

## Guidance for reporting on youth suicides and suicide clusters

### ➤ Background

**There is a public interest in youth suicides and in suicide clusters. However, it is important for journalists to be aware that young people are a particularly vulnerable audience in relation to media coverage of suicide and self-harm.**

Young people are at greater risk of suicide contagion and are more likely to be influenced by what they see and hear in the media than other age groups.

### Young people and suicide contagion

Young people are more susceptible to suicide contagion for a range of different reasons. Young people are:

- At increased risk of suicide contagion if they have been affected by suicide – for example a death at their school or university.
- More likely to imitate suicidal behaviour.
- More likely to self-harm or have thoughts of suicide.
- May be more likely than other groups to behave spontaneously and respond more emotionally to life experiences.
- May be less likely to possess a level of emotional maturity that would help them see a way through difficult life problems. For example, issues such as a relationship breakdown or anxiety relating to academic failure can feel all-consuming and never-ending, which can increase the likelihood of these being experienced as overwhelming.
- May be less likely to grasp the permanence of suicide, which increases their risk of suicidal contagion. They may not fully comprehend or appreciate that suicide is a very permanent response to what are typically temporary, surmountable problems.

### Sensational coverage

Over-reporting is a major issue with media coverage of suicides by young people. The number of articles focusing on suicides and suicide attempts involving young people remains disproportionate to the number of incidents. This can overstate the prevalence of suicide among this age group, potentially normalising the behaviour.

Research shows that stories covering youth suicides are frequently reported in a more sensational and emotive way than for suicides by other groups. This can include romanticised language, lots of images of the young person or young people who have died, outpourings of grief and memorials and often intense speculation about possible causes.

Sensational and excessive reporting has been shown to increase the likelihood of imitational suicidal behaviour among vulnerable people, including young people.

### Clusters

Suicide clusters occur primarily among teenagers and young adults. A suicide cluster is a group of suicides or suicide attempts, or both, that occur closer together in time and space than would normally be expected in a given community. Clusters are often linked to a specific place, but the internet and social media mean

geographically spread clusters may be increasing. Research has found links between sensationalist reporting and the volume of suicide coverage featuring young people, on subsequent suicide clusters and suicides by other young people.

In the case of suicide clusters, it is possible that media coverage could increase the risk of further deaths, particularly if the reporting is extensive, sensationalist or prominent and if it details the method of suicide.

## Best practice for reporting on youth suicides and clusters

- As with all suicide reporting, it is recommended that journalists follow [Samaritans' Media Guidelines on Reporting Suicide](#) to make sure that coverage is appropriate and safe. However particular care should be taken when reporting on suicides by young people because of their vulnerability.
- Don't include details of a suicide method as this can significantly increase the risk of imitational behaviour. Refrain from mentioning known methods of suicide (for example by hanging), but also steer clear of reporting new or novel methods. Mentioning a known method can generate prolonged awareness of that particular method and reinforce perceptions that it is lethal, effective or easily available. Studies also show that mentioning a novel method can increase imitative suicides.
- Aim for sensitive reporting that highlights the tragic loss of life without inadvertently romanticising or glorifying a suicide death.
- Language and tone are very important. Don't use sensationalised language. Consider carefully whether it is necessary to include comments posted on social media sites, these can sometimes unintentionally romanticise suicidal behaviour. Unhelpful examples include: "Heaven's gained another angel" and "You're at peace now."
- 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 a coincidence. Steer clear

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

- Avoid speculation around the causes of a young person's suicide. For example, when a suicide is reported and bullying is cited as the cause, this could affect other young people experiencing bullying who may be feeling hopeless about their own situation. Making direct links about causes oversimplifies suicide. Publishing lots of photographs, outpourings of grief or messages about holding people to account for a death, for example directed at bullies, can increase the likelihood of other young people identifying with the person who has died and could lead to suicide contagion.
- It is particularly important to be aware of the risk of inadvertently suggesting that suicide means achieving something through death which may not seem possible in life. This could promote the idea of suicide to other vulnerable young people and make it feel like an option for them too.
- Avoid using photographs of others who have died by suicide, including galleries. Doing so can create links between deaths when there are none, and can give the impression of a larger number of suicides in a smaller period of time than is correct – perpetuating the idea of a 'cluster'.
- Remind your audience that suicide is preventable and encourage help-seeking behaviour by signposting to sources of support, including Samaritans.

## Benefits of sensitive reporting

- Research shows that coverage describing a person 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 effect. This type of coverage can encourage people to seek help and has been linked to falls in suicide rates.
- Aim for coverage that educates and informs. Where possible refer to the wider issues associated with suicide, such as risk factors like mental health problems. Encourage conversations about mental health – discussion of such issues can lead to greater understanding of suicide, including the signs that may indicate a person is struggling to cope and may need help.



## How Samaritans can help you

Samaritans' Media Advisory team works closely with researchers, producers and directors, providing expert advice on covering the topics of suicide and self-harm in factual programmes. The team can be reached at [mediaadvice@samaritans.org](mailto:mediaadvice@samaritans.org)

For general advice and best practice consult [Samaritans' Media Guidelines for Reporting Suicide](#) on our website.

When covering the topic of suicide or self-harm please encourage help-seeking by including sources of support, such as Samaritans' helpline:

*When life is difficult, Samaritans are here – day or night, 365 days a year. You can call them for free on 116 123, email them at [jo@samaritans.org](mailto:jo@samaritans.org), or visit [www.samaritans.org](http://www.samaritans.org) to find your nearest branch.*