|  |  |
| --- | --- |
| The Importance of Media Guidelines for Reporting on Suicide | September 2021 |

The Suicide Prevention Office offers the following commentary in support of the guidelines.

Evidence shows that media reporting about self-harm and suicide can have a negative impact on vulnerable people, including being associated with increases in subsequent rates of suicide.[[1]](#footnote-1) Particularly problematic reporting includes:[[2]](#footnote-2)

* reports of suicides by celebrities
* descriptions or implications of suicide methods
* sensationalist headlines (including terms like ‘surge’, ‘spike’, ‘crisis’, ‘epidemic’)
* repetitive reporting
* reporting that depicts suicide as inevitable
* reporting that reinforces myths about suicide. Examples of such myths are that people who talk about suicide don’t mean to do it, that someone who is suicidal is determined to die and can’t be dissuaded from that intention, that only people with mental disorders are suicidal, that suicide is easy to explain, that suicide is an appropriate means to cope with problems, and that talking about suicide will put the idea into someone’s head.

Most people who die by suicide are acutely distressed but not mentally unwell. A complex range of risk factors contributes to distress that may lead to suicide.

The impact of other types of media, such as social media and entertainment media, is increasingly being documented.[[3]](#footnote-3) The World Health Organization has now produced guidelines for the entertainment industry.[[4]](#footnote-4)

A growing body of evidence also highlights that media reports of people overcoming suicidal crises may contribute to preventing suicide.[[5]](#footnote-5)

It is important to consider potential effects that various types of reporting can have on audiences.

The media have the potential to contribute to positive public health outcomes by reducing stigma, and engendering hope and help-seeking,[[6]](#footnote-6) which are important in efforts to reduce suicide in Aotearoa New Zealand.



September 2021
HP 7766

1. Niederkrotenthaler T, Braun M, Pirkis J, et al. 2020. Association between suicide reporting in the media and suicide: systematic review and meta-analysis. *BMJ* 368: m575.

Niederkrotenthaler T, Voracek M, Herberth A, et al. 2010. The role of media reports in completed and prevented suicide – Werther versus Papageno effects. *British Journal of Psychiatry* 197: 234–43.

Sinyor M, Schaffer A, Nishikawa Y, et al. 2018. The association between suicide deaths and putatively harmful and protective factors in media reports. *CMAJ* 190: E900-7.10.1503/cmaj.170698 30061324. [↑](#footnote-ref-1)
2. See note 1. [↑](#footnote-ref-2)
3. Niederkrotenthaler T, Stack S, Till B, et al. 2019. Association of increased youth suicides in the United States with the release of 13 Reasons Why. *JAMA Psychiatry* 76(9): 933–40. [↑](#footnote-ref-3)
4. WHO. 2019. *Preventing Suicide: A resource for filmmakers and others working on stage and screen*. Geneva: World Health Organization. URL: [https://www.who.int/publications/i/item/preventing-suicide-a-resource-for-filmmakers-and-others-](http://www.who.int/publications/i/item/preventing-suicide-a-resource-for-filmmakers-and-others-) working-on-stage-and-screen (accessed 9 August 2021). [↑](#footnote-ref-4)
5. Niederkrotenthaler et al. 2010. See note 1.

Till B, Arendt F, Scherr S, et al. 2019. Effect of educative suicide prevention news articles featuring experts with vs without personal experience of suicidal ideation: a randomized controlled trial of the Papageno effect. *Journal of Clinical Psychiatry* 80: 17m11975.

Niederkrotenthaler T, Till B. 2020. Effects of suicide awareness materials on individuals with recent suicidal ideation or attempt: online randomised controlled trial. *British Journal of Psychiatry* 217(6): 693–700. [↑](#footnote-ref-5)
6. Mindframe Guidelines, <https://mindframe.org.au/mental-health/communicating-about-mental-ill-health/mindframe-guidelines>.

Srivastava K, Chaudhury S, Bhat PS, et al. 2018. Media and mental health. *Industrial Psychiatry Journal* 27(1): 1–5. DOI:10.4103/ ipj.ipj\_73\_18 (accessed 9 August 2021). [↑](#footnote-ref-6)