

# **13 Reasons Why: can a TV show about suicide be ‘dangerous’? What are the moral obligations of a producer?**

Media, Culture & Society  
2020, Vol. 42(7-8) 1564–1574  
© The Author(s) 2020



Article reuse guidelines:  
sagepub.com/journals-permissions  
DOI: 10.1177/0163443720932502  
journals.sagepub.com/home/mcs



**Marco Scalvini** 

Erasmus University Rotterdam, the Netherlands

## **Abstract**

The release of the Netflix’s show *13 Reasons Why* caused significant public concern about the risk of suicide contagion among teenagers – particularly those who have suicidal thoughts. Practitioners and researchers expressed apprehension about the show for its apparent praise of suicide and for allegedly increasing suicide risk among vulnerable teenagers. However, there is a lack of clear evidence for the influence of fictional content on self-harm. Little is known about variations in media effects between news and fiction. The literature focuses mainly on non-fictional media reporting, without making any distinction between individual vulnerability and the type of media portrayal. The present article criticizes the assumption that risk of self-harm is reduced by sanitizing fictional content. The absence of definite scientific evidence is precisely why this article re-addresses the problem through an ethical perspective by focusing on the moral responsibility of Netflix. Censoring fiction may do more harm than good, but producers have the responsibility to evaluate in advance the potential impact that such content has on vulnerable people, and to support viewers as well as parents, educators, and practitioners through an adequate campaign of prevention.

## **Keywords**

contagion, media effects, media ethics, moral obligation, responsibility, suicide

---

## **Corresponding author:**

Marco Scalvini, Department of Media and Communication, Erasmus University Rotterdam, Burgemeester Oudlaan 50, 3062 PA Rotterdam, the Netherlands.

Email: scalvini@eshcc.eur.nl

According to the *Centers for Disease Control and Prevention* (CDC, 2016), suicide is the second leading cause of death in the United States among individuals between the ages of 10 and 34. Figures released by the Office for National Statistics (ONS, 2016) show the overall number of suicides registered in London among teenagers increased by 107% between 2013 and 2016. Therefore, it is not surprising that *13 Reasons Why* caused substantial alarm by introducing the subject of suicide in a TV show for teenagers. Educators, journalists, and parents expressed apprehension toward the show for allegedly praising suicide through storylines and imagery (Butler, 2017). Anecdotal evidence reported by press (Rosman, 2017) reveals emulation among teenagers in high school triggered by the show. Health professionals have been severely critical of the Netflix show, warning that it could contribute to a contagion effect and have linked the show to self-harm and threats of suicide among young people (Feuer and Havens, 2017).

*13 Reasons Why* is the story of Hannah Baker, a 17-year-old high school student, who died by suicide and left behind 13 tapes explaining why she chose to take her own life. The show provoked a heated debate over its portrayal of sensitive subjects, such as teen suicide, self-harm, rape, and bullying (O'Brien et al., 2017). The first season incurred criticism for its graphic content, most notably the scene in which Hannah kills herself. The release of the second season of Netflix's show *13 Reasons Why* has renewed significant public concern over the risk of suicide contagion among teenagers and introduced new criticism about the way in which the show explores trauma such as grief, loss, and despair among teenagers.

A study published by the *JAMA Internal Medicine* (Ayers et al., 2017) claims that Google searches for suicide are a possible indicator of suicidal ideation and that those searches increased after Netflix released the show. In the United States, the Society for the Prevention of Teen Suicide (SPTS, 2018) claimed the Netflix show 'tends to glamorize and sensationalize suicide' and 'may increase the relatability and identification a viewer may have with characters and/or situations'. Furthermore, the *US National Association of School Psychologists* (NASP, 2017) said in a report, 'We do not recommend that vulnerable youth, especially those who have any degree of suicidal ideation, watch this series. Its powerful storytelling may lead impressionable viewers to romanticize the choices made by the characters and/or develop revenge fantasies'.

The panic surrounding a risk of contagion led Germany's Professional Association of Pediatricians (BVKJ) to call for the 'immediate cancellation' of the TV show (see Stafford, 2017). In a common statement, the German Society for Child and Adolescent Psychiatry, Psychosomatics and Psychotherapy (DGKJP) and the German Society for Psychiatry and Psychotherapy, Psychosomatics and Neurology (DGPPN) reported that both organizations are confronted with an 'increasing number of suicides which are directly related to the view of the series' (DGKJP and DGPPN, 2017).

In response to the *13 Reasons Why* controversy, the *British Medical Journal* (BMJ), in an editorial titled 'Suicide on TV: minimizing the risk to vulnerable viewers' (Arendt et al., 2017), called for better implementation of international standards to regulate how television and movie producers represent suicide on screen. According to the authors, the Netflix series could trigger 'self-harm among vulnerable viewers by romanticizing suicide and portraying it as the only option to cope with negative experiences' (Arendt et al., 2017: para 2). For this reason, it is argued that 'clinicians need to be aware of

heightened media attention to adolescent suicide and ask vulnerable young patients about possible exposure so that potentially harmful effects can be minimized' (Arendt et al., 2017: para 6).

The show presents a composite picture of suffering among teenagers and a lack of capability to help on the part of parents and educators. As Mueller (2019) argues, the point is not whether the show describes reality or not, but rather that its popularity is due to its depiction of very important aspect of youth's lives today. At the same time, medical experts are practically unanimous in the view that the television show is a powerful trigger causing suicide among susceptible individuals. Therefore, it is believed that restraint in the media industry and artistic creativity should be exercised to curb the surging rise in suicide cases (Wang, 2012).

The assumption that fiction can directly instigate suicidal behavior is at best simplistic and reductive for those disciplines which study media and communication (Ferguson, 2020). The contagion theory focuses mainly on non-fictional media reporting (Sisask and Värnik, 2012) without making any distinction between individual vulnerability and the type of media portrayal. This is even more relevant today, given the rise of the Internet and the growing number of platforms for streaming music or movies that might invoke violence, self-harm, or suicide (Alao et al., 2006).

## Research on media-induced suicide

The metaphor of contagion has a long history, preceding contemporary media. The theory of contagion is also known as the Werther's effect, and originates from Goethe's novel *The Sorrows of Young Werther* in 1774 (Jack, 2014). The novel is an insightful piece about a young creative artist named Werther. Having been embroiled in a love triangle, Werther felt he was left with one of two choices: kill someone or kill himself. Werther would eventually go with the latter option, shooting himself in what would be the end to a tragic piece. Although a fictional character, Werther in Goethe's novel soon became a cultural phenomenon. Driven by the mannerisms and character of Werther, contagion suicides soon began to be recorded.

The association between the portrayal of suicide and contagion suicide has been debated since 1774, and a large number of studies considering the association have been conducted in the 19th century. As reported by Leonard (2001), the *American Journal of Insanity* (Brigham, 1845: 232–234) in the 19th century posited that suicide is often an act of imitation. Also, the *North American Medical and Surgical Journal* (1827: 415–416) positioned itself against the publishing of stories concerning suicide because of the risk of imitation, claiming that morbid imagination is irresistible when presented with opportunities for imitation.

In 1897, Emile Durkheim noted that suicide was more of a social phenomenon than a problem that relies solely on the psychological state of an individual. He emphasized that as psychological as suicide may appear, it could also be explained from a social perspective, and therefore considered a social problem. Durkheim's argument was based on his observation that annual suicide rates did not increase exponentially because of imitation, and that those who died by imitation did so because they were inherently willing to take their own lives anyway.

Durkheim (1897) was staunchly against those who argued that newspapers and other outlets should not approve of suicide reports; he criticized those who deemed these reports to be a causal mechanism in imitation (p. 140). Interestingly, and perhaps unfortunately, most studies designed to assess suicide contagion have been developed with little regard for the theoretical work of Durkheim. In most present studies, suicide continues to be investigated as a problem faced by individuals, even when social and contextual factors are identified (Wray et al., 2011). The relationship between fiction and the real world is moderated by the nature of the content (Walter and Boyd, 2019), as well as the characteristics of, and social influences on, the individual exposed to the media (Valkenburg et al., 2016).

Evidence in support of the theory that fictional media results in suicide contagion effects remains weak, and a strict causality has never been established (Ferguson, 2018; Mueller, 2019). However, there is substantial evidence to support suicidal contagion from news portrayals. The study carried out by Phillips (1974) warned against the placement of suicide-related stories in the headlines or on the cover pages of newspapers. The effects of suicide reports on suicide imitation have been established, identifying that individuals at risk tend to repeat modality of suicide if exposed to news (Sisask and Värnik, 2012). Vulnerable people might be motivated to imitate behavioral patterns described in the news (Etzersdorfer and Sonneck, 1998). This phenomenon seems more prevalent during exclusive, prominent, and sensationalist coverage that describes in great detail the mode of suicide attempted (Gould et al., 1989).

Two mediating mechanisms have been studied regarding suicide imitation (Romer et al., 2006). The first is the capacity of media depictions to offer viewers, who are interested, with practical techniques to terminate their lives. For instance, details in newspapers about suicide may have both short- and long-term effects on the attitudinal responses of individuals (Zahl and Hawton, 2004). This is due, in part, to the fact that such reports may, for example, allow individuals more in-depth knowledge about methods of suicide, or may inadvertently present suicide as a way to resolve problems and challenges that individuals may be grappling with. It is therefore a growing concern for many researchers who claim that, regardless of intent, mass media and newspapers have great impact on the decisions of susceptible persons to commit suicide (Niederkrötenhaller et al., 2010).

Emulation might also be produced by fictional portrayals. For instance, the British TV drama *Casualty* affected the type and rate of hospital admissions for self-poisoning (Hawton et al., 1999). The incidence of the number of patients reporting deliberate self-poisoning changed in the 3 weeks after the show was aired. The study finds that popular fiction depicting self-harm may have a short-term influence on overdose and variations in the choice of drug taken. Although the study does not claim that fiction induces suicide, it raises important questions about the desirability of the media portraying suicide and self-harm because of the imitational behaviors that can be generated (see also Mueller, 2017).

If we assume that fiction can induce imitation, then we must also consider as valid the notion that fiction can empower vulnerable viewers (Niederkrötenhaller et al., 2010) in terms of normalizing mental health issues, preventing suicidal ideation or encouraging help seeking (Scalvini and Rigamonti, 2017). It has been suggested that appropriate

portrayals, such as those emphasizing negative consequences or alternative courses of action, could actually have a protective or educational effect (Sisask and Värnik, 2012). This is the so-called Papageno Effect (Niederkrötenhaler et al., 2010), taking its name from the character Papageno in Mozart's opera *The Magic Flute*. Fiction can be used as a non-exploitative, empathy-increasing resource by providing support to those who are dealing with these issues (Falkoff, 2018), but it might also be helpful to increase public understanding and help people empathize with those who face these challenges.

A recent study by Northwestern University and funded by Netflix, titled *Exploring How Teens and Parents Responded to '13 Reasons Why'* (Lauricella et al., 2018), surveyed a sample of 5000 adolescents and young adults aged 13 to 22, and parents in the United States, United Kingdom, Brazil, Australia, and New Zealand, to determine how audiences perceived, related to, and were influenced by the show (Karter, 2018). The data suggested the show prompted conversations between teens and parents about bullying, suicide, and mental health. The study also reported that parents and adolescents were interested in finding more information on the subject. Most importantly, the show led adolescents to show more empathy for their peers. The survey did not include questions to evaluate whether watching the show encouraged suicidal thoughts.

Despite the large sample size spanning several countries, the survey has predominantly used a quantitative self-report method to examine the short-term effect of the show. For instance, the survey did not ask whether watching the show encouraged suicidal thoughts in viewers. According to Ellen Wartella, who led the research project, those questions were not approved by Northwestern's Institutional Review Board because interviewees would have required 'support and expertise' (Chiou, 2018) to respond to them. Perhaps future research could also address those implications, as both strands of research focusing on the role of mass media exposure in influencing incidences of suicide are based on self-reports.

This approach to data gathering has significant limitations in studying the media effects. First, participants might not answer openly because they are not able to recall or simply because they prefer to not discuss their personal issues. Second, participants – especially suicidal teenagers – may lack the introspective ability to provide an accurate response. Third, suicide is a rare incidence and it is difficult to measure media-induced suicide; evaluation of suicide contagion has to rely on naturally occurring incidences in significant populations. Also, since these evaluations are often impractical and indirect, causal relationships are challenging to assess.

Present research seems not to address those methodological implications, which are central to an adequate picture of how the TV show has either prompted viewers to self-harm or had beneficial effects on self-harming behavior. Therefore, it mostly seems like the evidence is suggesting a cautionary approach (Ferguson, 2018). The relationship between media and self-harm is not simply that of one-way cause and effect. As Sonia Livingstone has already noted, in many studies reflecting public anxieties over youth and media, 'the claim of causality cannot be considered conclusive' because of various methodological and disciplinary inconsistencies (Livingstone, 2017: line 46). Media exposure is not sufficient to drive people to suicide (Scalvini and Rigamonti, 2017). Therefore, the effect that fiction can have on suicidal thoughts and behaviors is likely smaller than that of other psychological and social risk factors for suicide (Bridge et al., 2006). Furthermore,

if we accept that fiction can induce self-harm, then we must also accept the positive effect it might have on prevention.

## Moral and practical obligations of a producer

The case of *13 Reasons Why* is suitable for ethical scrutiny because there are conflicting opinions as to what is the right course of action for the producers. Producers are faced with a situation in which, on one hand, their interests are to create a series for the entertainment of viewers. Entertainment media might also have a specific marketing interest to create a controversy, provoke emotional reactions, and at the same time raise awareness about taboo subjects. On the other hand, by continuing to produce such content, they might ignore concerns of parents, school counselors, and mental health experts. No ethical norm might defend the action of a producer intending to encourage or incite self-harm (Christians et al., 2015). Even though the intention of the producer is morally good, one should consider the ethical decisions to be made when portraying this kind of story.

The ethics of media help us to reflect on the ‘rightness’ or ‘wrongness’ of choices taken by professionals; this approach relies on long-lasting concept of the public service mission of the media (Plaisance, 2016). However, the ethical responsibility of a TV show producer intersects with the tradition of media effects analysis – as it has been shown in this article, a dominant paradigm in communication and media studies (Krijnen, 2011). Potential harm posed by fiction, the use of deceptive tactics to secure an audience, and the increasing prevalence of content romanticizing suicide or self-harm are all examples of ethical issues. Therefore, two principles can be adopted in the definition of the moral obligations of a producer: ‘doing no harm’ and ‘doing good’.

The obligation to ‘do no harm’ is a source of ethical concern once any communicative intervention, including a TV show, harms a person or individuals, either directly or indirectly, via either physiological, cultural, social, or psychological grounds. For instance, due to a TV show or specific content, people can develop anxiety triggered by some risk messages. Also, a TV show can unknowingly stigmatize some populations by continuously describing their medical conditions in pejorative ways. The development of this obligation may thus require a worthy consideration of the following questions: (1) Has the producer provided a proper warning, so that every person can decide if they will reject the content or not? (2) Is self-harm represented as an inevitable or desirable result, or a solution to personal challenges? (3) Is it necessary to include a detailed, graphic image of self-harm? (4) Is there any better use for self-harm in the plot or script?

The ‘do good’ obligation (beneficence) is a direct opposite to the ‘do no harm’ obligation discussed above. However, it is still seen as a primary principle every content producer should adopt. This obligation is originally meant to be executed by actively following ways of helping individuals achieve a positive level of enjoyment of the content, or helping them avoid the distress caused by potential harms and risks (Brown and Singhal, 1990). This principle includes the protection and promotion of people’s wellbeing and at all levels, including personal, family, community, and society (Guttman, 2000). When producers try to ‘do good’, it comes with several dilemmas. For instance, in the case of Hannah’s suicide, the central dilemma is whether and how producers can increase awareness of subjects like mental health without causing harm. Furthermore,



the position of writers and screen players remains delicate, considering they must deliver within the thin line between entertainment and reality. However, the assured legal protection to creatives in the entertainment industry should be preceded with a serious approach to the ethical issues affecting dramatic or controversial fiction. Creatives and producers must ask themselves whether they have portrayed highly controversial topics in a responsible way.

### **The case of *13 Reasons Why***

The controversy surrounding *13 Reasons Why* engages with the responsibility of Netflix in using graphic content representing the suicide of Hannah. The show is an adaptation of a novel by Jay Asher (2016), but in the original storyline, Hannah attempts suicide by overdosing on sleeping pills and eventually survives the attempt. In the last episode of the first season of *13 Reasons Why*, Hannah is seen cutting her hand with a razor blade in the bathtub and gradually suffers until she dies. Viewers experience a detailed and horrific visual description of the suicide with no transition or previous warnings. The blade simply touches the skin and the blood pours out from the wounds. She struggles to breathe and gradually loses consciousness as the bathtub is filled with blood. Hannah's mom finds her lying unconscious in the bathtub with blood all over her. She breaks down and clings to Hannah while yelling for help. Before launching the third season, Netflix decided to edit some of these controversial scenes following the criticism of medical experts. However, it might be questioned why Netflix had taken so long to address concerns, and to what extent other scenes should be cut from the series.

Producers might create controversial scenes if they believe that they are needed to create strong reactions from the viewers to spark discussion. However, the episode of Hannah's death includes a step-by-step depiction of a suicide, which could be viewed as a manual – guidance as to how to commit suicide yourself, instead of how to get help. The viewers who have experienced emotional trauma or depression may be more vulnerable to footage intentionally rich in unnecessary graphic details. This kind of footage may inspire vulnerable viewers to imitate the self-harm and suicidal behaviors (Arendt et al., 2019; da Rosa et al., 2019). Obviously, a producer cannot be blamed for the pre-existing emotional and behavioral problems that afflict children and adolescents. However, does this mean that producers should maintain a distance from any dramatic storylines because of the potential consequence on vulnerable viewers?

Freedom of artistic expression is a principle that must be always defended, but portraying graphic scenes of suicide and also sexual assaults of teenagers is not respecting the interests of those who may be negatively affected by such scenes. The risk of influence of TV on the lives of vulnerable individuals poses an ethical dilemma for producers of entertainment programming. They must have the artistic freedom to develop quality shows that reflect the realities of contemporary society without forgetting their moral responsibility. Producers have a moral obligation to reduce the potential harm to vulnerable viewers and when they decide to release controversial content, they also have a responsibility to educate and support those viewers who might struggle. Overall, a producer can still encourage people to be open and start looking for help, while limiting the use of graphic details to portray behaviors that could be damaging to the audience.

Clinicians have emphasized how the show falsely amplified the actions of Baker's external surroundings while completely ignoring internal psychological problems which she may have had (Wetherall, 2017). To those with pre-existing mental illnesses, such inner struggles play a major role, and scholars have underlined the danger that people suffering from suicidal thoughts may be especially at risk of imitating the suicide depicted in the show (Campo and Bridge, 2018) when suicide is represented as an act of revenge against her peers, as it might represent suicide as a means of accomplishing meaningful ends (Knopf, 2017). However, is the viewer invited to sympathize with Hannah's decision to end her life? Or is the viewer invited to reflect on the problems of teenagers in the age of social media? The show engages with diversity, conformity, the struggle to reach impossible standards by comparing oneself to others, and how social media can be a terrible new vehicle for bullying and shaming (Scalvini and Rigamonti, 2017). At the same time, it must be emphasized that Netflix should be more careful about the simplifications of the complexity of mental illness (Zimerman et al., 2018) and should not perpetuate stereotypes (Payne et al., 2008) such as the suicidal female teenager who is unstable and depressed.

Responding to the criticism, Netflix created a downloadable viewing guide [13reasonswhy.info](http://13reasonswhy.info) to help parents and teens talk about the show's difficult themes. Netflix also included a warning video before each episode to alert viewers about the sensitive topics at hand and pointing them toward necessary resources. The second season has introduced a new after-show featuring the actors, experts, and educators discussing the most sensitive themes of the episodes. Those initiatives are laudable and aimed at educating audiences about practical strategies that can help prevent suicide. Still, attempts to provide support to vulnerable viewers should be led by an ethical commitment toward the audience, rather than public concern or moral panic for suicide contagion.

## Conclusion

The controversy over *13 Reasons Why* demonstrates to what extent concern persists that fictional media suicides may induce imitative self-harm behaviors among teenagers and young adults. Medical professionals, public health researchers, and expert policy makers have paid significant attention to suicide, but to date there is a lack of clear evidence for the influence of fictional content on self-harm. Researchers and practitioners should be fully aware of their responsibilities when making statements that inflate or misinterpret the available evidence. We are very far from the existence of 'undeniable' evidence that fictional representations can push vulnerable young persons to take their lives. The relationship between fiction and the real world is moderated by the nature of the content, as well as the characteristics of, and social influences on, the individual exposed to the media.

The causes for our despair are far more complex than an explanation as simple as media effects can account for. Therefore, irrespective of whether fiction romanticizes suicide, the questions that should be asked are about the moral responsibilities and ethical duties that producers have when creating controversial content developed for a young audience. To address this shortcoming, this article lists the essential principles of ethics and moral obligations for a producer. Those are useful suggestions for further theoretical



investigation and additional ethical questions on representation and reception of distant suffering that may arise. Finally, producers have the moral responsibility to develop ethical guidelines and support viewers through an adequate campaign of prevention, especially for those viewers who might be more vulnerable. At the same time, parents, educators, and therapists cannot delegate their role to screenwriters or producers. They need to talk to children and young people openly, not censor what they read or view.

## Funding

The author received no financial support for the research, authorship, and/or publication of this article.

## ORCID iD

Marco Scalvini  <https://orcid.org/0000-0002-3265-8857>

## References

- Alao AO, Soderberg M, Pohl EL, et al. (2006) Cybersuicide: review of the role of the internet on suicide. *CyberPsychology & Behavior* 9(4): 489–493.
- Arendt F, Scherr S, Pasek J, et al. (2019) Investigating harmful and helpful effects of watching season 2 of 13 Reasons Why: results of a two-wave U.S. panel survey. *Social Science & Medicine* 232: 489–498.
- Arendt F, Scherr S, Till B, et al. (2017) Suicide on TV: minimising the risk to vulnerable viewers. *BMJ* 358: j3876.
- Asher J (2016) *Thirteen Reasons Why*. London: Penguin.
- Ayers JW, Althouse BM, Leas EC, et al. (2017) Internet searches for suicide following the release of 13 Reasons Why. *JAMA Internal Medicine* 177(10): 1527–1529.
- Bridge JA, Goldstein TR and Brent DA (2006) Adolescent suicide and suicidal behavior. *Journal of Child Psychology and Psychiatry* 47(3–4): 372–394.
- Brigham A (1845) Note by the Editor. *American Journal of Insanity* 1: 232–234.
- Brown WJ and Singhal A (1990) Ethical dilemmas of prosocial television. *Communication Quarterly* 38(3): 268–280.
- Butler B (2017) ‘13 Reasons Why’ depicts a graphic suicide. Experts say there’s a problem with that. *Washington Post*, 14 April. Available at: <https://www.washingtonpost.com/news/arts-and-entertainment/wp/2017/04/14/the-problem-with-how-13-reasons-why-treats-suicide/>
- Campo JV and Bridge JA (2018) Exploring the impact of 13 Reasons Why: looking for light amidst the heat. *Journal of the American Academy of Child and Adolescent Psychiatry* 57(8): 547–549.
- Centers for Disease Control and Prevention (CDC) (2016) WISQARS leading causes of death reports, 1981–2018. Available at: <https://webappa.cdc.gov/sasweb/ncipc/leadcause.html/>
- Chiou A (2018) Netflix’s ‘13 Reasons Why’ adds new warning video: ‘This series may not be right for you’. *The Washington Post*, 23 March. Available at: <https://www.washingtonpost.com/news/morning-mix/wp/2018/03/23/netflixs-13-reasons-why-adds-new-warning-video-this-series-may-not-be-right-for-you/>
- Christians CG, Richardson KB, Fackler M, et al. (2015) *Media Ethics: Cases and Moral Reasoning*. New York: Routledge.
- da Rosa GS, Andrades GS, Caye A, et al. (2019) Thirteen Reasons Why: the impact of suicide portrayal on adolescents’ mental health. *Journal of Psychiatric Research* 108: 2–6.

- DGKJP and DGPPN (2017) Gemeinsame Stellungnahme von DGKJP und DGPPN zur TV-Serie 'Tote Mädchen lügen nicht'. Available at: <http://www.dgkjp.de/aktuelles1/446-gemeinsame-stellungnahme-von-dgkjp-und-dgppn> (accessed 12 August 2018).
- Durkheim E (1897) *On Suicide*. London: Penguin.
- Etzersdorfer E and Sonneck G (1998) Preventing suicide by influencing mass-media reporting: the Viennese experience 1980–1996. *Archives of Suicide Research* 4(1): 67–74. Available at: <https://doi.org/10.1023/A:1009691903261>
- Falkoff M (2018) Looking to Fiction for insights on suicide. *Pacific Standard*. Available at: <https://psmag.com/education/books-to-help-understand-suicide>
- Ferguson CJ (2018) 13 Reasons Why Not: a methodological and meta-analytic review of evidence regarding suicide contagion by fictional media. *Suicide and Life-Threatening Behavior* 49(4): 1178–1186.
- Ferguson CJ (2020) One less reason why: viewing of suicide-themed fictional media is associated with lower depressive symptoms in youth. *Mass Communication and Society*. Epub ahead of print 5 May. DOI: 10.1080/15205436.2020.1756335.
- Feuer V and Havens J (2017) Teen suicide: fanning the flames of a public health crisis. *Journal of the American Academy of Child & Adolescent Psychiatry* 56(9): 723–724.
- Gould MS, Wallenstein S and Davidson L (1989) Suicide clusters: a critical review. *Suicide and Life-Threatening Behavior* 19(1): 17–29.
- Guttman N (2000) *Public Health Communication Interventions: Values and Ethical Dilemmas*. Thousand Oaks, CA: Sage.
- Hawton K, Simkin S, Deeks JJ, et al. (1999) Effects of a drug overdose in a television drama on presentations to hospital for self-poisoning: time series and questionnaire study. *BMJ* 318(7189): 972–977.
- Jack B (2014) Goethe's Werther and its effects. *The Lancet Psychiatry* 1(1): 18–19.
- Karter E (2018) *Multinational Survey: How Teens, Parents Respond to Netflix Show '13 Reasons Why' Exploring How Teens and Parents Responded to '13 Reasons Why'*. Institute for Developmental Sciences, Media, Mental Health, Research, School of Communication, Northwestern University. Available at: <https://news.northwestern.edu/stories/2018/march/13-reasons-why/> (accessed 8 August 2018).
- Knopf A (2017) Advice for parents on 13 Reasons Why. *The Brown University Child and Adolescent Behavior Letter* 33(S6): 1–2.
- Krijnen T (2011) Engaging the moral imagination by watching television: different modes of moral reflection. *Participations: International Journal of Audience Research* 8(2): 52–73.
- Lauricella AR, Cingel DP and Wartella E (2018) *Exploring How Teens and Parents Responded to '13 Reasons Why': Global Report*. Evanston, IL: Center on Media and Human Development, Northwestern University.
- Leonard Jr EC (2001) Confidential death to prevent suicidal contagion: an accepted, but never implemented, nineteenth-century idea. *Suicide and Life-Threatening Behavior* 31(4): 460–466.
- Livingstone S (2017) No, the internet is not actually stealing kids' innocence. *The Conversation*. Available at: <https://theconversation.com/no-the-internet-is-not-actually-stealing-kids-innocence-80543> (accessed 12 August 2018).
- Mueller AS (2017) Does the media matter to suicide?: Examining the social dynamics surrounding media reporting on suicide in a suicide-prone community. *Social Science & Medicine* 180: 152–159.
- Mueller AS (2019) Why thirteen Reasons Why may elicit suicidal ideation in some viewers, but help others. *Social Science & Medicine* 232: 499–501.

- NASP (2017) *13 Reasons Why* Netflix Series: Considerations for Educators. Available at: <https://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/preventing-youth-suicide/13-reasons-why-netflix-series-considerations-for-educators/13-reasons-why-netflix-series-considerations-for-educators> (accessed 12 August 2018).
- Niederkrötenhaler T, Voracek M, Herberth A, et al. (2010) Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *The British Journal of Psychiatry* 197(3): 234–243.
- North American Medical and Surgical Journal* (1827) Suicide from imitation. 3: 415–416.
- O'Brien KHM, Knight JR and Harris SK (2017) A call for social responsibility and suicide risk screening, prevention, and early intervention following the release of the Netflix series *13 Reasons Why*. *JAMA Internal Medicine* 177(10): 1418–1419.
- ONS (2016) Suicides in the UK: 2016 registrations. Home people, population and community births, deaths and marriages deaths suicides in the UK. *Statistical Bulletin*, 18 December 2017.
- Payne S, Swami V and Stanistreet DL (2008) The social construction of gender and its influence on suicide: a review of the literature. *Journal of Men's Health* 5(1): 23–35.
- Phillips DP (1974) The influence of suggestion on suicide: substantive and theoretical implications of the Werther effect. *American Sociological Review* 39(3): 340–354.
- Plaisance PL (2016) Journalism ethics. In: *Oxford Research Encyclopaedia of Communication*. Available at: <https://dx.doi.org/10.1093/acrefore/9780190228613.013.89>
- Romer D, Jamieson PE and Jamieson KH (2006) Are news reports of suicide contagious? A stringent test in six US cities. *Journal of Communication* 56(2): 253–270.
- Rosman K (2017) Netflix triggers online debate with a show about teen suicide, '13 Reasons Why'. *The New York Times*. Available at: <https://www.nytimes.com/2017/04/19/style/13-reasons-why-netflix-teen-suicide.html>
- Scalvini M and Rigamonti F (2017) Why we must defend suicide in fiction. *BMJ* 359: j4743.
- Sisask M and Värnik A (2012) Media roles in suicide prevention: a systematic review. *International Journal of Environmental Research and Public Health* 9(1): 123–138.
- Society for the Prevention of Teen Suicide (SPTS). 13 REASONS WHY. Available at: <http://www.sptsusa.org/13-reasons-why/> (accessed 12 August 2018).
- Stafford N (2017) German doctors condemn internet TV series depicting teenage suicide. *BMJ* 358: j3367.
- Valkenburg PM, Peter J and Walther JB (2016) Media effects: theory and research. *Annual Review of Psychology* 67: 315–338.
- Walter B and Boyd AS (2019) A threat or just a book? Analyzing responses to thirteen Reasons why in a discourse community. *Journal of Adolescent & Adult Literacy*. Epub ahead of print 4 December 2018.
- Wang X (2012) Media guidelines for the responsible reporting of suicide. *Crisis*.
- Wetherall K (2017) Comment on the Netflix series *13 Reasons Why*. Suicidal Behaviour Research Lab. Available at: <http://www.suicideresearch.info/news-1/commentonthenetflixseries13reasonswhy> (accessed 1 April 2019).
- Wray M, Colen C and Pescosolido B (2011) The sociology of suicide. *Annual Review of Sociology* 37: 510.
- Zahl DL and Hawton K (2004) Repetition of deliberate self-harm and subsequent suicide risk: long-term follow-up study of 11 583 patients. *The British Journal of Psychiatry* 185(1): 70–75.
- Zimmerman A, Caye A, Salum GA, et al. (2018) Revisiting the Werther effect in the 21st century: bullying and suicidality among adolescents who watched *13 Reasons Why*. *Journal of the American Academy of Child and Adolescent Psychiatry* 57(8): 610–613.