

Suicide on Screen: *13 Reasons Why Not?*

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Background

Suicide contagion

- Contagion: Suicidal behaviour may facilitate the occurrence of subsequent suicidal behaviour, either directly (via contact or friendship with the index suicide or via the media) or indirectly (*Haw et al, 2012*)
- A single suicide increases the risk of additional suicides within a community and may serve as a catalyst for the development of a cluster (*Johansson et al, 2006; Gould et al, 1990*)
- Suicide clusters can be considered as the end result of a contagious process in which vulnerable individuals connect to influence one another (*Mesoudi, 2009; Johansson et al, 2006; Berman & Jobes, 1994; Gould et al, 1990*)
- Research has consistently shown that following the detailed portrayal of suicide in the media or in a film/TV series, the risk of suicide involving the same method increased from 81% to 175% in the weeks and months after the release (*Ladwig et al, 2012; Sisask & Varnik, 2012; Hawton et al, 1999; Schmidtke & Häfner, 1988*).

Historical evidence of contagion of suicide

1774: “*The Sorrows of Jung Werther*” – JW Von Goethe

- Following publication of the novel, indications for imitative suicides among young men in Germany, and in Denmark and Italy – “The Werther Effect”

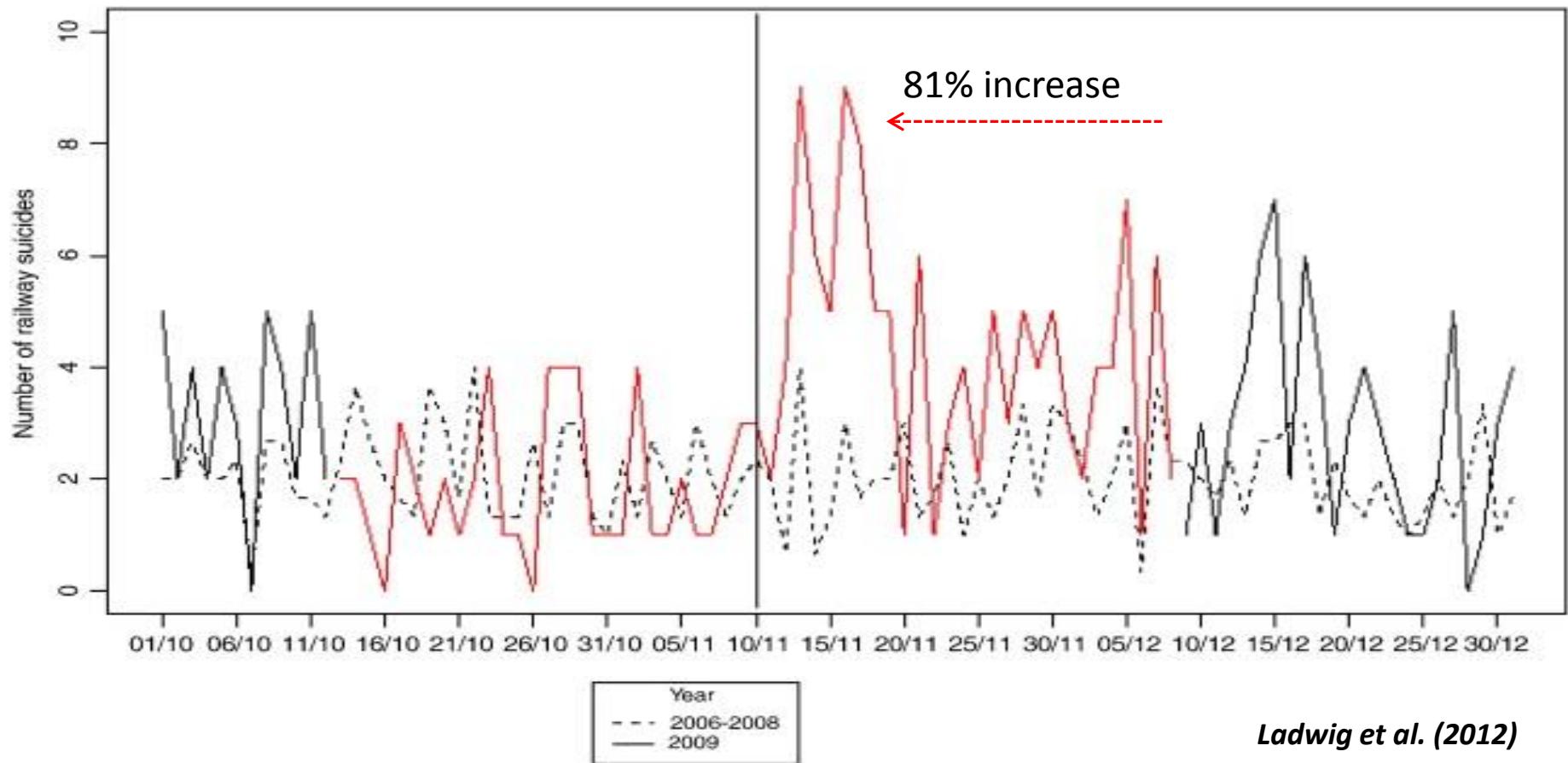


1988: TV film of railway suicide of a 19-year old male student

- A tv film showing the railway suicide of a young men was followed by a 175% increase in railway suicides in young men over 70 days after broadcasting (2x).

Phillips, 1974; Schmidtke & Häfner, 1988; Halgin et al, 2006

Significant increase of railway suicides after the suicide of German goal keeper, Robert Enke on 10th November 2009



Ladwig et al. (2012)

In addition to the short term increase in railway suicides, Hegerl et al (2013) identified a long-term effect: 19% increase in railway suicides in the two years after the suicide by Robert Enke

German goalkeeper kills self by stepping in front of train, police say

November 12, 2009 1:53 pm EST

Germany stunned as national goalkeeper Robert Enke commits suicide

By SPORTSMAIL REPORTER

Last updated at 12:15 PM on 11th November 2009



Reasons Why Not

1. The graphic nature of reporting and the reporting of specific details of highly lethal methods involved can trigger copycat cases; the effects of exposure on suicidal behaviour and violence are well-documented.
2. There is no consideration of young vulnerable people who may over-identify with the teenage girl in '*13 Reasons Why*' who ends her life.
3. There are elements of glorifying and romanticising suicide, which may further impact on people who are considering suicide or self-harm.
4. The protagonist is memorialised throughout the episodes and her locker at school is decorated and students take selfies in front of it. This is an example of memorialisation that could be misinterpreted by young people as something they too will get if they die by suicide.



Reasons Why Not

5. The death by suicide of the protagonist is presented as a quasi-rational response to the behaviour of others, as a ‘black and white’ situation, oversimplifying the processes underlying self-harm and suicide. Other young vulnerable people may perceive suicide as an escape when faced with similar situations.
6. Revenge suicide is relatively rare; revenge motive is reported by a minority of young people who self-harm.
7. Evidence based information on positive mental health promotion and help-seeking for mental health problems, was not taken into account.
8. Evidence of copycat suicides and suicide attempts/self-harm via information from IASP National Representative since early April 2017.



Evidence of copycat suicides and suicide attempts/ self-harm

*Families blame '13 Reasons Why' for the suicides
of 2 teens in California (US), April 2017)*

Netflix officials defend 13 Reasons Why against claims it glamourises suicide



Dylan Minnette and Katherine Langford in 13 Reasons Why

Netflix drama series blamed for inspiring teens' suicide and attempted suicide (Austria), May 2017

*'13 Reasons Why' copycat suicide in Peru,
June 2017*

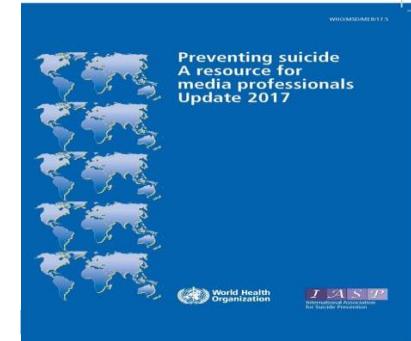
*Increase in teen suicidal behaviour linked to
'13 Reasons Why', Toronto, June 2017*

Internet searches for suicide following the release of *13 Reasons Why* (Ayers et al, JAMA, 2017)

- Comparison of internet search volumes (31st March - 18th April 2017) with expected search volumes if the series had never been released
- Suicide-related searches were 15-44% higher than expected, 12-19 days after the show's premiere
- Searches “*how to commit suicide*” (26%); “*commitsuicide*” (18%); “*howtokillyourself*” (9%) were all significantly higher than expected
- Public awareness indicative searches were also elevated.
- **Conclusion:** *13 Reasons Why* elevated suicide awareness, but it is concerning that searches indicating suicidal ideation also rose

Recommendations

- Films and shows such as *13 Reasons Why* should follow the WHO Media Guidelines, in particular removing scenes showing suicide and include suicide helpline numbers in each episode.
- Programmes should undergo testing to evaluate any effect on public health outcomes before release to minimise societal harms.
- Adherence by film directors to safe messaging guidelines, and providing young viewers and the supportive adults in their lives with necessary resources, especially considering “binge watching”.
- Increased awareness of suicide risk/protective factors and warning signs among professionals in primary care and community based settings.



A Call for Social Responsibility and Suicide Risk Screening, Prevention, and Early Intervention Following the Release of the Netflix Series *13 Reasons Why*

Kirby L. McManama O'Brien, PhD, John R. Knight, MD, Sonja H. Harris, PhD, CHW

The national Institute for Health Research recently reported that suicide has become the second leading cause of death among young people, accounting for more than 1 in 6 deaths.¹ Adolescent reports of suicide ideation and attempts have increased over time, particularly among female national high school Youth Risk Behavior Survey,² the percentage of high school respondents who reported that they seriously considered attempting suicide during the 12 months preceding the survey rose from 11.8% in 2009 to 17.3% in 2015. In addition, nearly 1 in 4 female national high school students making a plan for how they would attempt suicide increased (10.9% to 14.6%), and the percentage of students who had made a plan increased.³

Ayers and colleagues⁴ found that suicide-related internet searches increased following the release of the series *13 Reasons Why*. In addition, the authors found that the series was associated with an increase in calls to the National Suicide Prevention Lifeline (1-800-273-TALK). In addition, the authors graphically depict the suicide deaths of the star of the series and her friend, and provide detailed descriptions of how or where a person died or detailed descriptions of how or where a person died which can be a factor in vulnerable individuals imitating the attempt.

It is clear that there was a strong response to *13 Reasons Why* that may encourage others to produce similar shows. That being the case, it is important that professionals, particularly those who have taken steps to mitigate the latter, as encouraged by suicide prevention specialists. For instance, grants are available through the American Foundation for Suicide Prevention (www.afsp.org/prevention/teaching-and-training) could have protected against some unintended effects. Specifically, as Ayers and colleagues⁴ found, the series may have been better benefited from emphasizing seeking help and providing information on finding helpful listing concrete steps before and after a suicide attempt. The National Suicide Prevention Lifeline (1-800-273-TALK). In addition, the choice to graphically depict the suicide deaths of the star of the series and her friend, and provide detailed descriptions of how or where a person died or detailed descriptions of how or where a person died which can be a factor in vulnerable individuals imitating the attempt.

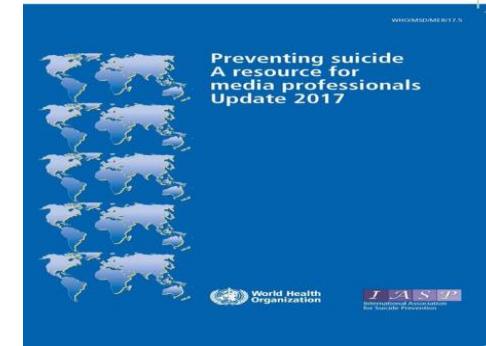
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Preventing suicide: A resource for media professionals Update 2017

Ayers et al, 2017; McManama O'Brien et al, 2017

Steps undertaken by IASP

- IASP Briefing Statement disseminated among IASP National Representatives and key contacts in all 75 IASP member states.
- Communications with US and EU Netflix branches; As a result, the scene showing the suicide act was taken off YouTube.
- Priorisation of the updating of the WHO-IASP Resource for Media Professionals (2017)
- Ongoing liaison with Netflix by Co-Chairs of the IASP Special Interest Group on Suicide and the Media
- Monitoring of copycat suicides and suicide attempts/self-harm via IASP National Representatives



Challenges in relation to harmful information on internet and social media

- Harmful/potentially harmful media can be accessed across jurisdictions
- Increasing speed of circulation via social media
- Absence of code of conduct for film directors, in line with code of conduct for media professionals
- Unclear whether regulatory agencies for traditional media are responsible for monitoring social media
- Existing evidence on suicide contagion not translated into practice for all media stakeholders, including film and show directors

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