# MEDIA AND MENTAL HEALTH

# Responsible Media Reporting: Guidelines for Reporting on Mental Illness and Suicide in Media

## Dr Sharmitha Krishnamurthy

# Dr Sharmitha K

BDS, MPH, MBA, PGDCR, PGDMLE, FMHE (NIMHANS)

Chief of Public Mental Health & Director, Augmenta Health

- A graduate in Dental Surgery and a post-graduate in Public Health (Gold Medalist), Health & Hospital administration, Medical Law Ethics (NLSIU), and Clinical Research Regulatory Affairs.

- Meritoriously completed a one-year post-graduate fellowship in Mental Health Education from the National Institute of Mental Health and Neurosciences (NIMHANS) and is the recipient of SPIRIT (SuicidePrevention & Implementation Research IniTiative) fellowship, a South Asia Implementation Research Fellowship in Mental Health.

- Co-creator of Helpie, India's first online community suicide gatekeeper training (helpie.co.in).

- With a decade of work experience, her areas of special interest include public mental health, mental health education, suicide prevention, health promotion and behaviour change communication, healthcare technology, and community development.

- She has published research articles in both national and international journals, focusing on her areas of expertise. Additionally, she has co-authored book chapters in the 202I Indian Psychiatric Society publication "Cyber Psychiatry" and the October 2023 Volume 8 of the Indian Psychiatric Update, which is themed around Digital Psychiatry.

# Disclaimer

The author created this supplementary resource material in good faith for the goal of providing information and education.

The supplementary material is only meant to complement the video instruction.

The material provided here does not intend to substitute for professional advice.

All reasonable efforts ensure that the information contained in this material is current and accurate at the time of production.

## Trigger warning

The material contains information about suicide. Reader discretion warranted.

# CONTENTS

# OBJECTIVE



Using available guidelines, learn how to report suicide and mental illness in the media responsibly and promote this practice, among others.

The media guidelines exist for a reason—to save lives through promoting accurate and ethical reporting, not censorship. They operate as a compass, pointing the media professionals in the right direction, giving them the framework to focus, thus enabling responsible reporting on suicide and mental illness.

# IMPORTANCE

Suicide is typically a result of many reasons, and poor media coverage is one of them. Suicide is a common theme in media headlines. Death by suicide affects individuals, their families, and entire communities.

They are, therefore, worthy of responsible reporting. A growing corpus of literature makes a case for responsibly portraying suicide in the media, which can prevent suicides.

When one approaches mental health reporting scientifically, one will appreciate, accept, and apply the best reporting standards and be less vulnerable to legal and regulatory challenges. Thus, it is critical to comprehend the recommendations and the evidence behind them.

The training will assist in developing confidence in the ability to think clearly and critically before reporting about mental illness and suicide in any media outlet.

You are taking up training in media and mental health because you had the intention in the first place, and you were successful.

Having the right intentions leads to receiving bright insights. If you have only intent or insights, it will not be sufficient.

To make an impact, you need to put your newly acquired knowledge into practice at your place of employment, where you have the opportunity to implement your learning.

intent                    insight
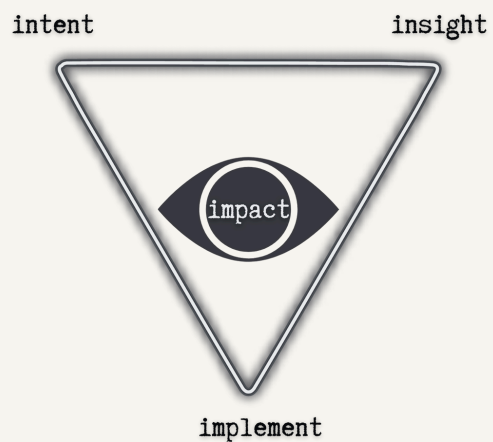
impact

implement

With the right intention, bright insight, and tight implementation, you can make quite an impact.

# KEY TERMINOLOGY

### WERTHER EFFECT

The "Werther effect" refers to an increase in suicide rates following the publication of a suicide narrative, as occurred after Johann Wolfgang von Goethe's publication. In 1774, The Sorrows of Young Werther (original title: Die Leiden des Jungen Werthers) was published.

### PAPAGENO EFFECT

In Mozart's "Magic Flute," a magical fairy tale opera, Papageno is a fictitious figure. The Papageno Effect, named after the protagonist, refers to the media's impact by responsibly reporting on suicide and presenting non-suicide alternatives to crises.

### SUICIDE CONTAGION

It is the suicide risk connected with first-hand or media exposure to another person's suicidal behaviour. Suicides that may have been induced in part by contagion are frequently referred to as "copycat suicides."

### SUICIDE CLUSTER

A suicide cluster may be defined as a group of suicides or suicide attempts that occur closer together in time and space than would normally be expected in a given community.

### SUICIDE PACT

A suicide pact is an agreement between two or more people to die by suicide together at a given place and time.

### SYNDICATED CONTENT

Content is published or broadcast simultaneously in several newspapers, television stations, and other media outlets. Journalists should also be aware that their reports can be auto-generated from a syndicated feed and distributed further without further editing.

### ECHO CHAMBER

The environment in which a person encounters only beliefs or opinions that coincide with their own so that their current views are reinforced, and alternative ideas are not considered.

### FILTER BUBBLE

A situation in which an internet user encounters only information and opinions that conform to and reinforce their own beliefs is caused by algorithms that personalize an individual's online experience.

### CLICK BAIT

Something (such as a headline) is designed to make readers want to click on a hyperlink, especially when the link leads to content of dubious value or interest.

# BRAINSTORM

## Question I

Can press coverage help change the
trajectory of the suicide crisis
in today's fast-paced society
where everyone is pressed for
time?

## Question 2

Is it likely that suicide-related
conversations in publications,
personal narratives, and press
coverage can have a profound
impact?

## Question 3

Can certain visuals or language
impact a person's decision to live
or die? Is there a way one
person's suicide might lead to
another?

## Question 4

To what extent does the media
contribute to the suicide crisis?
How can the media help to stop
people from dying by suicide?

## Question 5

Is it your experience that news coverage of suicides, particularly those with news-worthy elements such as celebrity suicides, suicide pacts, clusters, or new methods, tends to follow a consistent pattern in which incidents are widely reported as soon as they are disclosed, with an increased pressure to cover the story quickly and fuelled by the need to place them on front pages with a sensational tone?

## Question 6

In India, what are all the major challenges in mental health and suicide coverage that you can recall from the last several years? Why do some suicides garner more media coverage than others?

## Question 7

Is it helpful or more harmful to exclude suicide reporting altogether? Why?

## Question 8

Do you believe the media can play a positive role in busting misconceptions regarding mental health and suicide?

## Question 9

Do you agree with the statement that "violent criminals have had mental disorders at some point in their lives?"

## Question 10

How can journalists ensure their work is free of reporting bias to ensure that mental health-related news pieces reflect a fair point of view?

## Question 11

Do you agree that most mental illnesses, including depression, are treatable and people can often get better and live normal lives?

## Question 12

What can the media do better about those with mental health concerns to give a more accurate portrayal?

## Question 13

Do you think journalists are persuaded to use sensational media in their reporting?

## Question 14

How can media aid in amplifying the echo chamber effect of social media?

## Question 15

Did you know online content employs catchy, emotional, and frequently deceptive headlines to maximise advertising revenue?

# SUMMARY

Contrary to popular belief, suicide is not just a personal loss but a public health concern. Given the importance of the media in disseminating information to the public, they must do it in a sensitive and grounded manner, particularly regarding mental illness and suicide coverage.

Numerous research studies conducted worldwide have revealed that certain types of news coverage can raise the risk of suicide in vulnerable individuals. The phrase "vulnerable individuals" is the key. Suicidal media content is processed differently by more vulnerable individuals than less vulnerable ones. In the moments before the suicide act, suicidal individuals are ambivalent, swinging between life-sustaining and death-focused impulses. From this perspective, it appears reasonable to infer that messages from the environment, including media sources, have particular relevance. Individuals who already have suicide intentions can be "triggered" as though it were the final push for those already on edge. The trigger effect will be greater if:

- attributing suicide to a single circumstance
- specifying the location
- explicitly describing the method
- elaborating on the suicide note content
- printing the incident on the first page
- using the term "suicide" in the headline
- exposure of graphic images
- portraying the deceased's attitude as heroic and ideal.

In the media report, the vulnerable individuals identify themselves with the person described, who could be a colleague, companion, or citizen belonging to the community. Assuming that suicide is the solution to the problems they are facing, people may "copy" or "imitate" the suicidal behaviour of others, eventually dying by suicide. The stronger the resemblance between the individual and the victim presented in a media report, the greater the impact.

Extensive research has found a link between celebrity suicide coverage in the media and suicides among people, dubbed the Werther effect. When people overidentify with celebrities or high-profile individuals, media coverage of their suicides increases suicide fatalities in the general population.

Empirical evidence suggests that disclosing suicide safely and appropriately minimises the risk of contagion and improves help-seeking behaviour among those in need. The Papageno effect may help educate the general public on the difficulties that may lead to a person becoming vulnerable and the signs of struggling to cope.

It can encourage help-seeking behaviour by emphasising the benefits of communication. Narratives of lived experience and resources offering treatment and intervention choices appear to be the most promising suicide-protective Papageno effects.

The media can help save lives by using language that does not sensationalise or normalise suicide or promote it as a constructive solution to problems. Factors such as the desire to sensationalise, a lack of knowledge of ethical reporting norms, and a tendency to underestimate their influence on the minds of readers or viewers make responsible and sensitive reporting difficult.

The media can positively impact by capitalising on the 'Papageno effect'. It is thus up to the media to do their part in suicide prevention by following certain professional principles.

Rapidly evolving online media is gradually dominating the media landscape. Maintaining vigilance regarding syndicated content published or transmitted concurrently in multiple newspapers, television stations, and other media channels is vital.

With the rise in popularity of syndicated content, media organisations have pooled resources and expanded their coverage to include anyone outside their regions or countries. As a result, a single piece of content can be repeated and amplified throughout hundreds of local, national, and international outlets.

Digital media is a volatile medium, a slippery slope that exposes vulnerable people to various healthy and unhealthy content. In this context, media can be viewed as part of the phenomenon known as the "echo chamber effect of social media," which means that we are surrounded by individuals who confirm our beliefs and rarely challenge them. The internet also has a distinct echo chamber known as a filter bubble.

Algorithms build filter bubbles that track which links are clicked and which are ignored. Websites will then utilise those algorithms to offer content similar to what they have previously expressed interest in. In addition, headlines are sometimes changed for commercial purposes.

Click baiting is a phenomenon that, in particular, generates internet headlines. Link clicks are the most common source of revenue for websites. When consumers click on an enticing headline, a sequence of pages with advertisements helps the website make money.

Because syndicated online suicide reports have the potential to grow viral, reinforce echo chambers, build filter bubbles, and drive click baits, the same evidence-based recommendations apply to online mental health and suicide reporting.

Mental illness is frequently the subject of media speculation, concluding before the facts are known. Studies have regularly found that print and broadcast media portray mental illness as disproportionately dramatic, distorted, and damaging. It portrays danger, criminality, and unpredictability.

They also demonstrate negative reactions to the mentally ill, such as dread, rejection, scorn, and mockery. The most harmful media portrayals of people with mental health challenges portray them as violent or criminal. This is despite them being considerably more likely to be the victims of crime than the perpetrators.

The association between mental illness and crime or between mental illness and violent behaviour is difficult to navigate. Early childhood experiences, poverty, physical challenges, upbringing, and heredity are a few factors that influence a person's mental health and well-being throughout life. It is significantly more common for substance misuse to predict violent conduct than, for example, depression. Unfortunately, substance addiction can cause or be a consequence of mental illness, depending on the situation.

Individuals suffering from depression or anxiety can use illicit drugs to relieve their symptoms to ease their pain. The precise mechanism through which this fits together is intricate and complex. Stigmas that force people with mental health issues into hiding and away from treatment are unlikely to help.

Stigma against mental illness can contribute to a patient's unwillingness to seek treatment or to maintain therapy if diagnosed. When the media often portrays mental illness as hopeless, it may appear that people with it cannot lead regular, productive lives, but this is untrue. Most people recover with treatment, medication, and family and friends' support.

When reporting on mental health, the solution-focused nature of the story is very important. Make a point of being specific. It transforms the reporting from detached to empathic, a trait that is critical for good mental health reporting. Section 24 (I) of the Mental Health Care Act of 2017 establishes the guidelines for disseminating and reporting mental illness information by the media.

It is important to remember not to publish images or other information about a person seeking treatment at a mental health facility without their consent. When writing an article on any mental illness, the ability to provide referral support is as important as familiarizing oneself with responsible reporting requirements. Of course, offer information at the end about where people can seek assistance.

Be mindful that underreporting suicide compared to the actual occurrence and overreporting specific types of suicide may be detrimental to suicide prevention. Suicide's relative lack of media coverage compared to other crimes like homicide may contribute to the public's view that suicide is less of an issue, resulting in a lack of interest in public funding for suicide prevention.

# GUIDELINES

To ensure responsible media reporting in India, one must consider referring to

- World Health Organization's publication Preventing Suicide:
  A Resource for Media Professionals, Update 2023 (12 September 2023).

- Press Council of India (PCI) guidelines for Mental Illness and Suicide reporting 2019.

- Select sections of the Indian Mental Health Care Act 2017.

While reporting stories on suicide, adhere to the Press Council of India (PCI) guidelines on media reporting of suicide, adopted in pursuance of the World Health Organization report on Preventing Suicide: A Resource for Media Professionals, 2017 update (Reference - Press Release PR/10/19-20-PCI dated 13.09.2019).

While reporting stories on suicide, do not

- place stories about suicide prominently
- unduly repeat such stories,
- use language that sensationalises or normalises suicide or presents it as a constructive solution to problems,
- explicitly describe the method used,
- provide details about the site or location,
- use sensational headlines,
- use photographs, video footage or social media links.
- use the phrase "commit suicide" as it conveys crime, generating stigma for those who have lost a loved one to suicide and discouraging suicidal people from seeking treatment.

Section 115 of the Indian Mental Healthcare Act, 2017, states that every person who attempts suicide will be presumed to be under severe stress. Section 309 of the Indian Penal Code, 1860, which criminalises attempted suicide, would not apply. Thus, media professionals must not report suicides as crimes (e.g., committing suicide).

Section 24 (1) of the Mental Health Care Act of 2017 establishes the guidelines for disseminating and reporting mental illness information by the media. It is important to remember not to publish images or other information about a person seeking treatment at a mental health facility without their consent.

# CHECKLIST

✅ Do provide accurate information about where and how to seek help for suicidal thoughts and suicidal crises.

✅ Do apply particular caution when reporting celebrity suicides.

✅ Do educate the public with the facts about suicide and suicide prevention based on accurate information.

✅ Do report stories of how to cope with life stressors and/ or suicidal thoughts and the importance of help-seeking.

✅ Do apply caution when interviewing bereaved family members or friends or persons with lived experience of suicide.

✅ Do recognize that media professionals may themselves be affected when covering stories about suicide.

❌ Don't position suicide related content as the top story and don't unduly repeat such stories.

❌ Don't use language/content which sensationalizes, romanticizes or normalizes suicide, or that presents it as a viable solution to problems.

❌ Don't describe the method used.

❌ Don't name or provide details about the site/location.

❌ Don't use sensational language in headlines.

❌ Don't use photographs, video footage, audio recordings, or digital or social media links.

❌ Don't report the details of suicide notes.

❌ Don't oversimplify the reason for a suicide or reduce it to a single factor.

**Remember to follow the MEDIA guidelines, the guiding light that has the potential to save lives**

**M**aintain suicide coverage to a minimum

**E**ducate the public the facts about suicide and suicide prevention

**D**on't mention the method used, the location or video links

**I**nclude information about seeking help

**A**void simplifying, speculating, sensationalizing and suggesting suicide as a solution to problems

# CHALLENGES

Often, the press appears to struggle to protect its freedom of expression. It frequently happens when a well-known public person dies by suicide, has a sensational element, such as a suicide pact or cluster, or a novel method. As the story breaks, the news media tends to cover the tragic incident extensively, typically on the front pages and in a sensational tone, driven by the need to cover the storyline quickly. Several photographs of the deceased surface in headlines, and major media debate about possible motives ensues in the days and weeks that follow. Informing the media that their reporting may be harmful is then warranted. The supervisor can convene a private media briefing to remind the team of their responsibilities and give case-specific instructions. Briefings change reporters' tone and substance, lessening the likelihood of news coverage influencing imitative behaviour.

Media coverage of suicide clusters is challenging. People want to know about suicide clusters and hold public officials accountable for taking preventative steps. However, reporting about clusters of suicides risks sensationalising the deaths and promoting copycats. The media should rethink its depictions of cluster reporting. Avoid using language or visuals that emphasise the number or frequency of deaths, as this may unintentionally "promote" the cluster. Notify the media outreach team if a cluster of suicides is likely to occur. Ask them not to publicise the method of suicide or group the suicides together. Of course, there is the risk of attracting more attention by bringing a previously unknown issue to the attention of reporters. Experts say proactive preventive intervention is more likely to avert damaging publicity.

A murder-suicide is distinct from a solitary suicide. Like suicide, these events are typically complex. To reduce panic in the community, focus on facts and comments that highlight unusual occurrences rather than speculating on the events. Reporters should be sensitive while covering survivors. It would help if you did not expose the particulars of the act, such as the approach to killing or the use of weapons. Overstating the incidence of violent crimes, including murder-suicides, does not help anybody. If the perpetrator has been diagnosed with a mental disorder, describe it in simple, non-stigmatizing terms. To understand their motivations, it is critical to place murder-suicides in the correct context. How to receive help for mental health issues must be explained (e.g., helplines). Avoid prolonged coverage of homicide-suicide.

# Responsible reporting of suicide in the media "Lifeboat in a Storm."

Imagine each media report on suicide as a lifeboat navigating through a turbulent sea, where the storm represents the complex, emotionally charged issue of suicide. Here's how the elements of this metaphor align:

Lifeboat is the News Report: Like a lifeboat, the report should be sturdy and reliable, built on facts and ethical guidelines. It should be a vessel that can help people reach safety—not put them at further risk

Storm is Sensationalism: The temptation to sensationalize or glamorize suicide can be likened to the raging winds and waves that can easily capsize a lifeboat if not navigated carefully.

Compass is Ethical Guidelines: Just like a compass helps sailors navigate through storms, ethical guidelines for reporting should direct journalists through the complexities of covering sensitive issues.

Life Jackets are Trigger Warnings: Just as life jackets are mandatory safety gear on a boat, trigger warnings should be a standard feature, allowing readers to engage or disengage.

Rescue Flares are Support Resources: A responsible lifeboat carries flares to signal for help. Similarly, reports should always include helpline numbers or support resources, serving as a beacon for those who need it.

Captain is the Editor/Journalist: The captain makes critical decisions about navigation and safety. Journalists and editors should exercise caution and judgment in how they frame stories, what language they use, and how they present data.

Passengers are the Audience: The ultimate goal is to get the passengers—your readers—to safety, providing them with the information they need without causing harm or exacerbating the crisis.

The "Lifeboat in a Storm" metaphor reminds you that you are responsible for guiding your audience through sensitive content with care, accuracy, and an ethical compass. Like lifeboat captains, your choices can mean guiding people to safety or leading them to sufferings.

# RESESOURCES
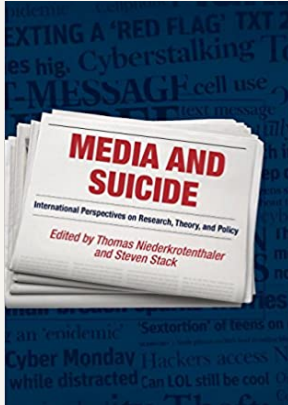
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and Policy

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## https://www.bloggingonsuicide.org

Suicide Awareness Voices of Education has developed
more guidelines for bloggers (SAVE). These
recommendations are based on traditional media norms,
identifying common safety risks in blogs and how to
address them.

## http://topreventtheattempt.com

A set of online best practices for small, medium, and
large organisations and corporations has been
designed. Suicide prevention online tools with
interactive components are recommended for beginners,
intermediates, and experienced users. Recommendations
include a help centre with information on supporting
resources and FAQs on suicide, policies on how to
respond to possible suicidal users, rules on
involving law enforcement, and information on where
to refer potentially suicidal persons.

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# CREATE HOPE THROUGH ACTION

No matter how slippery the slope seems,
there is always hope for people suffering;
Every action could help light the way
for those who have lost all hope.

Suicide is preventable. We are all accountable -
as responsible members of society, as family
members, friends, partners, parents, peers,
neighbours, gatekeepers, and media reporters.

By creating hope through action, we can all make a
difference in someone's darkest hour.

We all have a responsibility.
to support those in distress and
those who have lost someone to suicide.

Be The Ray of Hope For Those on a Slippery Slope!