

13 Reasons Why Netflix Series: Considerations for Families

Families have an important role in preventing youth suicide, and being aware of potential risk factors in their children's lives is vital. The trending Netflix series *13 Reasons Why*, based on a young adult novel of the same name, is raising such concerns. The series revolves around 17-year-old Hannah Baker, who takes her own life and leaves behind audio recordings for 13 people who she says in some way were part of why she killed herself. Each tape recounts painful events in which one or more of the 13 individuals played a role.

Producers for the show say they hope the series can help those who may be struggling with thoughts of suicide. However, the series, which many teenagers are binge watching without adult guidance and support, is raising concerns from suicide prevention experts about the potential risks posed by the sensationalized treatment of youth suicide. The series graphically depicts a suicide death and addresses in wrenching detail a number of difficult topics, such as bullying, rape, drunk driving, and slut shaming. The series also highlights the consequences of teenagers witnessing assaults and bullying (i.e., bystanders) and not taking action to address the situation (e.g., not speaking out against the incident, not telling an adult about the incident).

CAUTIONS

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. They may easily identify with the experiences portrayed and recognize both the intentional and unintentional effects on the central character. Unfortunately, adult characters in the show, including the second school counselor who inadequately addresses Hannah's pleas for help, do not inspire a sense of trust or ability to help. Hannah's parents are also unaware of the events that lead to her suicide death.

Given its viral popularity, it is very likely that your middle or high school age children and/or their friends have or are watching the series. **Engaging in thoughtful conversations with your children about the show is vital.** Doing so presents an opportunity to help them process the issues addressed, consider the consequences of certain choices, and reinforce the message that **suicide is not a solution to problems** and that help is available. **This is particularly important for adolescents who are isolated socially, struggling, or vulnerable to suggestive images and storylines.** Research shows that exposure to another person's suicide, or to graphic or sensationalized accounts of death, can be one of the many risk factors that youth struggling with mental health conditions cite as a reason they contemplate or attempt suicide.

What the series does accurately convey is that there is no single cause of suicide. Indeed, there are likely as many different pathways to suicide as there are suicide deaths. However, the series does not emphasize that common among most suicide deaths is the presence of treatable mental illnesses. Suicide is **not** the simple consequence of stressors or coping challenges, but rather, it is most typically a combined result of treatable mental illnesses and overwhelming or intolerable stressors.

The following information may be helpful in engaging with your children in supportive conversations and accessing helpful resources if necessary.

GUIDANCE FOR FAMILIES

1. While we do not recommend that all students view this series, it can be appreciated as an opportunity to better understand young people's experiences, thoughts, and feelings. Children and youth who view this series will need supportive adults to process it. Take this opportunity to both prevent the risk of harm and identify ongoing social and behavior problems in the school community that may need to be addressed.
2. Help students articulate their perceptions when viewing controversial content, such as *13 Reasons Why*. The difficult issues portrayed do occur in schools and communities, and it is important for adults to listen, take adolescents' concerns seriously, and be willing to offer to help.
3. Reinforce that school-employed mental health professionals are available to help. Emphasize that the behavior of the second counselor in the series is understood by virtually all school-employed mental health professionals as inappropriate. It is important that all school-employed mental health professionals receive training in suicide risk assessment.
4. Make sure parents, teachers, and students are aware of suicide risk warning signs. **Always take warning signs seriously, and never promise to keep them secret. Establish a confidential reporting mechanism for students.** Common signs include:
 - Suicide threats, both direct ("I am going to kill myself." "I need life to stop.") and indirect ("I need it to stop." "I wish I could fall asleep and never wake up."). Threats can be verbal or written, and they are often found in online postings.
 - Giving away prized possessions.
 - Preoccupation with death in conversation, writing, drawing, and social media.
 - Changes in behavior, appearance/hygiene, thoughts, and/or feelings. This can include someone who is typically sad who suddenly becomes extremely happy.
 - Emotional distress.
5. Students who feel suicidal are not likely to seek help directly; however, parents, school personnel, and peers can recognize the warning signs and take immediate action to keep the youth safe. When a student gives signs that they may be considering suicide, take the following actions:
 - Remain calm, be nonjudgmental, and listen. Strive to understand the intolerable emotional pain that has resulted in suicidal thoughts.
 - Avoid statements that might be perceived as minimizing the student's emotional pain (e.g., "You need to move on." or "You should get over it.").
 - Ask the student **directly** if they are thinking about suicide (i.e., "Are you thinking of suicide?").
 - Focus on your concern for their well-being and avoid being accusatory.
 - Reassure the student that there is help and they will not feel like this forever.
 - Provide constant supervision. **Do not leave the student alone.**
 - Without putting yourself in danger, remove means for self-harm, including any weapons the person might find.
 - **Get help.** Never agree to keep a student's suicidal thoughts a secret. Instead, school staff should take the student to a school-employed mental health professional. Parents should seek help from school or community mental health resources. Students should tell an appropriate caregiving adult, such as a school psychologist, administrator, parent, or teacher.
6. School or district officials should determine how to handle memorials after a student has died. Promote memorials that benefit others (e.g., donations for a suicide prevention program) and activities that foster a sense of hope and encourage positive action. The memorial should not glorify, highlight, or accentuate the individual's death. It may lead to imitative behaviors or a suicide contagion (Brock et al., 2016).
7. Reinforcing resiliency factors can lessen the potential of risk factors that lead to suicidal ideation and behaviors. Once a child or adolescent is considered at risk, schools, families, and friends should work to build these factors in and around the youth.
 - Family support and cohesion, including good communication.
 - Peer support and close social networks.
 - School and community connectedness.

- Cultural or religious beliefs that discourage suicide and promote healthy living.
 - Adaptive coping and problem-solving skills, including conflict resolution.
 - General life satisfaction, good self-esteem, and a sense of purpose.
 - Easy access to effective medical and mental health resources.
8. Strive to ensure that **all** student spaces on campus are monitored and that the school environment is truly safe, supportive, and free of bullying.
 9. If additional guidance is needed, ask for support from your building- or district-level crisis team. The team may be able to assist with addressing unique situations affecting your building.

See [Preventing Suicide: Guidelines for Administrators and Crisis Teams](#) for additional guidance.

Suicide Awareness Voices of Education (SAVE) and the JED Foundation have created talking points for conversations with youth specific to the *13 Reasons Why* series, [available online](#).

SAFE MESSAGING FOR STUDENTS

1. **Suicide is never a solution. It is an irreversible choice regarding a temporary problem. There is help. If you are struggling with thoughts of suicide or know someone who is, talk to a trusted adult, call 1-800-273-TALK (8255), or text “START” to 741741.**
2. Don't be afraid to talk to your friends about how they feel and let them know you care about them.
3. Be an “upstander” and take actions to reduce bullying and increase positive connections among others. Report concerns.
4. Never promise to keep secret behaviors that represent a danger toward another person.
5. **Suicide is preventable.** People considering suicide typically say something or do something that is a warning sign. Always take warning signs seriously and know the warning signs.
 - Suicide threats, both direct (“I am going to kill myself.”) and indirect (“I wish I could fall asleep and never wake up.”). Can be verbal, written, or posted online.
 - Suicide notes and planning, including online postings.
 - Preoccupation with death in conversation, writing, drawing, and social media.
 - Changes in behavior, appearance/hygiene, thoughts, and/or feelings.
 - Emotional distress.
6. Separate myths and facts.
 - **MYTH:** Talking about suicide will make someone choose death by suicide who has never thought about it before. **FACT:** There is no evidence to suggest that talking about suicide plants the idea. Talking with your friend about how they feel and letting them know that you care about them is important. This is the first step in getting your friend help.
 - **MYTH:** People who struggle with depression or other mental illness are just weak. **FACT:** Depression and other mental illnesses are serious health conditions and are treatable.
 - **MYTH:** People who talk about suicide won't really do it. **FACT:** People, particularly young people who are thinking about suicide, typically demonstrate warning signs. Always take these warning signs seriously.
7. **Never leave the person alone; seek out a trusted adult immediately.** School-employed mental health professionals like your school psychologist are trusted sources of help.
8. Work with other students and the adults in the school if you want to develop a memorial for someone who has died by suicide. Although decorating a student's locker, creating a memorial social media page, or other similar activities are quick ways to remember the student who has died, they may influence others to imitate or have thoughts of wanting to die as well. It is recommended that schools develop memorial activities that encourage hope and promote positive outcomes for others (e.g., suicide prevention programs).

Read these [helpful points](#) from SAVE.org and the JED Foundation to further understand how *13 Reasons Why* dramatizes situations and the realities of suicide. See [Save a Friend: Tips for Teens to Prevent Suicide](#) for additional information.

ADDITIONAL RESOURCES

- National Suicide Prevention Hotline, 1-800-273-TALK (8255), or text “START” to 741741
- [Center for Disease Control Suicide Datasheet](#)
- [SAMHSA Prevention Suicide: A Toolkit for High Schools](#)
- [Suicide Prevention Resource Center, After a Suicide: Toolkit for Schools](#)
- [Memorials: Special Considerations for Memorializing an Incident](#)

WEBSITES

- National Association of School Psychologists, www.nasponline.org
- American Association of Suicidology, www.suicidology.org
- Suicide Awareness Voices of Education, www.save.org
- American Foundation for Suicide Prevention, <https://afsp.org/>
- www.stopbullying.gov
- Rape, Abuse & Incest National Network, www.rainn.org

REFERENCES

Brock, S. E., Nickerson, A. B., Louvar Reeves, M. A., Conolly, C., Jimerson, S., Pesce, R., & Lazzaro, B. (2016). *School crisis prevention and intervention: The PREPaRE model* (2nd ed.). Bethesda, MD: National Association of School Psychologists.

Contributors: Christina Conolly, Kathy Cowan, Peter Faustino, Ben Fernandez, Stephen Brock, Melissa Reeves, Rich Lieberman

© 2017, National Association of School Psychologists, 4340 East West Highway, Suite 402, Bethesda, MD 20814, 301-657-0270, www.nasponline.org

Document may be adapted or excerpted with proper acknowledgement. Please cite as:

National Association of School Psychologists. (2017). *13 Reasons Why Netflix series: Considerations for families* [handout]. Bethesda, MD: Author.