and youth serving agencies and associations,” Brown says. “Other countries, such as Canada, Britain, and Australia, have mandated media literacy education from kindergarten to high school. They talk about it as ‘teaching young people to read Baywatch as well as Beowulf.’”

That said, Brown can understand why schools and communities don’t put media literacy at the top of their priority list. “It seems as if the media are the least of our worries. [People think that] ‘at least when I have my child sitting inside watching TV, I’m not concerned that they’re going to be shot walking down the street or dealing drugs, or getting pregnant,’” Brown



says. “What I say is, the media influence all these other issues. The research that I and others are doing shows that the media are implicated in violence, teen pregnancy, tobacco smoking, beer drinking, body problems, eating disorders, as well as obesity.”

Another form of “media vaccination” starts in the home with the relationships young people have with their parents. In this area, Brown’s research made a notable discovery: that African American adolescents were more likely to have conversations with their parents about sexual values, and that those conversations served as a protective factor against

media pressure to engage in early sexual behavior. At the same time, however, she says that media targeted to black adolescents tends to be even more sexualized than that targeted to whites.

In all demographics, this generation of parents does not have an easy job keeping up with the media their children are exposed to. Just when you’ve learned about Facebook or MySpace, along comes Twitter and Hulu. Brown herself relies on updates from her 18-year-old daughter and her college students, some of whom admit that they can barely keep up with what their younger siblings are doing. “One mother

told me recently that she discovered that her daughter was so tired because she’d been going to sleep with her cell phone on, underneath her pillow, and her friends were texting her all night.”

Brown doesn’t think parents need to panic. In most cases, she says, young people are coming up with their own social etiquette around new forms of communication. For instance, although “sexting” – where teens send sexual photos of each other by text message – is gaining popularity, she believes most teens understand what’s appropriate or not. Nevertheless, parents would be wise to counsel their children on the long-term consequences



of sharing explicit digital images of themselves or others in cyberspace. Brown also thinks parents should help their children navigate the media in healthy ways, teaching them how to access the good stuff and avoid the bad stuff, not to mention encourage them to spend less time in front of a screen, period.

“Parents have to start early, setting limits, realizing that knowing where your child is in the media is as important as knowing who their friends are, who they are hanging out with, and where they are in ‘real life,’” Brown says.

That goes for everyone who works with adolescents, from social workers and teachers, to doctors and even policymakers. Brown wants them to do more than just monitor what’s out there, and actually create the useful material themselves.

Advocates and institutions have an opportunity to use new media for the good of adolescents, to disseminate constructive information and positive messages. This can mean setting up websites with health information that teenagers can use about topics like substance abuse, reproductive health, or sex education. Brown offers one example: the nonprofit organization Advocates for Youth developed a website to help gay and lesbian youth connect with each other and navigate adolescence from their perspective. Some policymakers also have a presence on Facebook, Twitter, and other social network sites to connect with constituents and young people. More and more advocacy groups are starting to interface with social networking sites like Facebook and MySpace by setting up ‘affinity’

or ‘fan’ groups that link to their websites. Brown also knows of one health-oriented organization, the Adolescent Pregnancy Prevention Campaign of North Carolina, that is developing a texting service where teenagers can get honest answers to their questions about sex.

In other words, Brown says, don’t underestimate the power of media, and don’t fear it, either. Take a cue from the entertainment and advertising industries, which have already figured out how to hook the attention of adolescents, but offer teens something they can really use: realistic information about sex, about building relationships, and about staying healthy. ■