

Mass Violence and Working With the Media

DISCUSSION



With 24-hour news and social media, inaccurate or inflammatory reporting about mass violence situations can emerge before facts can be gathered. Real-time speculation of the role of mental illness by reporters, pundits and mental health professionals from different disciplines can lead to many issues concerning the public's understanding of the situation and the possible links between violence and mental illness.

It is most important that ongoing coverage of mass violence situations be as sensitive and evidence-based as possible. Media outlets should never encourage or repeat unfair, unscientific observations about the symptoms and treatment of mental illnesses and the challenges of access to care or offer blanket statements about the illnesses or the possibility of violent behavior by people with mental illness. They should also be mindful of the possibly triggering aspects of their reporting.

RECOMMENDATIONS



- Media representative should have close working relationships with mental health professionals who can discuss emergency situations in a fair, engaging and evidence-based way before a crisis situation occurs.
- Existing media guidelines about reporting on mass violence should be more widely disseminated and mental health professionals being interviewed should ask if the reporter has seen and understands them.
- Organizations should establish protocols about who should respond to media requests — employees should know if they are allowed to accept interview requests in emergency situations without being cleared. They should also know who is available to clear them 24 hours a day.
- Train behavioral health staff responsible for responding to the media.
- Develop messaging well in advance of a tragic event, including:
 - Diagnosis, treatment and family encouragement to remain in treatment are critical to help people at risk for violence.
 - Most people with mental illnesses will never become violent; they are much more likely to be the victims of violence.
 - Risk factors, including untreated or undertreated mental illness.
 - “See something, say something.”
- Work with the media to develop guidance for the general public on risk factors for violence.

EXPERT PANEL



An expert panel appointed by the National Council for Behavioral Health Medical Director Institute examined the issue from multiple perspectives and found the solutions are as complex as the problem. The insightful and evidence-based response, “Mass Violence in America: Causes,

Impacts and Solutions,” provides a call to action to respond to this complex issue.

Membership of Expert Panel

- Medical Directors of mental health and addiction treatment provider organizations
- CEOs of mental health and addiction treatment provider organizations
- Members from the American Psychiatric Association
- Members from the American Psychological Association
- Member from the American Association of Emergency Psychiatrists
- Members representing law enforcement/courts
- Members from National Association of State Mental Health Program Directors
- Content experts on mass violence and trauma
- Mental health consumer/patient representatives/parents of a mass shooter