



MYTH: You should drink 8 glasses of water a day

FACT: Most people get enough fluids from typical daily consumption of milk, juice and caffeinated beverages. Drinking too much water is, in fact, dangerous.¹

Which statement will you remember tomorrow?

Is Myth-Busting Counterproductive?

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Purpose

The purpose of this poster is to:

1. Highlight recent research on the possible negative impact of "myth-busting" as a method communication.
2. Suggest recommendations for suicide prevention materials.
3. Provide recommendations for future research.

What is 'Myth-Busting'?

Myth-busting involves listing misconceptions and then 'debunking' them by presenting the correct information. This approach is common practice in many types of standardized and informal health communications.^{2,3,4,5}

How is Myth-Busting Used in Suicide Prevention?

Suicide prevention programs, crisis hotlines and informational websites use myth-busting techniques to increase awareness or knowledge about suicide and suicide prevention. Common myths and facts used in suicide prevention programs include:

- **MYTH:** If someone really wants to kill themselves, there is nothing that can be done.
FACT: Most suicidal people are undecided about living or dying. A part of them wants to live, but death seems like the only way out of their pain and suffering.
- **MYTH:** Suicide happens without warning.
FACT: Most suicidal people give many clues and warning signs that they are thinking about taking their lives.
- **MYTH:** Talking about suicide can put the idea in someone's head or make them decide to take their lives.
FACT: Talking about suicide does not increase suicide risk – in fact, it is the best way to find out if someone is at risk and get them the help they need.
- **MYTH:** People who talk about suicide don't complete suicide.
FACT: Many people who die by suicide give warnings of their intentions. Always take any comment about suicide seriously.

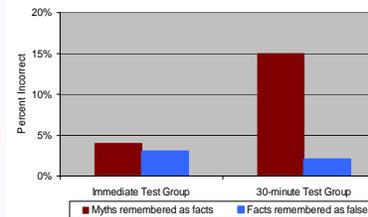
Effects of Myth-Busting on Accurate Recall of Facts

Skurnik, Yoon, and Schwarz⁶ used a CDC flyer (Figure 1) to study the impact of one myth-busting approach on factual recall and behavioral intentions. Immediately after reading the flyer, a group of students recalled myths as true 4% of the time. Thirty minutes later, a second group of students who read the flyer recalled myths as true 15% of the time (Figure 2).

Figure 1⁷



Figure 2
Accuracy of Recall for Those Who Read "Facts & Myths" Flyer



Another group of students was given a "facts only" version of the flyer to read, with simple statements of fact about flu vaccines. Compared with students who read the "myths & facts" flyer, the "facts only" students placed greater importance on getting a flu vaccine and stated that they were more likely to get a flu vaccine.

The authors attributed the recall of myths as true to an "illusion-of-truth" effect where, "once the memory for substantive details fades, familiar statements are more likely to be accepted as true than to be rejected as false".⁶ They concluded that "The common 'facts & myths' format, used in many public information campaigns, runs the risk of spreading misinformation in an attempt to discredit it...Accordingly, information campaigns should focus on the facts, avoiding reiteration of the myths".⁶

Recommendations: Just the Facts

Simple factual statements appear to increase accurate knowledge retention and positive behavioral intentions over the use of myth-busting techniques.^{6,8}

Suicide prevention practitioners should use simple factual statements such as:

- Suicide can be prevented.
- There are almost always warning signs that someone is thinking about suicide.
- Always take a threat of suicide seriously and get help.

Questions for Further Research

The Skurnik et al.⁶ study supports an "illusion-of-truth" effect on the factual recall of vaccine information presented in a flyer, but does this result generalize to the field of suicide prevention and other modes of communication?

Specifically:

1. Does the presentation of suicide myths and facts result in lower factual recall than the presentation of facts alone?
2. Does the "illusion-of-truth" effect hold true for different modes of communication, such as video, audio, and PowerPoint presentations?

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