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PRINTQUAL – A Measure for Assessing the Quality of Newspaper Reporting of Suicide

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Abstract. *Background:* Many studies have demonstrated a relationship between newspaper reporting of actual or fictional suicides and subsequent suicidal behaviors. Previous measures of the quality of reporting lack consistency concerning which specific elements should be included and how they should be weighted. *Aims:* To develop an instrument, PRINTQUAL, comprising two scales of the quality (poor and good) of newspaper reporting of suicide that can be used in future studies of reporting. *Method:* A first draft of the PRINTQUAL instrument was compiled, comprising items indicative of poor- and good-quality newspaper reporting based on guidelines and key sources of evidence. This was refined by team members and then circulated to a group of international experts in the field for further opinion and weighting of individual items. *Results:* The final instrument comprised 19 items in the poor-quality scale and four in the good-quality scale. Following training, agreement between raters was acceptably high for most items ($\kappa \geq .75$) except for three items for which agreement was still acceptable ($\kappa \geq .60$). *Conclusion:* The PRINTQUAL instrument for assessing the quality of newspaper reporting of suicide appears appropriate for use in research and monitoring in future studies.

Keywords: suicide, media, quality score

Numerous studies have demonstrated a relationship between media reporting and portrayal of suicides (actual or fictional) and subsequent suicidal behaviors (Hagihara, Tarumi, & Abe, 2007; Niederkrotenthaler et al., 2010, 2012; Pirkis & Nordentoft, 2011; Stack, 2000, 2005; Thom, McKenna, Edwards, O'Brien, & Nakarada-Kordic, 2012). Guidelines have been developed by several organizations to improve the quality of reporting (Department of Health and Aging, 2011; Samaritans, 2008; World Health Organization, 2008). Additionally, supporting the news media in delivering sensitive approaches to suicide and suicidal behaviors is frequently an objective of suicide prevention strategies around the world (Department of Health, 2012; U.S. Surgeon General, 2012; Welsh Assembly Government, 2009). Machlin et al. (2012) explored the diverging interpretations of such guidelines when applied to actual news reporting. They highlighted that the professionals involved, both in media and mental health services, are divided in their attitudes toward the reporting of suicides between caution to minimize copycat behavior, on the one hand, and encouragement of broad media discussion to heighten community awareness of the associated issues and reduce stigma, on the other.

Several authors have attempted to develop a quality measure for suicide reporting to aid its assessment (Fu & Yip, 2008; Hamilton, Metcalfe, & Gunnell, 2011; Michel, Wyss, Frey, & Valach, 2000; Pirkis, Burgess, Francis, Blood, & Jolley, 2006). However, there is no agreement about which specific elements should be included in such a measure and how different elements should be weighted (Hamilton et al., 2011).

We report here on the consensus development of PRINTQUAL, an instrument comprising two scales of the quality of newspaper reporting of suicide to assess its potential general impact. The items are in two categories, those that indicate poor reporting and those that indicate positive reporting. It is intended for use in future studies and international monitoring to assess the general impact of such reporting with respect to contagion, imitation, cluster propagation, and reducing the dissemination of knowledge concerning novel methods of suicide.

Method

A first draft of the PRINTQUAL instrument was compiled, comprising items indicative of poor- and good-quality newspaper reporting; this was primarily based on the UK Samaritans guidelines for reporting suicide and self-harm (Samaritans, 2008) but also based on items from other key sources of evidence (Hagihara et al., 2007; Niederkrotenthaler et al., 2010; Pirkis & Nordentoft, 2011; Stack, 2000, 2005; Thom et al., 2012). This version comprised 25 items: 20 items in the poor-quality scale and five in the good-quality scale. The draft was circulated to all members of the research team (academics, mental health professionals, and a journalist), refined, and then recirculated to team members for further comment.

The agreed version of the instrument was then circulated to a group of experts in the area of suicide, suicide reporting, and suicide clusters (team members AJ, KH, DG, SP, KL, MD, plus other international experts; see Acknowledgments). Experts were asked for comments on the individual items, including their removal or the addition of other important factors. They also weighted the individual items dependent on perceived strength of negative or positive quality in relation to their potential impact on risk of suicide in the general population. A score of 1 indicated no additional weighting should be applied to the item, although it should be included in the measure. The final weighting for each item included in the instrument was calculated as an average of the weighting for each item across the 12 experts. To allow for interrater variation in relative size of scores, for each expert the weighting used to calculate this was a proportion of the total score for all items.

Two investigators (AM, PJ) were involved in the initial independent rating of 30 newspaper articles using PRINTQUAL from a study of reporting on deaths in Bridgend, South Wales, around the time of a possible suicide cluster in that town (Jones et al., 2013). The level of agreement between investigators was calculated and subsequently each rater received training in the use of

Table 1. PRINTQUAL: overall weightings and pre- and posttraining interrater agreement

PRINTQUAL items	Weightings	Pretraining κ	Posttraining κ
Negative/poor-quality items			
Is the article on the front page?	60	1.00	1.00
Is it the main headline on the front page?	78	1.00	1.00
Is the method mentioned in the headline?	48	1.00	1.00
Does the article cover over 50% of the page?	43	.89	1.00
Is it on page 3?	24	1.00	1.00
Does the article use phrases to be avoided as stated in guidelines?	23	.47	.67
Are explicit or technical details of the method described?	70	.54	.63
Are technical details of an unusual method for the locality described?	69	1.00	1.00
Are the contents of a suicide note described?	31	1.00	1.00
Does it mention or refer to a suicide hotspot?	54	.68	.70
Does it report positive outcomes from the death?	46	1.00	1.00
Is the cause of the suicide attributed to a single factor?	33	.66	.76
Is there repeated reporting of earlier suicides in the article?	45	.64	.75
Does the article report whether the person knew previous suicides or that the timing implies a link?	42	.63	.76
Does the article highlight community expressions of grief?	38	.47	.90
Does the article include interviews with the bereaved?	30	.67	.90
Does the article include photographs of the scene, location, or method?	54	.90	.90
Does the article include a photograph of the deceased?	36	.77	1.00
Does the article mention a celebrity suicide?	66	1.00	1.00
Total negative/poor-quality score	890		
Positive/good-quality items			
Does the article include recommended language as based on guidelines?	34	.57	.64
Does article describe complex or multifactorial causes of the death?	35	.78	.78
Does it include sources of information or advice?	58	.90	.84
Does it take the opportunity to educate the reader?	48	.57	.75
Total positive/good-quality score	175		

PRINTQUAL for items that appeared difficult to judge. Following training, a further 30 reports were coded by the two researchers.

In using PRINTQUAL each factor is coded (1) or (0) depending on its presence or absence, respectively, and then weighting is applied in accordance with the consensus consultation exercise. A score is then calculated for each subscale (poor-quality items and good-quality items).

Results

The final version of the measure comprised 23 items, 19 items in the poor-quality scale and four in the good-quality scale (Table 1). Discussions had resulted in the removal of an item related to the number of photographs because there was no method to avoid this becoming overweighted in the final score, and given that two items were already included relating specifically to photographs this was deemed a reasonable step by the research team. A positive item relating to advice quoted from official sources was also removed following expert consensus since the advice quoted may not always be perceived as positive. Two experts felt that many of the negative items may be weighted differently depending on their position in the newspaper; however, the research team concluded that the two items relating to placement on the front page or page 3 allowed for this. It was also highlighted that whether a method was deemed unusual could be geographically dependent, that is, vary between countries and populations.

Table 1 presents the overall weightings based on the experts' ratings and the pre- and posttraining interrater agreement in the use of PRINTQUAL. Cronbach's α was .96 for the negative quality score and .69 for the positive quality score. The maximum possible unweighted negative poor-quality score was 19 and positive good-quality score was 4, reflecting the number of items in each dimension of quality. Applying the weightings gave a maximum total weighted poor-quality score of 890 and good-quality score of 175.

The initial rating exercise identified particular items where raters had difficulty in achieving consistent assessment of reports. Some examples of these were: the widespread reporting of social media tribute sites in the Bridgend study articles being classified as a "community expression of grief"; and terms such as *suicide street*, *suicide town*, and *suicide valley*, classified as "hotspot." Other items clarified in rater training were: the inclusion of photographs of other individuals who have died through suicide is an indicator of repeated reporting of earlier suicides, and bereaved individuals include not only relatives but also friends and colleagues in direct contact with the deceased. Full guidance notes based on the researchers' initial difficulties appear in Appendix A. Weak agreement was initially reached regarding recommended phrases and phrases to be avoided, and thus the raters were issued with a list of examples based on Samaritans guidelines (Samaritans, 2008).

Following training, the level of agreement between raters was high ($\kappa \geq .75$) for most items, except the use of "recommended phrases or phrases to be avoided in reporting," "identification of suicide hotspots," and "the use of explicit details," although agreement on these items was still acceptable ($\kappa \geq .60$). The time to review each article varied from 1 to 20 min depending on its length.

Discussion

In this short report we describe the development of an instrument, PRINTQUAL, to assess the quality of print media reporting of suicide. The instrument includes two dimensions, namely, positive/good-quality and negative/poor-quality reporting. The internal consistency, that is, how closely related the set of items are as a group, was excellent for the negative quality score and acceptable for the positive quality score. This implies that the items, particularly for the negative quality score, measure different substantive areas within a single construct. Machlin et al. (2012) concluded that guidelines and research of helpful reporting for suicide prevention are underdeveloped and this may explain the lower consistency of the positive quality score items.

Training in use of the instrument was of value. The level of agreement between coders following training was acceptably high for most items except the use of recommended phrases or phrases to be avoided in reporting, identification of suicide hotspots, and the use of explicit details, although agreement was still acceptable for these items. In other studies, the use of sensational language has been identified as difficult to define (Hamilton et al., 2011). There was some evidence that cluster-/location-specific training in the use of PRINTQUAL would be helpful for future use.

While PRINTQUAL was developed on the basis of evidence and expert consensus agreement from a diverse group of experts in terms of background and international location, it is restricted to the assessment of newspaper reporting only. Journalistic use of social media and blogs was not considered. PRINTQUAL could, however, potentially be applied to online versions of mainstream newspapers or used by journalists themselves to assess draft articles.

Conclusion

We have developed an instrument (PRINTQUAL) for assessing the quality of newspaper reporting of suicide that we consider appropriate for use in future research and monitoring. However, the development of an instrument of this type should be seen as an evolving process. Further research is required to evaluate its use in specific circumstances, such as application in studies of cluster contagion and of distress caused by reporting of suicides to communities and the bereaved. Item weighting in particular may be affected by local geographical and cultural influences.

Acknowledgments

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Appendix A

Notes for Use of PRINTQUAL

- Social media tribute sites should be included as community expressions of grief.
- Inclusion of terms such as *suicide street* and *suicide town* should be counted as mentioning area as a hotspot.
- Inclusion of photographs of other individuals who have died through suicide should be counted as an indicator of repeated reporting of earlier suicides.
- Positive outcomes include situations such as separated parents reconciling following the death.
- The bereaved includes not just relatives but also friends and colleagues with direct contact with the deceased.
- Explicit details refer to describing, for example, the type of ligature used not simply stating the method.
- Recommended phrases and phrases to be avoided should be based on guidelines from the locality, for example, Samaritans guidelines for reports from the UK, and listed for raters.
- Unusual methods refer to the locality or deaths reported, for example, when investigating media reporting of a possible cluster of deaths by hanging, poisoning would be an unusual method.
- A single factor as a cause would be relating the death to the individual experiencing bullying without referring to multiple risk factors such as self-harm, abuse, mental health issues.
- Photographs of the scene include inside the house or a tree, location would be outside the house, the street, wood, or locality.
- Sources of information or advice would be identifying helplines or organizations that could provide support.
- Education of the public includes discussion of stigma associated with mental health issues or how to respond to someone with suicidal ideation.