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Mental Health  
Foundation Australia

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## Press Release – 1<sup>st</sup> May 2017

### Response to Netflix series “13 Reasons Why”

This press release from Mental Health Foundation Australia is in response to the perturbing Netflix series "13 Reasons why" which graphically depicts and sensationalises the tragedy of suicide and reasons why to take this pathway of despair dressed up in claims that it educates the public on mental health and tackles issue such as bullying and destigmatisation of mental illness. This response is in the context of the Australian Press Council statement on the reporting of suicide. This includes the necessity to add at the end of any article regarding suicide and mental health problems contact details of some mental health support and emergency services such as Lifeline, Beyond blue, and when relevant a local counselling Service.

Universities assert the primacy of research and scholarship in our decision making. There is extensive and longstanding evidence that "copycat" suicide behaviour, or what has been called the "Werther effect" after a novel by Goethe, follows graphic media description of suicide and its methods particularly in young people. For example in Germany there was a spike in suicide rates after a TV series that dramatically depicted the death of a young man in front of a train. In Brisbane repeated suicides occurred from a bridge across the Brisbane river following sensationalized newspaper reporting of a suicide. These continuing suicides did not stop until safety fencing was erected. The same situation has occurred on the West Gate Bridge in Melbourne. There have also been well documented rises in suicide rates following the intensive reporting of the suicide of pop music stars. The evidence is that particularly young people, who already have mental health problems and a current stress in their lives, perhaps exacerbated by alcohol and other substances, identify with the character who suicides in the media description. For the person experiencing suicidal ideas, in an impulsive moment of anger or distress, the media description gives them the means to suicide. They then have no time to reflect, talk with friends, seek help and find positive solutions.

The evidence for effective methods of mental health education and promotion does not link these activities with the presentation of graphic and dramatic depiction of suicide. For example in Canada some years ago, a mental health education program, was introduced in schools that included discussion on suicide phenomenology and its methods. A series of copycat suicides followed and persisted in those school areas where the education programs had been delivered in comparison to areas which had not run the program. Eric Shaffer a noted researcher on adolescent mental health who had designed these programs wrote extensively on the tragic lessons we have

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learnt from this well-meaning activity. Internet sites which encourage suicide and invite social participation in suicide acts is a growing concern which currently can only be countered by other sites which offer positive mental health promotion solutions.

The destigmatisation of mental illness and mental health promotion programs are effective when they tackle issues such as bullying and provide positive solutions such as exercise, diet, stress management methods, how to improve social relationships and avoidance of substance use. There is no evidence that the detailed media description of suicide and its methods has any part to play in the life of a mature and supportive society

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