

“Insane. Invisible. In danger.” v. *Died Suddenly*: The Difference Between Investigative Reporting and Conspiracy Theory

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Although journalism takes many different forms, all must deliver on the same overarching goal of informing the public about events, discoveries, and other pieces of news. There are creative liberties taken into account when presenting this information, be it through the use of video or written work, but the core essence of journalism lies in the delivery of news. A work written in the traditional format becomes leagues greater than a beautifully crafted reel of footage on the basis of delivering genuine facts. A journalist could produce a full-length film worth of information, edit it to perfection, and write a brilliant script, but it means absolutely nothing if every piece of evidence within the film is false. This does not mean that effort should not be put into the display, but it should be done so with undeniable proof and—if there is bias present—accounted for prior to the content of the work. The two pieces explored in this essay are the Pulitzer Prize winning article “Insane. Invisible. In danger.” and the documentary *Died Suddenly*. While one work exposes the truth with reports and records collected throughout a year-long investigation, the other lies to the audience with fear tactics and contextomy sprawled out across a sharply-edited film.

“[Insane. Invisible. In danger.](#)” is an article written by a team of reporters from both the *Tampa Bay Times* and the *Sarasota Herald-Tribune* and published in 2016. The piece explored the lack

of funding in mental hospitals in Florida and how budget cuts turned them into dangerous places for both staff and patients. The article won a [Pulitzer Prize in 2016](#) under the investigative journalism category. Scott Simone of [The Hatch Institute](#) called the article “a prime study in investigative journalism” and [The Online Journalism Awards](#) said that it was “unique by its purest definition”. The article combines interviews with staff, politicians, and people involved in these institutions with data and footage of events that occurred in the hospitals to showcase how the lack of funding creates a hazardous environment. [According to the article](#), “they also collected thousands of pages of incident reports, health and safety inspections and investigative files from state agencies and police departments across Florida”, thus creating a complete record of events in the various mental hospitals in Florida.

Part one of the article begins with a story about Tonya Cook, an orderly for the North Florida Evaluation and Treatment Center. The story is taken piece by piece, with a scroll feature only allowing small fractals of the narrative to unwind as the audience becomes invested in the suspenseful story. The background is set with: “One night in 2012, she walked the ward again, a single orderly watching over 27 men. Her nearest co-workers were upstairs, out of sight. They didn’t see what a security camera captured—a patient holding a radio antenna fashioned into a jagged point.” The implication following this information brings a feeling of dread for what is about to happen next. The formatting of the introduction makes for an excellent lede, as it touches on the topic at hand through storytelling and reminds the audience that the data and evidence they will be looking at later represent actual people going through these situations. The inclusion of Cook humanizes the story.

After the introduction in part one, the audience is able to see surveillance footage of the event that conspired that night thus providing evidence to the story. The article then delves into background context regarding the lack of proper medical records complete with dates and times. The article states: “Since 2005, DCF administrators have steadily relaxed reporting requirements so that hospitals no longer need to disclose most patient injuries. The reports that have been filed are in such disarray that accurately comparing them over time is impossible.” In addition, “DCF spokeswoman Michelle Gladly first said records from three hospitals prior to 2011 had been lost. She later said the documents may never have been created because DCF did not have a standard reporting form until 2011.” Both of these statements emphasize the lack of organization in the hospitals. As this was part of an investigation conducted by the *Tampa Bay Times* and *Sarasota Herald-Tribune*, these sources are all direct. All the quotes found can be attributed to those involved with the mental hospitals. “Northeast Florida State Hospital in Macclenny laid off one-third of its psychology staff, according to Harry Reiff, who was head of psychology services at the time. Before Cook was stabbed in the face, her hospital cut the number of guards on duty from 12 to eight, according to former security supervisor Gerald Simmons.”

This investigative piece does not present any notable bias that isn’t backed up by facts within the investigation. For example, it states that: “The nation’s third-largest state — and one of its richest — now spends less per capita on forensic mental hospitals than 42 others. It ranks 49th in total spending on all services for the mentally ill, according to the National Association of State Mental Health Program Directors.” By GDP, Florida is currently the [fourth richest state](#) in the US. However, according to the Claude Pepper Center of Florida State University, it [does still](#)

[rank 49th](#) for mental health funding in the US. While drawing the comparison to shed a negative light on Florida for not putting enough money into mental health, this is backed up by truth.

The article has informational contributions from David Wilkins, the secretary for the Department of Children and Families in Florida from 2011 to 2013. The article [introduces Wilkins](#) with the fact that he “oversaw \$61 million in cuts from the hospitals, more than 15 percent of their funding.” A [quote from Wilkins](#) reads, “If the average person saw those facilities, they would be ashamed.” The article allows the opportunity to hear feedback from the person in charge of the mental hospitals while simultaneously acknowledging that they are partially responsible for the events recorded within the article. Interviews with officials with authority highlight the details that either go unnoticed by them or were ignored. For instance, the [assistant DCF secretary, John Bryant, stated](#), “his agency relies on hospitals to accurately report on incidents that occur.” Prior to this statement, the *Tampa Bay Times* [reports that](#), “while DCF says there were about 450 injuries or attacks over the past six years, the *Times/Herald-Tribune* found nearly 1,000” and provides a breakdown of the various totals within those six years. There is considerable balance in who gets to be heard in the full investigation, allowing both the people in power and people who must abide by the standards set to be heard.

The article contains several displays of charts and graphs accumulated from the records they collected. One chart [draws the comparison](#) between the budget cuts from the mental hospitals with the outbreaks of violence in them. Another highlights the [number of cases](#) that the DCF reported versus the number that the *Times/Herald-Tribune* discovered over the years. The display helps break down the information provided in a way that allows the audience to take a break

from reading the article and receive a visual representation of the statistics discovered. Because there is such a sheer amount of information, the use of graphs and charts helps with ensuring the audience still has their attention on the article. At the very end of each section of the article, the reporters provide an [“About The Data”](#) category that highlights where all of their information came from, providing transparency to the audience and ensuring that what they have written can be trusted or accounted for. Having this section, alongside rightfully quoting individuals throughout the article, helps establish credibility with the content provided.

Alongside the graphs, the article contains [several other videos](#) taken from surveillance footage. Each is taken side-by-side with a description of the event occurring and the parties involved. Utilizing actual footage from the hospitals, the credibility is further established by the reporters. The videos are given discretionary warnings for the graphic content, providing a means of connecting to the audience by understanding their sensitivity toward the topic. The videos are credited to the offices they were taken from beneath each one, allowing them to be traced back by anyone who independently decides to research them.

Overall, the article does a very good job at maintaining transparency, keeping track of potential bias, organizing evidence, and having a sense of balance. The work is segmented into five parts, with pieces that accompany the main narrative such as showcases of surveillance footage, updates on the story as it progresses, and records of the deaths of mental patients in the Florida hospitals. The reporters investigating the hospitals produced a long but complete collection of every detail they could gather, ensuring that as little of the whole story as possible went untold.

To compare to the investigative article produced by the *Tampa Bay Times* and the *Sarasota Herald-Tribune*, [*Died Suddenly*](#) is an anti-vaccination documentary directed by Matthew Miller Skow and Nicholas Stumphauzer and released in late November 2022. [According to the IMDb page](#) for the documentary, “5 billion [are] vaccinated worldwide, and many are dying suddenly. Is this the greatest orchestrated die-off in the history of the world?” Upon its release, many social media users were skeptical of the film. Nicholas Stumphauzer has produced several documentaries prior to *Died Suddenly*, including *Watch the Water* in 2022, which proclaims that COVID-19 is a “synthetic version of snake venom”. [The Poynter Institute states that](#) *Watch the Water* obtained its name from a QAnon post regarding “a secret cabal of Satan-worshipping pedophiles”. [Politifact](#) debunks *Died Suddenly* as full of information that has been disproven by researchers and critics, with clips of individuals being used out of context and no genuine evidence supporting the arguments made throughout the film.

The full video of *Died Suddenly* has been removed from YouTube, but is available on [Twitter](#) and Rumble, a website similar to YouTube “[for people with something to say and something to share](#).”

The introduction to the film contains various images of people in tactical gear, wearing masks, and getting shots. One quote is used by ex-president George Bush in his [Invasion of Iraq speech](#) held on October 16, 2002. The brief clip shows Bush saying “weapons of mass destruction” followed by the words “conspiracy theory” (2:04). The contextomy of this quote within the documentary presents an allusion that the vaccine is a “weapon of mass destruction”, which is the argument Skow and Stumphauzer are attempting to push throughout the documentary.

The documentary features a [2010 TED Talk](#) by Microsoft founder Bill Gates, where he states, “the world today has 6.8 billion people. That’s headed up to about nine billion. Now, if we do a really great job on new vaccines, health care, reproductive health services, we could lower that by, perhaps, 10 or 15 percent” (5:46). Funeral director Chad Whisnat was interviewed about the statement, where he claimed Gates said, “somebody’s going to die because you put a vaccine in them”. However, [according to NewsChecker](#), Gates’s statement is another taken out of context. In this case, Gates is stating that lack of proper medical care results in poverty increase which leads to larger families. The way the documentary frames this statement is biased toward their argument that the vaccination is a “[genocide](#)”.

Several news articles are shown in the beginning of the video showcasing individuals who “died suddenly” such as [Edward John Scarisbrick](#), [Megan Fisher](#), and [Pete Moxon](#) (7:25-7:38). While two of these people had unconfirmed deaths, Pete Moxon’s death was attributed to multi-organ failure, septic shock, and Crohn’s Disease. *Died Suddenly* does not mention the cause of death for any of these people, but put into the context of the entire documentary, it misleads the audience into believing that the vaccine is the cause of death. Within the same montage of deaths, *Died Suddenly* decides to highlight [one particular article about the Google platform Stadia](#), which is not a person and harms the credibility of the documentary if they were intending to push it as such (7:31).

One claim made by Chad Whisnat in the interview segment of the documentary is that the number of people that “died suddenly” has “never happened like this until now” (8:11). Based on

an article [The Conversation published](#) in 2014, one in 100,000 people aged between one and 35 every year dies suddenly from natural causes. While it is true that there has been an increase in the number of deaths in recent years, The [World Health Organization believes](#) it will be the result of non-communicable diseases such as heart disease and cancer. By making the bold claim that there has been a drastic increase in death correlated to the vaccinations people have gotten against COVID-19, Skow and Stumphauzer intend to scare people into not getting the vaccine or convince others to not get vaccinated. In addition, Whisnat says this and does not back it up with any data. There is no statistical evidence provided in this segment that proves the notion he makes. Instead, the segment shifts to another montage meant to leave the audience with a heightened sense of anxiety.

Dies Suddenly goes on to introduce blood clots as evidence that the vaccines are causing deaths. Several embalmers are introduced including Richard Hirschman, who serves as the central testimony (8:58). Hirschman and the other embalmers all state they have seen “white fibrous clots” in the blood of cadavers (9:53). As one anonymous embalmer says: “it certainly appears that there is some relationship to the vaccine and these obstructions”. [According to PolitiFact](#), there is “no clear evidence that COVID vaccines are responsible for strange blood clots observed by embalmers”. While it is not as likely that the vaccines are the cause of blood clots, experts do think that COVID-19 itself can potentially be responsible. Yazan-Abou Ismail, a hematologist for the University of Utah Health, says, “the association between COVID-19 and blood clots was recognized early in the pandemic among hospitalized COVID-19 patients”. One other important aspect of the embalmer segment within the documentary is how two of them are anonymous. One embalmer opted to have his interview in a completely dark room to appear as a silhouette

while the other had their face completely blurred out. This significantly impacts both credibility and transparency, as the audience does not know who these experts are or if they are even experts in the field.

In the middle of the documentary, Dr. Ryan Cole is introduced regarding cancer and the vaccine. He says, "That's toxic spike protein has so many mechanisms that allow cancers to wake up and certain cancer genes that it binds to and promotes mechanisms... cancer surgeons like I met today. Cancer, cancer, cancer" (25:51-26:14). The repetition of "cancer" in Dr. Cole's interview also predominantly attempts to appeal to the fear invoked in those who watch the documentary. The thought of cancer is pushed into the audience's mind and associated with vaccines, thus furthering the correlation between the two. Skow and Stumphauzer purposefully leave this unnecessary repetition in to cement those ideals. "[It's] biologically implausible for any carcinogens or cancer-causing agents to suddenly produce cancer within a month of exposure," said Dr. Johnathan Laxton [in an interview with MedPageToday](#). "If this is happening, why do they not coordinate some effort to publish this case series of strange postmortem events so that the medical community can comment on it?" asked epidemiologist Katherine Wallace. "If Dr. Ryan Cole really has seen hundreds of thousands of weird cases in his microscope, why is he not publishing those cases?"

Dies Suddenly features numerous clips of people the documentary suggests "died suddenly", including those who end up in particularly dangerous situations. One of these clips is of Argentinian nutritionist Teresa Coccaro, who [fainted during an interview](#) due to [syncope](#). Another example is a bus driver from Turkey who [suffered a heart attack](#) and caused the bus to

crash. A second woman from Argentina is used in the documentary as shown having [fainted under a moving train](#), which she said later was due to lack of nutrition. These clips are another example of videos being taken out of context as “evidence”, as none of the individuals shown in these clips actually died nor did they have anything to do with the COVID-19 vaccines. Placing these clips in the documentary alongside the information being presented results in a false narrative, thus creating more anxiety in the audience and damaging credibility of the documentary for anyone that decides to fact check it.

At around 50:18, the audience is presented with the statement: “The following imagery is from actual cadavers and has not been prepared, altered, or manipulated in any way”. Immediately following the disclosure is a cinematic shot of someone walking toward a cadaver. The documentary proceeds to show clips of blood clots being pulled from the cadaver. These images are put in place to shock and disturb the audience, but also insinuate that these are what could be found in their body if they get vaccinated. However, TechArp found that the [video used was stolen from Dr. Eric Beyer](#), who performed the heart surgery shown on April 2, 2019—before the vaccines were made.

“Insane. Invisible. In danger.” and *Died Suddenly* are both pieces that had a substantial amount of work put into them, but the core difference lies in the credibility of each work. The false sense of ethos established by *Died Suddenly* comes in the form of its presentation. The production had sincere effort put into it, making it a high-quality piece visually. Interviews with people proclaimed to be experts speaking directly to the emotions of individuals in the audience thus allow for the spread of misinformation and disinformation freely. Fear tactics are used to connect

the vaccine to death and harmful diseases such as cancer in order to make the notions sound credible. Using misquoted clips and videos taken out of context means that those who don't take time to research where they came from will take them at face value and genuinely believe the sudden deaths of individuals were the result of the vaccine. The documentary is therefore dangerously well-made to a point where the false information presented preys on those who are media illiterate. In contrast, the ethos in "Insane. Invisible. In danger." comes in the form of sources provided and information collected. Disclaimers at the end of each segment of the article provide insight as to where the information came from, with credits applied to any videos, graphs, or displays present within the piece. There is certainty that each quote and event documented has truth behind it because of the care put into recording everything. While there are stories within the narrative told by "Insane. Invisible. In danger." that could possibly shock or scare the audience, these stories are backed up by surveillance footage embedded in the article. The story works to humanize the victims of budget cuts in mental hospitals without taking away the facts of the situation, thus establishing their credibility in both a professional and creative manner.

Journalists have a primary responsibility of providing the public with new information that helps to establish credibility. Showing where information came from, indicating and accounting for potential biases, and obtaining as full of a picture as possible of the story at hand comprise the core values of journalism and the overarching goals of a journalist. Without these, the journalist loses all transparency and eventually trust. As the United States has become more polarized than ever—[according to a study](#) from Brown University—it is crucial that news organizations, reporters, and those in charge of informing the public are held accountable for any of the

journalism they produce. Though news can serve to create a lasting impression or impact on the audience if told in the right way—truth should not be sacrificed for the sake of appealing to people's emotions. Capturing the truth hails above all in the world of journalism and should never be twisted.

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