# The Representation of Depression in Canadian Print News

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#### **ABSTRACT**

This study analyzed a retrospective sample of articles from 12 major Canadian newspapers to characterize messages about depression in print media. Major themes were positive and focused on promoting awareness and disseminating research findings. Stories often relied on expertise, but seldom included input from those affected by a mental illness. More than half the articles used improper language. Articles rarely provided information to find additional resources. Findings may guide future analyses and programs aimed at improving media coverage of mental illness.

**Keywords:** Canada, depression, media, newspaper, stigma

## RÉSUMÉ

Cette étude a analysé un échantillon rétrospectif d'articles provenant de 12 journaux canadiens avec le but de caractériser les messages portant sur la dépression dans les journaux. Les thèmes majeurs sont positifs et axés sur la sensibilisation et la diffusion des résultats de recherche. L'opinion d'experts dans le domaine a souvent servi mais rarement celle des personnes avec une maladie mentale. Plus que la moitié des articles ont employé un langage inexact. Les articles ont rarement fourni des sources de ressources additionnelles. Les résultats de cette étude peuvent informer des analyses futures et des programmes qui ont pour but d'améliorer comment les médias abordent le sujet des maladies mentales.

Mots clés: Canada, dépression, média, journaux, stigmatisation

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The stigma associated with mental illnesses encompasses both the public stigma that results from the social endorsement of stereotypes about mental illnesses, as well as the self-stigma that results when affected individuals internalize these stereotypes (Corrigan & Kleinlein, 2005). The public stigma can feed into the latter and greatly affect how an individual deals with their condition. This stigma can undermine people's ability to access basic necessities, including employment, health care, and housing and reduce self-esteem, quality of life, and social support (Lazowski, Koller, Stuart, & Milev, 2012; Livingston & Boyd, 2010; McNair, Highet, & Hickie, 2002).

The media is an important source of information about mental health (Borinstein, 1992). Media representations have been shown to have a powerful influence on how people view mental illnesses (Angermeyer, Dietrich, Pott, & Matschinger, 2005; Borinstein, 1992; Dietrich, Heider, Matschinger, & Angermeyer, 2006; Thornton & Wahl, 1996) and are thus a key target for improving public attitudes about mental illnesses. Analyses of articles about mental illnesses from newspapers across several countries suggest an overemphasis on criminality or violence. The absence of articles focused on recovery and rehabilitation is another common criticism (e.g., Corrigan et al., 2005; McGinty, Kennedy-Hendricks, Choksy, & Barry, 2016; Whitley & Berry, 2013a). The absence of stories about recovery may suggest that those with a mental illness are burdensome to society or incapable of leading independent, fulfilling, or productive lives (Wahl, 2003). Inaccurate portrayals, though not inherently negative, may also adversely impact those affected by psychiatric conditions. It has been suggested that the use of generic terminology such as "the mentally ill" to refer to those with a mental illness may reinforce the notion that they are fundamentally different from others (Wahl, 1995, p. 43).

People affected by a mental illness are aware of the media's portrayals and attribute the stigmatization of mental illnesses to negative media stories and a lack of public awareness (Read & Baker, 1996; Stuart, 2006). The portrayal of mental illnesses by the media may also inform government policies; the public's negative perception of mental illnesses may lead government to respond to these perceptions rather than putting forth legislation that would address the true needs of individuals who are affected, including issues dealing with treatment and research (Edney, 2004). However, in light of the media's impact on public attitudes, guidelines have been developed by key journalism and mental health groups to encourage more positive reporting about mental illnesses (Canadian Journalism Forum on Violence and Trauma, 2014; Hunter Institute of Mental Health, 2014; Stuart et al., 2014). A reporter's guide "Mindset: Reporting on Mental Health" was released in April 2014. It contains succinctly presented information for reporters about (1) understanding stigma, (2) how treating mental illnesses as a single category is problematic, (3) including voices of people with a mental illness, (4) mental illnesses and the law, (5) covering stories about suicide, (6) best practice checklists about issues presented in 1–5 as well as dos and don'ts in interviewing, language use, addiction, and suicide (Canadian Journalism Forum on Violence and Trauma, 2014).

Research focused specifically on media portrayals of depression remains limited. The stigma surrounding depression is a barrier to help seeking; individuals may feel embarrassed or fear that others will view them as inferior, neurotic or unbalanced (Barney, Griffiths, Jorm, & Chistensen, 2006; McNair et al., 2002; Priest, Vize, Roberts, Roberts, & Tylee, 1996). Common negative attitudes about those affected by depression include a reluctance to associate with, to employ, or to vote for someone with depression and beliefs that those with depression are dangerous, that depression is something people can "snap out of," or that it is the

result of personal weakness or bad character (Canadian Medical Association, 2008; Cook & Wang, 2010; Link, Phelan, Bresnahan, Stueve, & Pescosolido, 1999; Pescosolido et al., 2010; Wang & Lai, 2008). Only 60% of Canadians with past-year major depressive disorder consult a mental health professional, yet over 85% report mental health care needs (Patten et al., 2015).

Societal attitudes surrounding depression appear to differ as compared to that of other mental illnesses. The results of a study in Germany (Angermeyer & Matschinger, 2003) show that when compared to schizophrenia, respondents have more positive emotional reactions to depression. And when asked to recall media reports about violence and mental health when evaluating vignettes of schizophrenia and depression, respondents only associated dangerousness with schizophrenia (Reavley, Jorm, & Morgan, 2016).

Given the potential difference in public attitudes toward depression, we were interested in the media representation of this disorder. One analysis of Australian newspapers found that stories presented depression as a phenomenon occurring beyond the control of the individual and tended to focus on protecting affected individuals rather than protecting the public (Rowe, Tillbury, Rapley, & O'Ferall, 2003). Others have noted a focus on policy and program initiatives rather than on criminality (Francis et al., 2005). Depression may thus be presented differently than other mental illnesses. Thus, this study aimed to identify overarching messages about depression in Canadian newspaper articles and to analyze the manner in which these messages were portrayed.

#### **METHODS**

#### **Selection of Articles**

Factiva and Canadian Newsstand databases were consulted to extract newspaper articles from 12 major Canadian news publications (Table 1). Databases were selected based on availability, ease of use, and high coverage of regional and national publications. Articles were selected from January 1, 2013 to October 1, 2014 to provide a feasible sample of articles (n = 316) using the index subjects "depression" or "mental depression." Figure 1 shows details of article selection.

Articles were screened to remove duplicates (n = 72; Figure 1). Articles were excluded if they did not discuss clinical depression (e.g., articles about economic depression; n = 18). Eighty articles were then selected for analysis using a random integer generator (available at https://www.randomizer.org/).

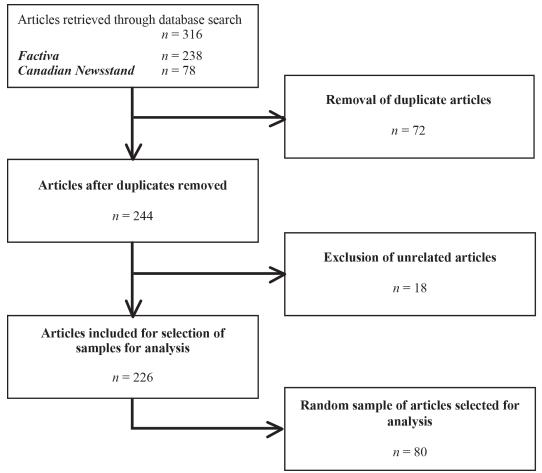
Note that the media guidelines set forth in the document "Mindset: Reporting on Mental Health" (Canadian Journalism Forum on Violence and Trauma, 2014) were released in April 2014. As such, only 24 of the 80 articles evaluated in our work were written after the document was released.

Table 1
List of Included Newspapers

| Newspaper              | Province         | Market          |
|------------------------|------------------|-----------------|
| Calgary Herald         | Alberta          | Calgary         |
| Edmonton Journal       | Alberta          | Edmonton        |
| Vancouver Sun          | British Columbia | Vancouver       |
| Telegraph-Journal      | New Brunswick    | Saint John      |
| Globe and Mail         | Ontario          | National        |
| National Post          | Ontario          | National        |
| Ottawa Citizen         | Ontario          | Ottawa/Gatineau |
| Toronto Star           | Ontario          | Toronto         |
| La Presse Canadienne   | Quebec           | Montreal        |
| Le journal de Montréal | Quebec           | Montreal        |
| The Gazette            | Quebec           | Montreal        |
| Le journal de Québec   | Quebec           | Quebec City     |

Note. Data obtained from Newspapers Canada (2014).

Figure 1
Outline of Article Selection, Screening, and Randomization



## Coding Scheme & Analytical Approach

Whitley and Berry (2013b) have prepared a review of the methodological challenges encountered during their national study of over 11,000 newspaper articles related to mental illnesses from across Canada, in which they provide key guidelines for researchers conducting similar analysis. This article informed the coding method for this study.

Whitley and Berry (2013b) recommend a framework for coding with three components: (1) basic descriptors, (2) "objective" questions (e.g., "are mental health experts quoted in the text either directly or indirectly?" and (3) more "subjective" questions (e.g., "is the overall tone optimistic/positive about mental health?" This approach was adopted by the current study. This framework provided a method that was thorough enough for an exploratory analysis, while still maintaining a feasible and systematic coding approach.

# **Basic Descriptors**

Articles were classified according to demographics (newspaper, date, word count, and language), and then read and coded qualitatively by one researcher (LC) using NVivo software (NVivo, 2012).

## **Analysis of Selected Attributes**

Articles were coded according to a list of attributes informed by previous media analyses and journalism guidelines (Canadian Journalism Forum on Violence and Trauma, 2014; Hunter Institute for Mental Health, 2014; Whitley & Berry, 2013b; see Table 2).

# **Identification of Overarching Themes**

Articles were coded according to overarching themes. If an article addressed multiple themes, it was coded according to the most representative theme. Illustrative quotes were selected to illustrate each theme.

Table 2
Attributes Used to Assess Newspaper Articles

| Attribute   | Definition   |
|---|--|
| Perspective of someone with depression/mental illness | Direct quotation/article from someone identified as having depression/mental illness.  |
| Perspective of significant others                     | Direct quotation/article from a significant other of someone with depression: family members, partners, friends, or colleagues.  |
| Expert opinion  | Direct quotation/article from an expert: psychiatrists, psychologists, physicians, researchers, and other mental health professionals or advocates.  |
| Reference to a public figure with depression          | Identification of a public figure with depression: celebrities, politicians, or other well-known individuals.  |
| Contact information for help                          | Contact information for mental health information or services.   |
| Colloquialisms, slang, or inaccurate terminology      | Negative language: "deranged," "lunatic," "nut house," "asylum," "happy pills," "crazy," "nuts."  Terms suggesting victimization: "succumbed," "suffering," "afflicted."  Labelling terms: "depressive."  Inaccurate use of "depression," "the blues." |

*Note.* Terms such as "suffering" were considered inaccurate only when applied by others to persons with depression rather than by affected individuals.

#### **RESULTS**

# **Demographic Description of Sample**

Table 3 illustrates the distribution of articles across regional markets. Most articles were published in English (73.75%) and were shorter than 1,000 words ( $mean = 588 \pm 339$  words).

# **Assessment of Selected Attributes**

Inclusion of different perspectives. Sixteen articles included the perspective of someone with a mental illness, including 13 speakers identified explicitly as having depression. Almost half the articles contained expert perspectives (Table 4).

Table 3

Distribution of Newspaper Articles According to Regional Markets

| Region           | Newspaper Articles (%) |
|------------------|------------------------|
| Québec           | 35                     |
| Ontario          | 26.25                  |
| National         | 13.75                  |
| Alberta          | 13.75                  |
| British Columbia | 11.25                  |

Reference to a celebrity or public figure with depression. Celebrities and public figures with depression were mentioned in 11 articles (Table 4). Three articles referred to Clara Hughes, spokeswoman of the Bell Canada Let's Talk campaign; four covered the suicide of American actor Robin Williams. Others references included Stéphane Richer, Michael Landsberg, Catherine Zeta-Jones, Serena Ryder, and Lisa Raitt.

Use of inaccurate or damaging language. Over 50% of articles used inaccurate language, out-of-context terminology, or colloquialisms in reference to depression, affected individuals, or treatments (Table 4). Thirty-four articles described affected individuals as "suffering," three used labels such as "depressives," and four described depression as "the blues," including three references to postpartum depression. For example,

Table 4
Classification of Newspaper Articles According to Selected Attributes

|   | Yes |      | No |      |
|---|-----|------|----|------|
| Attribute   | n   | %    | n  | %    |
| Perspective of someone with depression/mental illness | 16  | 20.0 | 64 | 80.0 |
| Perspective of significant others                     | 6   | 7.5  | 74 | 92.5 |
| Expert opinion  | 38  | 47.5 | 42 | 52.5 |
| Contact information or resources                      | 6   | 7.5  | 74 | 92.5 |
| Celebrity/public figure                               | 11  | 13.8 | 69 | 86.3 |
| Colloquialisms/slang/inaccurate language              | 42  | 52.5 | 38 | 47.5 |

one article used "depression" inaccurately to describe an emotion rather than a clinical syndrome: "...par contre, moi, c'est quand j'ai fini de boire mon verre que je déprime!" (Langlois, 2013).

# **Overarching Themes**

Most articles focused on raising awareness and research advances (Table 5). Subthemes within raising awareness included addressing stigma, men's mental health, policy issues, military mental health, and workplace issues; example quotes for these are presented in Table 6 below. Within the theme of research advances, subthemes included treatment-related research and studies about etiology or prevention. Few articles focused on recovery stories or violence.

| Table 5                                       |
|---|
| Themes in Newspaper Articles About Depression |

| Theme                           | N  | %    |
|---------------------------------|----|------|
| Raising awareness               | 31 | 38.9 |
| Policy issues/lack of resources | 11 | 13.8 |
| Addressing stigma               | 7  | 8.8  |
| Military mental health issues   | 3  | 3.8  |
| Workplace issues                | 6  | 7.5  |
| Men's mental health initiatives | 2  | 2.5  |
| Generally raising awareness     | 2  | 2.5  |
| Research advances               | 32 | 40.0 |
| Treatment discoveries           | 13 | 16.3 |
| Etiology/prevention             | 15 | 18.8 |
| Other research findings         | 4  | 5.0  |
| Personal stories of recovery    | 5  | 6.3  |
| Criminality or harm             | 2  | 2.5  |
| Other                           | 10 | 12.5 |
| Advice columns                  | 3  | 3.8  |
| Community events                | 3  | 3.8  |
| Unclassified                    | 4  | 5.0  |

Table 6
Themes in Newspaper Articles About Depression—Example Quotes

| Theme                     | Article   | Example Quotation   |
|---------------------------|---|---|
| Raising awareness         |   |   |
| Men's mental health       | "Former Hab shares his pain" (Cowan, 2013)  | "When Landsberg speaks publicly about his depression he often starts with three words: sick, not weak. 'I have a mental illness five words you very seldom hear people say, especially guys like me on stagemy point is to expose my own mental illness and therefore, in my own, tiny little way in that room for that moment, do what I can to reduce the stigma.""   |
| Addressing stigma         | "Clara's big ride" (Laucius, 2013)  | "Hughes said depression is something she will have to live with for the rest of her life. Her work for mental health over the past two years has shown her that things are happening when it comes to easing the stigma of mental health 'They never talked about the D-word before,' said Hughes. 'People with their feet on the ground say the ground is shifting.'"  |
| Lack of resources         | "Cognitive behavioural<br>therapy a viable mental health<br>treatment" (Sochting, Bilsker,<br>& MacKey-Jamieson, 2014)                                      | "CBT is almost unavailable in the public health system, notably in B.C. CBT is mainly provided by psychologists in the private sector. For many Canadians, this is a significant barrier to care, creating a two-tiered mental health system for those struggling with anxiety and depression."   |
| Workplace issues          | "Addressing presenteeism<br>and its impact on<br>business performance and<br>productivity" (Canadian<br>Centre for Occupational<br>Health and Safety, 2014) | "The burden of mental illness costs the Canadian economy approximately \$51 billion per year It is critical to understand the importance in recognizing and dealing with mental health issues in the workplace for both employees and employers. Organizations need to ensure that supervisors can recognize the symptoms of mental health issues, such as depression, in employees, and offer them the resources and support they need." |
| Research advances         | "Depression may be linked to cells" (2014)  | "depression due to chronic stress may be due to changes in non-neuronal brain cells called microglia researchers were able to show compounds that can alter how microglia could lead to new and efficient antidepressant medications."  |
| Personal recovery stories | "Families share tips on<br>coping with challenges"<br>(Lofaro, 2013)  | "'I'm working hard to get through the hoops through good habits, including exercise, nutrition, and sleep and developing habits. I don't do them perfectly, but I'm trying.' says Graham, who hopes to be a psychologist and possibly go to medical school. 'There is so much to hang on to now, and there's much good happening in my life.'"  |

#### **DISCUSSION**

#### **Overarching Themes: Major Findings and Possible Implications**

**Policy and workplace issues.** Several articles discussed the gaps in Canada's mental health system and advocated for more funding (Table 5; Table 6). Individuals with depression, family members and caregivers, and other stakeholders are concerned about the accessibility and availability of mental health services in Canada. Uninsured services create a barrier to treatment, resulting in a lack of autonomy that can be truly dehumanizing (Mood Disorders Society of Canada, 2011). News stories that bring these issues to light may encourage public advocacy for improving access to mental health treatments.

Promoting awareness and understanding is a key step to support the well-being of employees with depression who may be unwilling to disclose their condition to colleagues because of expected stigma (Haslam, Atkinson, Brown, & Haslam, 2005). Despite an expressed need for workplace accommodations, less than a third of employees with depression or anxiety feel adequately supported at work (Wang, Patten, Currie, Sareen, & Schmitz, 2011). Many articles in this sample quantified the costs of depression to the workplace, which may encourage managers to improve support for employees with depression (Table 6).

Men and depression. Men are less likely to access mental health services and may hold more stigmatizing views about depression than women (Cook & Wang, 2010; Galdas, Cheater, & Marshall, 2004; Wang, Fick, Adair, & Lai, 2007). Adherence to traditional masculine ideologies may underlie men's hesitancy to seek help (Berger, Levant, McMillan, Kelleher, & Sellers, 2005). Two articles focused on depression among men, challenging stereotypes about depression as a personal weakness (Table 6). Although male accounts of illness are rarely represented in the media (Seale, 2003, p. 203), by showing examples of other men, articles focused on recovery and public male role models may encourage men to reach out for help (Machlin, King, Spittal, & Pirkis, 2014).

**News coverage of mental health research.** Many articles discussed biomedical research, portraying depression as the result of biogenetic factors (Table 6). Although biological explanations may encourage help-seeking and reduce the blame attributed to persons with depression, they may foster pessimism about recovery and increase social distance (Angermeyer, Holzinger, Carta, & Schomerus, 2011; Deacon & Baird, 2009).

Several articles discussed findings from a meta-analysis of American clinical trials that questioned the efficacy of antidepressants for the treatment of mild to moderate depression (Kirsch et al., 2008). The media's misinterpretation of the study's findings could contribute to the stigma attributed to taking medication for depression (Fountoulakis, Hoschl, Kasper, Lopez-Ibor, & Möller, 2013). For example, one news article contained a quotation that described antidepressants as "addictive drugs" that should be used "only as a last resort" (Morton & Griffin, 2013). Such unbalanced reports may foster the universal rejection of antidepressants and the stigmatization of those who take them (McNair et al., 2002; Priest et al., 1996).

Individuals with depression may be frustrated when others expect a full and quick recovery or cannot appreciate that the condition is not easy to treat (Barney, Griffiths, Christensen, & Jorm, 2009; McNair et al., 2002). Several articles articulated the complexities of understanding depression and optimizing treatments, which may reduce the blame placed on those with chronic representation of depression.

**Criminality and harm.** Only two articles focused on criminality, in contrast to news reports about other psychiatric illnesses which remain disproportionately focused on depictions of violence and criminal justice involvement (McGinty et al., 2016).

## Selected Attributes: Major Findings and Possible Implications

Narratives in news reports: consumer and expert voices. Less than 20% of articles included the perspective of someone with depression or another mental illness; only five focused on a recovery story from someone with depression (Table 5). The absence of input from those with a mental illness may suggest that they are incapable of speaking for themselves (Wahl, 2003). Speakers affected by a mental illness can provide great value to media depictions; the recovery stories in this study conveyed a sense of hope, portraying speakers as relatable and capable (Table 6). Such narratives may help reduce public stigma by mediating indirect contact between readers and those affected with depression. Recent meta-analyses support the use of direct and indirect contact-based strategies to decrease the stigma associated with mental illnesses (Clement et al., 2013; Corrigan, Morris, Michaels, Rafacz, & Rüsch, 2012; Griffiths, Carron-Arthur, Parsons, & Reid, 2014).

Almost 50% of articles included a quotation from an expert, which could imply reporters' compliance with media guidelines to consult professional advice (Canadian Journalism Forum on Violence and Trauma, 2014; Hunter Institute of Mental Health, 2014). Conversely, the predominance of expertise over the voices of those affected directly by depression may suggest that that the condition should be managed outside the individual (Rowe et al., 2003).

Media references to celebrities with depression. Stories about celebrities affected by a mental illness may help reduce stigma and increase affirmative attitudes related to recovery, empowerment, and self-determinism (Corrigan, Powell, & Michaels, 2013). The inclusion of recovery-based articles about successful role models such as Hughes, Landsberg, and Richard may help dispel misconceptions that depression is a personal weakness or failure and promote hopeful attitudes towards recovery. Consistent with media guidelines, stories about Robin Williams's suicide did not focus on the details of his death; rather, they emphasized that "depression does not discriminate" and encouraged readers to talk about depression and to reach out to others (Pond, 2014). However, none of these articles included resources to find treatment or further information, limiting their potential to promote help-seeking. Across the sample, only six articles referred readers to any type of resources (Table 4). In addition to expectations of discrimination, not knowing how to access mental health services has been identified as a key barrier associated with delayed treatment (Henderson, Evans-Lacko, & Thornicroft, 2013).

**Inaccurate use of language.** The inaccurate application of terms such as "the blues" may blur the distinction between clinical depression and everyday sadness, and the use of "depression" to describe an emotion rather than a condition may trivialize depression as something that is common to everyone. This trivialization can cause affected individuals to dismiss their symptoms and delay help-seeking. Friends and family can reinforce this normalization—for example, by misunderstanding the symptoms of postpartum depression as normal "baby blues" (Abrams, Dornig, & Curran, 2009; Masserang, 2012;). Affected individuals may also feel frustrated by others' inability to appreciate difficulties associated with their condition (Barney et al., 2009; McNair et al., 2002; Masserang, 2012). Conversely, some may feel that others overestimate the

impact of depression on their ability to function (Barney et al., 2009). Describing those with depression as "sufferers" or "suffering" could perpetuate this overestimation by passing judgment about their quality of life regardless of their stage in recovery.

#### CONCLUSIONS AND FUTURE DIRECTIONS

Although more research is needed to understand how media messages about mental illnesses are generated and interpreted, this study provides insight for future initiatives aimed at analyzing and improving media coverage of depression. Portrayals of depression in current Canadian newspapers appear to be more focused on positive themes rather than on criminality or harm, but the use of inaccurate language and the absence of first person accounts remain key areas for improvement.

Inaccurate language in media reports can be prejudicial, thus, omitting such terminology as "crazy," and "mad" is only a first step. Replacing such expressions as "suffering from" with "afflicted by," for example, helps to dissuade victimizing the person with a mental illness or viewing them as hopeless. Addressing someone as "a person with schizophrenia" rather than someone as that mental illness itself—"schizophrenics"—also reinforces the notion that the person is much more than the illness and is not solely defined by it. The use of exact language can play an important part in de-stigmatizing mental illnesses. Furthermore, the use of first person accounts would provide more authenticity to any media report thereby allowing the viewer/reader/listener a personal perspective. Many campaigns aimed at sensitizing the general public about mental illnesses and the stigma associated with it, for example Bell Canada's Let's Talk, and Bring Change 2 Mind, have first person accounts and in some instances have celebrity first person accounts intended to reinforce the reality of mental illnesses, which is that anyone can be affected by it, and help dispel the notion that one is alone when affected by a mental illness. The first person account of successful treatment of a mental illness would also help to showcase the illness as an illness that can be treated and further dispel hopelessness (McGinty, Goldman, Pescosolido, & Barry, 2015).

The impact of the efforts put forth by the Canadian Journalism Forum on Violence and Trauma (2014) with the creation of guidelines for reporters, will only truly be known in a few years, at best, due to the infancy of this initiative. However, continued education of journalism students on the topics of mental illnesses, prejudice, and discrimination would be ideal and should be a mandatory part of the curriculum in schools of journalism. The symposiums for journalism students on mental illness awareness put forth by the Opening Minds in Canada group (Stuart et al, 2014) is a positive step in achieving this change.

While reports in the media are often thought to sensationalize mental illnesses and, further, that this practice is blamed for the stigma which accompanies mental illnesses, the onus of prejudice and discrimination should be shouldered by all individuals. Overall improved knowledge about mental illnesses would help people personally assess the accuracy and fairness of any media reports, so reading/listening with a critical perspective is crucial, questioning the source and the motivation driving the report, and enquiring further by reading additional, reputable sources. Above all, making a change will necessitate the education of young people by helping them understand diversity, rather than by trying to normalize individuals. So exposing children to accurate portrayals of mental illnesses in television, movies, and books, and above all having frank discussions with them about oneself or another afflicted by a mental illness will reinforce the

perception that mental illnesses are not unusual. We should also take advantage of their use of technology and create advertisements on social media aimed at sensitizing individuals about mental illnesses, prejudice, and discrimination using concrete examples from youth with which they might identify. We should also continue to encourage initiatives and campaigns surrounding the creation of mental illness specific hashtags (for example, #CHHSLetsTalk; #BreakTheSilence; #IWillListen), and the effort needs to continue throughout the year, not simply during mental health awareness week. Above all, we need to involve our youth in the creation of these initiatives in order to empower their voices.

The use of electronic databases facilitated the retrieval of articles from multiple newspapers, and indexing tools reduced the number of false positives resulting from a search using the key term "depression" (Whitley & Berry, 2013b). Electronic databases may not yield complete coverage of printed newspaper articles, although coverage appears relatively greater for larger newspapers (Ridout, Fowler, & Searles, 2012). Formal assessments of the validity and reliability of these databases are needed to ensure that retrieved articles represent printed content.

Although using a single coder improved the consistently of coding, subjective bias may influence this study's validity. Consultation with someone with lived experience of a mental illness has also been suggested as a critical component of any project analyzing media depictions of mental illnesses (Whitley and Berry, 2013b).

Although the majority of Canadians continue to read print newspapers today (Newspaper Audience Databank, 2014), this study did not consider the national and international news available to Canadians through the Internet and television. Identifying the messages in different forms of media is also important to understand their impact on particular subpopulations, such as youth, who may be more likely to use the Internet and social networks (Media Technology Monitor, 2013).

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