Suicide Clusters: 
What we know and what we don’t know

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SUICIDE CLUSTERS: WHAT WE KNOW

Suicides can cluster in:

- time only (temporal or “mass” clusters)
- space only (spatial or geographic clusters)
- space and time (space-time or “point” clusters)
SUICIDE CLUSTERS: WHAT WE KNOW

There is no one type of “suicide cluster-prone” community. Clusters occur in communities with varying socioeconomic and ethnic profiles.

Canada First Nation community in crisis amid 'almost nightly' suicide attempts

Community of 2,000 has seen more than 100 attempts in seven months, says chief, as country’s indigenous people continue to face higher levels of poverty.

The Silicon Valley Suicides

Why are so many kids with bright prospects killing themselves in Palo Alto?
Suicide clusters occur primarily among teenagers and young adults.
SUICIDE CLUSTERS: WHAT WE KNOW

1988-1996, 53 clusters
SUICIDE CLUSTERS: WHAT WE KNOW

• At a minimum, 5 youth suicide clusters occur each year in the U.S.
The media can play a role in triggering a cluster

Newspaper coverage of suicide and initiation of suicide clusters in teenagers in the USA, 1988–96: a retrospective, population-based, case-control study

Madelyn S Gould, Marjorie H Kleinman, Alison M Lake, Judith Forman, Jennifer Bassett Midle

Summary
Background Public health and clinical efforts to prevent suicide clusters are seriously hampered by the unanswered question of why such outbreaks occur. We aimed to establish whether an environmental factor—newspaper reports of suicide—has a role in the emergence of suicide clusters.
SUICIDE CLUSTERS: WHAT WE KNOW

Stories published after the index cluster suicides compared to those published after non-cluster suicides:

↑ number of stories about any suicidal individual
↑ number of stories about the teen suicide in our study
↑ front page story placement,
↑ size of headlines,
↑ headlines containing the word suicide
↑ headlines containing a description of the methods
↑ sensational headlines
↑ presence of picture
↑ detailed descriptions of the suicidal individual and act
SUICIDE CLUSTERS: WHAT WE DON’T KNOW

The precise mechanisms causing and sustaining a cluster are currently unknown.

But.........
SUICIDE CLUSTERS: WHAT WE THINK WE KNOW
-Hypothesized Mechanisms-

• Social learning theory
• Approach/Avoidance conflict: restraint reduction
• “Social multiplier” that amplifies the effects of other suicidogenic factors
• Changes in social norms
Social Norms - Definition:

- Implicit rules about “normal” or typical behaviors or beliefs in a group or setting
  - Concept in various behavioral theories (e.g., Social Cognitive Theory, Theory of Planned Behavior)

- Two main types:
  - What most people do (descriptive norms)
  - What most people approve of (injunctive norms)

(Borsari and Carey, 2003; Rimal and Real, 2003; Smith and Louis, 2008)
SUICIDE CLUSTERS: WHAT WE THINK WE KNOW

Social Norms

- Research on other health issues finds
  - Perceived norms (descriptive and/or injunctive) are one predictor of behavior.

- Media narratives and social norms
  - Narratives may convey or reinforce inaccurate perceptions about suicidal behavior, coping, services, offering help

(adapted from Linda Langford, Sc.D. Suicide Prevention Resource Center)
SUICIDE CLUSTERS: WHAT WE THINK WE KNOW

Social Norms

Suicide in Greenland, I heard over and over, is normal. People don't mean it's OK, just that it's been so common for so long that the next death almost seems inevitable.

"Somebody next to me in class said, 'Oh, I heard she jumped in front of the train,' and then everyone kind of nodded in agreement," Chakrpani told Action News. "We were just very sad together. But nobody was like, 'How could anyone ever do that?' because there've been so many of these at Penn."
SUICIDE CLUSTERS: WHAT WE DON’T KNOW

Postvention protocols to stop a suicide cluster have not been empirically evaluated.

But.........
SUICIDE CLUSTERS: WHAT WE THINK WE KNOW

-Postvention strategies are suggested by other areas of research and clinical best practices-

• Promote media recommendations
• Assess community risk
• Initiate/promote telephone and online crisis interventions
• Enhance community connectedness
• Shape community members’ (including students’) desire to “do something”
• Address myths and misinformation