Best practices for reporting suicide

By Martín Soberano, DVM & Journalist

At present, thanks to mobile phones and social networks, all veterinarians are journalists. By means of a comment in Facebook we can express our opinion on a fact; Or use the 140 characters of Twitter to tell what happened to a colleague. Social networks enhance our message: we can upload photos in Instagram, comment on Google +, send messages by Whatsapp or Telegram, etc. However, if we are not prepared to face the news of the suicide of a veterinary colleague, less we can communicate it following guidelines that do not add more damages, simply with the diffusion of the news.

On the other hand, knowing certain communication techniques will allow us to discern the messages received. Our critical spirit will help other colleagues, for example, by detecting a publication that does not meet the recommended parameters for suicide prevention and depression.

The communication tools in our hands transformed us and we must use that power with responsibility.

<table>
<thead>
<tr>
<th>What to do</th>
<th>What not to do</th>
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<tr>
<td>• Work closely with health authorities in the presentation of the facts</td>
<td>o Do not publish photographs or suicide notes</td>
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<td>• Refer to suicide as an accomplished fact, not a successful one</td>
<td>o Do not report specific details of method used</td>
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<td>• Submit only relevant data</td>
<td>o Do not give simplistic reasons</td>
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<tr>
<td>• Highlight alternatives to suicide</td>
<td>o Do not glorify or sensationalize suicide</td>
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<tr>
<td>• Provide information on help lines and community resources</td>
<td>o Do not use religious or cultural stereotypes</td>
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<tr>
<td>• Publicize risk indicators and warning signs</td>
<td>o Do not blame</td>
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On Tuesday, March 28, 2017, the World Health Organization (WHO) and the Pan American Health Organization held a seminar on Best Practices for Reporting Suicide. It was aimed at journalists specialized in health. Speakers were Devora Kestel, Head of the PAHO / WHO Substance Abuse and Mental Health Unit, and Dan Reidenberg, an expert in mental health and suicide prevention.
**Introduction**

The average person was, according to WHO data from 2002, more likely to commit suicide than to die at the hands of a terrorist, soldier or drug dealer. The figures are surprising: of the world's 57 million deaths, some 172,000 people died in a war and 569,000 died of violent crime (a total of 741,000 victims of human violence). In contrast, 873,000 people committed suicide.


In an earlier study by the same institution, wars killed 310,000 individuals and violent crime killed another 520,000. The number of violent deaths was 1.5% of the 56 million deaths of the year 2000. However, that year 1,260,000 people died in car accidents (2.25% of total mortality) and 815,000 people committed suicide (1.45%).


**Suicide can be prevented**

Throughout the year 2017, the priority issue to be communicated by the World Health Organization will be depression. The hashtag is #Let's talk.

**The goal is for more people to seek and receive help.**

<table>
<thead>
<tr>
<th><strong>Why is depression important?</strong></th>
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<tr>
<td>Because it affects 50 million people of all ages in the Americas, 5% of the population.</td>
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<tr>
<td>Depression does not discriminate, it affects mostly women and 65% of people do not receive treatment. Only 2% of the state budget for mental health is allocated.</td>
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The consequences of depression are multiple: it increases the risk of diabetes, cardiovascular diseases and is the leading cause of disability today. The process is fed back as greater disability worsens depression.

Depression, in turn, is a suicide promoter. There are 65,000 deaths a year in the Americas and ages range from 15 to 49 years. The increase from 15 years to adulthood is significant. The data certainly do not cover all cases and the number of unreported suicides would be much higher.

**Suicide is the third leading cause of death among people 20 to 24 years of age in young people of productive age**

Men commit suicide more than women, but they have higher rates of attempts. In people over the age of 70, the suicide rate rises and it is mainly in men.

78% of suicides occur in low- or middle-income countries

The important thing is that depression can be prevented and so too, suicide. There are actions that favor prevention and one of them is responsible communication. The key is to reduce contagion and encourage colleagues to seek help. Let's talk!
General Principles for Responsibly Reporting Suicide

1 ° Risk of contagion

There are more than 100 studies reporting the phenomenon of contagion in suicide episodes. That vulnerable people listen, read or see a suicide and then do the same with their life, is real, happens and is scientifically proven.

The contagion is reproduced mainly by the media and lately, by social networks. Contagious suicide occurs when one or more suicides are reported in a way that contributes to another suicide.

"From 1 to 5% of suicides in adolescents are by group contagion"

The frequency of the issue of the suicide notice, the location of the event and the language used are key to the contagion.
The most used examples are the suicide of Marilyn Monroe * and the Metro of the city of Vienna (Austria).

*In the 60's, suicides increased by 12% two months after the death of the actress.

The way the act is spoken of and focus on the suicidal method is a critical point. A work carried out in the underground (underground) of Vienna between 1980 and 1990, managed to reduce significantly the number of self-inflicted deaths by limiting the media coverage of the same ones. How they did it? They distributed press guides on how to cover such news.

2 ° The press and dissemination is the main prevention strategy for the World Health Organization

Responsibly communicated information is the key to preventing suicides. Reporting on Suicide reports in several languages how to report a suicide so as not to promote the contagion. www.reportingonsuicide.org

3 ° Delve into the problem

Depression is the decrease in the functionality of a person.
The greatest risk is the adolescents and young people. One of the ways of prevention is to talk about the topic and to delve into certain aspects.

The public health approach to suicide prevention involves answering four questions:

- What is the problem? (Evaluate the problem)
- Why it happened? (Identify the causes)
- What works? (Develop and evaluate programs and policies)
- As it does? (Implementation and dissemination)
Best practices for reporting responsible suicides

1) Avoid the simplistic explanation of suicide
2) Not to say that suicide is inexplicable
3) Avoid glorifying or romanticizing the act of suicide
4) Discard details or method about suicide
5) Do not exhibit suicide as something common or that suicide is a natural response to adversity
6) Avoid tabloid headlines
7) Language is extremely important
8) Restrict harmful images
9) Do not share the contents of the suicide note
10) Avoid disseminating and amplifying the comments of the police, emergency personnel or people close to you
11) Always include information on suicide prevention centers

We will then describe each particular point.

Avoid simplistic explanation of suicide

We can never attribute the cause of death to a single particular fact, to a single point. For example, the colleague died because he had little work. It is not constructive or preventive a headline of a local newspaper that mentions:

Unemployment kills 45,000 people a year

To say that unemployment is the cause of death is a bit risky if not to say, a falsehood. Communicating that suicide is only caused by unemployment is wrong. We must always explain about the multi-causality of suicide. In particular, 90% of suicides have a concurrent psychiatric illness that could be triggered by triggers such as stress, frustration, etc.

Main risk factors for suicide

<table>
<thead>
<tr>
<th>SYSTEMS OF HEALTH</th>
<th>Barriers to accessing health systems</th>
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<tr>
<td>Access to usable means of suicide</td>
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<tr>
<td>Inappropriate reporting by the media</td>
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<td>Stigma associated with behavior-seeking help</td>
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<table>
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<tr>
<th>SOCIETY</th>
<th>Disasters, wars, conflicts</th>
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<td>Displacement stress and acculturation</td>
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<tr>
<td>Discrimination</td>
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<td>Trauma or abuse</td>
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<tr>
<th>COMMUNITY</th>
<th>Sense of isolation and social support</th>
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<tr>
<td>Conflicts in relationships, disputes or losses</td>
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</table>

<p>| RELATIONS | |
|-----------| |</p>
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<thead>
<tr>
<th><strong>INDIVIDUAL</strong></th>
<th><strong>SYSTEMS OF HEALTH</strong></th>
<th><strong>SOCIETY</strong></th>
<th><strong>COMMUNITY RELATIONS</strong></th>
<th><strong>INDIVIDUAL</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Previous suicide attempt</td>
<td>Universal intervention</td>
<td>Mental health policies</td>
<td>Interventions targeting vulnerable groups</td>
<td>Indicated intervention</td>
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<tr>
<td>Mental disorders</td>
<td>Policies to reduce harmful alcohol consumption</td>
<td>Guardian training</td>
<td>Community monitoring and support</td>
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<tr>
<td>Harmful consumption of alcohol</td>
<td>Access to health care</td>
<td>Telephone hotlines in crisis</td>
<td>Evaluation and management of suicidal behavior</td>
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<tr>
<td>Loss of work or financial</td>
<td>Restriction of access to usable means of suicide</td>
<td></td>
<td>Assessment and management of mental and substance use disorders</td>
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<tr>
<td>Hopelessness</td>
<td>Responsible media reporting</td>
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<tr>
<td>Chronic pain</td>
<td>Awareness about mental health, substance use disorders and suicide</td>
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<td>Family history of suicide</td>
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<tr>
<td>Genetic and biological factors</td>
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Not to say that suicide is inexplicable

In most cases there were early warnings from the suicide bomber. Warning signs are very useful for diagnosis: searching for methods to die, websites, warning feelings of hopelessness, feeling a burden to your family or friends, etc. (See Warning Signals). A post on Facebook, a call in unusual hours, a comment out of place: most are known to give signals.

SUICIDE WARNING SIGNS

- Talk about wanting to die
- Find a way to kill yourself
- Talk about feeling that there is no hope or that there is no reason to live
- Talk about feeling trapped or having unbearable pain
- Talk about being a burden to others
- Increase the use of alcohol or other drugs
- Acting in an anxious, agitated or dangerous way
- Sleeping too little or too much
- Isolate or feel isolated
- Show anger or talk about revenge
- Display extremes of temperament

The more of these signals a person exhibits, the greater the risk. Warning signs are associated with suicide, but may not be what causes it.

Neither should we say that suicide has no cause because it reinforces the idea that it can not be prevented or treated.

In the texts that we write in the networks, emails or press releases we must include those alerts given by the colleague who died. Including them will enable us to learn from them and prevent further deaths.
Avoid glorifying or romanticizing the act of suicide

It's not heroic or trending. Nor is being a veterinarian suicidal: Our profession does not include depression or suicide per se.

The glorification of the dying veterinarian can encourage young and vulnerable colleagues.

Jian Zhicheng (31 years old) died on May 12, 2016 at the Xinwu Animal Protection Center in Taiwan. She was the director of the center who confessed that for lack of space had to sacrifice 700 dogs in two years. The journalistic note said that Jian loved the animals but that the public opinion called the Beautiful Carnicera. The journalist reproduced the note he wrote before he died: "Human life is no different from the life of a dog. I will die with the same medications they use to put the dogs to sleep in peace."

We must try to balance the history of the person and avoid talking about suicide as a romantic fact. When reading the history of the veterinarian who worked in the kennel of his city we can find acts of love, solidarity and heroism but if we relate it to death, they will lose all usefulness.


Veterinary suicide: “It is my passion and my poison”

In the same title relates the beauty of being a veterinarian with suicide (passion and poison), a similar error that is committed by relating the story of Romeo and Juliet to the suicide of a couple.

Discard details or method about suicide

If the place or method (anesthetic drug protocol used) is detailed, we can help the vulnerable person and facilitate their death.

Acaba con su vida de estocada en el brazo
(End your life of thrust in the arm)

ARTÍCULO | DICIEMBRE 14, 2013 - 6:00AM | BY DDM STAFF

Jiutepec, MORELOS.- Un veterinario acabó con su vida inyectándose una sustancia para sacrificar animales, justo a un costado del campo de fútbol “Michelle”, en la colonia El Naranjo. El occiso es el veterinario Luis Vera Ramírez, de 53 años, con domicilio y negocio en la calle 20 de Noviembre, del Centro de Jiutepec, quien falleció debido al veneno que se inyectó en un brazo. El hallazgo se suscitó ayer, a las 16:00 horas, cuando policías municipales se percataron que a orillas del campo de fútbol “Michelle”, en la colonia El Naranjo, había un hombre sentado y muerto. Debido a ello, los efectivos dieron parte a la Procuraduría General de Justicia (PGJ). Peritos del Servicio Médico Forense (Semefo) realizaron una inspección ocular, en donde hallaron una jeringa y un frasco de una sustancia llamada “Dolethal”, utilizada para sacrificar animales. Además, ordenaron el levantamiento del cadáver, el cual fue trasladado al anfiteatro.

ARTICLE | DECEMBER 14, 2013 - 6:00 AM | BY DDM STAFF
A veterinarian ended his life injecting a substance to sacrifice animals, right next to the soccer field "Michelle" in the colony El Naranjo. The deceased is the veterinarian Luis Vera Ramirez, 53, with address and business in the street November 20, the Center of Jiutepec, who died due to the poison injected into an arm. The finding was raised yesterday, at 16:00 hours, when municipal police noticed that on the banks of the football field "Michelle" in the colony El Naranjo, there was a man sitting and dead. Due to this, the troops gave part to the Attorney General's Office (PGJ). Forensic Medical Examiners (Semefo) carried out an ocular inspection, where they found a syringe and a bottle of a substance called "Dolethal", used to sacrifice animals. In addition, they ordered the removal of the corpse, which was transferred to the amphitheater.

We must not communicate the method or the exact site. Nor the details of life that can be used by another colleague to feel identified with the victim. For example, age, children, jobs, hobbies, specialties, etc.

Not to exhibit suicide as something common or that suicide is a natural response to adversity

Suicide is a public health problem. Most humans survive and face adversity. Suicide is not commonplace.

Avoid tabloid headlines

A title or proposition where all veterinarians have suicidal tendencies is a very negative thing.

Example N°1

http://www.vozpopuli.com/memesis/veterinarios-suicidan_0_959904178.html

¿Por qué los veterinarios se suicidan tanto?

(Why do veterinarians commit suicide so much?)

La tasa de suicidios de los veterinarios es la más alta de todas las carreras técnico-científicas. El estrés, la presión social y la carga emocional entre las causas de esta cruel estadística. Pero hay algo más...

(The suicide rate of veterinarians is the highest of all technical-scientific careers. Stress, social pressure and the emotional burden among the causes of this cruel statistics. But there is something more ...)
Study: 1 in 6 veterinarians have considered suicide

Mental health study explores U.S. veterinary professionals’ well-being

By Malinda Larkin

Posted March 18, 2015

Results from the first mental health survey of U.S. veterinarians show that they are more likely to suffer from psychiatric disorders, experience bouts of depression, and have suicidal thoughts compared with the U.S. adult population.

Example N°3

Clinical Crisis: Why Are So Many Veterinarians Committing Suicide?

Written by: Liz Brown

Republished from an article in Horse Network.

"It is very difficult to support such a statement with statistics. You can not stigmatize a profession like the veterinary, an age group or religious "

A good example would be the Canadian article where you are invited to talk about the subject. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4266064/


Suicide in veterinary medicine: Let’s talk about it

Debbie L. Stoewen
Language is extremely important

Let's look at some examples of something incorrectly mentioned and their positive form.

<table>
<thead>
<tr>
<th>Instead of this…</th>
<th>Do this…</th>
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<tbody>
<tr>
<td>Big headlines or sensationalist or prominently placed</td>
<td>Report without sensationalising suicide and reducing prominence</td>
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<tr>
<td>Eg &quot;Kurt Cobain used the shotgun to commit suicide&quot;</td>
<td>Eg. &quot;Kurt Cobain has died at age 27&quot;</td>
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<tr>
<td>Include photos / videos of place or method of death, grieving family,</td>
<td>Use a photo of the school / work or family; Include an emergency line logo or local crisis</td>
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<tr>
<td>friends, memorials or funerals</td>
<td>phone numbers</td>
</tr>
<tr>
<td>Suggestive photo published in AVMA magazine</td>
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<tr>
<td>Describing recent suicides as an &quot;epidemic,&quot; &quot;giving more ...&quot; or other strong</td>
<td>Carefully research the latest CDC data and use non-sensational words like &quot;to rise&quot; or &quot;higher&quot;</td>
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<tr>
<td>terms</td>
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<tr>
<td>Describe a suicide as unexplained or unannounced</td>
<td>Most, but not all, people who commit suicide exhibit warning signs.</td>
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<td></td>
<td>Include the sidebar of &quot;Warning signs&quot; or &quot;What to do&quot; in your communication, if possible (see above)</td>
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<tr>
<td>&quot;So-and-so left a note that said ...&quot;</td>
<td>&quot;A note of the deceased was found and the coroner is examining it&quot;</td>
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<tr>
<td>Investigate and report suicide in the same way that crimes are reported</td>
<td>Report suicide as a public health problem</td>
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<tr>
<td>Quoting / interviewing police or paramedics / firefighters about the reasons</td>
<td>Ask for advice from suicide prevention experts</td>
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<tr>
<td>for suicide</td>
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<tr>
<td>Referring to suicide as &quot;successful,&quot; &quot;unsuccessful,&quot; or &quot;failed attempt&quot;</td>
<td>Describe it as &quot;died by suicide&quot; or &quot;completed&quot; or &quot;killed&quot;</td>
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</table>

Source [www.reportingonsuicide.org](http://www.reportingonsuicide.org)
Restrict harmful images

Avoid dissemination of the location or methods of suicide. Also funerals or tributes.

It is recommended to use the photo of the school or with your family group.

Always enter the logo and references of the institutions for the prevention of suicide.
A very hard example is the one published in a newspaper with the image of a person hanged.

Do not share the content of the note left by the suicide

Only 20% to 25% of people who commit suicide leave notes and most are useless. Therefore, we must avoid publication. We can say that a note was found but without details. The same with the drawings or images contained therein.

Let us look again at the letter from Taiwanese colleague Jian Zhicheng:
"Human life is no different from a dog's life. I will die with the same medications they use to put the dogs to sleep in peace."

One of the repeated myths is that animals also commit suicide. Recent studies on thousands of species in freedom suggest that there is no such suicide identification in non-human species. Death by suicide is a strictly human phenomenon although the methods for dying are similar (barbiturates, for example).

http://www.lanacion.com.ar/1981128-la-veterinaria-que-se-suicidó-con-el-mismo-fármaco-con-el-que-sacrificó-a-cientos-de-perros

La veterinaria que se suicidó con el mismo fármaco con el que sacrificó a cientos de perros
(The veterinarian who committed suicide with the same drug with which she sacrificed hundreds of dogs)

Avoid disseminating and broadening the comments of the police or emergency personnel

Always gather information from experts on the subject of suicide or mental health. The comments of friends or people are not of great contribution and confuse the reader.

With regard to sources, we must always respect the family, provide accurate and updated data, not exaggerate the problem of suicide and always bring value to society.

Remember that the frequency with which we mention the subject of suicides can generate a contagion effect.

Always include information on suicide prevention centers

We should always include a message of hope. That we can save lives and that there is adequate treatment for depression. Focus on history in this positive aspect.
CONCLUSIONS

At the end of the World Health Organization seminar, we were able to ask the specialists if there is a specific relationship between suicide and the professions, more precisely, between suicide and veterinary medicine.

The response was negative and a sense of relief ran through the body of this veterinarian. The answer was negative but the effect is very positive: there would be no relationship between veterinary medicine and depression, according to experts.

World Health Organization specialist, Devora Kestel said: "I would not be encouraged to attribute a suicide label to a particular profession."

Finally, it is imperative a change of attitudes and beliefs about the suicide in the veterinary. The media, the veterinary services sector, the education sector and community organizations should develop activities to reduce the stigma associated with the search for suicide aid and to promote such behavior. In turn, conduct periodic assessments to monitor changes in attitude and beliefs of veterinarians regarding suicide, mental and substance use disorders.

What to do
If you know someone who has signs of suicide:

- Do not leave that person alone
- Remove firearms, alcohol, drugs, barbiturates, or sharp objects that could be used in a suicide attempt
- Call the National Suicide Prevention Network in your country. In U.S.A. is 1-888-628-9454
- Take the person to an emergency room or get help from a medical or mental health professional.

www.suicidepreventionlifeline.org
Reliable sources of information

- International Association for the Prevention of Suicide
  Http://www.who.int/ina-ngo/ngo027.htm

- American Suicidology Association
  Http://who.suicidology.org/

- Australian Early Intervention Network for Mental Health in Young People
  Http://auseinet.flinders.edu.au/

- International Academy of Suicide Research
  Http://www.uni-wuerzburg.de/IASR/

- American Veterinary Medical Association (AVMA).
  Https://www.avma.org/ProfessionalDevelopment/Personal/PeerAndWellness/Pages/default.aspx