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Research to Practice Webinar on
Suicide Narratives in the News Media: What Effect Might They Have and What Can We Do?

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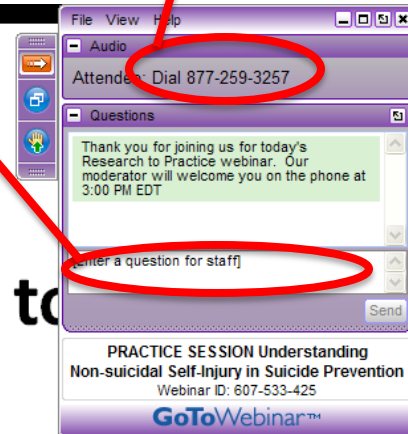
Enter question during Q&A

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Today's Speakers



Linda Langford, Sc.D



Madelyn S. Gould, Ph.D., M.P.H



Kenneth Norton, LICSW

Suicide Prevention Resource Center

Suicide narratives in the news media: What effect might they have and what can we do?

Research to Practice Webinar

August 4, 2011

Linda Langford, Sc.D., Evaluation Scientist, *SPRC*

Madelyn S. Gould, Ph.D., M.P.H., Professor, Psychiatry and Public Health (Epidemiology), *Columbia University/ New York State Psychiatric Institute.*

Ken Norton, LICSW, Executive Director, *The National Alliance On Mental Illness—New Hampshire*

Overview

- I. Defining suicide narratives in the news media
- II. Research and theory: how might media narratives have an effect on suicide?
- III. Taking action

I. Defining “Suicide Narratives” in the News Media

Based on media coverage, which statement best describes the problem of military suicide:

- A. Suicidal behavior is common among service members.
- B. Crisis help is readily available for suicidal personnel.
- C. Nearly 100% of personnel find positive ways to cope.
- D. Top leaders have received mental health treatment.

Military service → PTSD → Suicide

Dramatic **Increase** Found in Soldier Suicides — Psychiatric News

by A Levin - 2007

Sep 21, 2007 ... Dramatic **Increase** Found in Soldier Suicides. Aaron Levin. Next Section. Better documentation reveals a sharp rise in **suicide** among U.S. Army ...

pn.psychiatryonline.org/content/42/18/9.1.full

Army **suicide** rate hits a three-decade high, officials say - Los ...

Jan 30, 2009 ... At least 128 Army soldiers took their own lives last year -- an estimated **suicide** rate of 20.2 per 100000, a sharp **increase** from the 2007 ...

articles.latimes.com/2009/jan/30/nation/na-army-suicides30 - Cached - Similar

Army Grapples with '**Epidemic**' of Suicides - 911truth.org

2 days ago - Army Grapples with '**Epidemic**' of Suicides. ... One third who commit **suicide** have never served in combat; another third commit **suicide** while in combat; ...

www.911truth.org/article.php?story=20100406174537823 - Cached

Home Front Hearts - Despite Efforts, Troop **Suicide** Rate up

Mar 12, 2010 - ... and the U.S. **military** is losing a battle to stem an **epidemic** of suicides in its ranks. ... Christopher Philbrick, the deputy director of the Army **Suicide** ... While the **military's** **suicide** rate is comparable to civilian rates, ...

www.homefronthearts.org/news.../despite-efforts-troop-suicide-rate-up/ - Cached

Financial crisis → Job loss → Suicide



The Financial Crisis Is Driving Hordes of Americans to Suicide

By Nick Turse, Tomdispatch.com

Posted on January 29, 2009, Printed on February 4, 2009

<http://www.alternet.org/story/123563/>

The body count is still rising. For months on end, marked by bankruptcies, foreclosures, evictions, and layoffs, the economic meltdown has taken a heavy toll on Americans. In response, a range of extreme acts including suicide, self-inflicted injury, murder, and arson have hit the local news. By October 2008, an analysis of press reports nationwide indicated that an epidemic of tragedies spurred by the financial crisis had already spread from Pasadena, California, to Taunton, Massachusetts, from Roseville, Minnesota, to Ocala, Florida.

In the three months since, the pain has been migrating upwards. A growing number of the world's rich have garnered headlines for high profile, financially-motivated suicides. Take the New Zealand-born "millionaire financier" who leapt in front of an express train in Great Britain or the "German tycoon" who did much the same in his homeland. These have, with increasing regularity, hit front pages around the world. An example would be New York-based money manager René-Thierry Magnon de la Villehuchet, who slashed his wrists after he "lost more than \$1 billion of client money, including much, if not all, of his own family's fortune." In the end, he was yet another victim of financial swindler Bernard Madoff's \$50 billion Ponzi scheme.

LGBT → Bullying → Suicide

For Many Gay Youth, Bullying Exacts a Deadly Toll 🔍

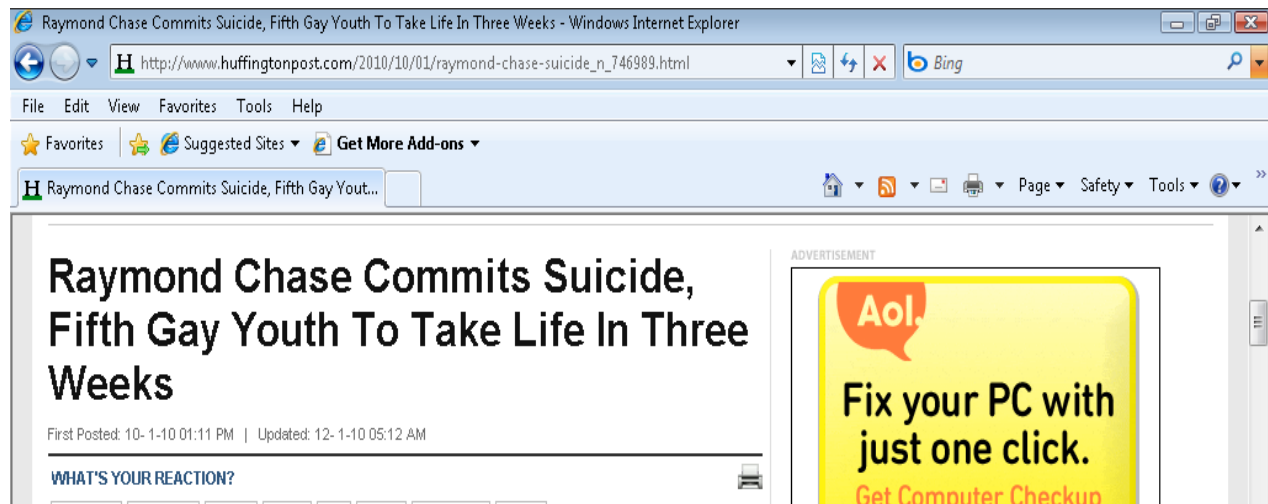
Oct 8, 2010 – Recent reports of **teens** taking their own lives 'the tip of the iceberg,' one expert says.

www.businessweek.com/lifestyle/content/.../644051.html - Cached - Similar

▶ US gay community reeling from 'epidemic' of suicides among ...

Oct 1, 2010 – On Thursday chat show host **Ellen DeGeneres** used her daytime programme to **call** for action to tackle the 'epidemic' of suicides among gay ...

www.dailymail.co.uk/.../US-gay-community-reeling-epidemic-suicides-teenagers.html - Similar



Raymond Chase Commits Suicide, Fifth Gay Youth To Take Life In Three Weeks

First Posted: 10-1-10 01:11 PM | Updated: 12-1-10 05:12 AM

WHAT'S YOUR REACTION?

ADVERTISEMENT

Aol. Fix your PC with just one click. Get Computer Checkup

Where do narratives come from?

Examples:

- Reporting on a study of one factor → conveyed as the only or primary factor
- “Normalizing” language (e.g., epidemic, hordes)
- One incident becomes a reference point, frames later stories

II. Do Narratives Affect Suicidal Behavior?

- No research on this specific question
- However, can examine relevant research and theory →
How might narratives affect prevention-related attitudes and behaviors?
- We'll examine:
 - Misinformation
 - Suicide contagion/modeling
 - Social norming, social scripts, & media framing/templates
 - Opportunity costs



Suicide “Narratives” in the Media: Empirical Basis of Concern

Madelyn S. Gould, Ph.D., M.P.H.
Columbia University/
New York State Psychiatric Institute

Suicide Prevention Resource Center

Webinar

August 4, 2011

Main Concerns about Narratives' Impact

- Promulgation of misinformation/misperceptions
- Promotion of suicide contagion/modeling

Misinformation/Misperceptions



Misinformation/Misperceptions: LGBT example (I)

FACT: Cross-sectional and longitudinal epidemiological studies find a significant two to six-fold increase risk of suicidal attempts for homosexual and bisexual youths compared to straight youth.

(Blake et al., 2001; Faulkner and Cranston, 1998; Garofalo et al., 1998; Remafedi et al., 1998; Russell and Joyner, 2001; see McDaniel et al., 2001, for a recent review).

HOWEVER...



Misinformation/Misperceptions: LGBT example (II)

- Suicide risk is substantially mediated by depression, alcohol abuse, family history of attempts, and victimization. (*Russell and Joyner, 2001*)
- Few suicide deaths are accounted for by LGBT youth. (*Shaffer et al., 1995*)



Misinformation/Misperceptions: LGBT example (III)

FACT:

Most youths who report same sex sexual orientation report no suicidality at all:

84.6% of males and 71.7% of females.

(Russell and Joyner, 2001)

The **FACTS** are more **complicated** than

LGBT  SUICIDE

The **narrative** should reflect the facts.

SUICIDE CONTAGION/MODELING



POLL

Do you consider the following statement to be true or false?

While anecdotal reports suggest that one suicide can lead to others,

...current research is insufficient to empirically support the existence of suicide contagion/modeling.

IMPACT OF MEDIA

Research finds an increase in suicide after:

- Non-fictional stories

AND

- Fictional stories (*less research devoted to influence of fictional stories*)

IMPACT OF MEDIA

Research finds an increase in suicide when:

- **Frequency of stories increases**
- Prominence of story increases (e.g. front page)
- Headlines are dramatic



IMPACT OF MEDIA

Direct Effects:

↑ suicides following stories



IMPACT OF MEDIA

Converse Effects

↓ suicide following media guidelines
or during newspaper strikes



Critical Evaluation of Research on Impact of Media

*Hill's Criteria of Causality**

- Consistency
- Strength
- Temporality
- Specificity
- Coherence

*Austin Bradford Hill, “The Environment and Disease: Association or Causation?,”
Proceedings of the Royal Society of Medicine, 58 (1965), 295-300. PMC 1898525.
PMID 14283879.



IMPACT OF MEDIA EXISTS

But, interactive factors exist

Audience

Stories

Match ▶ Differential Identification



Content Analyses of Suicide Stories (I)

Suicide newspaper reports from six countries with different suicide rates were qualitatively examined. (Hungary has the highest suicide rate followed by Japan, Finland, Austria, Germany, and the United States has the lowest suicide rate):

- Attitudes toward suicide in newspaper reports varied by country.
- Hungarian media were more accepting of suicide - relatively positive presentation
- Japanese media presented a positive portrayal of the suicide victim (as hero).
- The media of Germany, Finland, and the United States characterized suicide in the most negative terms - portraying the victim and the act in terms of psychopathology and abnormality, and describing the negative consequences of the suicide

Content Analyses of Suicide Stories (II)

To identify specific features in media suicide reports that may contribute to the *initiation of teenage suicide clusters*, we developed a content analytic strategy of qualitative characteristics abstracted from newspaper stories. 51 youth cluster communities (713 stories) compared to 101 non-cluster communities (1,138 stories).

↑ **nonfictional newspaper stories** following 1st victim in cluster

↑ **stories** about 1st victim in cluster

Content Analyses of Suicide Stories (II *continued*)

**More prominent coverage following 1st victim in cluster:
story placement, size of headlines, presence of picture**

More sympathetic coverage: content and picture

No explanation of suicide other than mentioning school or work problems

More personal details provided: victim's name, school's name, time/place of death, suicide method

WHAT SHOULD WE DO?



REPORTING ON SUICIDE

- *Recommendations for the Media* -

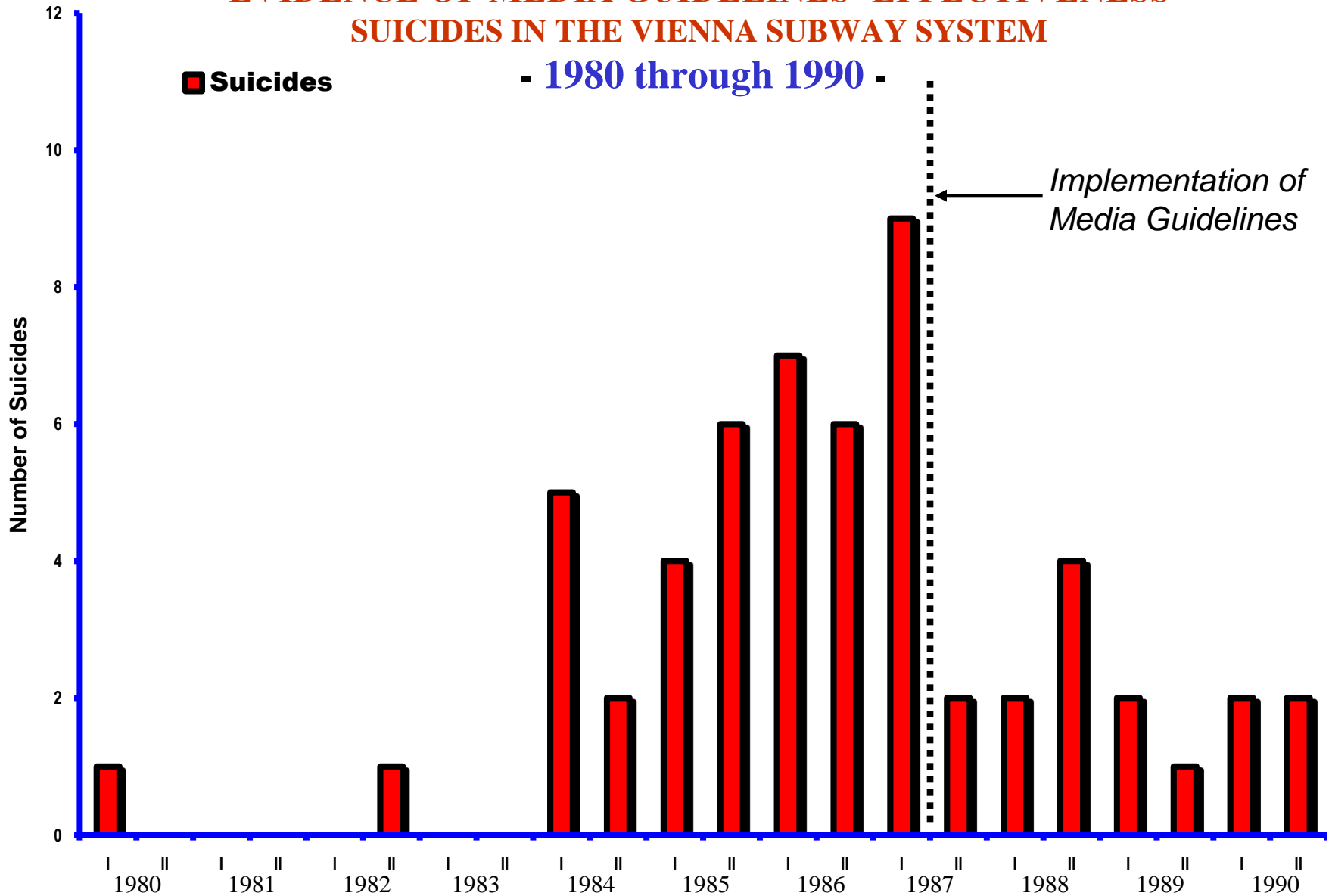
Major aims of media recommendations:

- ↑ Media's positive role to educate and shape attitudes
- ↑ Stories that minimize contagion



EVIDENCE OF MEDIA GUIDELINES' EFFECTIVENESS

SUICIDES IN THE VIENNA SUBWAY SYSTEM



I indicates the first six months and II the second six months. The media guidelines of the Austrian Association for Suicide Prevention went into effect in June 1987

Additional Resources

- Gould, M.S. (2001). *Suicide and the media*. In H. Hendin & J.J. Mann (Eds.), *Suicide Prevention: The Clinical Science of Suicide Prevention*. *Annals of the New York Academy of Sciences* (Vol. 932). New York: Annals of the New York Academy of Sciences.
- Gould, M.S., Jamieson, P., & Romer, D. (2003). *Media contagion and suicide among the young*. *American Behavioral Scientist*, 46(9), 1269-1284.
- Gould, M.S., Midle, J.B., Insel, B., & Kleinman, M. (2007) Suicide reporting content analysis: Abstract development and reliability. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*, 28(4):165-174.
- Insel, B.J., & Gould, M.S. (2008). Impact of modeling on adolescent suicidal behavior. *Psychiatric Clinics of North America*, 31(2), 293-316.
- Pirkis J, Blood RW. (2001). Suicide and the media: Part I. Reportage in nonfictional media. *Crisis*, 22(4),146-54.

A decorative graphic at the top of the slide features a series of overlapping, curved bands in shades of green and blue, extending from the left side towards the right.

**Any questions before we
continue?**

Social Norms

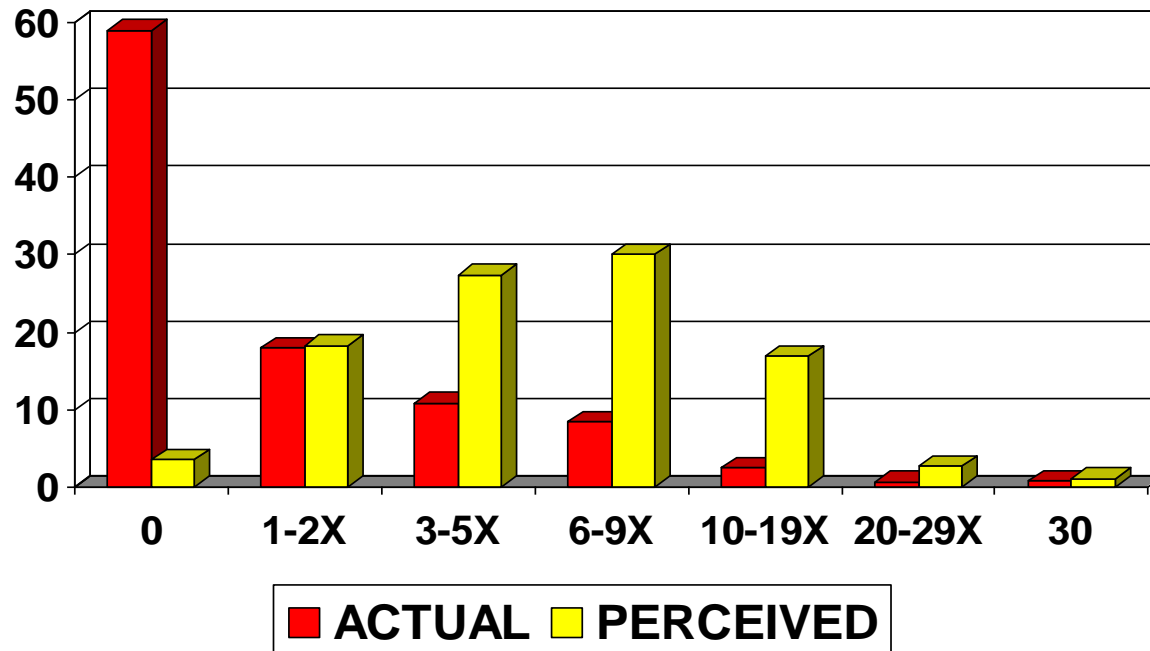
- Definition: Implicit rules about “normal” or typical behaviors or beliefs in a group or setting
 - Concept in various behavioral theories (e.g., Social Cognitive Theory, Theory of Planned Behavior)
- Two main types:
 - **Descriptive:** behavioral; what most people *do*
 - **Injunctive:** attitudinal; what most people *approve of*
- Can relate to suicidal behaviors or positive coping

Borsari and Carey, 2003; Rimal and Real, 2003; Smith and Louis, 2008

Actual vs. Perceived Norms

Perceptions of social norms often are inaccurate.

Example: High School Alcohol Use, Past 30 Days



Social Norms, con't

- Research on **other health issues** finds
 - People often
 - overestimate unhealthy behaviors & attitudes; and
 - underestimate healthy behaviors & attitudes
 - Perceived norms (right or wrong) are one predictor of behavior.
 - Other important factors: group identity, norm salience (*Smith and Louis, 2003*)

Social Norms, con't

- Social norms and suicide
 - A few recent studies measure norms (*e.g., Wyman et al., 2010; O'Connor, 2006*)
 - Similar concepts by different names?
 - Some stigma research – similarities to injunctive norms
 - Peer influences (*e.g, CDC, 2006*)
- Media narratives and social norms
 - Narratives may convey or reinforce inaccurate norms about suicidal behavior, coping, services, offering help

Cultural Scripts

- Scripts = culturally-specific models and rules for behavior, including suicide
 - Specific conditions under which suicidal behavior is expected, and by whom.

“When suicidal behavior becomes a possibility, these scripts, transformed and individualized, provide a blueprint for action.”

– Canetto, undated

- Media can help create/perpetuate scripts OR can show alternate storylines of help, hope, resilience.

Canetto, 2008; Canetto undated; Cato & Canetto, 2003; Russell and Bohan, 2001, 2005

Communication/Media Studies

- **Framing:** part of a media package that provides a central organizing idea for making sense of events (*Giles & Shaw, 2009*)
 - Problem definition
 - Makes salient a specific causal interpretation
 - Moral evaluation
 - “Treatment” recommendation
 - Also: reader identification w/ stories, use of adjectives, generalization
- Related: **“Media template”** (*Kitzinger, 2000; Giles & Shaw, 2009*)
 - High-profile story used to make sense of later events
 - “Another Watergate”
 - Become reference points for news sources AND audiences

“Opportunity Costs”

- Negative narrative => **not** telling stories of positive coping, receiving help, offering help, service availability
- Does this matter?
 1. Austrian study of protective as well as harmful reporting
 - Only 1 of 4 categories were associated with less suicide:
“Mastery of crisis”: Articles described adopting **coping strategies** other than suicidal behavior in adverse circumstances; ideation without suicidal behavior.

“Opportunity Costs” (con’t)

2. Behavior change/communications literature →

Positive behavior is more likely when messages:

- Promote specific actions
- Convey audience-relevant benefits
- Reduce barriers to action
- Increase self-efficacy to act

Suicide prevention =

- Promoting protective factors and reducing risk factors

Abroms & Maibach, 2008; National Cancer Institute, 2001; U.S. DHHS-NCI, 2005

Summary: Media Narratives and Suicide

While the media narrative-suicide relationship isn't simple, narratives have the potential to:

- Perpetuate misinformation
- Increase contagion factors (frequency, prominence, drama)
- Normalize suicidal behavior and lack of help; contribute to misperceived norms
- Contribute to a behavioral script for specific groups that convey suicide as inevitable, expected
 - In some cases, based on a “template event” that is repeated
- Supplant info about help, resources, actions people can take

Selected Resources for Accurate Content

www.sprc.org

Click on “online library” (on right side)

→ Populations and Settings

→ LGBT

→ Military/Veterans

→ Workplace

Selected Resources for Accurate Content, con't

- Haas AP, et al. Suicide and suicide risk in lesbian, gay, bisexual, and transgender populations: Review and recommendations. J Homosex. 2011;58(1):10-51.
- The Challenge and the Promise: Strengthening the Force, Preventing Suicide and Saving Lives
www.health.mil/dhb/downloads/Suicide%20Prevention%20Task%20Force%20final%20report%208-23-10.pdf
- Ramchand R, Acosta J, Burns RM, Jaycox LH, Pernin CG. The War Within: Preventing Suicide in the U.S. Military. Rand Corporation; 2011.
www.dtic.mil/cgi-bin/GetTRDoc?AD=ADA537090&Location=U2&doc=GetTRDoc.pdf
- Relationship between the economy, unemployment and suicide
www.sprc.org/library/Economy_Unemployment_and_Suicide_2008.pdf
- Luo F, Florence CS, Quispe-Agnoli M, Ouyang L, Crosby AE. Impact of Business Cycles on US Suicide Rates, 1928-2007. Am J Public Health. 2011 Jun 1;101(6):1139-1146.

References

- Abroms LC, Maibach EW. The effectiveness of mass communication to change public behavior. *Annu Rev Public Health*. 2008 Apr;29(1):219-234.
- Borsari B, Carey KB. Descriptive and injunctive norms in college drinking: A meta-analytic integration. *J Stud Alcohol*. 2003 May;64(3):331-341.
- Canetto SS. Women and suicidal behavior: A cultural analysis. *Am J Orthopsychiatry*. 2008 Apr;78(2):259-266.
- Canetto SS. Suicide Influences and Factors: Gender [Internet]. *Encyclopedia of Death and Dying*. [undated, cited 2011 Aug 2]; Available from: <http://www.deathreference.com/Sh-Sy/Suicide-Influences-and-Factors.html#ixzz1TJhczzw3>
- Cato J. E, Canetto S. S. Attitudes and beliefs about suicidal behavior when coming out is the precipitant of the suicidal behavior. *Sex Roles*. 2003;49(9/10):497-505.

- Centers for Disease Control and Prevention (CDC). Promoting Individual, Family, and Community Connectedness to Prevention Suicidal Behavior [Internet]. 2006 [cited 2011 Aug 2];Available from: http://www.cdc.gov/violenceprevention/pdf/suicide_strategic_direction_full_version-a.pdf
- Giles D, Shaw RL. The psychology of news influence and the development of media framing analysis. *Social and Personality Psychology Compass*. 2009 Jul 1;3(4):375-393.
- Kitzinger J. Media templates: Patterns of association and the (re)construction of meaning over time. *Media, Culture & Society*. 2000 Jan 1;22(1):61 -84.
- National Cancer Institute. Making Health Communication Programs Work [Internet]. 2001 [cited 2010 Nov 30];Available from: <http://www.cancer.gov/pinkbook>
- Niederkrotenthaler T, Voracek M, Herberth A, Till B, Strauss M, Etzersdorfer E, et al. Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *Br J Psychiatry*. 2010 Sep;197(3):234-243.
- O'Connor RC, Armitage CJ, Gray L. The role of clinical and social cognitive variables in parasuicide. *Br J Clin Psychol*. 2006 Nov;45(Pt 4):465-481.

- Rimal RN, Real K. Understanding the influence of perceived norms on behaviors. *Communication Theory*. 2003 May;13(>2):184-203.
- Russell GM, Bohan JS. The gay generation gap: Communication across the LGBT generational divide. *Angles: The Policy Journal of The Institute for Gay and Lesbian Studies*. 2005;8(1).
- Russell G, Bohan J. A look at research; describing/prescribing risk: Queer youth and self-fulfilling prophecies. *In the Family*. 2001 Spring;6(4):21.
- Smith JR, Louis WR. Do as we say *and* as we do: The interplay of descriptive and injunctive group norms in the attitude-behaviour relationship. *Br J Soc Psychol*. 2008 Dec;47(Pt 4):647-666.
- U.S. Department of Health and Human Services-National Cancer Institute. *Theory at a Glance: A Guide for Health Promotion Practice*, 2nd edition [Internet]. 2005 Spring [cited 2010 Nov 27]; Available from: <http://www.cancer.gov/PDF/481f5d53-63df-41bc-bfaf-5aa48ee1da4d/TAAG3.pdf>
- Wyman PA, Brown CH, LoMurray M, Schmeelk-Cone K, Petrova M, Yu Q, et al. An outcome evaluation of the Sources of Strength suicide prevention program delivered by adolescent peer leaders in high schools. *Am J Public Health*. 2010 Sep;100(9):1653-1661.



**Any questions before we
continue?**



III. Taking Action

SUICIDE NARRATIVES IN THE NEWS MEDIA

Think Globally and Act Locally
Working with Media at the Community Level

Kenneth Norton LICSW
(603) 225-5359
knorton@naminh.org
www.theconnectprogram.org

**It Takes A Community
To Prevent Suicide**

How many participants have
distributed the media
recommendations to your local
media?
(click raise hand)

Recommendations for Reporting on Suicide

www.reportingonsuicide.org

RECOMMENDATIONS FOR REPORTING ON SUICIDE

Developed in collaboration with: American Association of Suicidology, American Foundation for Suicide Prevention, Annenberg Public Policy Center, Canterbury Suicide Project, University of Otago, Christchurch, New Zealand, Columbia University, Department of Psychiatry, Connecticut College, Emotion Technology, International Association for Suicide Prevention, Task Force on Media and Suicide, Medical University of Vienna, National Alliance on Mental Illness, National Institute of Mental Health, New York State Psychiatric Institute, Substance Abuse and Mental Health Services Administration, Suicide Awareness Voices of Education, Suicide Prevention Resource Center, The Centers for Disease Control and Prevention (CDC) and UCLA School of Public Health, Community Health Sciences.

IMPORTANT POINTS FOR COVERING SUICIDE

- More than 50 research studies worldwide have found that certain types of news coverage can increase the likelihood of suicide in vulnerable individuals. The magnitude of the increase is related to the amount, duration and prominence of coverage.
- Risk of additional suicides increases when the story explicitly describes the suicide method, uses dramatic/graphic headlines or images, and repeated/extensive coverage sensationalizes or glamorizes a death.
- Covering suicide carefully, even briefly, can change public misperceptions and correct myths, which can encourage those who are vulnerable or at risk to seek help.

Suicide is a public health issue. Media and online coverage of suicide should be informed by using best practices. Some suicide deaths may be newsworthy. However, the way media cover suicide can influence behavior negatively by contributing to contagion or positively by encouraging help-seeking.

Suicide Contagion or "Copycat Suicide" occurs when one or more suicides are reported in a way that contributes to another suicide.

References and additional information can be found at: www.ReportingOnSuicide.org.

INSTEAD OF THIS: ❌	DO THIS: ✅
<ul style="list-style-type: none"> • Big or sensationalistic headlines, or prominent placement (e.g., "Kurt Cobain Used Shotgun to Commit Suicide"). • Including photos/videos of the location or method of death, grieving family, friends, memorials or funerals. • Describing recent suicides as an "epidemic," "skyrocketing," or other strong terms. • Describing a suicide as inexplicable or "without warning." • "John Doe left a suicide note saying..." • Investigating and reporting on suicide similar to reporting on crimes. • Quoting/interviewing police or first responders about the causes of suicide. • Referring to suicide as "successful," "unsuccessful" or a "failed attempt." 	<ul style="list-style-type: none"> • Inform the audience without sensationalizing the suicide and minimize prominence (e.g., "Kurt Cobain Dead at 27"). • Use school/work or family photo; include hotline logo or local crisis phone numbers. • Carefully investigate the most recent CDC data and use non-sensational words like "rise" or "higher." • Most, but not all, people who die by suicide exhibit warning signs. Include the "Warning Signs" and "What to Do" sidebar (from p. 2) in your article if possible. • "A note from the deceased was found and is being reviewed by the medical examiner." • Report on suicide as a public health issue. • Seek advice from suicide prevention experts. • Describe as "died by suicide" or "completed" or "killed him/herself."

HELPFUL SIDE-BAR FOR STORIES

WARNING SIGNS OF SUICIDE

- Talking about wanting to die
- Looking for a way to kill oneself
- Talking about feeling hopeless or having no purpose
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious, agitated or recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

The more of these signs a person shows, the greater the risk. Warning signs are associated with suicide but may not be what causes a suicide.

WHAT TO DO

If someone you know exhibits warning signs of suicide:

- Do not leave the person alone
- Remove any firearms, alcohol, drugs or sharp objects that could be used in a suicide attempt
- Call the U.S. National Suicide Prevention Lifeline at 800-273-TALK (8255)
- Take the person to an emergency room or seek help from a medical or mental health professional

SUGGESTIONS FOR ONLINE MEDIA, MESSAGE BOARDS, BLOGGERS & CITIZEN JOURNALISTS

- Bloggers, citizen journalists and public commentators can help reduce risk of contagion with posts or links to treatment services, warning signs and suicide hotlines.
- Include stories of hope and recovery, information on how to overcome suicidal thinking and increase coping skills.
- The potential for online reports, photos/videos and stories to go viral makes it vital that online coverage of suicide follow site or industry safety recommendations.
- Social networking sites often become memorials to the deceased and should be monitored for hurtful comments and for statements that others are considering suicide. Message board guidelines, policies and procedures could support removal of inappropriate and/or insensitive posts.

THE NATIONAL SUICIDE PREVENTION LIFELINE 800-273-TALK (8255)

A free, 24/7 service that can provide suicidal persons or those around them with support, information and local resources.

AVOID MISINFORMATION AND OFFER HOPE

- Suicide is complex. There are almost always multiple causes, including psychiatric illnesses, that may not have been recognized or treated. However, these illnesses are treatable.
- Refer to research findings that mental disorders and/or substance abuse have been found in 90% of people who have died by suicide.
- Avoid reporting that death by suicide was preceded by a single event, such as a recent job loss, divorce or bad grades. Reporting like this leaves the public with an overly simplistic and misleading understanding of suicide.
- Consider quoting a suicide prevention expert on causes and treatments. Avoid putting expert opinions in a sensationalistic context.
- Use your story to inform readers about the causes of suicide, its warning signs, trends in rates and recent treatment advances.
- Add statement(s) about the many treatment options available, stories of those who overcame a suicidal crisis and resources for help.
- Include up-to-date local/national resources where readers/viewers can find treatment, information and advice that promotes help-seeking.

MORE INFORMATION AND RESOURCES AT:

www.ReportingOnSuicide.org

Safe Reporting - What to Avoid:

(May Contribute to Contagion)

- Detailed descriptions of the suicide
 - including specifics of method/location
- Romanticizing or glamorizing person/death
- Oversimplifying causes
- Overstating the frequency of suicide
- Using suicide in the headline
- Giving prominent placement to the story

Safe Reporting – What To Do

- Always include information on where/how to get help (local and national) 800-273 TALK (8255)
- Emphasize recent advances in treating mental illness and substance abuse
- Include information about warning signs
- Report on local efforts to prevent suicide

Print this Article | Email this Article

Man jumps to his death from I-95 bridge

Seacoast officials continue effort to stop suicide

Photo 1 of 2 | Zoom Photo +



Rescue and police personnel respond to the Piscataqua River Bridge on Tuesday afternoon after a man jumped to his death.

Scott Yates/syates@seacoastonline.com

By **Dave Choate**
dchoate@seacoastonline.com
May 19, 2010 2:00 AM

PORTSMOUTH — A man who officials said jumped off the Piscataqua River Bridge has died, according to state police.

Authorities were alerted when a motorist traveling north on the bridge reported a vehicle had stopped in the breakdown lane. The witness observed a man walk from the vehicle toward the guardrail, then jump from the bridge into the river.

The victim was 50 years old and from Enfield, Conn., according to State Police Sgt. Gary Wood. His name was not released, pending notification of family.

Fire Capt. Ken Smith said the incident occurred at 3:02 p.m. Portsmouth Assistant Fire Chief Steve Achilles said the man was pulled from the water by people on a private vessel and then transferred to a Coast Guard vessel on which attempts were made to resuscitate him.

Achilles and Smith said the Portsmouth fire boat was dispatched and paramedics provided further advanced life support measures on the water. The man was then brought to land and transported to Portsmouth Regional Hospital via ambulance, which left the nearby Port of New Hampshire with red lights flashing.

The distance from the bridge to the water is comparable to the height of a 36-story building, according to Portsmouth police Sgt. Chris Roth.

A number of agencies, including Portsmouth Fire and Police Departments, New Hampshire State Police

Need help?

24-hour suicide hotline: Call (800) 273-8255

Online: theconnectproject.org and seacoastsuicidepreventioncoalition.org.

Warning signs of suicide: anxiety, sleep problems and unrelenting down moods. For more information, visit www.afsp.org/index.cfm?page_id=0519e6d73a-8d90-7d2e9e2456182d66.

Getting a side bar box with the Lifeline number and warning signs is a major accomplishment even when the rest of the article is lacking

Need help?

24-hour suicide hotline: Call (800) 273-8255

Online: theconnectproject.org and seacoastsuicidepreventioncoalition.org.

Warning signs of suicide: anxiety, sleep problems and unrelenting down moods. For more information, visit www.afsp.org/index.cfm?page_id=0519e6d73a-8d90-7d2e9e2456182d66.



Understanding the Culture Key to Changing Narratives

Journalist culture

- Focus on facts
 - Who, what, when, where, how
- Strong ethic of independence
- Healthy skepticism
- Questioning authority



Engaging Media is Key to Changing Narratives

- Be respectful!
- Focus on long term relationships with media
- Invite them to local coalition meetings
- Provide with local data and information
- Identify local “experts” who can provide info or who they can quote
 - And who can guide the narrative you want to achieve

Get Out In Front of The News!

- Avoid getting caught in the reactive news cycle
- Send out press releases on local prevention efforts
- Provide alternative stories which debunk the prevailing narrative
- Pitch story angles that change the focus

The Media's “Policy” Related to Suicide Reporting (informal)

- Generally Don't Cover Suicide Deaths
- Exceptions:
 - Death is a public/high profile person
 - Death occurs in a public area
 - Death is “newsworthy”

Our Concern:

How Suicide Is Reported

- We **want** media to report on suicide
- Want it to be reported as a public health issue
- Media has a long history of positive influence on public health issues
 - Seat Belts
 - Bike/Motorcycle helmets
 - Life Preservers
 - Smoking

Suicide is Preventable!

A Key Narrative We Need to Communicate

- Surgeon General's Report
- Stories about people who have made lethal attempts and lived (eg. Terri Wise/Kevin Hines)
- Life saved stories after an intervention
- Success of crisis centers and hotlines
- Effectiveness of treatment

Ask for Editorial Board

- Issue oriented
- “On the record”
- Expect editors, reporters, photos
- Bring along a MH professional, or someone personally impacted by suicide
- May result in story or editorial



Editorial Board

Monday, February 27, 2006

Mental health officials say suicide is preventable

By GEOFF CUNNINGHAM Jr.
Staff Writer

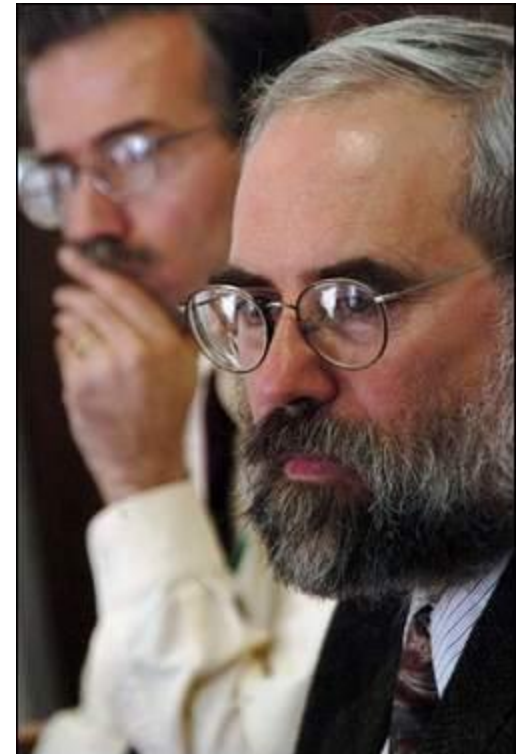
LACONIA — The decision to commit suicide is a drastically personal one, but the prevention of such acts is the responsibility of the communities that are impacted by them long after they are off the public's radar, according to state public health officials.

While discussion of the ending of one's life is often avoided by the media and in normal conversation, state public health officials say its avoidance is contributing toward a problem that is the second-leading cause of death among the state's youth.

"Everybody in the community has a role in preventing suicide," said Ken Norton, the director of frameworks for the state's Youth Suicide Prevention Project.

Norton recently joined Michael Cohen of New Hampshire's chapter of the National Alliance on Mental Illness and Genesis Behavioral Health Director Dr. David Bann in meeting with *The Citizen's* editorial board to discuss the suicide problem, which they say is more prevalent than some might think.

KEN NORTON, right, director of Frameworks Youth Suicide Prevention Project, and Dr. David Bann, medical director of Genesis Behavioral Health, discuss suicide prevention and related topics during an editorial board meeting at *The Citizen*. (Daryl Carlson/Citizen Photo)



A common script is simplistic explanations of causality



Full Picture?

- Moved to new country
- Divorced parents
- Poor grades
- Recent break up with boy friend
- Previous suicide attempt
- History of depression
- School environment

Did Phoebe die because of bullying?

Or did she die due to the failure to recognize a high prevalence of risk factors and intervene accordingly?

Fighting Misinformation

- Half of all suicide deaths in the National Guard are Soldiers who have never deployed
- Link military suicide with suicide as a public health issue
- Compare age and gender adjusted suicide rates
- Assist local National Guard and Reserve with developing stories about help seeking/prevention efforts

Promoting Success Stories

Can describe sources of help, desired behavior & how it led to the right outcomes; may reduce stigma

“General's story puts focus on stress stemming from combat”

Tom Vanden Brook, USA TODAY, 11/25/08

The stress of his combat service **could have derailed his career**, but Ham says he **realized that he needed help** transitioning from life on the battlefields of Iraq to the halls of power at the Pentagon. So he sought **screening** for post-traumatic stress and got **counseling from a chaplain**. That **helped him** "get realigned," he says.....

There clearly is a part of **Army culture that says, 'Tough it out. You just work your way through it.'** That's clearly where I thought I was. **I didn't think I needed anybody** to help me. It took the **love of my life** to say, **'You need to talk to somebody.'** I'm **glad** that she did that, and I think **she's glad** that I did that."

http://www.usatoday.com/news/military/2008-11-24-general_N.htm

Become Involved with New Media

- The Internet is now a prime source for news
- Not just limited to E News sites but also Social Networking
- Many of the damaging narratives are transmitted via the web.
- Active presence on the Web can help change narratives



How Do *We* Contribute To Negative Narratives?

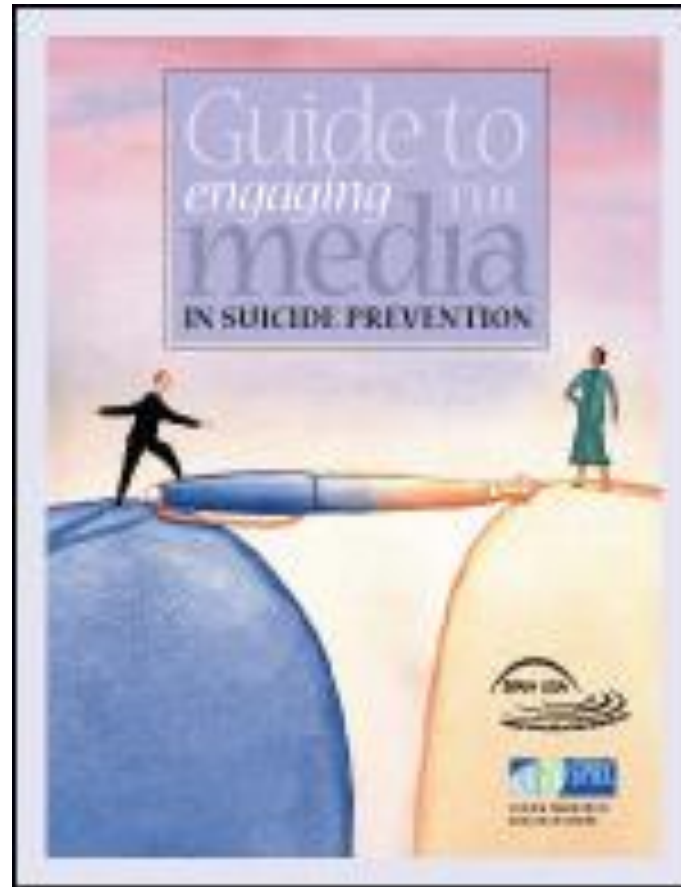


- Do our materials and presentations inadvertently overstate or normalize suicide?
- Do our broad efforts to raise awareness contribute to negative messaging or norming?

What is the Script you want?

- Suicide is preventable
- Suicide is a public health issue
- Effective treatment is available for mental illness and substance use disorders
- Warning signs include talking about death, suicide, isolation, anger, hopelessness
- Local resources include:
- Lifeline 1-800-273-8255

Media Resource



http://www.sprc.org/library/media_guide.pdf

It Takes A Community To Prevent Suicide



**Training Professionals & Communities in
Suicide Prevention & Response**

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(603) 225-5359**

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Q&A



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