

**Dr. Carlos FANJUL-PEYRÓ**

Universidad Jaume I. Spain. fanjul@uji.es

**Dr. Cristina GONZÁLEZ-OÑATE**

Universidad Jaume I. Spain. onate@uji.es

**Marta-del-Carmen SANTO-MIRABET**

Universidad Jaume I. Spain. msanto@uji.es

### ***Institutional campaigns for suicide prevention in Spain. Analysis of strategic change in its social communication: case of the Valencian Community***

### **Campañas institucionales para la prevención del suicidio en España. Análisis del cambio estratégico en su comunicación social: caso Comunidad Valenciana**

**Dates** | Received: 24/02/2020 - Reviewed: 30/03/2020 - In press: 04/04/2020 - Published: 01/07/2020

#### **Abstract**

This research attempts to address the concerns around talking about suicide in the media, especially due to the scarcity of social prevention campaigns in the current context. Data provided by the WHO show there is a serious public health problem, being the second highest cause of death among young people aged between 15 and 29 at global level. On the other hand, the media rejects treating with suicide publicly because of the influence of the so-called Werther Effect, able to create a "pull effect". However, a parallel theory named the Papageno Effect confirms that positive coverage of suicide in the media can help prevent it. The formulas employed in advertising coverage of a public interest issue can be revealed by means of a compilation of the main national campaigns and an analysis of the first prevention campaign in the Valencian Community. Future strategies include making the issue visible, raising awareness and education. Furthermore, expert opinion validates this approach and encourages visibility of the phenomenon so as to break the taboo, myths and stigma that surround suicide.

#### **Keywords**

Suicide campaigns; institutional communication; prevention; Werther effect; Papageno effect

#### **Resumen**

*La presente investigación trata de dar respuesta a las dudas que genera hablar del suicidio en los medios de comunicación, especialmente ante la escasez de campañas sociales de prevención en el panorama actual. Los datos ofrecidos por la OMS revelan que se trata de un grave problema de salud pública, siendo la segunda causa de muerte en jóvenes entre 15 y 29 años a nivel mundial. Por su parte, los medios muestran rechazo a la hora de tratarlo públicamente debido a la influencia que ejerce el llamado efecto Werther, capaz de generar un efecto "llamada". Sin embargo, una teoría paralela bajo el nombre de efecto Papageno corrobora que un tratamiento positivo del suicidio en los medios de comunicación puede ayudar a su prevención. Con una recopilación de las principales campañas nacionales, y un análisis de la primera campaña de prevención en la Comunidad Valenciana podemos recoger las fórmulas empleadas para el tratamiento publicitario de un tema de interés público. Visibilizar, sensibilizar y educar son las estrategias a seguir en un futuro. Además, la opinión de los expertos valida este planteamiento y trabajan por una visibilidad pública del fenómeno para acabar con el tabú, el estigma y los mitos que rodean al suicidio.*

#### **Palabras clave**

*Campañas suicidio; comunicación institucional; prevención; efecto Werther; efecto Papageno*

## 1. Introduction

In order to discuss social advertising campaigns for the prevention of suicide, first of all they should be contextualised within the general framework of social communication campaigns. Communication through advertising has a social aspect with non-commercial aims which seek to produce effects that can contribute to social and/or human development and which may or may not form a part of programmes promoting change and social awareness (Alvarado, 2005; Martínez y Vizcaíno, 2008). Thus any communication which seeks to contribute to social development on causes of social interest with non-commercial aims is considered to be social advertising.

In spite of the antagonism that the concepts "advertising" and "social" may generate by being placed together, many researchers define a link between them which unites them within the sphere of advertising. Both aspects of communication share basic communicative features such as the persuasive purpose and their highly paid nature. The most differentiating point of social advertising is to be found in the source, for it has been developed by the advertisers from the social sector and, basically, by the so-called Third Sector which has used conventional means to be known by and to obtain a certain social recognition (Cortés, 2008; Arroyo, 2009). In this way, non-governmental organisations (NGOs) use advertising as a promotional tool for social causes or for general interest in specific contexts.

In parallel to this, and as professor Arroyo (2009) continues, we also find the so-called "advertising with a cause" promoted by brand name companies in order to link socially positive ideas and values to their businesses. This trend is on the uprise; every day more and more advertising discourse crosses the traditional advertising rhetoric with the representation and utilization of social values and content, creating the so-called "Corporate Activism", a corporate discourse which feeds on social values and attempts to change the traditional narratives in order to legitimise its image.

Sometimes it is difficult to differentiate social discourse from corporate discourse because of the overlap of the rhetoric traditionally used by each of them. But the key indicator for recognising a social campaign with no lucrative or commercial aim is to identify the source. If, as we have mentioned, an NGO is the promoter of the campaign then it is clearly intended to be a social campaign, even though it may include some aspects recognisable from commercial advertising.

Nevertheless, there are social campaigns promoted by government entities whose source is clearly identified as a Public Administrations broadcast in different means of communication, in the spaces reserved for commercial advertising (Cortés, 2011). The State communicates directly with the public through the channels of mass media, with a social message that should fulfil the features previously mentioned, thereby generating "Institutional Advertising".

### 1.1. Aims of the Research

Stigmatising certain behaviour or conditions can be an incentive in some cases for the production of a greater number of publicity campaigns which try to eradicate or bring about awareness of them. Dealing with HIV or drug-taking is now taken for granted by society and by institutions, who broadcast social campaigns on these regularly. However, the stigma which suicide carries with it somehow impedes the production and broadcasting of such campaigns.

Seeing the shortage of publicity campaigns for the prevention of suicide in the last decade in Spain raised the question as to whether the production of awareness campaigns about suicide could have a positive influence on its prevention and bring about a reduction, by treating it with a more normalising and general approach.

The objectives for this research are as follows:

- To determine the reasons given by institutions to explain the low number of social campaigns in this field.
- To know the change in strategy regarding the treatment of suicide that the public institutions are adopting and its communication via publicity campaigns.
- To propose an alternative communicative strategy for greater efficiency in the campaigns for the prevention of suicide.

## 2. Theoretical Framework

### 2.1 Institutional Communication

The Institutional Publicity and Communication Law 29/2005, of the 29<sup>th</sup> December, defines institutional publicity and communication campaigns as "any organised activity aimed at spreading a message or common objective to a wide range of recipients, which uses an advertising format paid for or granted and which is promoted or contracted by [...] the General State Administration and by the other entities which make up the public sector".

Likewise, the Valencian Government's Law 12/2018 of the 24<sup>th</sup> May which regulates institutional publicity of interest to the public and the collective ideas of the public infrastructures, defines in its Article 2 the broadcasting of institutional publicity as one to "Promote attitudes and civic behaviour in citizens in relation to goods or public services of an educational, cultural, social, sanitary nature, promoting employment and other areas of equivalence", among others.

Therefore, the State, or the Public Administrations are responsible for broadcasting educational and socializing campaigns for the citizens with the aim of introducing new values which can bring about changes in society (Cortés, 2011), whether they be in perceptions or of attitudes.

The matters that should be addressed through this type of communication are defined by the Secretary of State for Communication in the Practical Guide published in 2010, in which the information and socially useful campaigns which foster in citizens a social change of habits or attitude, as well as campaigns of support to the Spanish economic sectors and those which support public institutions, are all considered to be "advertisable".

#### 2.1.1. Budget distribution for Institutional Publicity and Communication

Every year the Ministry of the Presidency and Territorial Administrations publish a *Plan for Institutional Publicity and Communication* in which social priorities are described. For the year 2018, healthy habits, the promotion of citizens' rights and duties, and the development of technology occupy the top positions. Throughout the year, 39.22% of the campaigns had as their objective "to advertise preventive measures against risks or which contribute to removing harm of any type for the health of the people or the natural heritage", to coincide with the priority of "promoting healthy habits". Certain matters such as "information and creation of awareness for the prevention of gender violence", "energy saving and efficiency" or "cybersecurity for citizens and businesses" (Plan 2018 for Institutional Publicity & Communication) form the major part of the advertising campaigns sent out during this year.

While it is true that the Ministry for Health, Social Services and Equality receives a higher budget than other Ministries (13,441.237€ in 2018), with a total of 13 annual national campaigns it is well behind others like the Home Office or the Ministry for Industry, Tourism and Commerce in the number of campaigns. Therefore, knowing the overall level of investment and distribution of funds for the different ministries' institutional campaigns, it is possible to see the importance attributed to each of them, placing health as the third cause with the greatest number of campaigns proposed, and in second place for the assignment of funding, in spite of being responsible for the first of the priorities defined by the 2018 Plan.

At the regional level, we find the relevant information for the budgetary assignment in the Valencian Community Transparency Portal. The production of public assets of a social nature, in particular the Institutional Promotion and Communication, received 5.9 million Euros in 2018. This amount is not itemised or broken down, so it is not known which campaigns were carried out with these funds.

Through the "Call for Projects" offered by the Valencian Government and open to professional agencies for the "Campaign for the prevention of suicide" the public were informed that "The budget for the development of this is 17,000€ + VAT". Thus, at least, this quantity was invested in the creation, promotion and distribution of the project.

### 2.2 Suicide as a social phenomenon

This study in no way attempts to understand the underlying causes of suicide, for to enter into its psychological, sociological and criminological depths would detract from the main focus of the research. Therefore, we shall proceed by explaining the classic concept of suicide in very broad terms, and the current contextual focus of suicide.

The World Health Organization (WHO) defines suicide as "the act of deliberately killing oneself". Tejedor (2010), as cited by García Fernández & Olmo (2015: 72), describes it as "neglected death". In turn, Emil Durkheim, in his book *Suicide* (1992), defines it as "the act of desperation of a man who does not want to live" (cited by García-Sanmartín, 2018:455). However, suicide cannot be summarised simply as voluntarily depriving oneself of life. A whole range and number of factors come into play, whose origin can be found in and derive from everyday life and the cultural and historical surroundings of the individual (García-Haro, García-Pascual & González, 2018), which is why we can neither understand nor approach this phenomenon in the same way over different times or social contexts.

In general, clinical psychology associates the origins of this phenomenon with depression, although they are not always directly related. There are an infinite number of "risk factors" that increase the level of risk of suicide, be they at an individual, family or contextual level (Pérez Barrero, 2005).

Relevant factors range from mental disorders such as depression, bipolarity, psychotic disorders, anxiety, personality disorders, etc., even age and sex. It is worth noting that adolescence and old age are "the times with the greatest risk of attempts and success of suicide" (Fernández, 2016), being men who tend to attempt and succeed in the greater part of registered suicides, with a rate of 73.9% (National Institute of Statistics - INE). On the other hand, family history, a lack of social-family support, economic status, the employment situation or education are some of the most relevant environmental factors. Together with these, some important stressful events, sexual orientation, abuse or the "Werther" effect (pull effect) directly influence suicidal thoughts and behaviour.

Without a doubt there are numerous cultural, social, psychological, clinical and biological factors (García-Haro et. al., 2018) which directly impact on suicidal behaviour. In addition, according to the individual's age and specific circumstances, the factors can change and vary in risk. The lives of adolescents, adults and the elderly present very different conditions associated with each particular stage in life, yet they can coincide in the same result. Likewise, other collectives like lesbians, gays, transsexuals and bisexuals (LGTB) form part of the most "vulnerable" groups in society.

In spite of the numerous causes, both individual and from the immediate surroundings, that are directly related with suicide, through his work *Suicide* (1897), the sociologist and philosopher Émile Durkheim (1858-1917) arrived at the following conclusion (cited by Felipe Palacio, 2010:6): suicide cases are not to be understood as isolated and private, but rather as a social trend in the so-called "suicidogenic societies", in which suicide arises as a response to "an imbalance between social structure and cultural conscience". As such, he concludes that "all suicides in a given society [...] are treated as a social fact that can only be explained sociologically, and not by the individual motivations that lead to suicide".

Following Durkheim's theory on suicide and its classic understanding, Felipe Palacio (2010) makes reference to the three types of suicide determined by the French sociologist: "egotistical suicide" (he underlines individualism, like the Japanese *harakiri*), "altruistic suicide" (moral sacrifice for the collective good, like the *kamikazes* or immolations) and, lastly, "anomic suicide" (generated by a lack of vitality or from individual disorientation).

Therefore, there are so many variables which intervene in the process of this complex phenomenon of suicide and so many vulnerable groups that it is very complicated to identify an objectively specific type.

### **2.2.1. The statistics of suicide**

The WHO recognises suicide as "a public health priority". The figures managed by the organisation rise to 800,000 deaths per year worldwide, and it is the second main cause of death in young people between the ages of 15 and 29. However, these figures may need modifying, given the questionable quality of the ways in which suicides are measured and deaths are recorded. In fact, the WHO considers that a very high proportion of suicides are wrongly classified as a result of the stigmatisation of the problem as a cause of death.

In Spain, the figures handled by the INE (2017) show that in 2017, 3,679 deaths were recorded with suicide as the principle "external cause" with 10 deaths per day. Deaths from road accidents were a long way behind with 1,890 victims.

That same year produced 397 suicides in the Valencian Regional Community (INE 2017), of which three out of four cases were male. This translates to almost one suicide per day, according to the Spanish Foundation for Mental Health through the Suicide Observatory in Spain. This positions the Valencian Community in fourth place for the number of suicides per year.

It is worth noting an article published in the Spanish newspaper *El País* in 2016, with data provided by the INE, which compared the number of suicides between the 1980s and the year 2014 with road accidents in the same period (Fonseca (2016).

From the beginning of the first decade of the 21<sup>st</sup> century road accidents started to reduce in number progressively until the present time. In contrast, there has been a continuous increase in suicides, albeit with a more gradual rise but which have persisted throughout the years and are still increasing. 2008 is a key year for both; the number of road accident victims was overtaken by that of suicides by 427. In 2014, the difference is 2,037 deaths.

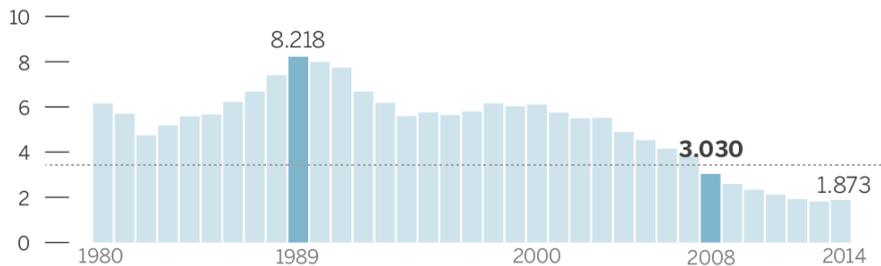
The source of this situation can be directly associated with the change in mentality by Spanish society towards road safety as a result of the policies of awareness campaigns (Castelló, 2010; García Fernández & Olmo, 2014). Since 1966, the DGT (Directorate-General for Traffic) has broadcast campaigns on accident prevention relating to speed, alcohol, safety, cyclists, etc. The insistence and continuity of the campaigns and the Strategic Plans for Road Safety have achieved a reduction of 6,345 victims of traffic accidents. This data therefore leads us to question what measures have been taken in relation to suicide and its prevention, after such progress made in the rate of road accidents.

**Figure 1. Mortality comparison between road accidents and suicides**

## Evolución de suicidios y víctimas de accidentes de tráfico

### TRÁFICO

En España. En miles



### SUICIDIOS

En miles



Fuente: INE / DAVID ALAMEDA - EL PAÍS

Source: Fonseca, D. (2016). <https://bit.ly/2HMqrpc>

It is common to see news about road accidents and prevention, but not so about suicide or awareness campaigns. The question posed by García Fernández (2014) is that, as it is a social problem, why is there so little media coverage about it?

### 2.3 Communication on suicide and its stigmatisation.

Having gone through the social communication campaigns sent out by the various Government Ministries, what stands out by their absence are institutional suicide prevention campaigns under the auspices of the

Health Ministry. In none of the Institutional Publicity and Communication plans broadcast by the Spanish Government is suicide treated as one of the primary targets of communication in a ten-year period (2007-2017).

This sample reflects the absence of social campaigns aimed at the prevention of suicide, just as it is also a symptom of the stigma from which it suffers, often understood as "a dysfunction, an outburst of human behaviour about which we only know how to feel compassion or repulsion" (Pérez Jimenez 2011:13). This author points out that the degree of public ignorance about suicide is comparable to its importance as a matter for concern.

Taking into account that suicide is a strongly stigmatized social phenomenon which is almost conceived of as "taboo", the treatment given to it in the media is reduced to representing it as an individual and anecdotal event (García Fernández & Olmo, 2015). Thus the information considered as newsworthy runs the risk of becoming of "morbid interest", focusing on details relating to the death, the method used, criminal facts, etc. The communication of suicide intrinsically incites a morbid interest in any case, for "when a person seeks to end his/her life it ruptures the natural order of things, which creates a special interest for the public" (Urzúa, 2003:354).

Recent years have shown a notable increase in concern for the prevention of suicide and the elimination of its status as taboo. However, each change in government has brought about substantial changes in the public treatment of the matter, for at both national and regional level strategic changes have been observed in the prevention of suicide. Nevertheless, Spain currently has no state plan or programme for prevention. What we do find is a proposal for a general strategy for the National Health System (SNS) where the prime objective is to raise awareness through social awareness and destigmatization campaigns on the problem of suicidal behaviour (Anseán, 2014; García Fernández & Olmo, 2014).

For its part, the Foundation for Mental Health in Spain (FSME) recognises a manifest disinterest on the part of politicians, who have restricted their interest to making proposals for laws yet have passed none. The judicial and legal system is an obstacle which holds back the creation of integral plans for the prevention of suicide in a combined and coordinated fashion.

On the other hand, it is true that in recent years, especially in 2018, the Autonomous Regional Community governments have proposed initiatives to work with protocols for action at a local and regional level. Notable among these are the programmes from Galicia, Castilla-La Mancha, Murcia, Barcelona and Valencia. In spite of these regions having programmes of prevention of suicidal behaviour in which publicity is considered priority as a strategic line of prevention and a means for action, it has only been carried out in some cases.

### **2.3.1. The "Werther" effect.**

An explanation for the communicative silence can be found in the "Werther Effect", proposed by the sociologist David Phillips in 1974, after proving that the number of suicides in the United States increased in the month following the front page publication of news of suicide (Herrera, Ures & Martínez, 2015). This reflects what is known as the "pull effect"; a phenomenon which induces an imitation of suicidal behaviour after its appearance in the news.

The term originates in Goethe's novel *Leiden des jungen Werther* (The Sorrows of Young Werther, 1774). The number of youths who ended their lives in a similar way to that described in the book increased notably after its publication, so much so that it caused the book to be banned in several European countries. This is why all the cases which can be considered as imitation after this type of events have been reported in the media are known as "The Werther Effect" (Álvarez, 2012).

When a celebrity is involved it is also known as the "copycat" effect (Herrera et al., 2015) and there is an increase in suicide cases when this type of suicide is in the news, which goes to show the strong impact that these cases of celebrities committing suicide can have, as with Antonio Flores (1995) in Spain or with Kurt Cobain (1994) throughout the world (García Fernández & Olmo, 2014).

### **2.3.2. The "Papageno" Effect.**

Following this line we find a parallel theory under the name of the "Papageno" Effect in honour of the character in Mozart's *The Magic Flute* (1791), who was dissuaded from committing suicide by the intervention of three children who showed him the alternatives that life has to offer. The "Papageno" effect proposes that news coverage of suicide does not necessarily lead to an increase in suicides.

The impact of information about suicide cannot be limited to harmful effects; that coverage of a positive coping mechanism in adverse circumstances, as explained in the press articles on suicidal thinking, may have protective effects (Niederkrötenhaler cited by Herrera et al., 2014: 125).

In the media we find two equally dangerous attitudes for the effects that high-profile suicides can produce, be they lack of information or indeed, excessive information. García Fernández & Olmo, cited by Lois-Barcia, Rodríguez-Arias & Túnnez (2018: 88), uphold "the need to inform responsibly, without sensationalism, without euphemisms and by treating it as a subject of public health".

Many authors have suggested the influence that mass media has on the imitative effect of attitudes and behaviour. In this sense, positive and responsible treatment would be to follow the guidelines as laid out by the WHO in the SUPRE project of 1999, and the document published in 2000 with the title "Suicide prevention: an Instrument for Media Communication Professionals", whose aim is to train professionals of Communication in the task of progressively reducing suicide mortality (Clinical Practice Guidelines in the National Health System (SNS), 2012).

Likewise, the prevention campaigns are a little used tool, for the same reasons of imitation and contagiousness. However, various studies conclude that the awareness campaigns on suicide improve people's attitudes and reduce stigma towards mental illness (Clinical Practice Guidelines in the SNS, 2012; Pérez Barrero, 2005). So the main aim of talking about suicide publicly through institutional campaigns is to remove stigma, which directly contributes to its prevention.

Campaigns are needed which promote mental health, just as the initiatives which abound focusing on avoiding accidents, violence or illness. "Talking about suicide is a way of combatting it" (Pérez Jiménez, 2014).

### **2.3.3. Campaigns on the Prevention of Suicide in Spain**

As we have pointed out throughout, the number of prevention campaigns on this phenomenon is very low; because of the theories already explained and the stigma of suicide it is not easy to find campaigns.

The Spanish Foundation for Mental Health includes the existing programmes for the prevention of suicidal behaviour in both Europe and Spain. The most relevant European programmes are "Eurogenas" and "Supreme", initiatives which aim to prevent suicidal thoughts and behaviour by focusing particularly on reducing or eradicating stigma surrounding mental disorders.

On the other hand, in Spain, where there is no strategic state plan, we find at least fourteen prevention programmes developed independently at a regional and local level. Among these the protocols carried out by Galicia, Castilla-La Mancha, Murcia, l'Eixample in Barcelona and the Valencian Community. All of them are centred on preventing suicidal behaviour, and recognise the importance of promoting social awareness campaigns for their positive effect on being able to change attitudes towards this topic in society and in the minds of individuals (Plan for the Prevention of Suicide, Govt. Galicia, 2017). It is worth pointing out that many of the actions are aimed exclusively at health workers in order to eradicate stigma in this group and provide guidelines for a situation which is actually more common than is generally known.

However, only in some very specific cases has publicity been generated for the general public as part of a promotional strategy. These cases can be found in the Madrid Community, through their *Mental Health Plans* (2010-2014, 2018-2020) and in the Valencian Community with the *Plan for Prevention of Suicide and Suicidal Behaviour Management* (2026-2020). In both regions, the Public Administrations have produced programmes and strategies which coincide in their validity as campaigns for prevention, but they differ in the way they have been carried out.

The Valencian Community stands out as a pioneer among the initiatives for prevention by placing communication at the centre as one of the tools. Whilst it is true that the protocols of the remaining regions also value communication as part of a strategy of prevention, none of them have created an integral strategy of communication which ranges from a website to television spots.

In any case, it should be highlighted that in all of the plans, communication is considered as a key tool for ending the stigma associated with mental illness of any type, and specifically with suicide. The question of the theories of "contagiousness", as we have explained with the Werther Effect, contrasted with the Papageno Effect, give rise to solutions based on communication.

### 2.3.4. International Suicide Prevention Campaigns

Both in Europe and throughout the world, campaigns are more common, but the treatment of suicide in those contexts has to be understood before we can talk about them in depth. To look at the situation beyond the borders detracts somewhat from the main focus of this study, however it is interesting to mention some of the projects which, by using an open treatment strategy have produced good results designed to give a solution to one of the main problems of global public health (WHO, 2018).

As for the social campaigns for the prevention of suicide, the most significant in Europe are in Austria, the United Kingdom and Romania; in Asia, Singapore and South Korea, and lastly, Australia. All of these regions have high rates of suicide, albeit not the highest. According to WHO, the ratio of suicides per 100,000 inhabitants in these countries is at about 9 in the European regions and between 15 and 20 in the Asian regions. In Spain the ratio is 8.7.

The initiatives which have produced the best results for reducing the suicide rate are based on communication strategies which centre their efforts in a triad: publicity campaigns for prevention which treat the problem of suicide openly, the removal of dramatic and sensationalist treatment of suicide cases in the media, and the production of information guides on prevention and detection of suicidal behaviour aimed at different sectors and with different objectives, which deal with the same issue in a different way depending on the target audience (males, females, youths) and on the context in which they are placed (Clinical Practice Guidelines in the SNS, 2012).

Campaigns such as "Read between lines" (Scotland), "Small Talk Saves Lives", (UK), "Find the reason before it's too late" (Romania), "R U OK?" (Australia), "It's time to take suicide seriously. Seriously" (Singapore), or "Bridge of life" (South Korea) are example of the initiatives carried out in these countries which have shown a significant effectiveness in the reduction of suicides in their respective regions.

These initiatives reflect the value given to suicide in different countries and contexts, and why in each country they address the public in a different way. The tone used in Singapore is not the same as in Australia or the UK, which shows just how important it is to know your audience in order to approach it in the best way. Also, the way in which the matter is going to be addressed in terms of its seriousness, as is the case in Asia, conditions the resources used - type of graphics, styles and creativity.

Language as a resource is repeated in many cases, but with changing tones and styles. We detect a clear change between Western Europe (the UK, Scotland and Austria), Eastern Europe (Romania) and Asia (Singapore). In the latter the issue is treated from a harder, even aggressive, standpoint; likewise in Romania, whilst the tone adopted in the West (and we include Australia also) is more friendly.

In any case, even if the way the public is addressed differs on certain points, the objective of each of them remains the same: to speak openly about suicide and to do so with people who feel affected by it.

## 3. Methodology

Now we shall analyse the advertising strategy used by the Valencian Community and the regional Health Council with the launching of its campaign in 2018 "Let's break the silence. Let's talk about suicide". Our choice of this particular campaign for our analysis is based on its originality as an institutional communication, for up to that time there had been no campaigns with similar features either in the Valencian community or anywhere else in Spain.

If we take the Werther theory into account, talking about suicide in the mass media could create a copycat effect. Meanwhile, on the other hand, the Papageno effect proposes that talking about suicide in a responsible way can be positive for preventing it. Through critical analysis of the discourse we shall weigh up whether the campaign in question achieves the effect it has aimed to produce or whether it could end up being counter-productive.

The ultimate aim of this analysis is to study the way in which publicity communication has taken on a problem of public interest without precedent, by applying a qualitative research via critical discourse analysis.

The methodology we use is divided into two phases. In the first we apply the model of advertising discourse analysis devised by professors Baños & Rodríguez from the Communication Sciences Department of the King Juan Carlos University. The content analysis it comes from is a widely used technique in the field of social sciences and specially used as a research tool in the field of communication sciences, which will allow us to understand the campaign at the advertising, narrative and social levels.

The model of analysis of advertising discourse applied to social publicity tries to discover to what extent the discursive nature of the message designed by a third sector influences the viewer's attitude (knowledge, affect and action) towards these causes (Baños & Rodríguez, 2009).

Added to this method of analysis, in the second phase we interview two of the people responsible for making the campaign, who contribute a more complete view of the working process and the public health basis which it has been guided by.

### 3.1 Analysis of the advertising discourse of the campaign “Let's break the silence. Let's talk about suicide”.

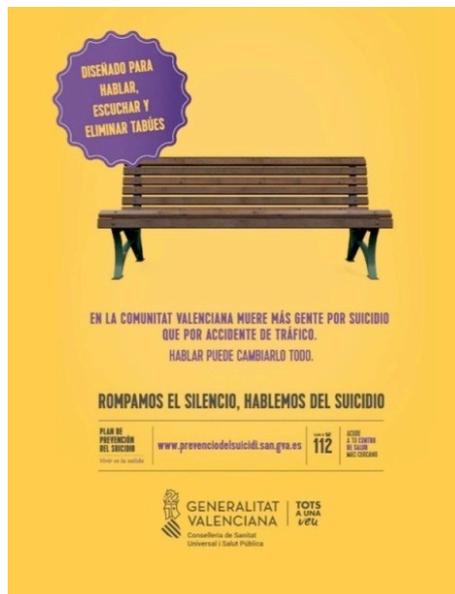
#### 3.1.1. Technical Data

Agency: Kanbei Creative Company

Advertiser: Valencia Generalitat. Ministry of Universal Health and Public Health

Production: Montaña Studio

Pieces: three posters, three video spots and two advertising wedges



Source: Generalitat Valenciana (2019). Suicide Prevention Campaign. <https://bit.ly/2HNFMFV>

#### 3.1.2. Analysis of the source; needs and strategies.

The Valencia Generalitat is responsible for broadcasting the texts with no other collaborating body of intervention, so it can be described as an institutional campaign of a social nature. The same applies to the advertising, for it is not only responsible for the message itself, but also for shaping and broadcasting it.

The nature of the discourse gives rise to a single voice which adopts different discursive strategies in order to achieve a range of objectives within one message. First of all it adopts the role of informer by revealing hitherto unknown information which is of interest to the people.

By using description of events and affirmations, the wording aims to persuade the public via a change of perspective, which serves to change perceptions and, consequently, attitudes towards suicide.

In order to connect with the audience a series of publicly accepted cultural and social references are used, independently of the context in which they are found. The principal elements they have chosen to use can be more readily identified by the public and the message driven home more effectively. The advertising discourse relates directly to cultural traditions with which the public immediately identify.

The aim of the campaign is to take the real dimension of the problem into society and bring about an awareness of the situation (GVA, 2018). In order to achieve this, the axis of communication is the fact that in the Valencian Community the high number of suicides and attempted suicides is not generally broadcast because of the taboos which surround it. And everyday items are used creatively in order to start the conversation that can help to change things. All this is embodied in the slogan "Let's break the silence. Let's talk about Suicide" and the campaign is aimed at the general public resident in the Valencian Community, and at people who are at risk and their families and close contacts. The video spots specifically target the two most vulnerable groups: the young and the over 65s.

### 3.1.3. Analysis of the advertising message

Three different images have been chosen as a way of targeting specific groups according to people's consumer habits. The three main elements are a bench, a take-away coffee and a bag of sunflower seeds, all of which are products which invite conversation in parks, cafés and just about anywhere in the city.

**Figure 3. Images in the campaign "Let's break the silence. Let's talk about Suicide"**



Source: Video Case Agency Kanbei for the Festival La Lluna 2018.

Using the model for analysis designed by Dr. Javier Marzal Felici (2004) we shall discuss the image at a contextual, compositional and morphological level for the posters and the video spots, both of which use the same image.

It corresponds to a still-life, as it contains only digitally created objects and no interaction with other elements.

The objects are positioned in an unidentifiable and uniform space, thereby creating a flat representation based on visual simplicity. This simplicity is not to be considered as an obstacle but as the use of a series of non-complex elements with a certain degree of abstraction, as they are not in a real or recognisable place.

The symmetry and regularity of the image accentuate the composition's simplicity, strongly marked by the verticality and rhythm, which lends the image a static balance. Both structural parameters are particularly reflected in the colour, for three colours alternate (orange, purple and black) in a regular and constant way to create a visual pattern loaded with stability and harmony.

On the other hand, the objects are positioned in the centre of the composition, creating a general line of vertical movement. In spite of being completely static, the distribution of weight creates a reading direction guided by the weight and hierarchy.

As it is a flat representation without depth on a solid colour background, the visual order is marked by the hierarchy of size. In this sense the main element stands out (coffee cup, bench or bag of sunflower seeds) by its greater size or weight. When the centre of interest coincides with the geometric centre of the image this produces a focus of attention.

All the elements have an influence because they induce meaning to the image independently of their size, so the slogan and the Generalitat logo are the second components in the reading order, followed by the different claims. The only element which could break the symmetry and the order of the overall image is the text in the top left corner, which draws the reader's attention and requires a necessary minimal movement.

### **3.1.4. Content variables: indicative aspects of the formal elements, values transmitted and significance of the message**

Tone and style: The manner of appeal to the public denotes proximity, for its use of informal and familiar language without resorting to colloquialism. At the same time, it adopts a formal and informative style by presenting each of the main elements in different formats as part of an academic definition. It also draws upon statistical data which enhances the rationality of the message.

Above all, it transmits a disturbing message with seriousness yet with a degree of sympathy through the choice of colours, music or tone in the voice-overs.

Interpretation of the social discourse: The discourse promotes the conversation on the reality ignored by most of society and, on many occasions, transmitted wrongly by the mass media. By connecting with the values and current cultural mores of the target audience it approximates a shared story in which the conversation stimulated by a coffee, a typical snack or a bench is common.

With this public story another one is spoken of which could become greater with the whole of society implicated. The values the campaign is working towards achieving are responsibility and empathy. Responsibility on the part of those who can prevent suicide in a positive way (mass media, society, health workers, etc.), and empathy on the part of the environment of someone who is going through a bad time and needs help. In short, it seeks a compromise between two realities, that which communicates with enthusiasm and that which reflects a serious health problem.

The results of the campaign cannot as yet be measured, but its repercussions can. Months after its launch, the health authority has noted a threefold increase in detection of cases according to sources close to the promoting advertising agency. And the central government has responded to the initiative by starting up a project to launch a national campaign.

### **3.2. Interviews with members of the Office for Mental Health**

In order to know the origins and preparation of the campaign at first hand we interviewed two members of the Mental Health Office of the Health Council who were directly implicated in the project. Begoña Frades, regional coordinator for the Office for Mental Health and José A. López, technician for the Council of Universal Health.

First of all we asked them about the real situation of suicide in the Valencia Community, to which the reply was that the data they handle "is not even real". Currently about 800,000 people around the world take their own lives, according to data from the WHO, and it is a very serious public health problem. They specify that the statistics for the Valencian territory reach almost 390 people per year, which is more than one person per day, and that there are 4,500 attempted suicides per year. They are sure there are actually even more, because at times, for many social reasons, (shame, insurance policies, myths, etc.) the families try to cover it up. "The figures are high. Since 2008 the number of suicide victims is twice as high as road accident deaths, and 40 times more than victims of domestic violence, according to the data from the Health Council."

From a clinical perspective they state that it is a phenomenon of many causes, with an infinite number of motives which provoke it, be it the loss of a family member, depression, social problems, etc. "There are very many reasons, and a mental disorder is not necessarily one of them. The most vulnerable groups here are males over 65 and young people between the ages of 15 and 29" they tell us.

As such, it is worth consulting the experts as to how this taboo which does not allow open discussion has been built. "Western cultures have generated a stigma about the act of taking one's life voluntarily and there are whole series of myths which feed back into the problem, compounding the stigma. As a taboo it is not easy to end, mostly because the media by and large do not know how to deal with it".

So, just how do the media deal with it? The answer we are offered is that in general there is a negative treatment from the media, particularly from the newspapers. Everything revolves around sensationalism and too much is detailed – on the method used, whether a note was left, whether the person had been fired from work – sensationalist information. In many cases it is true that when the media talk in these terms it produces a copycat effect. This is exactly what happened in the case of the DJ Avicii, about which the details were discussed uncontrollably. The case of celebrity or famous people suicides is more delicate, although it has to be said that "the media are behaving more responsibly".

When we ask how the Health Council are dealing with one of the main problems of public health according to the WHO, they confess that until 2016 there were no regulations covering the matter, and until one was

introduced there was no type of plan. In 2017 the Plan for the Prevention of Suicide and Handling of Suicidal Behaviour was approved, and the project started to be taken seriously. The Community got involved and was a fundamental part to begin working. In spite of the delay in the plan they claim that there are projects in other communities but that none of them are as specific or as big as the Valencian Community one.

As stated in the public document of the plan, the first line of strategy of the project is the "Promotion of Mental Health". Among the actions are the awareness campaigns for the people. With these initiatives we are struck by the doubt as to whether they could produce a negative affect or rejection by the people due to stigma suffered and how little it is mentioned in the mass media, to which both interviewees responded that this is one of the myths we have to face, as the Werther effect only applies when there is an irresponsible treatment by the media. In this case, they have worked very carefully together with the Kanbei advertising agency and they recount it as having been a very complicated process. A process of "great responsibility" they conclude.

We ask them, with regard to one of the most specific aims of the 2016-2000 plan, which is to reduce suicides by 10% as a key part of the prevention, whether campaigns are a fundamental part of achieving their aims. The Office for Mental Health does realize that a campaign is not going to end suicides, because there will never be zero suicides, that is very complicated to achieve. The main thing to achieve this aim is to bring about awareness in the people first of all, provide information about the phenomenon, train health workers, and lastly, incentivise the demand for help, all through the prevention campaigns, just as is being done.

The key is to break with the myths and talk. We need to talk (in a responsible way) to achieve its prevention, never its elimination.

As for the choice of the concept "Let's break the silence. Let's talk about suicide", this contrasts with other campaigns which have used euphemisms such as "end it all", or "don't go on". Experts' opinion is that the use of more subtle or more indirect language is just as effective in any case. The important thing is to be talking about suicide one way or another. Although a logical dynamic does have to be followed when the topic is posed in the media for the first time, and in this case they have opted to talk like this, any other way is also valid. Always, they insist, with responsibility to the fore.

#### **4. Analysis of the results**

In line with the successful campaigns carried out in other countries like the UK or Scotland, the campaign proposed by the Valencia Generalitat in Spain opted to follow the strategy used in these countries and treat the problem of suicide openly, using a tone which is both familiar and which invites conversation.

The main objective of the campaign is to make the problem of suicide visible, and it does this from two lines of action. It stimulates conversation among the general public in order to eliminate a taboo which, in itself, stops people who do not feel in a good state of mental health from seeking help. So it proposes that people speak openly about suicide and thereby help those who are on the point of succumbing.

In this way, "break the silence" is a start towards eradicating the taboos and myths of the psychological problems suffered by so many, but who having been subject to such marked stigma have not the strength to talk about it in public. The strategy designed for the campaign fulfils the basic criteria in the choice of content and the code of the message. The axis of the campaign is powerful but yet to be exploited by the Generalitat, responding to a collective truth backed by world organisations such as the WHO and to statistical data. The concept's mission is to provoke conversation in its audience. It creatively represents the way to confront a world health problem but does not have media repercussions. Expressed through simple, clear and direct images it is capable of transmitting the message without resorting to the typical topics to be found in other campaigns, such as sad or depressed people.

In this sense, the choice of everyday elements as characters makes sure that no segment of the population feels excluded, given that all types of public can feel identified depending on the use they give to each of the products. The ordinariness of the elements for starting conversations avoids an initial rejection when talking about a "disagreeable" subject, and thanks to the method's simplicity it is made more accessible.

This first campaign was conceived to be a first contact between the problem of suicide and society, so it is about creating awareness combined with a balanced strategy of emotion and reason. In order to persuade it does not take advantage of emotions, but it does not restrict itself purely to information either. It makes good use of both ingredients to connect with the public on a matter which affects us all, but which can be changed through words and collaboration.

## 5. Discussion and conclusions

Having carried out the research on each of the aspects that affect suicide either directly or indirectly, one is aware of the severity and extent of a problem caused by many factors about which there has been a consensus to tackle it positively for the past two decades with the SUPRE programme (1999), based on the Papageno effect and backed by the World Health Organisation. Nevertheless, in many countries like Spain, this information has not resulted in effective and real actions which bring to light the positive effects that general campaigns lead to in prevention and reduction of the problem.

It is the government secretaries or ministers, foundations or specialised organisations who should be bringing awareness about this social problem to the people. The way to do it with the greatest repercussions is through the public institutions, introducing suicide as one of the priorities of public health, just as road accidents are. In fact, we know about these as a success in the prevention policies thanks to a long history of campaigns and a logical communication strategy sustained over time.

Legislation should be adapted to society's needs, and at this point it is necessary to define a plan of national communication provided with the sufficient funding. Mass media should be the key to normalizing the phenomenon with an innovative and integral focus aimed mainly at the people, regardless of whether they are directly affected by the problem.

The first intention of the prevention campaign is not to stop someone from committing suicide but to listen, for by listening there is less likelihood of suicide being committed. As a result, the best line of action would consist of bringing visibility, awareness and education to society, to the affected and the survivors. An adequate strategy for a gradual transformation in the system, which allows associations to work as a network together and in coordination with the regional governments. So as a collective aim, the creation of spaces for communication open to participation would be essential, where the main bodies implicated could dialogue without prejudice. The angle of communicative actions should seek to achieve three objectives: firstly, visibility of the problem (make the seriousness of suicide clear); secondly, bringing awareness to the people (consciousness-raising of the problem and that it is possible to prevent it); and finally, training society (educating on how to address the problem). In short, work together with the media, associations, foundations and governments with the main aim of making the affected group visible, making adequate use of the terminology, concepts and words which, ultimately, will normalise a silenced suffering.

On the other hand, it is not necessary to enter into excessive emotion, but to adequately combine reason with emotion and thereby achieve a rupture of the stigma through a reasoned basis.

As for the critics who support the Werther copycat effect, the Papageno theory justifies the opposite. In a society in which we are more and more connected and we have more facilities for staying in touch it is frustrating to see that the feeling of loneliness is generalised and produces psychological and mental problems which can spiral into suicidal intentions.

For this reason, and based on the Papageno effect, we have the opportunity to incentivise conversation about suicide in a responsible and positive way in order to normalise and reduce it, thanks to communication and conversation.

## 6. Acknowledgement

Translator: Emil Isaac Harris.

## 7. References

- [1] Alvarado, M. (2005). La Publicidad Social: concepto, objeto y objetivos. *Redes.com: revista de estudios para el desarrollo social de la Comunicación*, (2), 265-284. <https://bit.ly/39XG0X3>
- [2] Álvarez, S. M. (2012). Efecto Werther: Una propuesta de intervención en la facultad de Ciencias Sociales y de la Comunicación (UPV/EHU). *Norte de salud mental*, 10(42), 48-55. <https://bit.ly/2QUFS3C>
- [3] Anseán, A. (2014). *Suicidios. Manual de prevención, intervención y postvención de la conducta suicida*. FSME.
- [4] Arroyo, I. (2009). Publicidad Social: Presentación. *Revista Icono* 14, 7(2), 3-7. <http://doi.org/dqtk>
- [5] Baños, M. y Rodríguez, T. (2009). Desarrollo de un Modelo de Predicción de la Eficacia para la Publicidad Social. *Revista Icono* 14, 7(2), 214-238. <http://doi.org/dqtm15>

- [6] Castelló, E. (2010). Del 'Milagro Francés' al 'Milagro Español': contextos, estrategias y resultados de las campañas de Seguridad Vial en el umbral del siglo XXI. *Transitions Journal of Franco-Iberian Studies*, 6, 74-100. <https://bit.ly/32jvLKj>
- [7] Centro de Prensa (2018). Montón presenta la campaña preventiva 'Rompe el silencio, Hablemos del suicidio' y una guía para medios con la Unió de Periodistes. Centro de Prensa Generalitat Valenciana. <https://bit.ly/2UNd6TD>
- [8] Comisión de Publicidad y Comunicación Institucional. Ministerio de la Presidencia y para las Administraciones Territoriales (2018). *Plan 2018 de Publicidad y Comunicación Institucional*. <https://bit.ly/2T55bQQ>
- [9] Conselleria de Sanitat Universal i Salut Publica de la Generalitat Valenciana (2016). *Plan de Prevención del Suicidio y Manejo de la Conducta Suicida*. <https://bit.ly/390NdfC>
- [10] Cortés, A. (2008). Conceptualización de la publicidad institucional en su dimensión socializadora y educativa. *Espacios Públicos*, 11(22), 226-237. <https://bit.ly/2UsZlup>
- [11] Cortés, A. (2011). La Publicidad Institucional en España. Una década en perspectiva. *Razón y Palabra*, (75). <https://bit.ly/3a2Yt4S>
- [12] Felipe Palacio, A. (2010). La comprensión clásica del suicidio. De Émile Durkheim a nuestros días. *Affectio Societatis*, 7(12), 1-12. <https://bit.ly/2WVQnaL>
- [13] Fernández, M. (2016). El suicidio. Una perspectiva criminológica. *Revista Electrónica de Ciencias Criminológicas*, (1), 1-62. <https://bit.ly/2JoDmyB>
- [14] Fonseca, D. (30/03/2016). El número de suicidios duplica al de los muertos por accidentes de tráfico. *El País*. <https://bit.ly/2HMqrpc>
- [15] Fundación Salud Mental España (2017). *Comunidad Valenciana. Suicidios 2016*. Observatorio del Suicidio en España. <https://bit.ly/2w0U5oq>
- [16] Fundación Salud Mental España (2019). Centro de Documentación sobre Conducta Suicida. <https://bit.ly/39RPLWW>
- [17] García Fernández, D. y Olmo, A. (2014). El tratamiento de las noticias sobre suicidios. Una aproximación a su reflejo en los medios de comunicación. *Estudios sobre el Mensaje Periodístico*, 20(2), 1149-1163. <http://doi.org/dqtn>
- [18] García Fernández, D. y Olmo, A. (2015). Suicidio y libertad de información: Entre la relevancia pública y la responsabilidad. *Revista de Comunicación de la SEECI*, 19(38), 35-57. <http://doi.org/dqtp>
- [19] García Sanmartín, P. (2018). La sinergia escuela - medios de comunicación. Un canal para erradicar el acoso escolar. *Revista de Sociología de la Educación (RASE)*, 11(3), 448-463. <http://doi.org/dqta>
- [20] García-Haro, J.; García-Pascual, H. y González González, M. (2018). Un enfoque contextual-fenomenológico sobre el suicidio. *Revista De La Asociación Española De Neuropsiquiatría*, 38(134), 381-400. <https://bit.ly/3bBKu6E>
- [21] Generalitat Valenciana (2019). Campaña Prevención del Suicidio. *Campañas Activas*. <https://bit.ly/2HNFMFV>
- [22] Herrera, R.; Ures, M. B. y Martínez, J. J. (2015). *Revista de la Asociación Española de Neuropsiquiatría*, 35(125), 123-134. <http://doi.org/c45t>
- [23] Instituto Nacional de Estadística (2017). Defunciones según la Causa de Muerte Año 2016. *Notas de prensa*. <https://bit.ly/2VjMVG2>
- [24] Instituto Nacional de Estadística (2019). Defunciones según la Causa de Muerte 2017. *Suicidios. Resultados Nacionales*. <https://bit.ly/2uv1oUM>
- [25] Lois-Barcia, M.; Rodríguez-Arias, I. y Túñez, M. (2018). Pautas de redacción y análisis de contenido en noticias sobre suicidio en la prensa española e internacional: efecto Werther&Papageno y seguimiento de las recomendaciones de la OMS. *ZER revista de estudios de comunicación*, 23(45), 139-159. <http://doi.org/dqtr>
- [26] Martínez, E. y Vizcaíno, R. (2008). Publicidad institucional como fenómeno integrador ante la inmigración en España: régimen jurídico. *Revista Latina de Comunicación Social*, (63), 90-98. <http://doi.org/drt8p216>

- [27] Marzal, J. (2004). Propuesta de análisis de la imagen fotográfica. <https://bit.ly/32lXmuc>
- [28] Ministerio de Política, Sanidad e Igualdad (2012). *Guía de Práctica Clínica de Prevención y Tratamiento de la Conducta Suicida*. Guías de Práctica Clínica en el SNS. <https://bit.ly/2UKUG62>
- [29] Organización Mundial de la Salud (2018). *Nota descriptiva suicidio*. Centro de prensa OMS. <https://bit.ly/2T7PqbO>
- [30] Pérez Barrero, S. A. (2005). Los mitos sobre el suicidio. La importancia de conocerlos. *Revista Colombiana de Psiquiatría*, 34(3), 386-394. <https://bit.ly/2wI3EiY>
- [31] Pérez Jiménez, J. C. (2011). *La mirada del suicida. El enigma y el estigma. Introducción*. Madrid: Plaza y Valdés Editores.
- [32] Pérez Jiménez, J. C. (2014). Suicidio y medios de comunicación. Un desafío profesional que salva vidas. En A. Anseán (Ed.), *Suicidios. Manual de prevención, intervención y postvención de la conducta suicida*. Madrid: Fundación Salud Mental España, para la prevención de los trastornos mentales y el suicidio.
- [33] Portal de Transparencia de la Generalitat Valenciana (2019). <https://bit.ly/2VhKO5N>
- [34] Secretaría de Estado de Comunicación (2010). *Publicidad y Comunicación Institucional. GUÍA PRÁCTICA*. <https://bit.ly/2w36JCR>
- [35] Urzúa, M. (2003). Suicidio, intimidad e información. *Documentación de las Ciencias de la Información*, 26, 351-358. <https://bit.ly/2WXvqfK>

