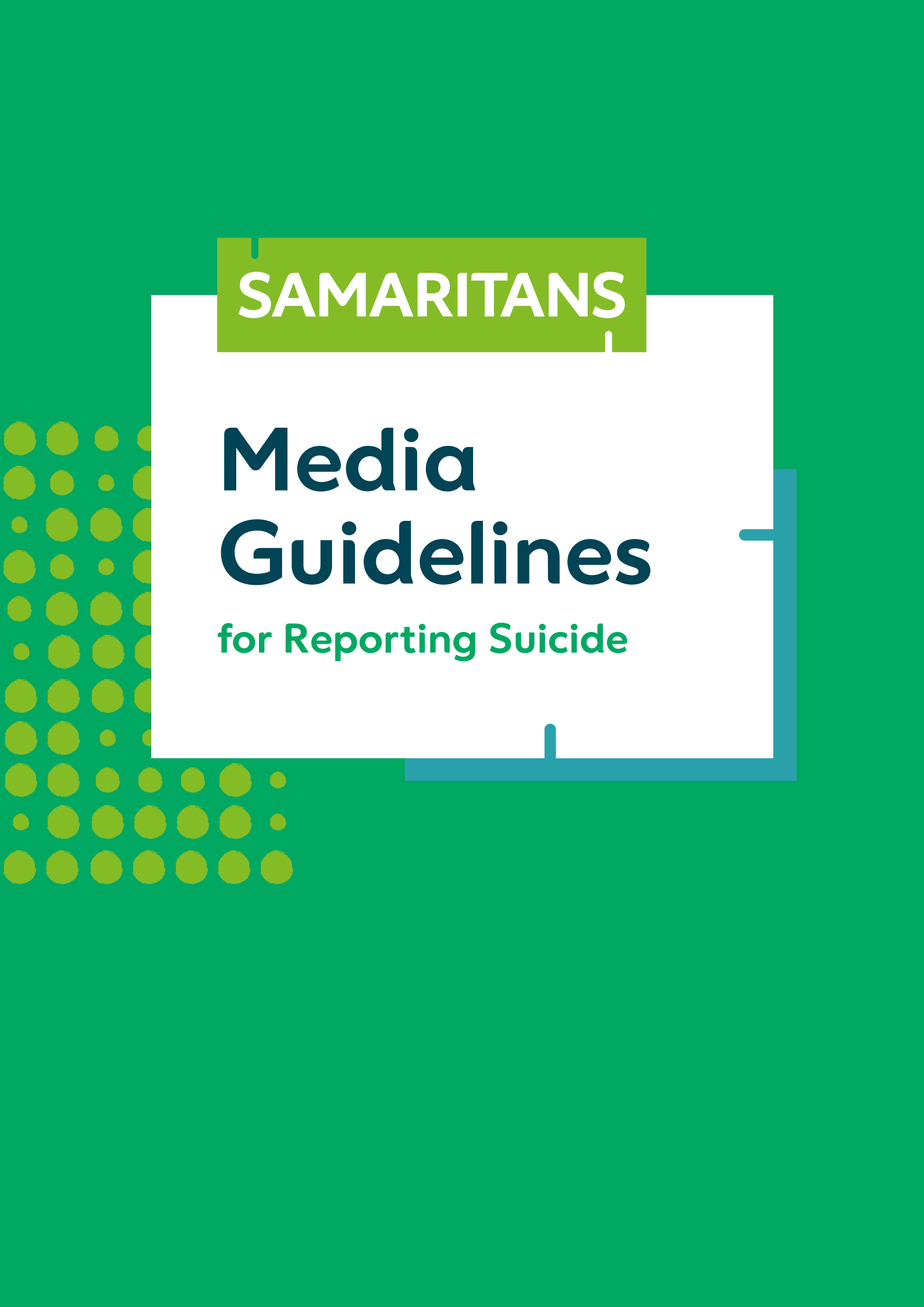


The background is a solid teal color. On the left side, there is a vertical strip of green circles of varying sizes. In the center, there is a white rectangular area. At the top of this white area is a green horizontal bar containing the word 'SAMARITANS' in white capital letters. Below this bar, the words 'Media Guidelines' are written in a large, dark teal font, and 'for Reporting Suicide' is written in a smaller, green font below it. A blue L-shaped graphic element is positioned on the right side of the white area, and a small blue vertical line is at the bottom center of the white area.

SAMARITANS

Media Guidelines

for Reporting Suicide



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10 things to remember when reporting suicide

01 Avoid reporting methods of suicide in articles, such as describing someone as having died by hanging, particularly in headlines.

02 Include references to suicide being preventable and signpost sources of support, such as Samaritans' helpline. This can encourage people to seek help, which could save lives.

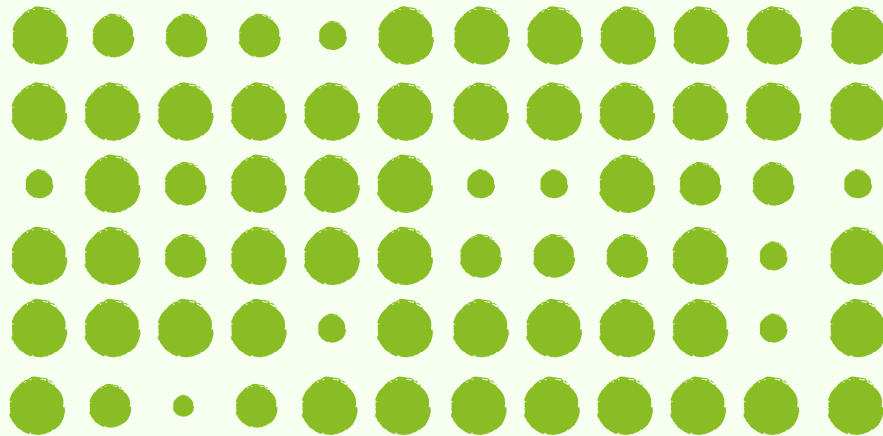
When life is difficult, Samaritans are here – day or night, 365 days a year. You can call them for free on 116 123 or visit www.samaritans.org for more ways to speak to a Samaritan.

03 Avoid dramatic headlines and strong terms such as 'suicide epidemic'. Never suggest that someone died instantly or that their death was quick, easy, painless, inevitable or a solution to their problems. Steer clear of language that sensationalises or glorifies suicide.

04 Don't refer to a specific site or location as popular or known for suicides, for example, 'notorious site' or 'hot spot' and refrain from providing information, such as the height of a bridge or cliff.

05 Avoid dramatic, emotive or sensational pictures or video footage. Excessive imagery can glamourise a death and lead vulnerable individuals to over-identify with the deceased.

06 Avoid excessive amounts of coverage and overly prominent placement of stories, such as a front page splash or making it a lead story, and do not link to previous stories about suicide.



07

Treat social media with particular caution and avoid mentioning or linking to comments, or websites/forums that promote or glamourise suicide. Similarly, it is safer not to open comments sections on suicide stories and careful consideration should be given around the appropriateness of promoting stories through push notifications.

08

Including content from suicide notes or similar messages left by a person who has died should be avoided. They can increase the likelihood of people identifying with the deceased. It may also romanticise a suicide or cause distress to the bereaved family and friends.

09

Speculation about the 'trigger' or cause of a suicide can oversimplify the issue and should be avoided. Suicide is extremely complex and most of the time there is no single event or factor that leads someone to take their own life.

10

Young people are more susceptible to suicide contagion. When covering the death of a young person, do not give undue prominence to the story or repeat the use of photographs, including galleries. Don't use emotive, romanticised language or images – a sensitive, factual approach is much safer. Coverage that reflects the wider issues around suicide, including that it is preventable, can help reduce the risk of suicidal behaviour. Include clear and direct references to resources and support organisations.

Introduction

Suicide is a major public health concern and is therefore a subject that is very much in the public interest.

While sensitive reporting can inform and educate the public about suicide and the signs to look out for, there is strong and consistent research evidence that some forms of news reporting lead to increases in suicide rates.

Media coverage can influence how people behave in a crisis and their beliefs about the options open to them. The research shows that certain types of media depictions, such as explicitly describing a method and sensational and excessive coverage, can lead to imitational suicidal behaviour among vulnerable people.

For example, in the five months following Robin Williams' suicide in 2014, there were 1,841 more suicide deaths in the USA compared to the same time period from the previous year – a 9.85% rise.

In contrast, some forms of reporting can help save lives. Coverage describing a person or character seeking help and coming through a difficult time can serve as a powerful testimony to others that this is possible, and can have a protective influence over audiences.

Stories can highlight that suicide is preventable and direct vulnerable people to sources of support. We know from international research that when media guidelines are followed this has a positive effect by improving reporting standards.

Suicide is a very complex topic that presents a distinct set of challenges for journalists, who must balance reporting on a sensitive issue and informing the public while considering what influence coverage

may have on vulnerable people, including the possibility of imitational behaviour.

At the same time, avoiding intrusion into the grief and shock of the bereaved.

These guidelines are advisory and are in no way intended to limit press freedom. Their purpose is to reinforce industry codes of practice and editorial policies, to support journalists and programme makers in producing the highest standards of coverage of suicide. They offer practical recommendations and tips for covering the topic in what is a challenging and evolving media environment. They are informed by extensive international research into media portrayals of suicide and wide consultation with media professionals, academics, and those with lived experience.

Samaritans has worked closely with journalists, programme makers and media organisations over many years to support responsible coverage of suicide. These media guidelines are central to this work. As well as the core guidelines, there is a series of online resources outlining further advice for specific aspects of covering suicide, including working with people who have been bereaved, reporting on inquests and content for documentaries and drama. These are available on the **media advisory** section of our website.

Samaritans' Media Advisory Service also provides free advice and training to support informed and safe coverage. Journalists and programme makers can get in touch directly with enquiries about suicide content, including breaking news.

Reporting suicide: research & evidence

A significant body of academic research from across the world, known as the Werther effect, has found links between certain types of reporting of suicides and increased suicide rates.

For instance, stories that include descriptions of the method of suicide and where coverage has been overly prominent, extensive or sensationalised, can lead to imitational suicidal behaviour. Some people are more susceptible to this effect than others.

What does the research tell us?

Dramatic headlines that explicitly reference a suicide method can have harmful effects and potentially lead to imitative behaviour. If people who may be vulnerable, such as people with mental health problems, young people and those who have been bereaved are provided with details about suicide methods, it can lead to more deaths using the same method. In some circumstances, this has led to the introduction of new, highly lethal methods of suicide into populations, resulting in an overall increase in suicide deaths. People who survive a suicide attempt, and most do, get a second chance at getting support and appropriate treatment. Those using highly lethal suicide methods get no second chance.

The research literature identifies the phenomenon known as 'suicide contagion'. This occurs when a suicide or attempted suicide serves as a 'model' or example for subsequent suicidal behaviour. The 'model' could be a famous person or celebrity, but could also be a relative, neighbour or friend living in the local community.

The contagious effect may be precipitated by pervasive grief or over-identification with the person who has died, or the circumstances in which they took their own life.

Young people are a particularly vulnerable audience in relation to media coverage of suicide. They are more susceptible to imitational suicidal behaviour and more likely to be influenced by the media than other age groups. Young people are also at greater risk of contagion if they have been affected by a suicide. Often the deaths of young people receive disproportionate, emotive coverage compared with other deaths by suicide, which can increase the risk of influencing imitational suicidal behaviour.

Another smaller body of evidence shows that sensitive portrayals of suicide, focusing on someone overcoming a crisis, can have a protective influence. This is known as the Papageno effect. Coverage describing a person or character seeking help and coming through a difficult time can serve as a powerful testimony to others that this is possible. This type of coverage can encourage people to seek help and has been linked to falls in suicide rates.

“ There is abundant international evidence that media reporting and portrayals of suicide can be extremely influential. Poor media practice can cause further loss of life, especially in more vulnerable groups such as the young and people with mental health problems. On the other hand, careful and responsible media handling of this important issue can contribute to suicide prevention. ”

**Professor Keith Hawton, Director
Centre for Suicide Research,
University of Oxford**

Best practice: reporting tips

The current media environment is a very demanding one for journalists and reporting on suicide can be particularly challenging.

Samaritans' media advice team is available to provide support when covering suicide and self-harm at mediaadvice@samaritans.org Samaritans also offers confidential briefings and advice sessions for media outlets.

There are many ways to produce sensitive, informed coverage of suicide, here are some helpful tips:

Dos and Don'ts

Think about the impact of coverage on your audience

- Your story might have an effect on vulnerable individuals or people connected to the person who has died. Providing information on how to contact organisations where people can find support, including helpline numbers, can encourage people who are struggling and may be experiencing suicidal thoughts, to seek help. This could save lives.
- It can be helpful to include trigger warnings at the beginning of a piece covering suicide, allowing those who may be vulnerable to make a choice on the suitability of your content for them.
- Remember that even good news stories, where a person has survived and recovered from a suicide attempt, can run the risk of leading to imitative behaviour if they refer to a suicide method or location. Please bear this in mind if covering a suicide attempt made by a celebrity.

**When life is difficult,
Samaritans are here – day
or night, 365 days a year.**

You can call them for free on **116 123** or visit [samaritans.org](https://www.samaritans.org) for more ways to speak to a Samaritan.

“ Our research has demonstrated how suicide in public places is influenced by media reporting, and this is why locations and methods should not be reported. By following these guidelines journalists and commentators can play an important role in preventing suicide and saving lives. ”

Siobhan O'Neil
Professor of Mental Health
Sciences, Ulster University

Avoid mentioning suicide methods

- Providing details of suicide methods has been linked to increases in suicide rates and shown to influence vulnerable people to imitate suicidal behaviour. Placing information about a method in a report, for example describing someone as having died by hanging, can reinforce awareness of specific methods, and increase perceptions of its effectiveness, especially if prominently featured.
- Avoid providing details of a location if it is a public place such as a cliff, bridge or railway line. Publishing information about locations is likely to result in more deaths at that location.
- Never describe a suicide method as quick, easy, painless or effective. Referring to a person as having 'died instantly' for example, is not advised.
- Steer clear of presenting suicidal behaviour as an understandable response to a crisis or adversity. This can contribute to unhelpful and risky normalising of suicide as an appropriate response to distress.

Aim for non-sensationalising, sensitive coverage:

Research shows that the more sensationalised the reporting, the greater the potential impact on suicidal behaviour.

- Take care not to sensationalise any aspect of a story. Breaking news, instant publishing, social media reach and competition for clicks can all place

journalists under increased pressure when producing reports, increasing the possibility of sensational coverage.

- Before publishing, consider if the draft headline or sub-headline dramatises the story, includes the suicide method, or uses emotive or sensationalist terms.
- Avoid contributing to locations becoming 'known' suicide sites. Labelling a location as a 'suicide hot spot' or 'notorious site' increases people's awareness of the method and location, potentially transforming it into an iconic site widely known for suicides, which can draw vulnerable people to the location.
- Don't refer to a possible rise in suicides in a specific place or among a particular group as an 'epidemic', 'spate' or other similar term. Two or more people taking their own lives who, for example, share a similar background, age or live in a similar geographic area may be coincidence. Steer clear of implying a connection

“Samaritans' media advisory service is an invaluable help for editors looking to report difficult stories in a sympathetic and responsible way. The guidance provided by Samaritans has helped the Telegraph & Argus many times. I believe every journalist should be aware of the service – and the training provided by Samaritans – as a key part of their job.”

Nigel Burton
Group Editor of Newsquest
Yorkshire

where there may be none. Evidence suggests that reference to clusters can lead to additional suicides.

- Comments or photographs provided by witnesses following a suicide should be avoided as these may include graphic details and speculation, which can increase the risk of imitative behaviour and could cause distress to bereaved families. Such individuals are unlikely to know that what they are saying could increase the risk of suicide if reported, or be aware of media guidelines and regulation.
- Suicide notes or similar messages posted on social media should be handled with particular care. Reporting the content of these risks sensationalising or romanticising suicidal behaviour, increasing the likelihood of vulnerable people over-identifying with the person who has died. It can also cause distress to those who have been bereaved.
- Repeated use of photographs of the deceased should be avoided as this increases the likelihood of vulnerable people identifying with them. Similarly, avoid using images of others who have previously died by suicide to illustrate subsequent stories about them, or someone else. This can suggest unsubstantiated links between the deaths and overstate the prevalence of suicide. It is also extremely distressing for bereaved families.
- Apply extra vigilance when considering using or linking to online sources, websites, social media reactions or

comments for a suicide story. Using verbatim quotes can be problematic. Speculation and emotional outpourings are sometimes shared online, particularly with regards to young people. These can easily be misreported, wrongly repeated as fact or spread without due consideration for bereaved or vulnerable people. They also risk glamourising suicidal behaviour, for example referring to 'tributes flooding in on social media.'

- Be mindful of sharing suicide stories on social media as this can increase the risk of sensationalising a death.

Avoid melodramatic depictions of suicide and its aftermath

- It is not advisable to share or embed links to a site, groups, forums or comments that glamourise, romanticise or glorify suicidal behaviour. For example, avoid sharing social media posts targeting young people with dramatic or upsetting memorials of a death. Be particularly wary of overemphasising community expressions of grief as this can unintentionally suggest that people are honouring suicidal behaviour, rather than mourning a death.
- Reporting suicide as a tragic waste and an avoidable loss is more helpful in preventing further deaths. A sensitively reported story that explores the emotional devastation of suicide on family and friends may encourage people experiencing suicidal thoughts to seek help.

Consider carefully the positioning, prominence and illustration of reports

- Avoid positioning a story too prominently, for example on the front page, as a lead bulletin, or at the top of an online breaking news feed. This may significantly increase the likelihood of influencing vulnerable people.
- Take extra care with the selection and placement of photos and video. Consider if it is appropriate or necessary to include a large or prominently placed picture of a person who has died, or link to a video of a memorial or funeral. This is particularly important for stories featuring young people as it risks glamourising a death. If you must use a picture it is safer to use neutral, non-emotive images.
- Avoid using footage or images of locations, for example a cliff or a bridge, especially if it is a place where a number of suicides or suicide attempts have taken place. Including these images can promote the site as an iconic place to take your life and draw vulnerable people to it. It can also increase people's perception of the lethality/effectiveness of a specific suicide method.

Treat high profile deaths by suicide with particular care

- When a death or suicide attempt involves a celebrity or high-profile person there is a greater likelihood of others identifying with the person.

- A research summary from 2020 has shown that media reporting about celebrity suicides is associated with a 13% increase in suicides in the following 1–2 months. The research also shows that when the media reported on specific suicide methods used by a celebrity, there was a 30% increase in deaths by the same method.
- It is particularly important to avoid the use of emotive or dramatic language and images, including public tributes and memorials, which may romanticise or glamourise suicidal behaviour. Glamourised reporting appears to be associated with increases in subsequent suicides compared with non-celebrity coverage.

More information on how to report a celebrity suicide can be found on the [media guidelines](#) section of our website.

Be wary of reporting too much detail from inquests

- Journalists reporting on inquests should apply careful consideration when selecting which elements to report. Inquests routinely include significant amounts of information about the circumstances surrounding a death, as well as explicit details of the suicide method. While this level of detail is necessary for a coroner to fully investigate a death and reach a verdict, it is often inappropriate for a wider audience.

- Paramedics and police officers who attended the scene of a suicide, may give specific and graphic evidence to the inquest so apply due caution when covering their statements. This is especially important as such individuals are unlikely to be aware that what they are saying could increase the risk of suicidal behaviour if reported.
- Be wary of repeating reasons or 'triggers' suggested by witnesses during a hearing, as there is a risk of oversimplification.
- Remember that inquests can be very distressing for bereaved people, so please report with sensitivity. Refer to the general Dos and Don'ts.

More information on how to report on an inquest can be found on the [media guidelines](#) section of our website.

Additional points to consider

Educate and inform

- Whenever possible, refer to the wider issues associated with suicide, such as risk factors like mental health problems, alcohol and substance misuse and deprivation. Refer to the long-term impact that a suicide can have on the bereaved. Informed discussion of such issues can encourage a better understanding of suicide.
- Include references in stories to suicide being preventable and mention when possible that sources of support, such as

Samaritans, are available and easy to access. This can have a positive impact on vulnerable individuals, including encouraging them to seek help.

- Online suicide prevention resources can help raise awareness of the risks surrounding suicide and offer support, without promoting suicidal behaviour. However, be wary of referring to sites that do not fall specifically into this category.

Avoid opening up stories about suicide for comments

There is a risk that comments alongside articles will romanticise suicidal behaviour, for example references to a person going to 'a better place' or 'heaven gained another angel'. Some individuals may use comment sections to share their experiences of suicide attempts or self-harm, which may influence some people who are vulnerable. Comments may also lead to inaccurate speculation about a cause or method of suicide and have the potential to be inappropriate or offensive to family and friends.



© Nick Maslen/Alamy Stock Photo

Be mindful of statistics

- Using 'trend' data within suicide stories can be problematic. Be aware that suicide rates in a single year may deviate from an overall trend. This can be especially the case if focusing on the number of suicides in small geographic areas or particular groups. It is best to look at timeframes of three or more years to identify significant patterns.
- When talking to particularly vulnerable groups, for example children and young people, apply caution when quoting statistics. Bear in mind that while the statistics may be concerning, alarmist reports can have the effect of normalising or exaggerating the prevalence of suicide.
- For the most up-to-date statistics and explanatory notes for suicides in the UK and Ireland go to **Samaritans' Suicide Statistics Report**. For any additional questions or information contact mediaadvice@samaritans.org

Treat murder-suicide with care

- A murder-suicide is when a person kills members of their family before taking their own life, or where an individual murders a number of people in a public place, such as a school, before taking their life. Murder-suicides are rare but can attract exceptional levels of media attention. The circumstances of these deaths can be dramatic and disturbing and reporting them should adhere to the general **Media Guidelines for Reporting Suicide**. Caution is required since imitative behaviour also applies to murder-suicide.

For more information see **Samaritans' guide for reporting murder-suicides**.

Consider use of language

The terms and phrases used when reporting suicide are important. Inappropriate or careless use of language can sensationalise or glorify a death. Careful use can contribute to more sensitive coverage, reducing the risk of influencing imitative behaviour or causing distress to bereaved family and friends.

Do use

A suicide

**Taken his/her/
their own life**

**Ended his/her/
their own life**

**Die by/death
by suicide**

Suicide attempt

Attempted suicide

**Person at risk
of suicide**

Don't use

Commit suicide

**Suicide victim
Suicide 'epidemic',
'wave', 'iconic
site', 'hot spot'**

Cry for help

**A 'successful',
'unsuccessful' or
'failed' suicide
attempt**

**Suicide 'tourist'
or 'jumper'**

“Suicide is a really difficult topic to get right and the training really helped the team forge a greater understanding of the need to take a responsible approach. Talking through the issues undoubtedly also helped grow confidence in portraying suicide and its effects in a sensitive way.”

**Will Banks, Assistant Editor
BBC Radio Oxford**

Suicide: the facts

- Suicide is a significant public health and social inequality issue, with more than 6,000 people across the UK and Republic of Ireland taking their own lives each year. Tens of thousands more attempt suicide. Suicides are preventable with timely, evidence-based interventions.
- In response to the strong evidence-base indicating that inappropriate reporting of suicide can lead to further deaths, many countries have incorporated responsible media reporting into national suicide prevention strategies.
- Suicide is more common among some groups than others. For example, it is more likely among men than women, and in particular men in their 40s and 50s from a lower socio-economic group.
- Suicide is complex and most of the time there isn't one event or factor that leads someone to take their own life. It is usually a combination of lots of different factors interacting with each other to increase risk. A combination of individual, community, and societal factors contribute to the risk of suicide.
- More than 1 in 20 people make a suicide attempt at some point in their lives. Their choice of method is the most important determinant of whether they live or die. While previous suicide attempts is a risk factor for dying by suicide at a later point, research shows that only a small proportion of those who attempt suicide and survive will go on to die by suicide at a later date.
- Self-harm is a sign of serious emotional distress and, while most people who self-harm will not go on to take their own life, it is a risk factor for future suicide.
- A suicide cluster is when a greater number of suicides than expected occur in a location or community. Research has found links between the type (sensationalist) and volume of coverage of suicides by young people, and subsequent suicide clusters and suicides by other young people.
- Some people considering suicide may hint at or even disclose to friends or relatives that they intend to take their own lives. Other people who are feeling suicidal might not mention it at all or give any indication of their intention. There is no evidence to suggest that asking someone if they are OK will make them feel worse. Talking can help.
- Only a third of people who die by suicide have been in contact with specialist mental health services in the year before their death.

Media and suicide codes of practice

Media codes of practice and current regulation have recognised the research evidence on the potentially harmful effects of inappropriate media coverage with the inclusion of clauses that address reporting suicide.

For links to all main reporting regulations and codes of practice within the UK, see the **media advisory** section of our website.

SAMARITANS

**Talk it
through
We're here
to listen**



Chris O'Donovan Photography/Samaritans

If you've lots on your mind,
we'll help you find your own
way through it.

samaritans.org

A registered charity

Call free day or night on

116 123

SAMARITANS

Contact Samaritans' Media Advice team

Samaritans' media advice team is available to provide support when covering suicide and self-harm:

Phone

+44 (0) 20 8394 8300/377

Or +44 (0) 20 3874 9186

Email

mediaadvice@samaritans.org

Web

samaritans.org/mediaguidelines



[#reportingsuicide](https://x.com/samaritans)

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