



Injury Control Research Center
for Suicide Prevention

If the Media is Ready to Change the Conversation to Suicide Prevention, Are We Ready to Help Them?

By: John Draper, Ph.D., Executive Director of the National Suicide Prevention Lifeline

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“My editor at *USA Today* wants me to write a column on Kate Spade. Is there really anything more to say about her suicide?” My brother’s fiancé, Kirsten Powers, *USA Today* columnist and on-air political analyst for *CNN*, was not enthusiastic about this assignment when she called me two days after Ms. Spade’s suicide.

I always enjoy talking with Kirsten, and I was happy to take dozens of other calls from media after the Spade and Bourdain suicides. But I haven’t always enjoyed talking with the media.

Among other reasons, I didn’t love focusing on what they wanted to talk about: suicide, instead of my greater passion, suicide prevention. Many years ago, a media training expert told me: “John, don’t focus on the story the media wants to tell; bridge the conversation to the story that *you* want to tell. What is the message that *you* want to communicate?”

In 2014, Lifeline’s communications team developed a public and media messaging strategy that included two suicide prevention focused themes: promoting stories of people finding help, hope and healing through suicidal despair; and providing concrete actions that anyone can take to help someone who may be suicidal (see National Suicide Prevention Lifeline’s *Bethe I to.com* initiative). With these messages in hand, I noted to Kirsten, “Yes, there is more to say, but not about Kate Spade.”

I shared with her that for every one person who dies by suicide, there are hundreds of others in this country that think seriously about suicide who don’t kill themselves. “Those are often untold stories of suicide prevention,” I explained, “and research suggests that telling these stories in the media of how



people positively cope through suicidal moments are associated with reductions in suicide in populations who hear, see or read about these stories.” In our field, we know this as the *Papageno Effect*—the counter “contagion” to the *Werther Effect*.

Kirsten paused, and then calmly stated, “Maybe I will tell my story then.”

The next day, while the media reported the suicide of Anthony Bourdain, Kirsten, a colleague of Bourdain’s, shared her personal story of overcoming suicidal thoughts. Her June 9th USA Today editorial, [*Americans are Depressed and Suicidal because Something is Wrong with our Culture*](#) was the most read USA Today story of the week. The burst of positive response from her readers led USA Today to ask me to write a follow-up article: [*Today’s Talker: After Kate Spade, Anthony Bourdain Suicides, A Look at How to Prevent Deaths*](#) which emphasized a “contagion of hope.”

There was a remarkably different media response in the dozens of media interview requests I received following the Spade and Bourdain suicides. It seemed that almost every reporter I spoke with explicitly stated fear of contributing to a suicide contagion, with some specifically citing the increase in suicides following the relentless media coverage of Robin Williams’ suicide in 2014. All of them asked, “*What do readers need to know about suicide prevention?*”

I believe reminding the public that help is available, providing the Lifeline number, and sharing the research that calls to the Lifeline number can reduce suicidality and emotional distress is a vital first step, but it is not enough. The Lifeline saw record-breaking call volume from the 10,000+ media mentions of 800-273-8255 on the days following the deaths of Spade and Bourdain. But many members of the media are ready and willing to do more. Are we ready to give them more? Are we ready to collaborate with them to write stories of suicide prevention, and generate our own stories showing how suicides are being prevented? What is *our* message, and how are we communicating it?

In talking with members of the media, I find that they like numbers, which can get them interested in the stories behind the numbers. The rising suicide rates in the 21st Century have spurred many headlines over these years. But how do we find a number to quantify what is *not* happening (e.g., the number of suicides being prevented)?

The overwhelming weight of my 25 years of crisis intervention work has shown me that most people experiencing a suicidal crisis find help, hope and healing. In 2016, after the CDC reported an increase in suicide rates, I explored how these death rates compared to “survival rates,” or indicators of prevention. By combining one-year survey results from SAMHSA’s National Survey of Drug Use and Health (NSDUH) and the CDC’s Youth Risk Behavior Surveillance System (YRBSS) related to serious suicidal thoughts (and separately, attempts) of adults and high school aged youth, I arrived at a rough estimate of 1 suicide for about every 280 people thinking seriously about suicide.

This estimate is not perfect, but it effectively illustrates a basic truth that has allowed me and my many thousands of dedicated colleagues in crisis intervention to feel positive about our work over the years. When I use this figure in media interviews, it has consistently changed the conversation to the one I want to have, and a story they seem interested in telling...these “untold stories of suicide prevention.” One of my favorite examples is the remarkable article by Abigail Jones from Cosmo, [*“The Invisible 280: This is the suicide story that you’re not hearing.”*](#) Abigail originally contacted me with the assignment to write an article on the rising suicide rates in Kate Spade’s age group. Our conversation

helped to shift her interest to telling these “untold stories” that are associated with reducing suicide rates among those who may read them.

While I am seeing some signs of change in the media’s willingness to embrace stories of suicide *prevention*, I am concerned about our field’s readiness to engage the media in ways that take advantage of these fertile opportunities. Until very recently, our most common communications have focused on telling the media *what not to do*. We are often far less clear and practiced in telling them *what to do*, aside from calling the Lifeline (which is working); giving them warning signs of suicide (which has no evidence of having an impact); or seeing a therapist or doctor (advice which many aren’t following, and advice that many clinicians are unprepared for responding to).

Dan Reidenberg of SAVE and I are currently leading an international workgroup to establish a uniform framework for suicide prevention messaging that will also engage input from the National Action Alliance for Suicide Prevention, stakeholders throughout our field, and the public at large. We hope to complete this consensus building process and release our messaging recommendations through the Action Alliance and our constituent networks in 2019.

However, there are some basic suggestions that we can all begin acting on now. It is essential that we are able to offer more evidence of our successful suicide prevention efforts and activities in our communications with local media. What are examples of activities with “your 280” persons locally, who had suicidal thoughts and coped through it?

It is also critical that we become more prepared to provide to the media local persons with lived experience of suicidality to share their stories of help, hope and healing, in ways that are sensitive and helpful to both the storyteller and the audiences who are hearing or reading these stories. The media likes numbers, but they are typically looking for a story of a person who can illustrate what these figures mean. This is also the same formula for getting legislators and funders to pay attention to our activities and what we need to grow them.

There are challenges in advancing our collective collaborations with media, including personal anxieties and fears of either us or the media “getting it wrong.” Nevertheless, we have to take on these anxieties and fears and agree on ways that we can “get it right”.

Our field is well aware of the media’s power to influence public behaviors. If suicide rates increased after the flood of media in the wake of Marilyn Monroe’s and Robin Williams’ suicides (12% and 10% respectively), what might the suicide rates in our country look like if we could engage public figures and the media in more stories about suicide prevention?

Over the past decade, the message conveyed through our media outlets is: “for every one story of a person who thinks seriously about, but doesn’t die by suicide, there are hundreds other stories about suicide.” But our experiences as preventionists reminds us of the truth not reflected in the media “for every one person who dies by suicide there are hundreds of others who think seriously about it but don’t kill themselves”.

If we can engage the media substantively to flip these messages, we will have a powerful partner in our collective efforts to significantly reduce suicides in this country. Let’s get ready to do so.

John Draper, Ph.D., is Vice President of National Networks for [Vibrant Emotional Health](#), and Project Director of the SAMHSA-funded [National Suicide Prevention Lifeline](#) network. Under his leadership, Vibrant also administers and supports other national crisis hotline networks, including the Disaster Distress Helpline, the U.S. Department of Veterans Affairs' Veterans Crisis Line, and the National Football League's NFL Life Line.

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