Depiction of suicide and self-harm in literature

Background

Suicide is a major public health concern and therefore a topic of public interest. It often features in mainstream media and in literature, both fiction and non-fiction.

There are sensitivities and risks associated with covering the topics of suicide and self-harm. This factsheet has been developed in consultation with the Society of Authors to provide helpful information for authors and publishers when covering these topics.

The aim of this guidance is not to deter writers from covering the topics of suicide and self-harm; the aim is to provide evidence-based, useful information to help authors avoid content which could be harmful.

Suicide facts

- In the UK approximately 6,000 people die by suicide each year and many more will make a suicide attempt. Men are three times more likely to die by suicide than women.
- The World Health Organisation estimates that for every person across the world who dies by suicide, there may be 20 others who will make an attempt on their life.
- Suicidal behaviour is extremely complex and can rarely, if ever, be attributed to a single cause. This complexity should be reflected in portrayals of suicide. For example, it would be unrealistic to suggest that suicidal behaviour occurred following an isolated incident such as the loss of a job or a relationship breakdown.
- There are numerous risk factors for suicide and often people are in more than one ‘at-risk’ group. Risk factors can include economic factors (such as a recession), living in disadvantaged communities, mental health problems, alcohol and drug abuse, exposure to suicide or self-harm (family, friends), and a history of trauma or abuse.
- Suicide is an extreme and potentially preventable act. It is best to avoid any suggestion of suicidal behaviour being a natural, understandable or inevitable response to everyday crises.

Self-harm facts

- In England young women are more likely than young men to self-harm.
- While most young people who engage in non-suicidal self-harm are not likely to go on to make a suicide attempt, previous history of self-harm is the strongest predictor of future suicide and suicide attempts, and it is often a behaviour which is repeated.
- In England between 2007 and 2014 there was an increase in the proportion of people who reported that they had self-harmed, especially among young women aged 16–24.
- Portraying self-harm in media carries risks in terms of contagion, particularly with young audiences. To protect people who may be susceptible to this behaviour, it is important to consider the details that are included and how this is covered.
The Werther effect

A significant body of research, conducted across the world over the last six decades, links certain types of media depictions of suicide with increases in suicide rates.

According to this research evidence, readers may identify with characters in literature (real and fictional), especially if they are charismatic/glamarous/romantic and can be idealised. Through a phenomenon known as ‘social contagion’ a depicted suicide can serve as a model for imitative behaviour. This contagious effect is caused by a combination of grief, suicide ideation and over-identification with the person or character who has died and/or the circumstances under which they took their life or made a suicide attempt.

The earliest known example of suicide contagion caused by media relates to a German novel titled ‘The Sorrows of Young Werther’, written by Johann Wolfgang von Goethe and first published in 1774. The novel is a story of unrequited love in which the main character, Werther, takes the decision to end his life. Following publication of the novel there was evidence of imitational suicides observed in Germany. Many of the deaths were men of a similar age to ‘Werther’ and even dressed in similar style to the character. This resulted in the book being banned in Germany, Denmark and Italy.

The main risk areas highlighted in the research evidence include detailed descriptions of suicidal acts – specifically those which describe suicide methods, content which romanticises or inadvertently glorifies suicidal behaviour and excessive coverage of suicide.

Those who are most susceptible to this contagion effect through media portrayals of suicide include people who suffer with mental health problems, young people, and people who are bereaved – particularly those who are bereaved by suicide.

The Papageno effect

There is also a smaller body of research evidence, known as the Papageno effect, which shows that sensitive portrayals of individuals demonstrating mastery over a suicidal crisis can have a protective influence. Coverage describing a person or character seeking help and coming through a difficult time, rather than making a suicide attempt, can serve as a powerful testimony to others that this is possible. This content has been linked to falls in suicide rates.

Samaritans’ work in this area is guided by the research and focuses on supporting safe and informed coverage of suicide. What we understand from the research is that it’s not that suicide shouldn’t be covered in the media, what’s important is how it is covered.
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General considerations when writing about suicide and self-harm

In terms of age, gender and socio-economic status, the group most at risk of suicide in the UK are less well-off, middle-aged men. In the UK men are three times more likely to die by suicide than women. More information on the issues affecting men is available on our website.

For up-to-date suicide statistics you can visit our website: Suicide facts and figures.

There are a range of psychological, situational, societal and individual background factors that can interact with and impact on a person’s suicide risk. It is helpful to convey this complexity where possible in suicide-related plotlines and avoid simplistic explanations which attribute a suicide attempt or death to a single incident.

Sensitive stories depicting mastery over a crisis and hopeful stories of recovery can help to encourage readers, who may be suffering in silence, to reach out for help. These can serve as reassurance that suicidal feelings can be worked through and will pass, particularly if the character seeks help and chooses to live.

Indicating any ‘reward’ following a suicide death or attempt can inadvertently promote the idea of achieving something through death which is not perceived to be possible in life. Examples include storylines depicting separated parents reuniting following a suicide attempt by their child or suggesting people will be held to account for their actions, such as bullies being shamed and made to feel sorry for their behaviour. Similarly, describing a death by suicide as a release, setting a person free from their troubles in life, or providing peace can romanticise the idea. This can romanticise the idea of suicide and could lead to a vulnerable person believing a death by suicide could resolve the problems they face in life.

Young people are more susceptible to media influence and are more likely to imitate suicidal behaviour. With this in mind, it is advisable to avoid overly dramatising a suicide, as this can romanticise or glorify the behaviour and inadvertently promote it to people who may be vulnerable.

For facts about suicide, visit our website.

Portrayal of suicide methods

Research shows that portraying a suicide as easy, quick, peaceful and/or pain-free can influence a person’s decision to make a suicide attempt.

Care should be taken to avoid portraying a suicide attempt as something that can quickly be recovered from, for example describing a character returning to normal life within hours or days.

Avoid introducing new or uncommon methods of suicide or self-harm into the public consciousness. Evidence shows that such portrayals can result in increases in the use of new methods. It is better to avoid depiction of novel or unusual suicide methods.

In any portrayal of a suicide or suicide attempt, it is better to give as little detail as possible about the method used. For example, if the character has taken an overdose it is advisable not to name the type or quantity of tablets that have been consumed.

It is also advisable to avoid giving details of how the means of suicide (eg, the instrument or drugs) were obtained, for example describing a certain instrument as being easily and cheaply obtained online.
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Language

The terms and phrases used when describing suicidal behaviour are important, as some terms can perpetuate stigma and discourage people from speaking out and seeking help.

With this in mind, we recommend the following:

**Phrases to use:**

- A suicide
- Suicide attempt
- Attempted suicide
- Taken his/her own life
- Person at risk of suicide
- Died by/death by suicide
- Ended his/her life

**Phrases to avoid:**

- Commit suicide
- Cry for help
- A ‘successful’ or ‘unsuccessful’ suicide attempt
- Suicide victim
- Suicide ‘epidemic’, ‘craze’, or ‘hotspot’
- Suicide-prone
- Suicide tourist
- Now at peace

Additional points for consideration

- It is advisable to consider how a book containing suicide content will be promoted. Please ensure publishers and news media are aware of Samaritans’ Media Guidelines.

- Consideration should also be given to any images used, particularly on book sleeves and covers. For example, it is better to avoid showing suicide locations or means. This will help to limit any risk.

- It can be helpful to signpost readers to appropriate sources of support, such as Samaritans’ helpline, at the end of a piece covering suicide or self-harm to encourage help-seeking. This could also be included in any publicity materials to promote the launch of the book.

- It can also be helpful to include trigger warnings at the beginning of the book and in publicity materials.

While this is not a complete fail-safe, alerting readers to suicide and self-harm content allows them to make the choice of whether or not it is suitable for them to read, particularly if they have been affected by the issues (eg those who have been bereaved or those who have experience of suicidal feelings or past attempts).

- Young people are a particularly vulnerable audience in relation to the topics of suicide and self-harm. Self-harm and thoughts of suicide are common among adolescents. Young people are more susceptible to suicide contagion, they are more influenced by what they see and hear in the media than other age groups, and their behaviour is often more spontaneous – more emotionally charged. Young people may not fully appreciate or comprehend the permanency of suicide.
How Samaritans can help you

Samaritans’ Media Advisory team can help authors and publishers by providing expert advice on content relating to suicide and self-harm. The team can be reached by email at 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, or visit www.samaritans.org to find your nearest branch.