Welcome to SPRC’s 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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Today’s Speakers

Linda Langford, Sc.D
Madelyn S. Gould, Ph.D., M.P.H
Kenneth Norton, LICSW
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
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 ...

ptn.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.homefronthearths.org/news.../despite-efforts-troop-suicide-rate-up/ - Cached
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.
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
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)
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
- 1980 through 1990 -

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.

From New England Journal of Medicine, Aug. 1992
Additional Resources


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

From “SNAPPY” study, L. Langford, unpublished data
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.

Niederkrotenthaler et al., 2010
“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


• The Challenge and the Promise: Strengthening the Force, Preventing Suicide and Saving Lives


• Relationship between the economy, unemployment and suicide

References


• 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.

• 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.


• Rimal RN, Real K. Understanding the influence of perceived norms on behaviors. Communication Theory. 2003 May;13(>2):184-203.


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

NAMI New Hampshire
How many participants have distributed the media recommendations to your local media?
(click raise hand)
Recommendaions for Reporting on Suicide
www.reportingonsuicide.org

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 CURRENT BEST PRACTICES. SOME SUICIDE DEATHS MAY BE NEWSWORTHY. HOWEVER, THE WAY MEDIA COVER SUICIDE CAN INFLUENCE BEHAVIOR NEGATIVELY BY CONTRIBUTING TO CONTRIVANCE OR ENCOURAGING BY ENCOURAGING HELP-SEEKING.

REFERENCES AND ADDITIONAL INFORMATION CAN BE FOUND AT: www.ReportingOnSuicide.org

INSTEAD OF THIS:

- 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 inevitable or "without warning."  
- "John Doe left a suicide note saying..."
- Investigating and reporting on suicide similar to reporting on crimes.
- Quoting/informing police or first responders about the cause of death.
- Referring to suicide as "successful," "unsuccessful" or a "failed attempt."

DO THIS:

- Inform the audience without sensationalizing the suicide and minimize prominence (e.g., "Kurt Cobain Dead at 27").
- Use school/work, or family photos; include hotline logo or local crisis phone numbers.
- Carefully evaluate 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."

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.

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.

MORE INFORMATION AND RESOURCES AT:
www.ReportingOnSuicide.org

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 reckless
- 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

THE NATIONAL SUICIDE PREVENTION LIFELINE

800-273-TALK (8255)

A free, 24/7 service that can provide suicide prevention information and local resources.

Released 4/14/11
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
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.
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 (e.g. 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
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
“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."

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

NAMI New Hampshire
Media Resource

It Takes A Community
To Prevent Suicide

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

NAMI New Hampshire
www.sprc.org

Tiffany Kim
Project Coordinator

tkim@edc.org

202-572-3717