Safe Reporting on Suicide: Media Toolkit
The Media’s Role in Suicide Prevention

The way we talk about – and report on – suicide matters. The National Strategy for Suicide Prevention is a call to action developed by the U.S. Surgeon General and the National Action Alliance for Suicide Prevention. One goal involves media coverage of suicide:

Promote responsible media reporting of suicide, accurate portrayals of suicide and mental illnesses in the entertainment industry, and the safety of online content related to suicide.

Responsible reporting can save lives
Media reporting with certain elements has been linked to increases in suicide.\(^1\) When an explicit description of the method is included in reporting on suicide, increases in suicides by the same method are usually observed.\(^2\) Celebrity suicides tend to have a greater effect. The U.S. experienced a 10% increase in suicides by hanging for five months following coverage of Robin Williams’ suicide. But increases are also observed after reports of non-celebrity suicides.\(^2\) Adolescents are especially vulnerable to imitation of suicidal behaviors and suicide clusters.\(^2\)

Suicide contagion, or the Werther effect
The Werther effect refers to suicide contagion that results from reporting of suicide via media exposure.\(^2,3\) The term is a reference to Goethe’s 1774 novel The Sorrows of Young Werther which details a young man who dies by suicide. The character, Werther, was wearing a yellow vest, blue coat, and boots at the time of his suicide by firearm. Following the release of the book, there were several suicides where victims were dressed in similar clothing, used the same suicide method, or had the book at the scene of their death.\(^2\)

Reporting elements associated with increases in suicide:
- Front-page story placement
- Repetitive reporting
- Including the suicide method in the headline
- Reporting on suicides by jumping, firearm, or asphyxiation (other than car exhaust)
- Reporting on suicide pacts
- Including accompanying photos
- Articles describing suicide in older adults
- Minimizing the complexity of suicide by suggesting it can be caused by one factor
- Reports that include misinformation about suicide

Positive messaging, or the Papageno Effect
The Papageno Effect includes reporting on people who recover from suicidal ideation or behaviors and go on to experience growth. Positive narratives about suicide prevention include sharing resources, telling stories of help-seeking, providing support, coping, and resilience, describing specific steps readers/viewers can take, and highlighting successful suicide prevention programs and new research.\(^5\)
Best Practices for Reporting on Suicide

Leading experts and organizations collaborated to develop recommendations for reporting on suicide. Below is a culmination of the recommendations as seen on reportingonsuicide.org and the World Health Organization's (WHO) website.

Keep information general
Keep information about the location and person general. Report the death as a suicide. It is important not to include details about the method used or information about the location of the death. Do not include information about the contents of a suicide note. If you choose to report on a suicide where a note was present, you can report that a note was found and is under review. These reporting elements have been associated with subsequent increases in suicides following reporting.

Provide accurate information
Provide accurate information on suicide to the public, such as suicide warning signs and risk factors. It is important not to perpetuate misinformation or myths about suicide. Information on risk factors and warning signs can be found from the following sources:

- Suicide Prevention Resource Center sprc.org/about-suicide
- American Foundation for Suicide Prevention afsp.org/learn-the-facts
- American Association of Suicidology suicidology.org/resources/warning-signs
- Substance Abuse and Mental Health Services Administration (SAMHSA) samhsa.gov/find-help/suicide-prevention

Provide information on where to seek help
Provide information on where to seek help and share stories of recovery. Report on what helps people with thoughts about suicide (i.e., coping skills, support and treatment).
- Maryland's Helpline is available 24/7. Marylanders can seek mental health and crisis support by calling 211 and pressing option 1, texting 898-211, or visiting 211md.org to chat online with a specialist.
- The National Suicide Prevention Lifeline can also be shared (1-800-273-8255).

Avoid prominent placement
Avoid prominent placement of the report/story. Don't unduly repeat the stories. If the report on the suicide is a print article or newscast, place the report later in the paper or newscast. Prominent placement and repetitive reporting have been associated with increased suicides after reporting.
Use the best available data
Use the best available data to describe an upward data trend, use words like “increase” or “rise” as opposed to sensational descriptors like “epidemic” or “skyrocketing.” Credible data sources include:
- Centers for Disease Control and Prevention (CDC) [cdc.gov/violenceprevention/suicide/index.html](https://cdc.gov/violenceprevention/suicide/index.html)
- Maryland Suicide Prevention Program [health.maryland.gov/suicideprevention/Pages/data.aspx](https://health.maryland.gov/suicideprevention/Pages/data.aspx)
- Maryland Violent Death Reporting System [https://phpa.health.maryland.gov/ohpetup/Pages/mvdrs.aspx](https://phpa.health.maryland.gov/ohpetup/Pages/mvdrs.aspx)
- Maryland Vital Statistics Administration [https://health.maryland.gov/vsa/Pages/reports.aspx](https://health.maryland.gov/vsa/Pages/reports.aspx)

Stick to the facts
Stick to the facts and use language that is sensitive to a grieving family. Avoid sensationalizing or romanticizing the suicide death. The language we use when talking about suicide matters. It is important that we do not use language that sensationalizes, romanticizes, or stigmatizes suicide.

Interview an expert
Interview an expert to help convey facts on suicide and mental health conditions. Interviews with experts on suicide and mental health conditions can help to verify facts in your report, provide credibility, and ensure the topic is being reported on with sensitivity.

Language matters
The language we use when talking about suicide matters. It is important that we do not use language that sensationalizes, romanticizes, or stigmatizes suicide.

<table>
<thead>
<tr>
<th>Don’t use</th>
<th>Rationale</th>
<th>Use this instead</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Committed suicide”</td>
<td>Stigmatizes suicide and associates it with a criminal act</td>
<td>“Died by suicide”</td>
</tr>
<tr>
<td>“Successful or completed suicide”</td>
<td>Implies a desired outcome – suicide is not a desired outcome</td>
<td>“Died by suicide”</td>
</tr>
<tr>
<td>“Unsuccessful/failed attempt”</td>
<td>Implies a desired outcome – suicide is not a desired outcome</td>
<td>“Suicide attempt”</td>
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</tbody>
</table>
# Safe Reporting Checklist

Use this checklist to make sure your reporting follows safe and responsible reporting strategies.

## General Reporting about Circumstances
- □ Does not include the method of suicide
- □ Does not include location of the suicide or kept location information general
- □ Does not include contents of suicide note

## Positive Messaging
- □ Reports on story of help-seeking and recovery
- □ Provides information on available resources such as crisis hotlines
- □ Provides actionable steps people can take to seek help or provide support
- □ Provides information on effective, successful suicide prevention programs or new research

## Accuracy of Information
- □ Provides information on risk factors and/or warning signs
- □ Information provided in the report is verified or retrieved from a credible source
- □ Does not include information that perpetuates myths or stigma about suicide
- □ Data is retrieved from a credible source and is most recent data available
- □ Does not portray suicide as being caused by a single factor
- □ Interview expert in suicide prevention or mental health

## Language Used in Reporting
- □ Does not use language that sensationalizes or glamorizes suicide
- □ Does not present suicide as a normal solution to issues faced by individuals
- □ Does not use stigmatizing language (i.e., committed suicide, successful suicide)
- □ Avoids sensational descriptors of suicide trends
- □ Does not include ‘suicide’ or method in headline
- □ Report is not on front page or prominently placed in print; report is not prominently placed in newscast
Additional Resources for the Media


Recommendations for Reporting on Suicide - [http://reportingonsuicide.org/](http://reportingonsuicide.org/)


American Foundation for Suicide Prevention, For Journalists - [https://afsp.org/about-suicide/for-journalists/](https://afsp.org/about-suicide/for-journalists/)

References


