Towards a shared understanding: Perspectives from Toronto's first media forum for suicide prevention

Mark Sinyor, MSc, MD, FRCPC,^{1,2} Jane Pirkis, PhD,³ André Picard, BComm, BJournalism,⁴ David McKeown, MDCM, MHSc, FRCPC,⁵ Margaret Vincent, BAH, MSc,¹ Christian Cheung,¹ Ayal Schaffer, MD, FRCPC,^{1,2} Jan Fordham, BScN, MEd,⁶ Rosie Mishael, BASc, MHSc,⁶ Marnin Heisel, PhD, CPsych⁷

ABSTRACT

Media reporting on suicide may have harmful and/or protective effects on deaths by suicide, depending on the nature of the coverage. Canada's first forum on this important issue was held in Toronto on November 6, 2015. Participating in the forum were public health policy-makers, mental health and suicide prevention experts and senior media representatives. This commentary summarizes the content of the forum and highlights the need for ongoing collaboration between suicide prevention experts and media professionals aimed at safe and respectful reporting that maintains the public's need to be informed.

KEY WORDS: Suicide; mass media; imitative behavior

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On November 6, 2015, a media forum for suicide prevention was held, jointly organized by Toronto Public Health (TPH), Sunnybrook Health Sciences Centre and the *Globe and Mail*. This event, which brought diverse perspectives together – as has been done previously in Oxford and Washington, DC^{1,2} – was, to our knowledge, the first of its kind in Canada. It represented a rare opportunity to have a substantial number (45) of public health policy-makers, mental health and suicide prevention experts and senior media representatives convene to discuss their viewpoints on a contentious topic that often provokes keen debate. Notably, despite differences of opinion among participants, numerous areas of consensus emerged. What follows is a summary of the perspectives offered and the discussion that followed.

Setting the stage: Perspectives of public health policy-makers

Suicide is a complex topic and among the most important public health issues of our time. It is a leading and modifiable cause of death in Toronto and the second most common cause of death in youth.³ In 2009, suicide resulted in 243 deaths in Toronto, which is triple the number of deaths from motor vehicle fatalities and quadruple the number from homicide.⁴ Certain populations are at increased risk for suicide, such as those exposed to multiple risk factors, including mental illness, substance misuse and abuse, socio-economic disadvantage and social isolation.⁵ Suicide deserves more attention at the policy level, particularly with respect to upstream preventive approaches, as reflected in 12 recommendations TPH made in a 2014 report to the Toronto Board of Health.⁴ Given that media reporting may influence suicide rates, one of these recommendations was to convene a forum to enhance engagement between mental health experts and journalists.

Perspectives of mental health and suicide prevention experts

Numerous studies, mainly large natural experiments, across a range of media (books, Internet, newspapers, television) show that more intense media reporting on suicide is often associated with a subsequent increased rate of death by suicide in that region.⁶ This copycat phenomenon is known as the Werther effect and it is most apparent when there is excessive/repetitive reporting of suicide and especially in relation to celebrities.⁷ This is thought to occur through social learning⁸ whereby already vulnerable people identify with a person who has attempted or died from suicide. For example, after the widely publicized death of a well-known journalist in Quebec, there was an excess of 200 suicide deaths (14% increase) in the province that year above what would have been expected based on yearly rates before and after.⁹ Intriguingly, there is also preliminary evidence that media reports focusing on

Author Affiliations

1. Department of Psychiatry, Sunnybrook Health Sciences Centre, Toronto, ON
 2. Department of Psychiatry, University of Toronto, Toronto, ON
 3. Centre for Mental Health, Melbourne School of Population and Global Health, University of Melbourne, Melbourne, VIC, Australia
 4. *The Globe and Mail*, Toronto, ON
 5. Toronto Public Health, Toronto, ON (at time of study; currently at Dalla Lana School of Public Health, University of Toronto, Toronto, ON)
 6. Toronto Public Health, Toronto, ON
 7. Department of Psychiatry, The University of Western Ontario, London, ON
- Correspondence:** Dr. Mark Sinyor, Department of Psychiatry, Sunnybrook Health Sciences Centre, 2075 Bayview Avenue, FG52, Toronto, ON M4N 3M5, Tel: 416-480-4070, E-mail: mark.sinyor@sunnybrook.ca

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people mastering suicidal crises – that is, people contemplating suicide but instead finding alternatives, such as seeking treatment – appear to be associated with subsequent decreases in rates of suicide.⁶ This phenomenon has been named the Papageno effect after a character in Mozart's "Magic Flute" who was convinced to abandon a suicide attempt. In acknowledgement of these issues, media reporting guidelines with similar content have been developed around the world, including in Canada.^{10,11}

Evidence suggests that media reports often focus on immediate factors involved in suicide death and omit mention of important underlying treatable causes, such as mental disorders or substance misuse.⁷ This emphasis belies the complexity of the issues that contribute to suicide death. Youth may be particularly vulnerable to social contagion¹² and the concern is that exposure to stories highlighting a simplistic cause and effect between a stressful life event and suicide may contribute to a sense of hopelessness/inevitability of suicide rather than providing information on how to overcome suicidal crises.

Australia has been at the forefront of efforts to improve engagement with the media on this issue, through the Mindframe initiative.¹³ This program involves multiple approaches including collaboration with and information resources for media professionals (including news journalists, as well as those in the entertainment industry who write for stage and screen) and journalism schools. It also targets those who may be asked by journalists to comment on suicide, including mental health experts, police and court officials. Analyses have shown that quality of media reporting on suicide has improved substantially in Australia since the advent of Mindframe.¹⁴ Although reviews of Mindframe from journalists have been overwhelmingly positive, some mental health professionals questioned whether Mindframe should have placed more emphasis on encouraging a widespread media campaign to raise awareness of suicide.

Ultimately, the media has been a crucial part of the movement to reduce stigma associated with mental illness. Media professionals can similarly help to better inform the public when reporting on suicide by emphasizing that it is a complex phenomenon that is almost always associated with remediable mental health problems, that suicide death represents a tragic missed opportunity to intervene with someone experiencing a crisis, that there is hope, and that suicide is preventable. It would be prudent for any large media campaign to be similarly life-affirming. There is, as yet, limited evidence on what effect such a campaign might have and this is an important area of future research.

Perspectives of media professionals

There are many subtleties to the issue of suicide reporting. Reporting on most suicide deaths is not in the public interest. Nevertheless, when suicide is newsworthy, it ought to be reported both to inform the public and also because suppression of suicide news perpetuates a taboo and stigma. The notion that there should be special rules for suicide coverage is debatable and guidelines imposed by outsiders may be unwelcome. For example, the CPA (Canadian Psychiatric Association) recommendation that "exciting" reporting of suicide should be avoided¹¹ is naïve since journalists do not and should not strive for dull reporting. Avoidance of photos of the deceased/bereaved may be similarly unrealistic. Likewise, guidelines from mental health experts may fail to

account for the "on the fly" nature of news reporting where, for example, decisions about titles and article language must be made rapidly, and for the fact that suicide death of famous people will almost certainly be reported excessively.

This topic raises numerous challenging questions. There is an internal debate among journalists as to whether their reporting can truly contribute to suicide deaths. Some are unconvinced by the existing evidence. There is also a debate about what the role of media professionals ought to be. The media reports the news, but one may ask whether the media should be in the business of disseminating suicide prevention information with every report? Even if media reporting does have an influence on suicide rates, is that a reason to suppress reports? Mass murder may be an example of an event that may result in contagion,¹⁵ but the media universally covers these anyway. Regardless, do traditional media have much control given that suicide is widely disseminated by the public itself on social media?

These questions notwithstanding, media professionals agree that they must strive for sensitive, high-quality reporting on suicide that emphasizes the importance of treatment of mental disorders. They appreciate that mental health experts are a resource but are resistant to being dictated to by people outside their field.

SUMMARY AND CONCLUSIONS

Experts from all areas reached consensus on several points:

1. Governments, mental health experts and journalists all have a common goal of improving public understanding and awareness of mental illness.
2. Canadian journalists do increasingly aim for high-quality, responsible reporting that educates the public and decreases stigma.
3. Words are powerful and can have profound effects on readers, some of whom being more easily influenced than others. The media has the challenging task of informing and educating the public while also attending to the public interest.
4. Journalism is not necessarily amenable to rigid constraints.
5. Suicide is a complex and multidimensional topic that does not lend itself to soundbites; longer-form reporting better captures the associated nuances and complexities.
6. Mental health professionals want to engage the media.

There was also agreement upon important principles and steps moving forward:

1. While mental health experts highlighted research suggesting that certain kinds of media reporting do influence vulnerable people and lead to increased suicide deaths, some Canadian journalists remain skeptical of the scope and definitiveness of these data. Therefore, there is a need for well-designed research examining the impact of media reporting on suicide death in Toronto and nationwide to inform the debate on the local impact of suicide reporting in Canada. Such studies would help journalists and editors to make more informed decisions about which stories to publish and details to be included/avoided.

2. Journalists should not report on most suicide deaths. When a suicide is deemed newsworthy, journalists should weigh the public's need to be informed as well as possible risk to vulnerable readers. Longer news features in particular can provide the context that both informs the public and avoids misleading or simplistic messages about suicide. Ultimately, the content of media reports on suicide must reflect the best judgement of their authors.
3. Collaboration between mental health experts and journalism schools is generally lacking in Canada and this represents an area for potential improvement.
4. Future national recommendations for reporting on suicide should involve a collaborative effort between mental health experts and journalists.
5. Canada can learn from the Mindframe initiative which has generally been well received by both those in the media and mental health communities. Interest in this forum demonstrates a desire for dialogue between mental health experts and journalists on the topic of suicide. For now, an informal network of interested parties has been created. The next forum should be focused on creating a formalized collaboration following the Mindframe model.

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RÉSUMÉ

La couverture médiatique du suicide peut avoir des effets nocifs et/ou protecteurs sur les décès par suicide, selon la nature des reportages. Le premier forum canadien sur cette importante question s'est tenu à Toronto le 6 novembre 2015. Il a rassemblé des responsables des politiques de santé publique, des spécialistes en santé mentale et en prévention du suicide et des hauts représentants des médias. Notre commentaire résume le contenu du forum et souligne la nécessité d'une collaboration continue entre les spécialistes en prévention du suicide et les professionnels des médias afin de soutenir un journalisme sûr et respectueux tout en tenant compte du besoin d'informer la population.

MOTS CLÉS : suicide; mass-médias; comportement d'imitation