

The fight against suicide censorship in New Zealand

Lessons from a partial victory

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History of censorship of suicide reporting in New Zealand

Year	Legislation	Impact	Public submissions
1951	Coroners Act: S.21	Coroner can now ban reporting of suicides. Rarely used	Some concern from MPs about restriction on media freedom
1988	Coroners Act: S.29	Bans reporting of 'any particular relating to the manner of death, where reason to believe death was self-inflicted'.	Mental health experts warned about 'copycat' risks media freedom concerns
2006	Coroners Act: S71	Bans any suggestion that a death is a suicide, or suspected suicide, UNLESS coroner satisfied no risk to the public from doing so.	Mental health experts warned about 'copycat' risks . Media Freedom Committee, a coroner, and others argued evidence did not justify censorship
2014	Law Commission advised Government to abolish reporting restrictions, except on method		Media Freedom Committee and others said an academic review of evidence did not justify censorship
2015	Coroners Amendment Bill	Can now report 'suspected' suicide, but not method, without express permission of coroner	Mental health experts urged that it keep 2006 restrictions. Media Freedom Committee, a coroner, and others urged that it abolish all restrictions and promote voluntary restraint aka Australia
Oct 2015	Passes 2 nd reading	Select committee ADDED: cannot report method, <i>AND any details that might suggest method e.g. place</i>	

Why did the 2015 select committee tighten the Bill?



- “The concern for all of us, including the committee, is that there needs to be a balance between preventing harmful reporting, which may give rise to copycat suicide episodes, and enabling enough reporting to note that an event has occurred. The last thing that any piece of legislation would seek to do is enable or encourage copycat behaviour, particularly by vulnerable young people.
- “We believe that the changes to this bill strike a good balance in that regard. There is a restriction around publishing; the method; or the site, if it suggests the method of the suicide, will be prohibited unless the Chief Coroner grants an exemption in that case. **This is based on international evidence that strongly suggests that the reporting of these details gives rise to copycat behaviour.**
- Jacqui Dean MP, chair justice and electoral select committee, 2nd reading of Coroners Amendment Amendment Bill
- [Sitting date: 20 October 2015. Volume:709;Page:7333. Text is subject to correction.]
- http://www.parliament.nz/en-nz/pb/debates/debates/51HansD_20151020_00000028/coroners-amendment-bill-%E2%80%94-second-reading

Departmental advice to the select committee reviewing the Coroner's Amendment Bill

- “The Committee received and heard a number of submissions arguing that the restriction on suicide reporting should be abolished entirely (and potentially replaced with voluntary standards) that the effect of media reporting on inciting further suicides has been overstated, and that the effect is likely small, provided reporting is responsible.
- “We do not support this submission. There is good scientific evidence * that certain types of media reporting of suicide (lurid, glamorising, method-specific) tends to incite further suicides. The Bill recognises that the current prohibition is uniquely restrictive and seeks to better focus it **on those details most likely to lead to copycat behaviour (the method and the site, if it suggests the method)**.
- “* For example, see submission by the New Zealand Medical Association and the report provided by the Director of Mental Health.”

What is that evidence?

- “There is considerable evidence on links between media influences and suicide behaviour. We draw the committee’s attention to the paper by Beautrais and Fergusson (2012) which provides an excellent evidence-based summary of the issue. ... we believe the amendments are consistent with international best practice in suicide prevention.”
- New Zealand Medical Association

NZ summary of the evidence

How NZers summarised the evidence

- “Media influences have now been examined in more than 80 scientific studies worldwide. These studies yield **remarkably consistent findings across different types of media, different research methodologies, and different cultures and countries**, for outcomes of both suicide attempts and suicide completions
- “In particular, a 2010 study examined both the positive and negative effects of media reporting using Austrian data. This study found that the *repetitive* [their italics] reporting of completed suicide or suicide attempts, had harmful effects and **led to increases in suicidal behaviour.**” Beautrais and Fergusson (2012)

What they got wrong

- 2010 paper did **NOT** show cause. In fact, no study has. Have only shown correlations.
- Yes, 2010 did find repetition was associated with increase, but this finding was not the main one.
- Authors have made it clear that we still don't know a lot of what kinds of reporting + presentation are actually possibly harmful, and that there are wide regional differences, and that *they do not support censorship*.

What did that Austrian study actually say?

- Content analysis of 497 suicide-related print media reports in Austria over six months in 2005, compared to suicide rates.
- Yes, did find that repetitive reporting, reports about suicide by jumping, were associated with increases in suicide rates.
- But also found that this effect was not very strong, and certainly not as strong as reports containing other facts (see table):
- “Meaning of the key findings:
“Evidence to date suggests the preventive potential of quantitative reduction in sensationalist reporting. To this, the present findings add that actual reporting of suicidal ideation itself may contribute to preventing suicide.
- SO: NZ focus on NOT reporting method does not reflect main thrust of recent research.
- Niederkrotenthaler, T. Voracek, M., Herberth, A, Till, B., Struass, M., Etzersdorfer, E., Eisenwort, B., Sonneck, G. (2010) Role of media reports in completed and prevented suicide: Werther v. Papageno effects. British Journal of Psychiatry 197, 234-43.

Class	Effect on suicide rate/100,000 pop
1: reports on case of completed suicide	0.03
2: reports on suicidal intention not accompanied by suicidal behaviour	- 0.08
3: reports on suicide research and statistics	0.14
4: reports on expert opinions, prevention programmes	0.13

Conclusions

- Departmental advice was ill-informed
- NZ policy formation easily influenced by 'experts' who claim specialist knowledge
- This needs to be challenged ON the evidence itself
- Attempts to argue for media freedom must start with influencing potential advisors, as well as MPs themselves

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