

The Samaritans logo is a green rectangle with the word "SAMARITANS" in white, uppercase, sans-serif font. It is positioned at the top of a white rectangular area that serves as a background for the title.

**SAMARITANS**

# **Suicide prevention**

**Communications guide**

## Background

### Talking about suicide is essential to prevent it – here's why and how

Open, safe communication about mental health and suicide prevention can save lives. It helps improve people's understanding of issues like contributing risk factors, how to spot when someone is struggling to cope, and how to start a potentially lifesaving conversation.

Talking can bring relief in a crisis, helping people to see their situation from a different perspective and helping them find a way through things.

Real-life stories of hope and recovery remind others that suicide can be prevented and encourage those who are experiencing suicidal thoughts to reach out for help. These personal testimonies have also been linked to falls in suicide rates. Samaritans has been working with the media and other organisations with an interest in communicating about suicide for many years. Our Media Advisory Service offers expert advice on how to minimise risk and maximise positive media opportunities when communicating on this topic.

This guide covers useful tips for developing safe and informed suicide prevention messages for those communicating about the issue, raising awareness or campaigning for change.



**Resource link**  
**Media Guidelines for Reporting Suicide**

## The importance of safe communication and giving people hope

Research conducted over the past six decades has significantly improved our understanding of the impact of how suicide is communicated. Many of those working across mental health and suicide prevention will be familiar with the phenomenon known as the **Werther effect**, where a depicted suicide (such as in a news report or drama) can serve as a model for imitative behaviour. This contagious effect may be 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. It may also

be more likely if an individual has already experienced hopelessness and/or suicidal thoughts.

This evidence has provided the framework for Samaritans' Media Guidelines work.

Lesser known, but equally important, is another phenomenon known as the **Papageno effect**, named after a character in Mozart's opera The Magic Flute, who chooses to live after being presented with alternatives to dying by suicide. Research related to this phenomenon shows that sensitive stories about suicide prevention can have a protective influence.

The evidence shows that stories and campaigns featuring people with lived experience sharing their stories of hope and recovery can be extremely powerful in influencing other people who are finding life tough.<sup>1</sup> These stories have been linked to falls in suicide rates, serving as vital reminders that recovery is possible and encouraging people to seek help.

The existence of both the Werther and Papageno effects represents the balance that all of us working in suicide prevention must manage in our communications. It's vital that we raise awareness and campaign for change, and at the same time, are sensitive to the effect that this may have on people experiencing suicide ideation or bereavement.

1. Niederkrotenthaler et al (2010). Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *British Journal of Psychiatry*, 197, 234–243.

## Campaigns to reduce suicide in vulnerable groups and communities

The purpose of your communication or campaign may be tackling broader issues like reducing stigma around mental health and suicidal feelings, or improving access to support services, or you may be campaigning on a more specific call to action to protect people at a greater risk of suicide.

Suicide is multi-faceted and rarely due to a single factor, but a combination of social, cultural, biological, psychological, and environmental factors present across the life-course.

Key risk factors for suicide include: diagnosis of a mental health condition or a history of self-harm and/or suicidal behaviour, alcohol and substance use disorders, gambling and other addictions, domestic violence, social deprivation, including problems with debt. Suicide rates are particularly high among middle aged men, especially those from low socioeconomic backgrounds, Traveller communities, veterans, people in prison and people from LGBTQ+ communities. And there are of course others.

The risk of suicide is **8 times greater** for people who live with a diagnosed mental health problem.

x1 x8

There is a strong association between suicide and alcohol – both the impact of long-term alcohol use and the immediate effects of drinking.

**3/4** of those who die by suicide **are men**.



**Unemployed people** are 2.5 times more likely to die by suicide than employed people.



The risk of suicide for men in manual and low-paid jobs, particularly construction, has been shown to be **3 times higher** than the male national average.



## Suicide prevention communications guide

### Campaigning for change, safely

Campaigning to put in place adequate funding and measures is critical to achieving reduced suicide rates. Raising awareness of risk factors and groups who are more susceptible to suicidal behaviour and describing how to prevent suicide are key to making this change a reality. What do we need to remember to campaign safely?

- Awareness raising campaigns are an important element for suicide prevention, but should be implemented alongside evidence-based interventions.
- When communicating publicly about suicide prevention, it is important to aim for balanced messaging that encourages behavioural change.
- Suicide prevention campaigns should be broadly designed around a structure that responsibly communicates the scale of the problem, details the action required to combat this, and presents a desired outcome, eg, encouraging help-seeking behaviour.
- Always consider the potential impact of your campaign materials on all audiences. As well as those you are targeting with a call to action, such as supporters, consider the impact on those who are affected by the very issues you are raising as a concern.
- Be mindful of the importance of responsible handling of suicide data and statistics. Suicide rates in a single year may deviate from an overall trend, particularly if focusing on numbers in a specific group or small geographic area. It is advisable to look at timeframes of three or more years to identify significant patterns.

Bear in mind that while the statistics may be concerning, alarmist reports can have the effect of normalising or exaggerating the prevalence of suicide.

- Use your work with the media as an opportunity to remind journalists that suicide can be prevented and of the importance of following **media guidelines** to prevent sensational coverage that may provoke despair.
- The causes of suicide are complex and simply belonging to a particular group does not automatically imply high risk. Communicating the complexity of suicide concisely is a challenge faced by us all, including the media. Hard-hitting messages can be balanced by showing hope that change can happen, that people are not alone in this and that support in some form is always available.
- Showing hope and alternatives is really important and this should be a significant element of all suicide prevention communications.
- Signposting people to sources of support is also essential. Highlight a range of different services available, including helplines and online support services (24hr), GPs, counselling services, self-help apps, text services and the support of friends and family.



**Resource link**  
**Campaigns aimed at young people**

## Telling people's stories

At Samaritans, we are committed to involving people with experience of suicidal thoughts or bereavement by suicide in our research and campaigns. We involve their expertise when we consider the issues we need to campaign on. We support people to tell their stories and consult with them on our strategy as an organisation.

We are always sensitive to the need to ensure that accounts, expertise and perspectives from people with lived experience are shared in a way that protects both them and the audience. We take care to incorporate the principles of the **Papageno effect**, offering hope to people wherever possible. An important key message for us is that suicides can be prevented.

Here are some considerations for including lived experience in your suicide prevention communications and campaign activity:

- 1.** Make sure anyone agreeing to share their personal story fully understands what they are agreeing to, and what you plan to do with their story. It's important to explain that the story may be picked up and published by other media outlets and shared on social media – meaning they may be exposed to public comments, which may extend to loved ones, and once shared it may be impossible to remove from circulation.
- 2.** Gauge the emotional wellbeing of anyone you are considering working with. While doing this, they may be reflecting on a difficult time in their life when they struggled to cope, potentially bringing up painful memories. Ensure anyone who tells their story has support in place, particularly when they are working with you to share their story and at the time when their story will be published or broadcast, and if re-sharing in the future.

- 3.** Encourage contributors to share aspects of their story that are relevant and to describe things in safe ways – see our [section on safe language](#).

- 4.** Suicidal behaviour is extremely complex and rarely the result of one factor – it is helpful to reflect this in stories wherever possible.

- 5.** Final sign off should sit with the contributor before their story is published on your channels or shared with the media. Strongly encourage the media to publish the story as it is intended (but also manage the expectations of the person sharing their story – the media agenda can change quickly and if intended plans are not fulfilled it won't be a personal reflection on the value of their story).

- 6.** Remember the Papageno effect, where a focus on seeking help and coming through a difficult experience can be protective for others who may be struggling with similar experiences. Offer hope – that whatever someone is going through, there is someone there who can listen and help.

- 7.** Always signpost to relevant sources of support.

If you are sharing stories of people who have been bereaved by suicide, research shows that stories focusing on the life of the deceased, rather than their suicide, do not appear to trigger the Werther effect. We have more guidance on working with people with lived experience of suicide.

It is also important to involve people with lived experience in the planning of a suicide prevention campaign from the start, as they will be able to offer guidance from the perspective of the audience.

The National Suicide Prevention Alliance (NSPA) and Support after Suicide Partnership (SASP) have published a **FAQ resource on meaningful involvement of people with lived experience in suicide prevention** which provides more useful guidance for professionals and organisations.

### Gareth's story

Gareth called Samaritans when he was really struggling and having suicidal thoughts. Because of childhood trauma, he struggled with his mental health, which led to anxiety, depression and PTSD. When things got really tough with work and his personal life, he reached out to Samaritans and put a plan in place to change the areas of his life that were causing him distress. Over the next year, he changed jobs, finalised his divorce and prioritised his health. He even ran a marathon to celebrate how far he'd come.

Gareth now encourages others to talk about their problems, saying Samaritans helped him turn his life around.

“ Without that call, I might not be here today – that's the honest answer. ”  
Gareth

**Find out more about Gareth's story, and other stories of hope like his.**

### Use of images and video in suicide prevention communication

A campaign's impact can be transformed by an image or video going viral. As communicators working across suicide prevention, it's vital that our campaign messages break through the noise and stand out from everything else competing for audience attention.

Striking the right balance between achieving mass visibility and awareness, while avoiding sensationalising or stigmatising the issue, can make coming up with powerful messages and images more challenging. To achieve the appropriate impact on audiences, in terms of inspiring positive behavioural change, we must reduce the risk of any negative impact on vulnerable people.

Here's a quick checklist of important points to remember when considering what you want your image to convey and selecting visuals for your communications:

- Including images of people increases the likelihood of others identifying with them. It's important to consider carefully the potential impact on vulnerable people, particularly if you're using an image of a person who has died.
- Use the Papageno effect evidence – consider ways of conveying hope and connection through your images. Avoid the clichéd 'head in hands' portrayal of emotional distress as these can be stigmatising and unhelpful. Aim for neutral or positive images, for example showing people engaging in conversation and supporting each other. This helps to promote the idea of hope and reaching out for support. These more



## Suicide prevention communications guide

neutral images of people can also help to highlight that it's not always obvious who may be struggling with suicidal thoughts.

- Bear in mind the Werther effect – photos or video footage of locations can increase people's awareness of these, especially if it's a place where suicides or suicide attempts have taken place. There are serious risks associated with showing any method of suicide or self-harm. Neutral, non-specific images are safer.
- Images can be an impactful way to convey the scale of an issue. But bear in mind the risk of normalising or sensationalising suicide by using props or stunts that are not proportionate, or that are linked strongly with particular vulnerable groups.

With this checklist in mind, here are some examples of neutral images which focus on the human interaction.



## Online safety for your campaign

We have developed **guidelines for the tech industry** around safe use of platforms such as Instagram, Snapchat and Tiktok. These platforms can be invaluable in sharing campaign stories and messages, and will probably be part of your communications plan.

Many of the same principles we have highlighted for all media still stand for social media – avoid highlighting locations or methods, and ensure sensitive use of language and imagery.

But online, those viewing your content can and will respond immediately to what you post. Some may disclose their own experiences.

Here are some considerations based on what we've learned from our **Online Excellence Programme** so far.

**1.** Most platforms will have tools available where you can limit or remove the ability to comment or feedback on posts. When this is felt necessary, it can help avoid harmful comments from malicious actors or trolls, especially when you're not able to moderate comments being shared 24/7.

**2.** Your post may be seen by people who are struggling to cope and looking for help. Being prepared for this is incredibly important. We recommend:

- Offering support and/or training for those who may be exposed to self-harm or suicide content on your platforms. **Find out about supporting staff and volunteers here.**

- Wherever possible, ensuring social media accounts are moderated in and out of working hours. Even with comments turned off, there may be communication to your organisation in other ways. These **guidelines for industry** may help you to think about how you can do that.
- Considering in advance how to support and signpost people in distress who may respond to your campaign online. There should be links to helplines, such as Samaritans, where people can get immediate support. **Find out more about supporting people who are struggling to cope here.**

**3.** When communicating on social media, take the opportunity to educate and inform (including facts about suicide as complex but preventable, encouraging conversation, and how to support each other).

You can read our **full industry guidelines** for more detail on preparing a plan for safe online interactions with your campaign. You may also find our **online safety resources** helpful.





## How Samaritans can help you

Samaritans' Media Advisory team provides advice and support to media and other organisations communicating about the topics of suicide and self-harm. Our support includes advice on developing communications materials and support with reactive concerns about high-risk media coverage.

Samaritans' Media Advisory team can be contacted at:  
[mediaadvice@samaritans.org](mailto:mediaadvice@samaritans.org)

For general advice and best practice tips you can refer to  
[Samaritans' media guidelines resources](#).

**Use media opportunities to remind people that suicide can be prevented and encourage those who may be struggling to reach out and seek help by including sources of support, such as Samaritans:**

Whatever you are going through, you don't have to face it alone. When life is difficult, Samaritans are here – day or night, 365 days a year. You can call free on 116 123 or email [jo@samaritans.org](mailto:jo@samaritans.org)

## Top tips for suicide prevention communications

1. Avoid details of suicide methods or locations, including images – whether in a case study or story, or as a place to launch or promote a campaign. Highlighting these can unintentionally promote or encourage online research of methods and locations.
2. Include messages of hope, such as how to cope with life stressors or suicidal thoughts. A key component in changing behaviour for any suicide prevention campaign is the message that **Things can change – suicides can be prevented**.
3. Encourage people to talk and to reach out to others – both to receive and offer support.
4. Always signpost relevant sources of support to encourage help-seeking.
5. **Use safe and sensitive language.**
6. Suicidal behaviour is complex and seldom the result of a single cause. In the case of advocacy campaigns calling for change relating to a single factor (such as access to means, vulnerable groups, access to support), present the issue as a risk factor with reference to the broader context of your story. Aim to balance your message with raising the issue, while maintaining hope for those affected. Focus on what can be done in terms of prevention.
7. Be aware of sensitivities and how to protect the wellbeing of people with lived experience of suicide and self-harm when preparing personal stories for public audiences. Refer to **Samaritans' guidance** to ensure this is done appropriately.
8. Avoid romanticising or sensationalising suicidal behaviour – take care around the use of emotive or dramatic language and images. Care should also be taken around public tributes and memorials and repeating the story, such as funerals and anniversaries. These may unintentionally serve to glamorise a death by suicide, especially if the deceased was a high-profile figure. Caution is strongly advised for celebrity suicides as these are particularly associated with imitative suicides.
9. Plan and prepare for how you will respond to public comments and people contacting you, for example on social media. Make sure you have **clear plans** in place to support vulnerable people and your own teams.
10. Take care when **communicating with young people**, who are generally more susceptible to imitative behaviour.

If possible, collaborate with local agencies and charities working across mental health and suicide prevention. This can be an effective way to ensure consistent adherence to media guidelines. This joined up approach can also be helpful when responding to local concerns, such as a high-risk location or a potential suicide contagion or cluster situation. Communications teams can work together to increase the proportion of positive messages in local media to support better mental wellbeing and to highlight available support services.

See Samaritans' full **Media Guidelines for Reporting Suicide** and World Health Organisation guidelines **Preventing suicide: a resource for media professionals**.

## Campaigns aimed at young people

Young people are more vulnerable to influence by media and social media than other age groups and are at greater risk of contagion if they have been affected by a suicide, for example if someone has died by suicide in their community or a celebrity. Bear in mind that communities can be spread far and wide, including online.

Here are some considerations for developing campaigns that more specifically target young people with suicide prevention messages:

- Emphasise that while suicidal thoughts can feel very intense, things can get better, these feelings may be temporary and may pass with time and support.
- Show that although something might feel like an overwhelming problem, there is always support available to help people face whatever they are going through.
- Signpost to relevant sources of support available to help young people.
- Highlight the benefits of talking. Talking helps us to see a way through things and to find solutions to problems which may not be apparent right now. Encourage people to reach out to each other.
- Try to address the issues that can make young people more vulnerable (such as problems feeling more intense/overwhelming/never-ending, thinking more morbid thoughts, spontaneous behaviour) and where possible demonstrate how working through these experiences helps us gain emotional resilience.
- Communicate things that can help support good emotional health, such as physical activity, arts, crafts, reading, music and being in touch with nature.



### Resource link

**Signpost journalists to media guidelines for reporting on youth suicides**

## Language dos and don'ts

Careful use of language can contribute to more sensitive communication, reducing the risk of imitational behaviour or distress to people with experience of suicide, including bereaved family and friends.



### What to use:

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



### What not to use:

- Commit suicide
- Suicide victim
- Cry for help
- Successful/unsuccessful/failed attempt
- Suicide epidemic, wave, spike
- Suicide hotspot
- Completed suicide

# 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](mailto:mediaadvice@samaritans.org)

### Web

[samaritans.org/mediaguidelines](https://samaritans.org/mediaguidelines)

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

Samaritans Registered Office  
The Upper Mill, Kingston Road, Ewell, Surrey KT17 2AF  
T 020 8394 8300

Patron: His Majesty The King. A company limited by guarantee registered in England & Wales (757372) and a charity registered in England & Wales (219432) and in Scotland (SC040604).

March 2025

© Samaritans 2025