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Parental Mediation of Adolescent Movie Viewing

by

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Bachelor of Arts University of South Carolina, 2001

Submitted in Partial Fulfillment of the Requirements

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Dedication

For Julie, my incredible wife, for making this possible. Without your support, encouragement and shouldering of all the extra work (and chauffeur duties!), I would never have been able to complete this. I love you!

For my amazing children, Alex, Spencer and Nic. The three of you inspire me to work hard and be the best I can be. Thanks for making sure I always do my homework. Daddy/Dad/Papaya loves you!

For my parents, in-laws, family and friends. Every word of encouragement, every time you asked "How's school?" gave me a boost that carried me through the long, late hours.

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Finally, to the rest of the faculty, staff and my fellow students in the department, thanks for your support. Every time I felt my hold on the thesis slipping away, it seems I would bump into one of you who would ask how it was going, forcing me to put into words the ramblings in my head that ultimately filled these pages.

Abstract

Parental mediation of media use by children has been studied extensively as it applies to television and children 12 years old and younger. This study expands the scope of Parental Mediation Theory by applying it to adolescents (age 13-17 years old) and movie viewing. The results of this study show overall parental mediation of adolescent movie viewing is negatively associated with the age of the child. The results show that among parents who mediate movie viewing, restrictive, instructive and social co-viewing mediation strategies are negatively correlated with the age of the adolescent. Third Person Effect is also examined as parental perception of the effect of inappropriate content such as violence, profanity, sexual references and activity, nudity, and alcohol, tobacco and drug use, on their children versus other adolescents. The results show a significant number of parents perceive a greater negative effect of inappropriate content on other adolescents compared to the negative effect on their own children. Third Person Effect as it relates to one's child is also found to have an effect on the decision to mediate and mediation strategies used by the parent.

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Chapter 1

Introduction

The purpose of this study is to determine if, how, and to a lesser degree, why, parents choose whether to mediate the movies their adolescent children view. For the purposes of this study, adolescents are defined as children 13-17 years of age.

Throughout the research reviewed for this study, the demarcation line between the "older children" and "adolescents" category is typically 13 years of age (Strasburger & Wilson, 2009). Also, since movies are the media focus of this study, the 13-17 years of age definition aligns with the three ratings categories that typically are the focus of most parental mediation.

For purposes of this study, movies are defined as theatrical presentations originally available for viewing in movie theaters, but which could later be viewed in a variety of venues (at home, school, a friend's house), on various media devices (TV, computer, mobile phone, etc.), and from various sources (DVD/Blu-ray discs, broadcast channels, basic and premium cable channels, and streaming video services).

This study addresses a specific area of parental mediation that has not been addressed fully in existing research. As evident in the literature review, exposure to and mediation of television content for children – primarily infants through 12 years of age – has been studied extensively (e.g., Gentile & Walsh, 2002; Funk, Brouwer, Curtiss, & McBroom, 2009; Warren, 2001). Much research has also been done on the effect of

exposure to age-inappropriate movie content has on adolescents (Bushman & Cantor, 2009; Webb, Jenkins, Browne, Afifi, & Kraus, 2007; Villani, 2001). Given that research supports negative effects from exposure to certain types of content (Strasburger & Wilson, 2009; Villani, 2001; Brown et al., 2006) and that a movie can deliver far more of the negative types of content both in quantity and extremity than television — up to seven times as much (Greenberg et al., 1993), it is surprising that little research exists on parental mediation of movie viewing for adolescent children. This study begins the process of filling this gap in research.

This thesis contains a review of existing research that covers what motivates parents to choose their level and method of mediation for adolescents; the tools parents have at their disposal; the mediation process; and theoretical perspectives including parental mediation theory and third-person effect.

The review of the literature is followed by hypotheses and research questions raised by the review of existing research. The methodology section identifies the population, sample and sample selection process; a description of the instrument used and data collection process; measures studied; and an analysis of the findings. A discussion section, including implications for parents, media, and theory, follows the results section. Limitations of the study and implications for future research are also included in this section followed by a brief conclusion.

Chapter 2

Literature Review

This literature review will cover four main areas of the topic: the motivation for a parents to choose whether to mediate their adolescents' exposure to certain types of media content; the tools available for parents to use in mediation; the mediation process which includes mediation styles, selection of content to be mediated and locations where mediation may be needed; and theoretical perspectives on the parental mediation process including parental mediation theory itself as well as third person effect.

Reasons for Parental Mediation

Screenwriter Joe Eszterhas in a New York Times article (2002) writes, "A cigarette in the hands of a Hollywood star onscreen is a gun aimed at a 12- or 14-year-old," and psychologists Brad Bushman and L. Rowell Huesman said in their 2001 study (p. 248), "...media violence is not likely to turn an otherwise fine child into a violent criminal. But ... every violent show one watches increases just a little bit the likelihood of [that child] behaving more aggressively in some situation."

For more than 50 years, pediatricians and psychologists have conducted research supporting a significant impact of media content on beliefs and behaviors of children and adolescents. Exposure to on-screen behaviors is of great concern to parents who fear an increase in aggressive behavior, risky sexual behavior and substance use (Strasburger,

Jordan, & Donnerstein, 2010). Parents often see rules and monitoring of movie viewing as a way of reducing children's risk for early tobacco, drug, and alcohol use (Dalton et al., 2006).

While there is great concern over the amount of time and the content viewed on television, there seems to be far less concern over children and adolescent exposure to negative behaviors in movies. A 2006 study surveyed a group of children under the age of 13. More than 50% of them reported they were allowed to watch R-rated movies some of the time. And two-thirds of those children were allowed to watch these movies without a parent viewing with them. Half of the surveyed children indicated their parents did not need to know the rating of a movie before giving permission to watch the movie (Dalton et al. 2006).

It is important to understand that although the MPAA movie ratings system along with the ratings systems for television, video games and music are designed to inform parents of the content of the media and not to dictate to parents what content is suitable for their children (CARA website http://www.filmratings.com/how.html), consensus does exist among pediatricians, parents and other stakeholders that certain types of content are inappropriate for children and adolescents: violence; profanity; sexual images and language; and drug, tobacco, and alcohol use (Grube, 1993; Anderson, Gentile, & Buckley, 2007; Brown, Childers, & Waszak, 1990).

The effect exposure to this inappropriate content in media has on children is an area of extensive existing research and, while all media are covered in the various studies, the largest focus has been on television (Brown et al., 2006; Zimmerman & Christakis, 2005; Wright, Huston, & Murphy, 2001). The negative impact of observing behaviors of

on-screen characters on a child's early behavioral, cognitive and affective learning is well documented (Bandura, 1978). Bandura's theory of observational and social learning lends support to this study's focus on parents' mediation of adolescents' movie viewing.

Allowing children to view media with little or no parental mediation is often a function of working parents using media as a babysitter while the parents catch up on household chores and other activities they don't have time for during the workday (Rideout & Hamel, 2006). As children move into adolescence and the opportunities for exposure to inappropriate content increases, parents may or may not have the time or resources to re-engage in mediation practices.

Screen media viewing among adolescents is a complex activity, full of dynamic relationships that go beyond a parent-child perspective. Physical, cognitive and social development also contribute to the effects media have on adolescents (Anderson & Pempek, 2005; Kcrmar, Grela, & Lin, 2007; Linebarger & Vaala, 2010; Wartella et al., 2010). Researchers also suggest the maturity of the child is an important mechanism affecting children's viewing experiences — screen media experiences vary depending on the age of the child (Anderson & Hanson, 2009; Barr et al., 2008).

However, no matter what the age of the child or adolescent, all of the stakeholders in children's media use effects have concerns about the possible negative outcomes exposure to certain types of content (American Academy of Pediatrics, 1999, 2001; Children's Television Act, 1990; Christakis et al, 2009). This includes the imitation of on-screen behaviors and the adoption of on-screen attitudes relating to violent behavior; early and risky sexual behavior; and early and increased tobacco, alcohol, and illegal

drug use. There is also research that indicates the amount of exposure to these types of media content can have a detrimental effect on academic performance by adolescents (Gentile, Lynch, Linder, & Walsh, 2004).

For at least 60 years, violence in the media has been of great concern to parents and health care providers, particularly when it comes to consumption of this violent media content by children (Anderson et al., 2003). Increased violent and aggressive behavior, tolerance of those behaviors in others and fear for one's safety in a "mean world" are possible effects of exposure to violence in various forms of media (Browne & Hamilton-Giachritsis, 2005). Some research has shown viewing violent content can lead to short-term episodes of increased aggression and/or long-term residual effects that can lead to increase instances of aggressive behavior and spousal abuse as an adult (Rothenburg, 1975; Anderson et al, 2003).

Despite this concern, the amount of violent content and the severity of the content in video games, television and movies is increasing (Webb, Jenkins, Browne, Afifi & Kraus, 2007). Research has shown parental mediation of violent television content for children 12 and under to be an effective measure in limiting short- and long-term effects.

Parents and health care providers are also very concerned about the effect viewing media with sexual content and sexual language can have on increased early and risky sexual behavior in children and adolescents. These behaviors can include the intent to engage or actually engaging in sexual activity ranging from body exposure and nudity to touching, kissing and sexual intercourse at an earlier age than adolescents who have had less exposure to this type of content (Pardun, L'Engle & Brown, 2005; Brown et al,

2006). Research also indicates a greater likelihood that adolescents engaging in these behaviors will have more sexual partners, more unplanned pregnancies and more sexually transmitted diseases.

One of the primary reasons adolescents are imitating on-screen sexual attitudes and behaviors is that there are rarely any consequences to the characters' sexual behavior. Very few on-screen teens get pregnant. Those pregnancies that do occur on screen are unrealistic in the depiction of what teen pregnancy is actually like. There is little to no discussion in most television shows and movies about the consequences of practicing unsafe sex.

One notable exception is the MTV reality series *Sixteen and Pregnant*, which attempts to portray teen pregnancy and motherhood in a realistic way. Some critics of the show feel making pregnant teens "TV stars" glamorizes teen pregnancy. However, a review of the content clearly shows the pregnancies, births and subsequent lives of the pregnant teens are not glamorous. Through accounts of health issues for the babies and mothers along with relationship difficulties with the children's fathers, the target audience of 12- to 24-year-old females sees some of the potential consequences of early and unprotected sexual activity (Kearney and Levine, 2014). Kearney and Levine report a decrease in teen pregnancies and an increase in Internet searches and Twitter activity regarding birth control corresponding with the run of the show. Further research to support this connection could provide parents, health care providers and television content creators with information that could deliver more positive health outcomes.

Other risky on-screen behaviors often imitated by adolescents are smoking, drinking, and drug use. Not only are these behaviors illegal for adolescents, they can lead

to negative health outcomes. Early tobacco users have an increased risk of lung cancer, emphysema, high blood pressure, and heart disease later in life. The same is true of adolescents who begin consuming alcohol at an early age. Alcohol-related disorders are more likely in those whose initiation into alcohol use occurs in adolescence rather than young adulthood (Dewitt, Adlaf, Offord & Ogborne, 2000). One of the few studies about parental mediation of media consumption by adolescents indicates parents with stricter mediation rules reported fewer occurrences of underage smoking, drinking, or drug use (Dalton et al., 2006).

Each of these behaviors — violence, aggression, early and risky sexual activity, and tobacco, alcohol, and drug use — combined with the sheer amount of time children and adolescents spend consuming media, can have a significant effect on academic performance (Sharif & Sargent, 2006). It is important to understand media can also have a positive effect on academic performance with appropriate content and appropriate time limits (Strasburger, Jordan, & Donnerstein, 2010).

Tools for Mediation

Once a parent decides mediation is necessary, there are various tools that can help in the mediation process. The primary tool used by parents is a system of industry-specific ratings (Williamson, 2009). All of the main sources of media – television, video games, music, and movies – have ratings systems. These ratings systems are age-based and provide a varying degree of information parents can use to determine whether material is suitable for their children to view (Valenti, 2000; Cantor, Stutman, & Duran, 1996; ESRB website, 2013).

Another tool is content-based reviews. These reviews are mostly online and are provided by various sources. They go beyond the evaluative nature of age-based ratings and provide specific details on the content.

Parental controls such as the V-chip in televisions, content filters and password protection give parents physical control over their adolescent children's media access.

Parents' use of physical controls is limited by complexity, knowledge and convenience.

Media ratings. Media ratings have become ubiquitous, but it is important to remember the purpose the ratings systems for various media were designed to serve – to provide parents with information to help them make viewing decisions for their children (Valenti, 2000; Jenkins et al., 2012). This assumes two conditions according to Douglas Gentile (2010). First, media content can cause harm or deliver benefits; and second, by using the ratings system, harmful effects can be reduced or eliminated and beneficial effects can be increased. Gentile places the burden of accuracy and validity on the ratings agency as a requirement for meeting the second condition.

Other studies have reinforced Valenti's statement and Gentile's research showing the MPAA ratings have minimal if any effect on viewing habits of adults (Austin, 1980) and that the main goal of any media ratings system is to inform parents (Cantor et al., 1996).

This study focuses on parental mediation of movies. However, research of television and video game content is closely related. Therefore, information on the TV Parental Guidelines and the ESRB ratings is included along with the Motion Picture Association of America ratings for movies.

Movie ratings. The Motion Picture Association of America (MPAA), under the guidance of Jack Valenti, created a ratings system in 1968, primarily as a way to avoid government regulation of the content of movies (Mosk, 1997). This was not, however, the first attempt at self-censorship by the motion picture industry. Valenti's system replaced the Production Code, also known as the Hays Code, which was adopted in 1930 and was named after former Postmaster General Will Hays. Hays led the Motion Picture Producers and Distributors of America (MPPDA which later became the MPAA) and was instrumental in helping the motion picture industry in its efforts to combat national and local censorship of films (Moley, 1945). The Hays code consisted of a formula that was in essence a rather ambiguous resolution of the MPPDA to adhere to the "highest moral and artistic standards of motion picture production." (Moley, 1945, p. 58). This formula was paired with a production code list known as the "Don'ts and Be Carefuls." The "Don'ts" were a list of 11 things that could never be included in a movie such as profanity, nudity, illegal drug trafficking, and ridicule of the clergy. The "Be Carefuls" were 26 issues with which great care was to be taken in how they were treated in a motion picture. The list included arson, the American flag, theft, a man and woman in the same bed, sedition, animal cruelty, surgical operations and kissing (Moley, 1945). Movies that did not adhere to the code did not receive the MPPDA's stamp of approval. This spelled commercial ruin since very few theaters would exhibit such a movie (Kaiser Report, 2002)

This system was a far cry from the age-based ratings system in place today.

Valenti's system originally placed films in one of four categories: General (G), which had no age restrictions and was deemed appropriate for all audiences; Mature (M), which

advised parental guidance; Restricted (R) which prohibited anyone younger than 16 from viewing the movie unless accompanied by a parent or guardian; and Adults Only (X), which prohibited anyone younger than 16 from being admitted to see the movie (Mosk, 1997).

In 1969, the MPAA ratings were modified. The M was changed to GP and still recommended parental guidance for movies with this rating. The R rating was changed to require an accompanying parent or guardian for children under the age of 17, while the X rating age was raised to 17 for admittance. To avoid confusion, the GP rating was changed to PG in 1971 (Mosk, 1997).

In 1984, a new rating was added. The PG-13 rating was introduced to inform parents that the content of a movie with this rating might be unsuitable for children younger than 13 years of age (Nalkur, Jamieson and Romer, 2010). It is important to note PG-13 is solely an informational rating, not a restrictive rating. This means if the parent of an 11-year-old child drops the child off at the box office of a theater, the child can purchase a ticket and view a PG-13 movie (CARA Website, 2012).

In 1990, the "X" rating -- which had come to symbolize pornographic movies in the United States -- was changed to NC-17. This rating prohibited admission to anyone 17 and under (Mosk, 1997) and clarified the wording of the age requirement that had stated X-rated films refused admittance to anyone under 17 when in practice, theaters only admitted those 18 and older to movies rated X. Figure 2.1 shows the current MPAA ratings and the CARA explanation.

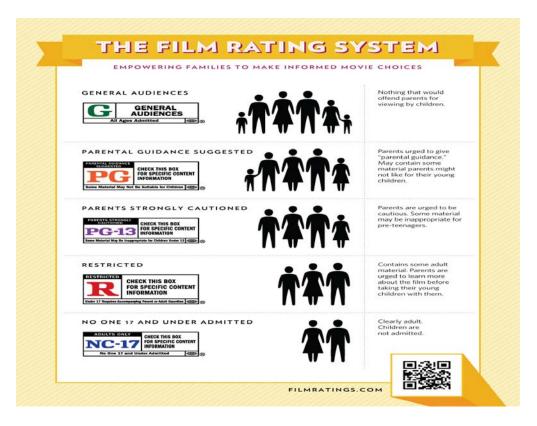


Figure 2.1 MPAA ratings chart. Source: CARA website.

Television ratings. In 1996, Congress, through the Telecommunications Act, required the television industry to create a ratings system called the TV Parental Guidelines with four age-based ratings for general entertainment programming and two additional ratings specifically for children's programming (Abelman, 2009). The ratings for general programming are: TV-MA, for mature audiences only; TV-14, parents strongly cautioned; TV-PG, parental guidance suggested; and TV-G, suitable for all audiences. The two ratings for children's programming are: TV-Y7, suitable for children 7 and older; and TV-Y, suitable for children of all ages (tyguidelines.org, 2013).

A year later, the system was revised to include additional content information to help parents make more informed decisions about which programs they allowed their

children to view. The content ratings are (V), violent content; (S), sexual content; (L), coarse language; (D), suggestive dialogue; and (FV), fantasy violence. The ratings appeared in the corner of the television screen for the first 15 seconds of a program and also appeared in most newspaper TV listings and television guides (Abelman, 2009). Figure 2.2 shows details for the television guidelines.

Programs are voluntarily rated by broadcast and cable television networks and/or program producers. Some networks provide detailed information about the ratings in addition to using the ratings for most programming that appears on television. News, sports, religious and home shopping programing do not usually have ratings.

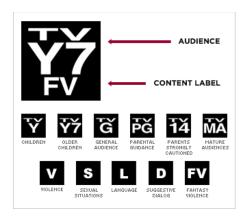


Figure 2.2 – Television Guidelines. Source: legacyforhealth.org

Video game ratings. Video games are another area of concern for parents regarding the content their children view, leading many parents to mediate video game-playing by adolescents. The Entertainment Software Ratings Board (ESRB) designed a ratings system to serve the same purpose as the MPAA ratings for movies – to inform parents about the content in a video game so they can determine which games they feel

are appropriate for their child(ren) (Dimaria, 2007). As seen in Figure 2.3, the ESRB ratings are similar to the MPAA ratings and the TV Parental Guidelines.

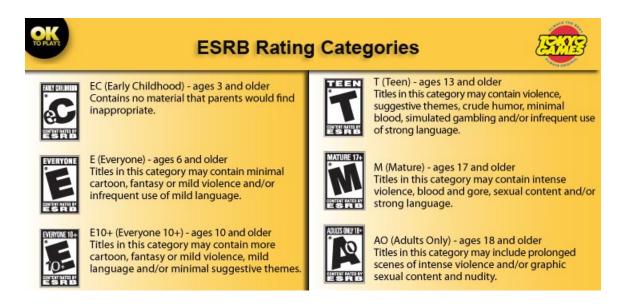


Figure 2.3 ESRB Video Game Rating Chart. Rating Category assignments can also be based upon a game or app's minimum age requirement. Source: tokyogames.com.

Parental use of and satisfaction with movie ratings. Current research regarding the MPAA ratings system offers two perspectives of the accuracy and usefulness of the system. The MPAA conducted a survey of parents and self-reports that nearly 85% of parents find the MPAA ratings useful (Williamson, 2009). This seems to indicate there is little room for improvement. The vast majority of studies (Cantor, Stutman, & Duran, 1996; Rich, 2007), however, indicate many of the parents who use the MPAA ratings system do so because it is familiar and easy to access since most motion pictures released in the United States are rated by the MPAA. Also, the survey Williamson referred to was actually conducted in 1999. A search turned up no survey on this subject by the MPAA

since then so the parent satisfaction numbers reported by Williamson may be the most recent available.

The MPAAs rating system has come under much scrutiny for perceived "ratings creep." Ratings creep is the phenomenon where the ratings for movies have become more relaxed as a function of time and perceived shifting values by CARA (Leone & Houle, 2006; Gentile, 2010). For example, studies show there is content in current movies rated PG-13 that would have received an "R" rating just 10 years ago.

Whether or not ratings creep exists, many parents find the ratings system less than adequate because it does not provide enough detail about the content. Some parents seek information about content so they can make a determination about the suitability of viewing of a film by their children (Williamson, 2009). When the MPAA assigns a rating, PG-13 for example, and a content based justification for the rating, there is a sense of vagueness that doesn't help parents in their decision making process. If a movie is rated PG-13 for brief nudity, a parent has no way of knowing how brief the nudity is, whether it is male or female nudity, or in what context the nudity appears. The same goes for language. Even if the content-based statement from the CARA states a movie received an R rating for pervasive language, parents do not know which words are used, how many times specific words are used, or in what context the words are used. One parent might feel it is appropriate for a child younger than 17 to view a movie in which the word "damn" is used 50 times, but be opposed to the same child hearing a different profane word even once. For example, the MPAA rating for Grown Ups 2 and The King's Speech is PG-13 (The King's Speech was originally rated R by the MPAA ratings board, but successfully appealed the rating) with a descriptor for language (CARA

website). Content-based reviews of these two movies provide much more detailed information about the language in question and illustrate the disparity in content that can receive the same rating and descriptor through the MPAA ratings system. Here are the language sections for these two movies from Focus on the Family's *Plugged In* website.

(*Grown Ups 2*) One s-word. Lenny tells his son that he's "fugly" (that all the men in their family are). We hear "a--" (a dozen times), "d--n" (eight), "h---" (three), "b--ch" (one) and "d--k" (one). God's name is misused 10 or more times. ("Grown Ups", n.d.)

(*The King's Speech*) Close to 20 each of f- and s-words. Christ's name is abused twice, and God's is misused at least once. The British crudity "bloody" is used more than a dozen times. Another British profanity, "b-gger," is used about 10. There's a handful each of the words "d--n," "b--tard," "a--" and "h---." Crude slang is used for sexual anatomy ("t-ts," "pr--k," "balls" and "willie"). ("The King's Speech", n.d.)

Content-based ratings and reviews. Content-based reviews provide information about the content that is missing from the age-based MPAA ratings. A content-based review can provide specific details, such as how many times a certain profane word is used or how many seconds of on-screen nudity are present. Number of deaths, specific instances of drug and alcohol use, as well as a qualitative assessment of whether the use was portrayed in a positive or negative way, are all components of content-based reviews.

The specificity of these reviews makes it clear why most parents prefer content-based ratings. Only 18% of parents feel they get all of the information they need from the MPAA movie ratings to make viewing decisions for their children (Gentile, Maier, Hasson, & de Bonetti, 2011). In fact, research shows only 27% of parents prefer the MPAA type of movie ratings. Clearly, some parents want a way to know what is in the movie rather than have someone tell them what is suitable for their children solely based on age (Cantor et al., 1996).

A list of some of the most frequently used content-based review organizations can be found in table 2.1. While some of the organizations have religious affiliations, the overriding concern is providing parents with enough information to make informed decisions about their children's movie viewing.

Table 2.1 List of Content-Based Review websites. Source: Compiled by author

Organization	Website
Kids in mind	Kids-in-mind.com
Movie guide	Movieguide.org
Commonsense media	Commonsensemedia.org
Screenit	Screenit.com
Cinema Review	Cinemareview.com
Parent Previews	Parentpreviews.com
Focus on the Family	Pluggedin.com
Rotten Tomatoes	Rottentomatoes.com

Parent peer group recommendations. Review of the literature found no research that described parents talking to other parents about the movies their children want to see. It is unlikely this method of gathering information about movies is used so little that it is insignificant to the topic of parental mediation. It would seem any parent who has a family member, neighbor, friend, or acquaintance in the same peer group or social circle would be a resource for movie information. This is a gap in parental mediation research and deserves further examination.

Physical control of media. Evolving technology is a double-edged sword when it comes to parental mediation of their children's media consumption. With the ability to view movies, not only on TV, but also on DVD and Blu-Ray discs, computers, desk top and laptop, tablets, video game devices, and even mobile phones, parents have a lot more media real estate to oversee. Fortunately for parents who want to actively mediate access to certain movies, technology has supplied some tools. The Telecommunications Act of 1996 required all televisions to have V-Chip technology, which uses the television program ratings required by the Act to filter content (Thierer, 2007). The V-Chip is mandatory on all televisions larger than 13 inches manufactured as of 2000 (Cantor et al., 1996). TV Guardian DVD players, which use close captioning signals to filter out profanity (Family Safe Media, 2013), offer parents another hardware-based option for mediating content. Other technical mediation options include software-based filters from content providers that enable parents to block content by rating, channel, time and quantity (Thierer, 2007), and password protection on content streaming services such as Netflix and Hulu.

The availability of these and similar tools will continue to increase as technology continues to develop. Currently, however, the majority of parents do not make use of these tools. A Kaiser Foundation study (2007) reported 57% of parents who have purchased a television since January 2000 were unaware their TV(s) had V-Chips. And of those who were aware, less than 28% actually used the V-chip on a regular basis. This is a significant increase from 2003, when a study indicated the number of regular V-Chip users was at seven percent of parents who knew their TVs were equipped with the chips (Martin, 2003). Those numbers may continue to increase as education efforts continue, but there has been no empirical support of this in research reviewed for this study.

Mediation Styles

Parental mediation of media content of children has been studied in depth and many names have been given to the styles. For purpose of this thesis, mediation strategies will be based on the Valkenburg, et al. study, which created a scale to measure three strategies: Instructive, Restrictive, and Social Co-viewing. Valkenburg later added a fourth mediation strategy, called unfocused mediation. For the purposes of this study, this fourth strategy will be called non-mediation (Valkenburg, Krcmar, Peters, & Marseilles, 2009).

This typology has been primarily applied to television mediation (Austin, 1993; Warren, 2001, 2003; Nathanson, 2002) and to lesser degrees to video game playing (Nikken et al., 2006); Internet use (Livingstone & Helsper, 2008); and movie viewing (Dalton et al., 2006).

Instructive. Instructive mediation takes place when a parent has active discussions with the child about the content. This discussion can take place either before

or after viewing (Valkenburg et al., 2009) and has also been called Active or Evaluative mediation (Austin, 1993; Nathanson, 1997). It is not necessary for the parent and child to view the content together or even for the parent to have seen the movie, only that the parent takes the opportunity to inform the child or answer questions the child may have about the content.

Restrictive. Restrictive mediation is just as it sounds. It is sometimes referred to as Rule Making mediation (Atkin, Greenburg, & Baldwin, 1991). Using restrictive mediation, parents control their children's media consumption either with time restrictions such as only allowing 30 minutes of television viewing per day or only allowing video game playing on weekends. Some parents use a restrictive system of mediation, requiring the child to spend an equal amount of time exercising or reading as is spent watching TV or playing videos. The combinations of time restrictions are endless and are primarily used with younger children.

Parents also use restrictive mediation by restricting the type of content they allow to be viewed. This is done primarily through various media rating systems; however, restrictive mediation can also be used to enforce very specific rules. A parent may set limits based on media rating, such as prohibiting viewing of PG-13 movies until the child reaches age 13, or based on specific type of content they wish to keep the child from viewing (Vandewater, Park, Huang, & Wartella, 2005).

Social co-viewing. Co-viewing as a mediation strategy is primarily used with younger children. With co-viewing, parents watch the movies, play the video games or listen to the songs with the children. This serves dual purposes. First, it enables the parents to see the content firsthand and not rely on the judgment of others to determine

what is best for their children. It also provides a bonding experience for the parent and child (Bryce & Leichter, 1983). Discussions of the content do not necessarily take place during or after Social Co-viewing. Time and the increase in movie viewing locations make this a less-used method of parental mediation as children reach adolescence. Often, however, parents use both Social Co-viewing and Instructive mediation styles in tandem (Livingstone & Helsper, 2008; Valkenburg, Krcmar, Peeters, & Marseilles, 1999).

Unmediated. A fourth strategy of mediation that has not garnered the focus of many researchers is the decision to not mediate adolescent media use. Valkenburg et al. (2009) refer to this as unfocused mediation, but do not include it in the scale because of a lack of face validity. There are several possible reasons for not mediating adolescent media use.

- The parent feels the child is old enough to make the decisions on which media to view.
- 2) The parent feels the child is mature enough or has been raised with sufficient values that the media content will not have a negative impact on the child (see Third Person Effect discussion later).
- 3) The parent does not believe media have negative effects or see the content as inappropriate. This is usually evident in a parent's media viewing practices mirroring what they allow their children to view. For example, a parent who watches a lot of violent content will be less likely to mediate violent content viewing by their child.
- 4) The parent is unaware of mediation tools.

- 5) The working or single parent might feel a need to mediate, but not have the time.
- 6) The parent gives in to peer pressure from other parents or the peer pressure their child experiences.

In most cases, these four mediation strategies are not mutually exclusive. Parents use combinations of these strategies (Barkin et al, 2006) and the balance of use shifts over time as children age and have increased opportunity to view movies in locations where parents are unable to co-view or have less oversight over the movies being watched, such as a friend's house, or simply behind a closed door of a bedroom with a TV in it (Jackson, Brown & Pardun, 2008).

Movie Mediation Locations

One of the biggest challenges facing parents who do wish to mediate their children's media consumption is the vast array of locations where the media — specifically movies as the focus of this thesis — can be viewed (Villani, 2006). Historically, most movies have been viewed in theaters. Whether it was the Hays Code which prevented movies with objectionable content from being shown in most theaters (Moley, 1945) or Valenti's MPAA ratings system which proposed to rate movies based on what the raters believe the average parent would deem objectionable (Valenti, 2000), many parents relied on the theater employees to prevent their children from gaining admittance to age-inappropriate movies.

Movie watching in the home has evolved dramatically over the past 40 years. For years, movies were broadcast by one of the big three networks and followed the FCC guidelines for content. With the advent of cable, control over the content began to

diminish since the cable channels were not held to the same content standards as the broadcast channels. Still, the cable channels in practice mirrored the broadcast guidelines for content shown during the hours a child could be expected to be viewing television. In 1980, premium channels HBO and Showtime began to show unedited theatrical releases. The channels primarily used the MPAA ratings, but soon added content descriptions. In today's cable environment many channels outside of the premium tier offer uncut or slightly edited versions of movies.

Videocassette recorders (VCRs) offered opportunities for home movie viewing like never before. Whether movies were rented or owned, having a video and a VCR in the home added a new layer to parental mediation requirements.

As the number of televisions per household increased from one, usually in a family area, to multiple sets, so did the number of VCRs per household. This led to more private viewing. Making the VCR and TV in a child's room or secondary viewing area in a home the "babysitter" raised concern over the content being viewed and the amount of time spent in front of the television.

As technology has continued to advance, with DVDs and Blu-ray discs, the availability of all content and access to the technology has increased for today's youth. With the addition of DVD players to computers, the need for even a TV and DVD/Blu-Ray player is eliminated. The computer provides another location for movie viewing.

The rapid evolution of media technology provides more opportunities for adolescents to access content without the traditional parental controls. Mobile movie viewing began with portable DVD players, which allowed movies to be watched anywhere. These popular devices had no V-Chip or parental controls, so a DVD of any

rating could be viewed in relative privacy by anyone of any age. Now, video on demand and streaming services offer access on laptops, tablets, phones, and even portable game players. Determining how a parent can physically control this virtually unlimited access to movies is beyond the scope of this thesis, but worthy of future research.

Video streaming is a technological advance offering access to unedited movies. At most theaters, a teen must provide proof of age to see an R-rated movie without a parent. Most video stores require ID for renting tapes, DVDs or Blu-ray discs, but once a video streaming service such as Netflix or Hulu is purchased and activated, there are no external controls on what content is streamed. Parents can use parental controls as one form of mediation, but many parents aren't even aware these controls exist -- or, if they are aware, don't know how to use them (Kaiser, 2007; Thierer, 2003). YouTube is another video streaming service viewable by anyone with Internet access. One issue that makes it difficult for parents to mediate streaming services is the ability to share passwords. For example, Netflix allows users to access their accounts on up to five devices at the same time. Therefore, an adolescent whose parents prohibit viewing of R-rated content either through restrictive mediation or parental controls, could use the Netflix password of a friend whose parents don't restrict the viewing of R-rated content.

One of the most important inhibitors to effective parental mediation is the paradigmatic shift away from family TV viewing toward individualized viewing. Factors contributing to this shift are the increase in the amount of content available, the increase in the number of television sets per household and the rise in the number of children and adolescents with televisions (and VCRs, DVD players and Blu-Ray players) in their bedrooms. Add the proliferation of tablets, personal video game devices, and

smartphones capable of accessing, downloading and playing unedited movies in any location, and the potential for effective mediation is greatly reduced.

Research shows many parents are putting TV and video players in the bedrooms of children as young as 2 years (Courage & Howe, 2010; Rideout & Hamel, 2006).

Whether these devices are used to "free up" other TVs in the house (Rideout & Hamel, 2006; Jackson, Brown & Pardun, 2008) or to serve as babysitters, children with access to movies and other media in their bedrooms are exposed to greater amounts of content, and parents are less consistent in monitoring the amount or type of content viewed (Gentile & Walsh, 2002).

While some physical controls such as password protection are available, as noted earlier in Thierer's (2003) and the Kaiser Foundation's reports (2007), most parents aren't using the mediation tools available, relying instead on the establishing and enforcing mediation rules for movies and other media content.

Another aspect of parental mediation that has gone largely unstudied is how parents who mediate enforce their mediation strategies and rules when their children are away from home. We have already discussed seeing films at a theater and the mediation styles and rules parents use at home. But what about when their children are at friends' houses where the parents don't have similar (or any) mediation philosophies? The Dalton, et al 2006 study showed only 20% of children under 13 reported that their parents wanted to know what movies they watched when at friends' houses. Do these parents expect their children will follow their movie viewing rules? Do they coach their children on how to handle these situations? This is another gap in research that could have a significant impact on the content adolescents are exposed to when outside of the home.

Many schools use movies for educational and recreation purposes for students. The policies governing which movies are shown are determined by the school districts. Recently it was reported that a Nevada school was considering changing its policy from only showing movies rated PG or lower (and only showing PG-rated to students with written parental permission) to showing PG-13 and R-rated movies without requiring permission from parents (Takahashi, 2012). No research was found on viewing of movies in schools; this could be an important focus of future content mediation research.

Theoretical Perspective

This study uses two mass communications theories to develop hypotheses: parental mediation theory and third-person effect.

Parental mediation theory. The primary theoretical underpinning for this study is parental mediation theory, originally developed as a way of explaining the role parents played in controlling their children's exposure to television (Clark, 2011). The theory has expanded to include other forms of media (movies, music, video games) and delivery methods (DVD, Blu-Ray, streaming video, mobile phones).

Parental Mediation Theory comprises three strategies: instructive (where parents discuss content before and/or after viewing by their children), restrictive (parents set limits on media viewing), and co-viewing (parents watch the content along with the children) (Valkenburg, Krcmar, Peeters & Marseille, 1999).

Three strategies for parental screen media mediation strategies were defined by Valkenburg, Krcmar, Peeters and Marseille (1999). Valkenburg et al. (1999) constructed a scale found to reliably measure each of the three styles of mediation. These three strategies are referred to by Valkenburg et al. (1999) as instructive (sometime referred to

as active), restrictive, and social co-viewing. Instructive mediation occurs when parents interact with children and discuss the content that has been or will be viewed by the adolescent. Restrictive mediation occurs when parents set rules on amount and/or type of content that can be viewed. Social co-viewing was explained as a more recreational, passive activity in which parent-child interactions focused on bonding and relaxing together (Valkenburg et al., 1999). Instructive mediation strategies have been suggested to be positively related to comprehension and learning outcomes in children. The majority of research on parental mediation indicates two or more of the strategies are often combined to create the parents' overall mediation style (Anderson & Pempek, 2005; Fender, Richert, Robb, & Wartella, 2010; Krcmar, Grela, & Lin, 2007).

The fourth mediation strategy is non mediation, sometimes referred to as unfocused mediation. These actually could be two separate mediation strategies as no mediation means an absence of mediation either because a parent feels it is not needed due to the maturity of the child or, more likely, a belief that media content has no negative effect on the child. Unfocused mediation is a lack of a cohesive or consistent manner of mediation. This is often seen in households where both parents work outside the home or those led by single parents who don't have the time to mediate as they otherwise might choose to do (Valkenburg et al., 2009).

The majority of parental screen media mediation research has focused on young children (age 12 and under) and most of those focus on mediation of television. The present investigation is unique in that it assesses self-reports of parental mediation strategies collected using a parent questionnaire focused on adolescents 13 to 17 years old. This study also focuses on movie watching rather than television viewing.

Current research regarding parental screen media mediation of young children has shown mixed results regarding the strategies most often used by parents. Warren (2001, 2003, and 2005) investigated parents' use of mediation strategies based on the Valkenburg et al. (1999) scale of mediation strategies defined above. Warren's research indicated parents most often reported using a restrictive mediation style during screen use by children aged 1 to 12 years old. The social co-viewing strategy is most often used by parents of 5- to 12-years old children (Valkenburg et al., 1999). Parents of younger children (5 to 8 years old) use instructive mediation more than parents with older children (9 to 12 years old). Also, parents of children in this age range typically use more than one mediation style (Barkin et al., 2006; Valkenburg et al., 1999; Warren, 2001, 2003, 2005)

Research shows parents' attitudes towards screen media have an effect on the type, if any, of mediation style used with their children (Gutnick et al., 2010; Rideout & Hamel, 2006). Research suggests parents who believe media have positive or no effects spend more time co-viewing, using media viewing as a time to strengthen the parent-child relationship (Nathanson, 2001; Valkenburg et al., 1999). Positive and neutral parental attitudes toward media effects have also been associated with parents allowing more media time for their children (Nathanson, 2001; Valkenburg et al., 1999). Parents who believe media has negative effects on children are more likely to use restrictive mediation (Gutnick et al., 2010; Nathanson, 2001; Rideout & Hamel, 2006; Valkenburg et al., 1999). This restrictive method can include limits on content and/or amount of media use allowed (Valkenburg et al., 1999; Nathanson, 1998). It is one of the purposes of this study to determine whether parents' beliefs on the effects of media influence the mediation styles they employ in regard to movie viewing as their children move into and

through the adolescent years.

Third-person effect. Third-person effect theory is interesting in that it has evolved since W. Phillips Davison (1983) first formulated the hypothesis as it related to public opinion situations. Davison's research indicated most people felt persuasive communications or propaganda would have greater success in persuading others than on themselves. Early third person effect research focused mainly on adults and their perception of how mass communication affected others versus self. Davison used a 0 to 7 scale to measure responses. No influence at all was scored a 0 and very great influence scored a 7. The difference in score between the effect of the communication on others, versus the effect of the same communication on self, is the third-person fffect (Davison, 1983). It is interesting in light of this study that even in the early stages, Davison included an experiment on "other people's children" and the effect watching TV had in making other people's children ask parents to buy products advertised on television. Davison compared this to the respondents themselves being influenced by TV as children.

Later research expanded this area of the theory to focus on parents' perception of media effects on their own versus other children (Meirick, Sims, Gilchrist & Croucher, 2007). The Meirick et al. study (2007) focused on materialism effects and used a scale similar to Davison's, with a 1 indicating no influence at all and 7 indicating a great deal of influence. Relating third-person effect to parental mediation is supported by this study as well.

Expanding this further, it is easy to relate the effects of inappropriate media content to third-person effect and parental mediation. Hoffner and Buchanan (2009)

conducted a study regarding parents' perception of television violence and its effects on their children versus other children. This study used a 5-point scale instead of the 7-point scale used in earlier studies, but the results were similar.

Even though they feel their children may be affected to a lesser degree than other children, this does not mean the parents have no concerns about the effects of media exposure, or feel mediation is unnecessary. Rather, third-person effect indicates a greater level of mediation would be needed for other adolescents who may not be as mature and well-adjusted as their own children, and therefore more susceptible to the effects of media. They may feel their children are mature enough to view the content without imitating the behavior (Strasburger, Jordan, & Donnerstein, 2010: Paul, Salwen & Dupagne, 2000).

Hypotheses and Research Questions

The literature review indicates the majority of parents use some form of mediation strategy to control media consumption by younger children. The few studies that focus on adolescents study television, video game playing and Internet use rather than movie watching. These studies indicate restrictive mediation is the primary strategy used for adolescents. Given the purported effects that viewing movies with inappropriate content may have on adolescents, determining what form (if any) of mediation used to mediate movie viewing in adolescents should be similar to mediation strategies for other media.

H1: Restrictive mediation is used more than instructive or social coviewing for parental mediation of movie viewing by adolescent children.

H2: The older the adolescent, the less likely the parent will use any mediation.

While most parents prefer content-based ratings to the MPAA ratings system, the MPAA ratings are so ubiquitous that most parents tend to rely on the ratings and adhere to the ages used by the MPAA. Therefore:

H3: Parents use the MPAA ratings systems for mediation strategy more than content-based ratings and reviews.

Research on television mediation with younger children indicates parents who have a positive view of television content are less likely to mediate the viewing habits of those young children. It is reasonable therefore to expect parents would react the same way toward mediation of movie viewing by adolescents if they have a positive view of movie content.

H4: Parents' level of perception of the negative effect on adolescents is related to the level of mediation.

While some research indicates a reverse third-person effect as it relates to the effects of media use, and some research indicate a neutral component, the vast majority of people think they (and by extension, their children) are less likely to be negatively affected by exposure to negative media content.

H5: Parents believe their adolescents are less likely to be affected by inappropriate media content in movies than other adolescents.

H6: Parents who exhibit a third person effect about themselves regarding negative effects of movie content are more likely to perceive a third person effect in their adolescents.

One question the research has not addressed is whether parents who exhibit a clear third person effect as it applies to the effect of inappropriate content on their own children versus other children are more or less likely to use mediation, and, if so, which mediation strategy will they use.

RQ1: How does belief that one's child is less affected by inappropriate content in movies than other children correlate with parents' decisions to mediate movie watching?

RQ2: How does belief that one's child is less affected by inappropriate content in movies than other children correlate with style of mediation used?

Chapter 3

Methodology

The population for this study is parents in the United States who have at least one child who is currently between the ages of 13 and 17 years. A national sample was selected using Amazon.com's Mechanical Turk (MTurk). MTurk has been successfully used in social science research since the tool was released to the public by Amazon.com in 2005. A total of 400 responses were requested to respond to a questionnaire created using Qualtrics online survey software. The University of South Carolina Institutional Review Board (IRB) approved the survey for use in gathering data for this thesis. A Microsoft Word version of the questionnaire is included in Appendix A.

MTurk was used because of its ease of use, ability to quickly reach a national sample at a reasonable cost, and ability to link to a survey instrument in Qualtrics. Also, once funded, MTurk pays participants directly, saving additional time.

Using MTurk as a tool to gather data for academic research, and specifically social science research, is becoming more commonplace because of the benefits noted above along with research that shows MTurk draws at least as representative a sample as other Internet means. Data obtained through MTurk also are as reliable as data gathered through more traditional methods (Buhrmester, Kwang & Gosling, 2011; Paolacci, Chandler, & Ipeirotis, 2010; Berinsky, Huber, & Lenz, 2012).

The Qualtrics survey instrument was tested by a representative test group of parents (N=75) with at least one child between the ages of 13 and 17 years who lived in the household. The test group of parents was recruited from a local church. After completing the survey, the parents were provided the opportunity to provide feedback on the clarity and usability of the survey instrument. After testing, the instrument was revised for length and clarity of some questions.

Measures

The survey was designed to capture parents' movie mediation strategies for adolescents by asking questions based on the Valkenburg et al. mediation scale. Using Likert-type 7-point scales, questions were designed to measure the likelihood of parents using one of the three mediation strategies outlined earlier in this study: Instructive, Restrictive, and Social Co-viewing. These questions measured parents' decisions to choose one strategy, combine strategies in an overall mediation plan, or, by indicating they don't use any of the strategies, support the fourth mediation strategy: Non-mediation.

In seeking to measure how parental mediation is related to third-person effect, questions were included that asked parents to rate the likelihood that various types of content will have a negative effect on their children, and in separate questions, if those same types of content will have a negative effect on adolescents in general. To strengthen the third person correlation, the same questions were asked about parents: How likely is it that they would be negatively affected by the various type of content, and how likely is it that adults in general would be affected negatively by the same types of content?

To measure any relationship between parents' feelings about the ratings and other information available to help mediate, questions were asked about parents' use of the MPAA ratings system and content-based ratings and review information that is available.

As a precursor to determine the perceived need for mediation, an early question in the survey asked parents if they feel certain types of content can have negative effects on adolescents.

General demographic questions regarding number of televisions in the home, race, education, income level, religious affiliation and marital status were included to measure whether these variables are predictors of mediation in general or of use of a particular mediation strategy.

Responses

The number of completed surveys recorded by Qualtrics totaled 465. Review of the responses revealed 37 of these contained an invalid response to the validation question, "How many times have you starred in a movie that you watched with your child." The valid answer was "Never". The 37 surveys in question responded either "Once" or "Twice". These surveys were deleted. Review also revealed 16 of the surveys were completed in less than six minutes, which was less than half of the average completion time. MTurk reported these times, and they were verified in Qualtrics. It was estimated six minutes was the minimum amount of time for completion of the survey with reliable responses. These 16 surveys were therefore deleted. There were two cases of duplicate MTurk User ID numbers, which each respondent was required to enter. The second survey for each of these was deleted. Additionally, 12 responses were deemed unreliable because the mother's age was given as less than 28, which was determined to

be the minimum age for the mother to have a child aged 13 to 17 years. This left a sample of 398 surveys used in this study. Figure 3.1 shows the distribution of the responses by zip code, The map was plotted using eSpatial online mapping software.



Figure 3.1: Survey response map by zip codes

Chapter 4

Results

This chapter reports the results of this study. It begins with an overview of the mediation styles used, followed by tests of the hypotheses, and analyses that address the Research Questions. Finally, post-hoc results are reported.

Mediation

The data reflects the level of use of the four styles of mediation: Instructive, which occurs when the parent discussed the content of the movie before or after the adolescent views the movie; Social Co-viewing, which occurs when the parent watches the movie with the adolescent; Restrictive, which occurs when the parent limits the type of content viewed either through physical controls or rules; and Non-mediation, which occurs in the absence of any of the three other mediation strategies. Analysis of the data showed at least some form of mediation in all cases. However, nearly a third of the parents surveyed indicated early in the survey they had no restrictions on the movies their adolescents were allowed to view in movie theaters. The same number had no restrictions on movies viewed in the home.

Existence of Mediation

H1: Restrictive mediation is used more than instructive or social coviewing for parental mediation of movie viewing by adolescent children.

In attempting to test H1, it was discovered that the variables were measured using different scales; therefore H1 cannot be tested in this study. There is a strong, positive correlation between the use of restrictive mediation and the use of instructive mediation (Pearson's r=.434; p<.000) and social co-viewing (Pearson's r=.370; p<.000). There is also a positive correlation between use of social co-viewing and the use of instructive mediation (Pearson's r=.614; p<.000).

H2: The older the adolescent, the less likely the parent will use any mediation.

H2 was supported with data showing the age of the adolescent related to the amount of mediation used. Data indicated older adolescents receive less mediation from their parents, Results: Child's age to restrictive mediation correlation, (Pearson's r= -.277; p<.000); Child's age to instructive mediation correlation, (Pearson's r= -.131; p<.000); Child's age to social co-viewing correlation, (Pearson's r= -.158; p<.000).

Ratings Used for Mediation

H3: Parents use the MPAA ratings systems for mediation strategy more than content-based ratings and reviews.

H3 was supported with data showing the MPAA movie ratings (M=4.39) are used more than content-based reviews and ratings (M=3.72) to determine which movies their adolescent children may view (t=8.04; df=397; p< .001).

Inappropriate Content and Mediation

H4: Parents' level of perception of the negative effect on adolescents, determines the level of mediation.

H4 was not supported. There was no correlation between parents' level of concern over negative effects of inappropriate content and amount of mediation used.

Third Person Effect and Mediation

H5: Parents believe their adolescents are less likely to be affected by inappropriate media content in movies than other adolescents.

H6: Parents perception of a third-person effect about themselves regarding negative effects of movie content is positively correlated to perception of a third-person effect in their adolescents.

H5 and H6 were tested by creating the third-person effect variables by computing the difference between the parents' perceived effect of inappropriate content on other

adolescents versus the perceived effect of inappropriate content on their own children (TPE-C), and the parents' perceived effect of inappropriate content on other adults versus the perceived effect of inappropriate content on self (TPE-A).

H5 was supported with the data showing significant difference in parents' perception of the effect of inappropriate content in movies on their children (M=28.98) versus the parents' perceived effect of inappropriate content on adolescents other than their children (M=25.41). The resulting difference is significant (M=3.57; t=10.89; df=383; p<.000).

H6 was supported with data indicating third-person effect in a parent is a positive predictor of third-person effect in that parent's child, regarding the negative effects of inappropriate content in movies (Pearson's r= .273; p< .000).

RQ1: How does belief that one's child is less affected by inappropriate content in movies than other children correlate with parents' decisions to mediate movie watching?

RQ2: How does belief that one's child is less affected by inappropriate content in movies than other children correlate with style of mediation used?

The survey produced mixed results relating to RQ1 and RQ2. Based on the literature review, it seems likely parents who believe their child is less affected by inappropriate content than other adolescents would feel less need to mediate. There is evidence that this holds true, as there is a negative correlation between the existence of high third-person effect-child and the use of restrictive mediation (Pearson's r = -.198;

p<.000) and instructive mediation (Pearson's r= -.153; p<.000). Testing for correlation between social co-viewing and third-person effect-child produced results that were not statistically significant (Pearson's r= -. 095; p<.06). Table 4.1 shows the results of the correlation tests between third-person effect-child and the three mediation strategies.

Table 4.1 Correlation Between TPE-C and Parental Mediation Strategy

		Restrictive	Instructive	Social Co-viewing
TPE-C	Pearson Correlation	198**	153**	095
	Sig. (2-tailed)	.000	.002	.060
	N	390	390	391

^{**.} Correlation is significant at the 0.01 level (2-tailed).

Chapter 5

Discussion

This chapter discusses the results of the study as it contributes to theory, implications for parents, and implications for the movie industry. This is followed by impact on future research and the limitations of this study.

Contributions to Theory

This study extends parental mediation theory to movie viewing by adolescents. The results indicate there are distinct differences in how parents choose to mediate adolescents and younger children. The instructive and social co-viewing strategies commonly used with children age 12 years and younger are used less frequently with adolescents. Restrictive mediation becomes the most prevalent mediation strategy used with adolescents. Also, parental mediation studies of younger children have found parents often use multiple mediation strategies. The results of this study clearly provide evidence social co-viewing and instructive mediation are strongly correlated. Each of these two strategies is also positively correlated to restrictive mediation, though to a lesser degree. Similar to mediation styles of parents of younger children, parents of adolescents typically use a combination of mediation strategies. This study reveals a correlation between the age of the adolescent and the amount and type of mediation used. The decrease in the use of mediation trends with natural progression toward independence that comes with growing older. There are other factors, such as number of

adolescent siblings in the home, number of older or younger siblings, birth order, marital status, etc., that could affect mediation in addition to the age of the child. Therefore, it is not suggested in this study that there is a direct, causal relationship between the age of the adolescent and mediation.

Third-person effect is also supported in the results. The data show parents perceive violence, profanity, crude humor, sexual references, and nudity along with tobacco, alcohol, and drug use have a greater negative effect on other adults than it does on themselves. Less than 12% (n=46) of parents indicated there was no difference in the effect of inappropriate content on themselves versus their perceived effect on other adults. Just over eight percent (n=46) indicated a positive third-person effect, indicating they believe they themselves would be more negatively affected by inappropriate content than other adults. This leaves nearly 80% (n=311) of parents who perceived they are less negatively affected than other adults. This finding is important because this third-person effect translates, though to a lesser degree, to parents' perceptions of the significant difference in the effect of inappropriate content on their own adolescent children compared to the effect on other adolescents. Just over 20% (n=80) of parents felt there was a stronger effect of inappropriate content on their adolescent children versus the perceived effect on other adolescents. Almost the same percentage (17%, n=67) indicated a neutral third-person effect, indicating they believe there is no difference between the effect of inappropriate content on their adolescents and the effect on other adolescents. The remaining 63% (n=247) parents perceive their adolescents are less negatively affected than other adolescents. This study does not examine why parents feel this way, but this finding is an area of importance for future research.

The relationship between third-person effect and parental mediation theory is reflected in the data of this study. Parents who perceive a greater effect on other children exhibit a higher use of restrictive mediation. Combined with parents' views on the negative effect inappropriate content can have on adolescents, third person has a significant effect on parents' mediation strategies.

Implications for Parents

The results of this study are particularly important to parents. There are three areas that impact parents and their mediation strategies: use of content-based ratings and reviews versus the MPAA ratings, use of physical mediation controls such as the V-Chip, and awareness of third-person effect.

Choosing which movies to mediate is the first step in the mediation strategy.

Since these decisions are tied directly to overall parenting strategy and family values, parents need information about the movies so they can make the right choices on which movies they allow their adolescents – and children of all ages – to view. Previous studies indicate parents prefer content-based reviews to MPAA ratings when evaluating movies. However, this study shows most parents still use the MPAA ratings to a greater degree than content-based reviews. Future research needs to be done to determine why parents continue to use MPAA ratings to evaluate movies their children view even though they prefer content-based ratings and reviews. Two key areas to investigate are whether this decision stems from convenience, or from lack of knowledge of or access to content-based ratings.

Also, parents need to be aware that their own movie viewing habits may have an effect on the movies they choose to mediate for their adolescent children. Post hoc

analysis shows correlations between the ratings of movies that parents view and the three mediation strategies. For example, parents who include R-rated movies in their movie viewing habits seem more likely to allow their adolescent child to view R-rated movies.

Once parents determine which movies to mediate, then they must determine how they will mediate. Whether it is a single strategy, a combination of strategies or nonmediation, future research should examine closely how this is done in practice.

One method of restrictive mediation evaluated in this study is the use of physical controls. One option parents have to limit viewing of unedited movies on television is the V-chip. Past studies indicate a large percentage of parents do not know about the V-chip. They do not know what it is, whether the televisions in their homes are equipped with the chips, or, if they are equipped, how to use them. The results of this study support the findings of previous studies. Nearly 32% of the parents surveyed indicated they did not know if the televisions in their homes were equipped with the V-chip. Of the 14.8% of parents who said their televisions were equipped with the V-chip (n=59), only 57% knew how to use it (n=34) and less than half of those (n=16) actually use the V-chip. More than 53% (n=212) responded negatively when asked if the televisions in their homes were equipped with V-chips. Further research is needed to determine if they responded no because they have older televisions that do not contain V-chips or whether they answered negatively because they did not know. Since all televisions manufactured after 2001 are required to have V-chips, it seems unlikely such a large percentage of those surveyed would not have at least one television with a V-chip. Knowledge and use of the V-chip is a valuable tool that could increase parents' ability to effectively implement their mediation strategy.

For restricting movies beyond those viewed on television, other physical controls are available, though less ubiquitous than the V-chip. Parental controls on programming sources such as Netflix and hardware devices can restrict viewing based on time limits and/or content. This study shows these types of controls are used to a greater extent than the V-chip; however, less than 25% of parents surveyed reported using these controls in the past six months. Availability and use of these other physical controls is another area that could use further research to measure parents' knowledge and use of these tools for mediation. Since most of these are technology-based, it seems likely knowledge and use will increase as the population ages.

Implications for the Movie Industry

Implications of this study that are important to the movie industry include the continued evidence that parents feel there is content in movies—particularly PG-13 and R-rated movies—inappropriate for adolescents to view even though the MPAA ratings indicate the movies are acceptable for most parents to allow their children of this age to view. Whether this is due to ratings creep or because the ratings are created by a very small and unrepresentative committee of raters is a possible subject of further research. The MPAA ratings system needs to be reviewed and evaluated and alternate methods of ratings need to be examined.

Regardless of the type of ratings or information available to help parents make mediation decisions, the movie industry should proactively seek ways to help parents put their mediation strategies into practice. Providing parents with the ability to control what movies are viewed via current and future technology would help put parenting decisions where they belong.

Implications for Future Research

As important as the questions answered and hypotheses supported by this study are the implications for future research.

Each of the mediation styles is worthy of individual study as to the predictors and impact it has on the adolescent. Perhaps the most informative research area would be non-mediation. Nearly one third of the parents reported they had no restrictions on the movies their adolescent viewed whether at a movie theater or at home. Answers to later questions in the survey indicated some form of mediation—asking permission to view movies with certain ratings, having the parent view the movie first, etc.— is taking place. However, investigating why parents might choose not to mediate, either by choice (not feeling it is needed) or by circumstance (not having the time or resources to implement a mediation strategy), could deliver important information for this field of study.

Also other predictors need to be investigated such as single parents, gender of child, gender of parent making the rules, religiosity, education level, and income level. These are all potential predictors of mediation in general as well as specific mediation strategy.

Each specific method of movie viewing needs to be closely examined in future research. How parents might choose to, or even be able to effectively mediate movie viewing on smartphones and other mobile devices is important. Finally, peer pressure – both adolescent-to-adolescent and parent-to-parent – is an interesting concept to pursue in future studies.

Using the data from this study, additional post hoc analysis on mediation of individual ratings may provide more informative results since G- and PG-rated movies

are not expected to be mediated in the same manner or frequency as PG-13-, R- and NC-17-rated movies. It would also be beneficial to measure parental satisfaction with the MPAA ratings again since the most recent survey on this topic occurred in 1999.

Changes in parental satisfaction

Finally, this study asks parents to assess their mediation frequency and strategies based on the MPAA ratings system. This was done because this is the movie ratings system that parents are most familiar with. Future research should measure parents' use of content-based ratings. This would provide a clearer picture of the types and amounts of content parents choose to mediate.

Limitations

There are several limitations to this study. Though it is a national sample and therefore more diverse and generalizable than a convenience sample, the small sample size is not ideal. Using MTurk to gather the responses is a relatively new approach, and while supported as an appropriate method by previous research, it faces the same limitations as other online data gathering methods. The self-report aspect of this study could also be considered a limitation, as some respondents may exhibit social desirability, providing the answers they feel are most acceptable, but that do not necessarily represent their true responses. Previous research has also shown parents' perception of mediation is often different from that of their children. The solution for this limitation is usually to survey parent-child dyads. However, it is particularly difficult and costly to adequately sample this population. Longitudinal studies on mediation and its short- and long-term effects as the adolescents grow into adulthood would be beneficial to parents, health care providers, and movie industry stakeholders.

Conclusion

This study contributes to the body of knowledge in important ways. It begins to fill a gap in existing Parental Mediation Theory research, expanding the scope of this theory to include an under-researched age group (adolescents) and content source (movies). The findings support previous research while providing direction for future studies. The results of this study also support previous third-person effect research while demonstrating that parents' perception of the effect of inappropriate media content extends to their adolescent children and to movie content. The study also identifies a relationship between the two theories, as third-person effect shows a positive correlation to the decision to mediate as well as to mediation strategy. These findings are also important for parents, movie industry professionals, and health care providers who may have concerns about the negative effects some types of content in movies may have on adolescents.

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Appendix A: Qualtrics Survey Instrument

Thank you for agreeing to participate in this study. When you have answered each question on a page, click the NEXT button in the bottom right corner of the page. Click the NEXT button on this page to get started.

Q1 I have read the introductory information and understand that my participation in this survey is voluntary and that I may choose to stop taking this survey at any time. I have been informed of the privacy and confidentiality procedures for all information I provide in this survey. O Agree (1)
O Disagree (2)
If Disagree Is Selected, Then Skip To End of Survey
Q2 How many children do you have age 13 to 17 that live with you in your home? O 0(1) O 1(2) O 2(3) O 3(4) O 4(5)
If 0 Is Selected, Then Skip To End of Survey Q3 Are you (please check one) O Mother (1) O Father (2)
Q4 Please enter your Mechanical Turk Worker ID Number

Let's get started with a few general questions about movies. When answering the questions in this survey, please consider only movies originally released in movie theaters, but which could later be seen on other media such as DVD or Blu-ray discs, broadcast, basic and premium cable channels, via the Internet, or streaming video services such as Netflix, Hulu, Amazon Prime, etc.

Q5 In your opinion, how often do movies with the following ratings contain content that

is inappropriate for adolescents (children ages 13-17)?

11 1	All of the Time (1)	Often (2)	Sometimes (3)	Rarely (4)	Never (5)
G (1)	O	0	0	0	0
PG (2)	O	•	O	•	O
PG-13 (3)	O	•	O	•	O
R (4)	O	•	O	•	O
NC-17 (5)	O	•	O	O	O

Q6 Please rate how likely it is that the following types of content will have a negative effect on adolescents other than your child.

cheet on adolescents other than your child.								
	Very Unlikely (1)	Unlikely (2)	Somewhat Unlikely (3)	Somewhat Likely (4)	Likely (5)	Very Likely (6)		
Violence (1)	O	O	O	0	O	O		
Profanity (2)	O	O	O	O	O	O		
Nudity (3)	O	0	O	O	O	O		
Crude Humor (4)	O	O	O	O	O	O		
Sexual References (5)	0	O	•	•	•	O		
Drug Use (6)	O	O	O	O	O	O		
Tobacco Use (7)	O	O	O	O	O	O		
Alcohol Use (8)	0	•	0	0	0	O		

Q7 Please rate how likely it is that the following types of content will have a negative effect on other adults.

effect off oth	01 000001051					
	Very Unlikely (1)	Unlikely (2)	Somewhat Unlikely (3)	Somewhat Likely (4)	Likely (5)	Very Likely (6)
Violence (1)	O	O	O	O	O	O
Profanity (2)	O	O	O	O	O	O
Nudity (3)	O	•	O	O	0	O
Crude Humor (4)	O	O	O	O	O	O
Sexual References (5)	0	O	•	•	•	•
Drug Use (6)	O	O	O	O	O	O
Tobacco Use (7)	O	O	O	O	O	O
Alcohol Use (8)	O	O	O	O	•	O

Q8 How many total TVs are in your home? Please count every TV no matter how often used, which family members use it, or where it is located in your home.

Q9 How many DVD/Blu-ray players or computers with DVD drives are in your home?

O10 A	re anv	of the	TVs in	vour	home	equipped	with a	V-Chin	9
QIOA	ic any	or the	1 4 2 111	your	HOHIC	cquipped	willia	v-Cmp	٠

- **O** Yes (1)
- O No (2)
- O Not Sure (3)

If No Is Selected, Then Skip To In the last six months, have you used...If Not Sure Is Selected, Then Skip To In the last six months, have you used...

- Q11 Do you know how to use the V-Chip?
- **O** Yes (1)
- O No (2)

If No Is Selected, Then Skip To Have you set content filters or passw...

Q12 In the last six months, how O Never (1) O Once or Twice in Six Month (3) O About Once A Month (3) O Two or Three Times a Most O At Least Once a Week (5) O Every Day (6) Q13 In the last six months, have	ths (2) nth (4)	
the following movie sources o	r devices?	
	Yes (1)	No (2)
Premium Movie Channels (1)	0	O
Basic Cable Channels (2)	O	•
Broadcast Network Channels (3)	•	•
Streaming Video Services (4)	•	O
Computer (5)	O	O
Video Game System (6)	O	O
Smart Phone (7)	O	O
Tablet (8)	O	O
Other (9)	O	O
Now you will answer a series of the one who had the most received	d in this age range, please answ	•
Q14 How old is the child you (C) 13 (1) Q 14 (2) Q 15 (3) Q 16 (4) Q 17 (5) Q Other (6) If Other Is Selected, Then Skip	ų ,	these questions?

Q15 What is the gender of the child you are referring to as you answer these questions? O Male (1) O Female (2)
Q16 In what school district does your child attend school?
Q17 Who usually makes the rules for which movies your child can watch? O Both Parents (1) O Mother (2) O Father (3) O Child (4) O Parent(s) and Child (5)

Q18 How important are the following in helping you make decisions about what movies your child is allowed to watch. Please check the response for each statement that most closely reflects your answer.

closely reflects you						
	Not at all Import ant (1)	Very Unimporta nt (2)	Somewhat Unimporta nt (3)	Somewh at Importan t (4)	Very Importa nt (5)	Extremel y Importan t (6)
MPAA movie ratings (G, PG, PG-13, R, NC- 17) (1)	0	O	O	0	O	0
MPAA thematic information (Graphic violence, strong sensuality, language, etc) (2)	0	•	0	0	•	0
Content-based reviews (such as pluggedin.com, rotten tomatoes.com, etc.) that give specific information about inappropriate content such as number of profane words, drug use, amount and type of nudity, etc. (3)	•	•	•	•	•	0
Child's age (4)	O	0	•	O	•	O
Child's maturity level (5)	O	•	•	O	O	O
Convenience (6)	O	O	O	O	O	C
Recommendatio n from family member. (7)	0	O	0	O	O	O
Recommendatio n from another adult (8)	0	O	O	O	O	O

Q19 In his or her bedroom, does your child have a:

	Yes (1)	No (2)
TV? (1)	O	O
DVD or Blu-ray player? (2)	O	O
Computer with DVD drive? (3)	O	0
Game system capable of playing unedited movies? (4)	•	•

Q20 Does your child have a smart phone, tablet, or other mobile device capable of accessing the internet or streaming video services such as Netflix?

- **O** Yes (1)
- O No (2)

Q21 In the last six months, how many movies have you watched with your child?

Q22 Do you have any restrictions on movie watching in the following locations for your child?

	Yes (1)	No (2)
Movie Theater (1)	O	O
Home (2)	O	O
Friend's House (3)	O	O
School (4)	O	0
Other (5)	O	0

Q23 How likely are you to let your child view a movie with the following ratings?

	Very Unlikely (1)	Unlikely (2)	Somewhat Unlikely (3)	Somewhat Likely (4)	Likely (5)	Very Likely (6)
G (1)	0	0	0	0	0	O
PG (2)	O	•	O	O	O	O
PG-13 (3)	O	O	O	O	O	O
R (4)	O	O	O	O	O	O
NC-17 (5)	O	O	O	O	O	O

Q24 How often does your child ask permission before watching a movie with the following ratings?

	Never (1)	Rarely (2)	Occasionally (3)	Frequently (4)	Always (5)
G (1)	0	O	O	O	0
PG (2)	O	O	0	O	O
PG-13 (3)	O	O	O	O	O
R (4)	O	O	O	O	O
NC-17 (5)	O	O	O	O	O

Q25 How often is watching the movie WITH a parent a condition of granting permission for your child to view a movie with the following rating?

	Never (1)	Occasionally (2)	Very Often (3)	Always (4)	This child not allowed to watch (5)
G (1)	0	O	0	0	0
PG (2)	•	O	O	•	O
PG-13 (3)	O	O .	O	0	O
R (4)	O	O .	O	0	O
NC-17 (5)	O	O	O	0	O

Q26 How often is a parent viewing the movie first a condition of granting permission for your child to view a movie with the following rating?

	Never (1)	Occasionally (2)	Very Often (3)	Always (4)	This child not allowed to watch (5)
G (1)	0	0	0	O	0
PG (2)	•	O .	•	•	O
PG-13 (3)	O	O .	0	0	O
R (4)	O	O	0	0	O
NC-17 (5)	O	O .	O	O	O

Q27 How often is discussing a movie after you and your child have both watched it (together or separately) a condition of granting permission for your child to view a movie with the following rating?

	Never (1)	Occasionally (2)	Very Often (3)	Always (4)	This child not allowed to watch (5)
G (1)	•	0	0	0	O
PG (2)	O .	O .	O	•	O
PG-13 (3)	O	O .	O	0	O
R (4)	O	O .	O	O	O
NC-17 (5)	O	O .	O	O	O

Q28 Please rate how likely it is that the following types of content will have a negative effect on your child.

effect off you	ii Ciiiu.					
	Very Unlikely (1)	Unlikely (2)	Somewhat Unlikely (3)	Somewhat Likely (4)	Likely (5)	Very Likely (6)
Violence (1)	O	O	O	O	O	O
Profanity (2)	O	O	O	O	O	O
Nudity (3)	O	O	O	O	O	O
Crude Humor (4)	O	O	O .	O	O	O
Sexual References (5)	•	0	•	•	0	0
Drug Use (6)	O	O	O .	O	O	O
Tobacco Use (7)	O	O	O	O	O	O
Alcohol Use (8)	O	•	O	0	O	O

Q29 Do you expect your child to follow your movie viewing rules when at a friend's
house?
O Yes (1)
O No (2)
Q30 Have you discussed with your child what to do if offered the opportunity to watch a
movie you would not approve of when away from home?
O Yes (1)

Q31 Have you ever told your child to stop watching a movie once you realized it contained questionable content.

Yes (1)No (2)

O No (2)

Next you will answer a few questions about YOUR movie viewing and television use.

Q32 For each MPAA movie rating, please indicate how often the rating prevents you from viewing a movie.

	Never Prevents (1)	Occasionally Prevents (2)	Often Prevents (3)	Always Prevents (4)
G (1)	0	0	0	O
PG (2)	O .	O	O .	O
PG-13 (3)	O .	O	O .	O
R (4)	O .	O .	O .	O
NC-17 (5)	O .	O	O .	O

Q33 How often have you starred in a movie you and your child viewed together?

- O Never (1)
- **O** Once (2)
- O Twice (3)

Q34 Please rate how likely it is that the following types of content will have a negative effect on you.

	Very Unlikely (1)	Unlikely (2)	Somewhat Unlikely (3)	Somewhat Likely (4)	Likely (5)	Very Likely (6)
Violence (1)	O	O	O	O	•	O
Profanity (2)	O	O	O	O	O	O
Nudity (3)	O	0	O	O	0	O
Crude Humor (4)	O	O	O	O	O	O
Sexual References (5)	0	O	•	•	•	0
Drug Use (6)	O	O	O	O	O	O
Tobacco Use (7)	O	O	O	O	O	O
Alcohol Use (8)	O	O	O	0	O	O

Q35 In YOUR daily life, how helpful is television when you want to:

Q35 In YOUR daily life, how helpful is television when you want to:									
	Not Helpful At All (1)	(2)	(3)	(4)	Extremely Helpful (5)				
a) Stay on top of what is happening in the community?	0	O	O	O	0				
b) Unwind after a hard day or week? (2)	0	O	O	O	0				
c) Share important moral values with others?	0	O	O	O	0				
d) Gain insight into why you do some of the things that you do? (4)	•	0	O	O	•				
e) Have a choice about the information you receive?	•	O	O	O	•				
f) Discover better ways to communicate with others?	0	O	O	O	0				
g) Decide where to go for services, such as health, financial, or household? (7)	•	O	O	O	•				
h) Relax	O	O	0	O	O				

when you are by yourself?					
i) Find out how the country is doing? (9)	O	O	O	O	O
j) Imagine what you'll be like as you grow older? (10)	•	O	O	O	•
k) Set a background mood for whatever you are doing?	O	O	O	O	O
l) Something to do with your friends? (12)	0	O	O	O	•
m) Figure out what to buy? (13)	•	•	0	•	O
n) Think about how to act with friends, relatives, or people you work with? (14)	•	O	0	0	•
o) Have fun with family and friends? (15)	O	O	O	O	•
p) Have control over information that other people receive? (16)	•	O	O	O	•

q) Keep you company when you are alone? (17)	0	O	0	0	0
r) Observe how others cope with problems or situations like yours? (18)	0	O	O	O	0
s) Keep up with world events? (19)	0	•	•	•	0
t) Reflect your personality to others? (20)	•	O	O	O	•
u) Be a part of events that you enjoy without having to be there? (21)	•	O	O	O	•
v) Get ideas about how to approach others in important or difficult situations? (22)	•	O	O	O	0
w) Create an atmosphere when you get together with friends? (23)	•	O	O	O	0
x) Plan where to go for evening and weekend activities? (24)	•	O	O	O	•

y) Change someone else's mood? (25)	0	0	O	O	0
z) Have something to do when nobody else is around? (26)	•	•	0	0	•

You're almost done! Just a few demographic questions and you will have completed the survey. Remember, all information collected in this survey is completely anonymous.

Q36 Please indicate the parents' highest level of education?

	Less Than High school (1)	High School (2)	Some College (3)	Associate Degree (4)	Bachelor's Degree (5)	Master's or Professional Degree (6)	Doctorate Degree (7)
Father (1)	O	0	O	0	0	0	O
Mother (2)	O	•	O	O	O	O	O

Q38 Mother's age

Q39 Your Marital status?

- O Married (1)
- O Widowed (2)
- O Separated (3)
- O Divorced (4)
- O Remarried (5)
- O Never married (6)

Q40 Please indicate race.

	America n Indian or Alaska Native (1)	Asia n (2)	Hispani c (3)	Black or African America n (4)	White or Caucasia n (5)	Native Hawaiia n or other Pacific islander (6)	Other/Prefe r not to answer (7)
Father (1)	0	O	O	0	0	0	0
Mothe r (2)	O	O	0	O	0	O	O

Q41 What is your total household income?

- O Less than \$25,000 (1)
- **O** \$25,000 to \$49,999 (2)
- **O** \$50,000 to \$74,999 (3)
- **O** \$75,000 to 99,999 (4)
- **O** \$100,000 to \$124,999 (5)
- **O** \$125,000 to \$150,000 (6)
- O More than \$150,000 (7)

Q42 What is your Zip Code?

Appendix B: Descriptive Statistics

Table B.1 Descriptive Statistics for all continuous variables

	N	Min.	Max.	Mean	Std. Deviation
How often do movies with the following ratings contain content that is inappropriate for adolescents (children ages 13-17)?					
G PG PG-13 R NC-17	395 395 397 397 396	1 1 1 1 1	5 5 5 5 5	4.11 3.66 2.91 2.12 1.94	1.466 1.368 1.079 1.023 1.348
How likely it is that the following types of content will have a negative effect on adolescents other than your child?					
Violence Profanity Nudity Crude Humor	398 397 398 397	1 1 1 1	6 6 6	4.14 4.10 3.80 3.82	1.244 1.393 1.468 1.339
Sexual References Drug Use Tobacco Use Alcohol Use	398 398 398 397	1 1 1 1	6 6 6	3.98 4.37 4.23 4.36	1.352 1.269 1.314 1.312

	N	Min.	Max.	Mean	Std. Deviation
TT1111i4 is 41 s4 41 s following secure					
How likely it is that the following content					
will have a negative effect on other adults?					
Violence	398	1	6	3.30	1.306
Profanity	398	1	6	3.00	1.394
Nudity	398	1	6	2.85	1.363
Crude Humor	397	1	6	2.93	1.365
Sexual References	398	1	6	2.91	1.359
Drug Use	398	1	6	3.18	1.317
Tobacco Use	398	1	6	2.95	1.308
Alcohol Use	397	1	6	3.06	1.372
How important are the following in					
helping you make decisions about what					
movies your child is allowed to watch?					
MDAA movie notings	398	1	6	4.39	1.180
MPAA movie ratings MPAA thematic information	398	1	6	4.33	1.283
Content-based	398	1	6	3.72	1.542
Child's age	398	2	6	4.83	.890
Child's maturity level	398	2	6	5.19	.890 .829
Convenience	397	1	6	2.80	1.294
Recommendation from family member.	398	1	6	3.90	1.299
Recommendation from another adult	398	1	6	3.72	1.224
Harry Elizabet and vices to let vices abild vices a					
How likely are you to let your child view a					
movie with the following ratings?					
G	398	1	6	5.84	.560
PG	397	3	6	5.78	.544
PG-13	397	1	6	5.38	.884
R	398	1	6	3.36	1.477
NC-17	395	1	6	2.10	1.433

	N	Min.	Max.	Mean	Std. Deviation
How often does your child ask permission before watching a movie with the following ratings?					
G PG PG-13 R NC-17	398 398 398 398 396	1 1 1 1 1	5 5 5 5 5	1.44 1.58 2.07 3.17 3.04	1.019 1.165 1.345 1.428 1.726
How often is watching the movie WITH a parent a condition of granting permission for your child to view a movie with the following rating?	397	1	5	1.46	1.021
G PG PG-13 R NC-17	397 397 397 395	1 1 1 1	5 5 5 5	1.57 1.91 3.07 3.80	1.053 1.108 1.351 1.560
How often is a parent viewing the movie first a condition of granting permission for your child to view a movie with the following rating?					
G PG PG-13 R NC-17	396 397 395 396 394	1 1 1 1 1	4 4 5 5 5	1.29 1.37 1.72 2.94 3.73	.808 .860 1.008 1.362 1.582

	N	Min.	Max.	Mean	Std. Deviation
How often is discussing a movie after you					
and your child have both watched it					
(together or separately) a condition of					
granting permission for your child to view					
a movie with the following rating?					
G	397	1	4	1.35	.834
PG	396	1	5	1.42	.898
PG-13	397	1	5	1.64	.969
R	396	1	5	2.58	1.464
NC-17	396	1	5	3.59	1.694
How likely it is that the following content					
will have a negative effect on your child?					
Violence	398	1	6	3.55	1.513
Profanity	398	1	6	3.58	1.485
Nudity	398	1	6	3.50	1.512
Crude Humor	398	1	6	3.49	1.407
Sexual References	398	1	6	3.65	1.474
Drug Use	397	1	6	3.69	1.602
Tobacco Use	398	1	6	3.51	1.629
Alcohol Use	398	1	6	3.65	1.616
Please indicate how often the following					
rating prevents you from viewing a movie.					
G	398	1	4	1.05	.256
PG	398	1	4	1.05	.271
PG-13	397	1	4	1.11	.402
R	397	1	4	1.45	.820
NC-17	395	1	4	1.86	1.132

	N	Min.	Max.	Mean	Std. Deviation
How likely is it that the following types of content will have a negative effect on you.					
Violence	397	1	6	2.18	1.429
Profanity	397	1	6	2.00	1.326
Nudity	396	1	6	1.94	1.253
Crude Humor	396	1	6	1.97	1.299
Sexual References	398	1	6	1.95	1.252
Drug Use	398	1	6	1.87	1.290
Tobacco Use	397	1	6	1.84	1.256
Alcohol Use	398	1	6	1.88	1.267
Valid N (listwise)	359				