



Influence of Media on Suicide: Proper Coverage of Media on Suicide Report

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To the Editor:

Sir: Dr. Ji et al. (1) have conducted a study investigating the annual trends of charcoal burning (CB) suicide, 2000 to 2011, and to examine the risk factors of CB suicide in Korea. In the study, the proportion of CB suicides among all suicide deaths reported was 0.7% (84 cases) in 2007, and since 2008 it has rapidly increased to 7.9% (1,251 cases) in 2011. Among risk factors of CB suicide in the study, the robust influence of media report about famous Korean actor Ahn's CB suicide (adjusted odds ratio, 11.69; 95% CI, 10.30-13.23) was clearly found, strikingly the risk of CB suicide was almost 12 times higher after September, 2008 compared to the months prior, indicating that the profound negative role of media report increasing copycat suicide especially in vulnerable population (e.g., 15-40s, single, and male). I would like to add up useful information along with some issues concerning a huge role of media on increasing impulsive suicidality of human and regarding proper preventive strategy to minimize such negative influence of media reporting.

Despite a positive impact of media on rapid and massive dissemination of information in a wide range of area such as science and health, such critical influence may also cause unwanted and negative results in aspect of public mental health. Most of the evidence to date for a copycat suicide effect of media report has been suggested to be indirect. However, there has been increasing evidence of copycat effect by media report today. According to studies funded by the Australian Commonwealth Department of Health and Ageing, the presentation way the media reveal stories on suicide can have a direct influence on the public's perception of suicide and its related mental health issues (2). The impact of the media on suicidal behavior is in particular strong and dangerous upon media's detailed storytelling such as specified suicide method and way to access onto lethal material; especially, such influence is more direct and profound when the suicide story is reported, modified, or por-

trayed intensively, dramatically and imminently (e.g., photographs of the deceased, large and stimulating headlines, repeated reports, explanation of background of suicide (people may identify difficult situation), and reports of immediate suicide celebrity (2)). In this context, active lead of government and community to develop media report guideline and continuous enlightenment should be initiated and established in Korea as soon as possible. In fact, such guideline and continuous education can be highly successful in responsible manner of reporting concentrating on encouragement of help-seeking and minimization of harmful messages without discouraging intention of media report (3, 4). Likewise, there were more news reporting of suicide in 2006 and 2007 (8,363 reports) compared to 2000 and 2001 (4,813 reports) in Australia; however, the quality of suicide reporting improved overall from 57% to 75%, indicating substantial improvement of media reporting on suicide in Australia (4). Despite a number of countries as well as World Health Organization (WHO) have developed media guidelines (e.g., Centers for Disease Control and American Association of Suicidology in the United States, Mindframe in Australia) (3), there have been no such acts have not been initiated in Korea. Interestingly, unlike televised suicide stories, newspaper and internet-based suicide stories can be saved, reread, displayed on one's wall or mirror, and elaborated repeatedly; according to Stack's systematic review, televised stories was 82% less likely to report a copycat effect than newspaper stories (3). This also indicates a differential impact on suicide behavior by type of media. Independently from media's role, movies misleading to glamorize and romanticize suicide can also impact or provoke individual's suicide-related acts (5). Therefore, inappropriate media portrayal and reporting of suicidal behavior should be immediately warned, educated, and enlightened by responsible health professional, community, and self-help society as well as government along with development of proper media guideline fitting environment and situation of Korea. Comprehensive, concise and clear guidelines against all potential sources such as newspaper, television, Social Network System (SNS), and internet should be developed as proposed in different countries (6): 1) avoid technical details about the method of suicide, sensational and provoking headlines along with portrayal using specific terms (e.g., suicide epidemic), dramatic pictures or video clips, description of suicide-related cause as simple one, mentioning specific website on suicide cluster, improper use of statistics, dealing as breaking news; 2) focusing on simple suicide news itself along with mentioning self-help group and easy accessible help resource and network, and keeping considerate and responsible way of report reflecting the contagion effects.

Additionally, the awareness and interest of peoples' perspectives and self-reports on suicidal ideation have drastically increased, in particular, in the management of their current mental health today. However, health professionals' and community's interaction and individual-level approach are not properly established and settled yet in Korea. Indeed interactive communication and active collaboration between health professionals and public community such as suicide organization may substantially increase the likelihood of saving people from being plunged into such unexpected impulsiveness to commit suicide by enhancing self-awareness and insight to be helped by relevant and immediately-available community resources, even they do not go to mental health professionals. Family alertness and education for vulnerable their member should be also integrated into community-centered preventive and care model as a part of community service system to reduce, minimize, and avoid such unexpected and impulsive suicide attempt, in collaboration with health professionals under full support of government. Conclusively, needless to say immediate action on development of media reporting guideline and enlightenment of media, modern health professionals to be more attentive and respectful to the need of integration, support and coalition with public health demands, by which establishment of sufficient and efficient preventive strategies may be settled in community.

DISCLOSURE

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The Authors Response:

We appreciate your attention and valuable comments in relation with our manuscript titled "Trends and Risk factors of the Epidemic of Charcoal Burning Suicide in a Recent Decade among Korean People." A huge literature supporting the copycat effect of the suicide coverage of the media on subsequent suicides has accumulated in the several decades throughout the world. In recent years, some Korean studies including this study also have presented an association between media reporting of celebrity suicides and subsequent increases in suicide (1-3). Based on this strong evidence, World Health Organization (WHO) developed suicide reporting guidelines for professional journalists and has recommended them to all the member states of WHO in 2008 (4). In the following year, the Korean Association for Suicide Prevention (KASP) and Journalist Association of Korea (JAK) developed a Korean guidelines of suicide reporting for journalists for the first time and suggested them to abide by the guidelines voluntarily.

Since then, however, the extent to which the Korean media follow the guidelines for suicide reporting has been little improved. Although the Korean Ministry of Health & Welfare (KMoHA) and KASP reinforced the previous one so that the journalists apply those items easily to their practice in 2013, the media's inappropriate behaviors about suicide reporting have still remained disappointing to those involved in suicide prevention. In this regard, the Korean government and media organizations could be inspired by the successful case of the Austrian response to the surge in imitative suicides at Viennese subway stations. The figure of subway suicides in Vienna rose dramatically between 1984 and mid-1987. In the second-half of 1987 there was a drop of 75% in subway suicides. This reduction in subway suicides began when a working group of the Austrian Association for Suicide Prevention developed media guidelines and initiated discussions with the media which culminated with an agreement to abstain from reporting (5). Also, Bohanna and Wang (6) concluded, on the review of studies addressing the effectiveness of media guidelines to bring substantial change in reporting style into the practice, that these approaches should focus on the dissemination and the education as well as the development of the guidelines.

In order to minimize the negative influences of suicide reporting, it would be very important that the general public and executives of media organizations as well as journalists should

perceived it as a serious public health problem. As you commented, health professionals could play a critical role in educating and enlightening them so that the media coverage of suicide will diminish and becomes compliant with the guidelines. Moreover, it is a very good point that the copycat effect and behaviors of suicide coverage varied by the type of media as you pointed out. We should take a suitable measure for each type of media in applying the guidelines into the practice. In particular, so many people can read the same report at the same time through Social Network System (SNS) today. It should be noted that these new media have a great potential to amplify the copycat effect of suicide coverage. Please continue to take interest in the proper role of the media on suicide prevention and we would like to discuss this topic together when we get a chance.

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