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Media reporting of suicide and adherence to media guidelines

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Abstract

Background: International research consistently shows evidence for an association between sensationalised and detailed media reporting, and suicidal behaviour.

Aim: This study examined the quality of media reporting of suicide and adherence to media guidelines in Ireland.

Methods: In accordance with the criteria outlined in the media guidelines for reporting suicide, 243 media articles were screened and analysed for quality of reporting of two high profile cases of suicide and two cases of suicide that became high profile following a period of intense media coverage that occurred between September 2009 and December 2012.

Results: A minority of articles breached the media guidelines in relation to sensationalised language (11.8%), placement of reports on the front page of the newspaper (9.5%), publishing of inappropriate photographs (4.2%) and mention of location of suicide (2.4%), while no articles disclosed the contents of a suicide note. However, in the majority of articles analysed, journalists did not refer to appropriate support services for people vulnerable to, and at risk of suicide (75.8%) or mention wider issues that are related to suicidal behaviour (53.8%). Overemphasis of community grief (48.3%) was also common. Nearly all articles (99.2%) breached at least one guideline and 58.9% of articles breached three or more guidelines.

Conclusions: Overall, adherence to media guidelines on reporting suicide in Ireland improved in certain key areas from September 2009 until December 2012. Nonetheless, important challenges remain. Increased monitoring by media monitoring agencies, regulators and government departments is required. Implementation should be conducted using a pro-active approach and form part of the curriculum of journalists and editors. The inclusion of guidelines for the reporting of suicidal behaviour in press codes of conduct for journalists warrants consideration.

Keywords: Media reporting, suicide, guidelines, monitoring, quality.

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Introduction

International research consistently shows evidence for an association between sensationalised and detailed media reporting, and suicidal behaviour notwithstanding the risk of reporting bias (Sisask & Varnik 2012) and limited methodological quality (Zalsman et al, 2016). The impact is greater on people with similar gender-age characteristics as the deceased (Sisask & Varnik 2012) and when celebrities are involved (Lee et al, 2014; Yang et al, 2013; Niederkrotenthaler et al, 2012; Chen et al, 2010; Fu & Yip, 2009).

Numerous studies have shown that the copycat and imitation effects of media reporting are primarily found for vulnerable people, such as people with depression and those who have engaged in self-harm (Sisask & Varnik 2012; Niederkrotenthaler et al, 2012; Niederkrotenthaler et al, 2010; Fu & Yip, 2009; Cheng et al, 2007; Stack 2005; Pirkis et al, 2002; Pirkis & Blood, 2001; Gould 2001;). Younger age is also associated with elevated vulnerability (Chen et al, 2010; Huh et al, 2009). Research indicates that one instance of intense or substantial media coverage of a novel method can increase the incidence of suicide by that method (Chang et al, 2010) with this increase remaining after the media coverage decreases (Lee et al, 2014).

The imitative effects of media reporting on suicidal behaviour are longstanding. In 1774, following the publication of JW Von Goethe's novel 'The Sorrows of Jung Werther', indications of imitative suicides were identified among young men in Germany, Denmark and Italy and thus 'The Werther Effect' was coined (Phillips 1974). Following the death by suicide of the iconic American actress and model Marilyn Monroe in 1962, a 12% increase in suicides was reported in the U.S in the month following her death (Schmidtke & Hafner, 1989). In the 1980s, in the 70 days after broadcasting a television film featuring the railway suicide of a 19-year old male, a 175% increase in railway suicides among young people was recorded (Halgin & Whitbourne, 2006). A significant short and long term increase in railway suicides was also reported in Germany (Hegerl et al, 2013; Ladwig et al, 2012) and wider Europe (Koburger et al, 2015) following the suicide of footballer, Robert Enke in November 2009. More recently, a 10% increase in deaths by suicide was reported following the death of actor Robin Williams (Fink et al, 2018).

The positive impact of the implementation of media guidelines for reporting of suicide has been reported in terms of a reduction in suicide rates (Niederkrotenthaler & Sonneck, 2007) and in the use of highly lethal methods of suicide (Barker et al, 2016). and improvement in reader's ability to use coping resources to overcome suicidal behaviour/ideation (Niederkrotenthaler et al, 2010). However, Bohanna and Wang report that media guidelines can be effective only when 'accompanied by media endorsement, active dissemination strategies and ongoing training and monitoring' (Bohanna & Wang, 2012). Analysis of the effectiveness of specific guidelines has found no positive or negative effects of exposure to media reports of suicide and it is unclear which individual guidelines can be attributed to efficacy (Williams & Witte, 2017; Anestis et al, 2015).

When analysing media adherence to specific guidelines, international media have been found to breach guidelines relating to specification of the method (Pitman & Stevenson, 2015; Chandra et al, 2014; Tatum et al, 2010; Niederkrotenthaler et al, 2010; Pirkis et al, 2002), stating the location of the suicide, (Chandra et al, 2014; Tatum et al, 2010), disclosing the content of a suicide note (Chandra et al, 2014; Niederkrotenthaler et al, 2010

), the location of article in newspaper (Sisask & Varnik, 2012 ; Niederkrotenthaler et al, 2010 ; Tatum et al, 2010) and use of sensationalised language (John et al,2016; Pitman & Stevenson, 2015; Tatum et al, 2010 ; Pirkis et al,2002). Moreover, literature indicates a lack of inclusion of supportive information (John et al,2016; Pitman & Stevenson, 2015; Chandra et al,2014; Niederkrotenthaler et al, 2010; Tatum et al, 2010; Fu & Yip,2008; Pirkis et al,2002) and reference to wider issues such as alcohol or other substance misuse, mental health status, service use history, self-harm, bereavement and deprivation (Chandra et al,2014; Niederkrotenthaler et al, 2010; Tatum et al, 2010). Studies have also reported non-compliance regarding inappropriate headlines (Chandra et al,2014; Niederkrotenthaler et al, 2010; Tatum et al, 2010; Fu & Yip,2008; Pirkis et al,2002), the romanticising of suicide (Pitman & Stevenson, 2015), referring to an incident that may have been attributed to the suicide (Chandra et al,2014; Niederkrotenthaler et al, 2010), and inappropriate imagery such as photos of the scene of the suicide and funerals (Chandra et al,2014; Fu & Yip,2008). Nevertheless, some media professionals do adhere to the guidelines in relation to imagery (Niederkrotenthaler et al, 2010; Tatum et al, 2010; Pirkis et al,2002).

In Ireland, the first set of media guidelines for the reporting of suicide were launched in 2006 (The Samaritans,2006), and further updated in 2008 (The Samaritans,2008) and 2013 (The Samaritans,2013). Headline, Ireland's national media monitoring agency was formed in 2007 to monitor media articles on a daily basis and identify articles that do not adhere to the media guidelines. Their aim is to increase media awareness of the guidelines and over the last eleven years they have liaised with and delivered training to journalists across the country in this regard. However, there is a lack of systematic research in this area. Key priorities in Ireland's National Strategy to Reduce Suicide, 2015-2020, *Connecting for Life* (Department of Health,2015) include engagement 'with the media in relation to: media guidelines; tools and training programmes' and improvement in 'the reporting of suicidal behaviour within broadcast, print and online media'. The World Health Organisation's Global report on preventing suicide (WHO,2014) and the updated resource for media professionals (WHO,2017) make reference to similar primacies.

Therefore, this study sought to examine the quality of media reporting of four cases of suicide in Ireland between September 2009 and December 2012. In addition, the study investigated the degree to which the media guidelines for reporting of suicide were adhered to for each of the four cases examined.

Methods

In accordance with the criteria outlined in the media guidelines for the reporting of suicide (The Samaritans, 2013; WHO 2017), national and regional media articles are scanned and recorded on a daily basis by Headline, Ireland's National Media Monitoring Agency. All newspaper articles relating to the selected four cases of suicide that occurred between September 2009 and December 2012 were referred to the researchers. Cases were selected based on a minimum criterion of four weeks' coverage and a minimum volume of 45 media articles. Four cases met this criterion. Articles that cited the full name of the deceased and contained common features across the selected cases were included. The cases examined were dated: 14-09-2009, 27-11-2011, 27-10-2012 and 12-12-2012. Articles were received in the form of media books, containing press clippings and the source of the editorial and images, if applicable. National and regional newspapers were included. In many instances articles relating to all four cases were disseminated online as well as in print. Ninety-six articles referred to case

one (14-09-2009), ninety-eight articles referred to case two (27-11-2011) and forty-nine articles referred to cases three and four collectively (27-10-2012; 12-12-2012). Cases one and two were two well-known sportsmen and cases three and four were two family members with similar characteristics with respect to age, gender and events prior to their death, and who died by suicide within a time span of six weeks. In multiple articles, cases three and four were reported on simultaneously. Case four was reported more widely due to the connection with case three.

Quality criteria

Articles were coded for quality of reporting by four researchers (AS, EC, BW, T'OR) using the principles of the 'Risk of Imitative Suicide Scale' (Nutt et al, 2015). Items were assessed against a range of criteria (See Table 1) derived from national and international media guidelines for the reporting of suicide (The Samaritans, 2013; WHO 2017). Items were coded as one if the guideline was breached and zero if the guideline was adhered to.

Data analysis

Quantitative content analysis was conducted in order to provide an overview of the quality of media reporting of suicide in Ireland. Data were entered in a Microsoft Excel database and descriptive statistics were calculated. The analyses were carried out by two researchers (NMCT, AS).

Table 1: Quality Criteria Analysed

Criteria	Definition
Use of sensationalised language	Inappropriate language used to describe the mental health of a person or the event e.g. 'maniac', 'epidemic', 'craze', 'hot-spot'.
Report on front page of newspaper	Article relating to suicide case published on the front page of newspaper
'Committed' in headline	The words 'committed suicide' included in the headline of the article, rather than 'take one's own life' or 'died by suicide'
Photographs of scene published	Photographs of the scene or other inappropriate photos published (e.g. coffin, cemetery, mourning scene including identifiable attendees)
Location	Location of the suicide mentioned or pictured, particularly landmark 'hot-spots'
Method of suicide	Details or description of the method of the suicide mentioned (e.g. hanging, overdose)
Reference to wider issues	Mention of wider issues to provide audience with better understanding. (e.g. alcohol or other substance misuse, mental health status, interventions received, service use history, self-harm, bereavement, deprivation)

Supportive Information	Lack of inclusion of supportive information such as support websites and helpline numbers to facilitate direct contact
Interview with Bereaved family member	Family or friends of deceased interviewed, including quotes
Reference to incident that may have caused suicide	Suggestions on what may have caused/attributed to the fatal event (e.g. breakdown of marriage, financial debt)
Overemphasis on community grief	Reports of a community in mourning over the death
Time of transition	Article published at high risk time of the year with reference to holiday times, such as the Christmas period or Valentine's Day, or any segment of time associated with increased familial stress
Accurate statistics	Credible statistics from a legitimate source omitted in the article. Necessary to provide appropriate representation of the scale of related problems within a particular community or wider area.
Suicide note	Information regarding a suicide note disclosed.

Results

Newspaper coverage of the four cases of suicide examined was extensive (243 articles). The results indicate that a minority of articles breached the following media guidelines: using sensationalised language (11.6%), placing reports on the front page of the newspaper (9.5%), publishing inappropriate photographs (4.2%), disclosing the location of the suicide (2.4%). None of the articles disclosed the contents of a suicide note.

However, in the majority of articles analysed (75.8%) journalists did not refer to appropriate support services for people vulnerable to suicide. Moreover, failure to address wider mental health issues and effective evidence informed interventions was a recurring theme (53.8%). Overemphasising community grief following the suicide was also common, with almost half of articles breaching this aspect of the media guidelines (48.3%) (Figure 1). Contrary to the media guidelines, reference to what may have caused the suicide was regularly mentioned (29.1%), and quotations from bereaved family members were frequently published (25.9%). Furthermore, almost one in five articles contained use of the term 'committed' in the headline (20.1%), included excessive detail of the method of suicide (19.9%) and referred to the time of transition or a high risk time of the year associated with increased familial stress (17.9%).

Table 2: Quality Criteria Results

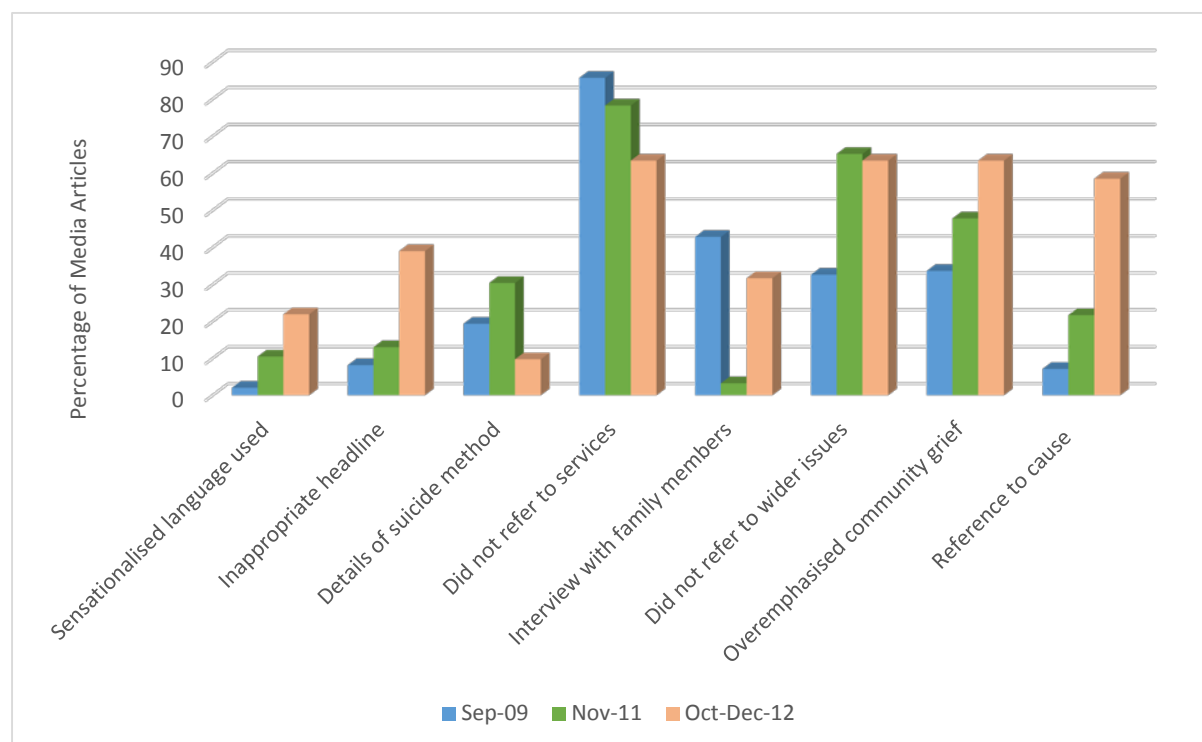
Criteria	Case 1 (%) N=96	Case 2 (%) N=98	Case 3+4 (%) N=49	Total (%) N=243
Use of sensationalised language	2.0	10.9	22.0	11.6
Report on front page of newspaper	15.3	1.1	12.2	9.5
Use of word/s “committed” “suicide”	8.2	13.0	39.0	20.1
Photograph published	3.1	2.2	7.3	4.2
Location mentioned	6.1	1.1	0.0	2.4
Reporting of method of suicide	19.4	30.4	9.8	19.9
Reference to wider issues	32.7	65.2	63.4	53.8
Did not include support information	85.7	78.3	63.4	75.8
Interview with family of deceased	42.9	3.3	31.7	25.0
Reference to what may have caused suicide	7.1	21.7	58.5	29.1
Overemphasis of community grief	33.7	47.8	63.4	48.3
Time of Transition	10.2	4.3	39.0	17.9
Did not report accurate statistics	93.9	0	90.2	61.4
Suicide note	0.0	0.0	0.0	0.0

Nearly all articles (99.2%) breached one or more of the media guidelines. Analysis found that 13.6% and 26.7% of articles breached one and two guidelines, respectively. More than half of articles (58.9%) were found to breach three or more guidelines.

The findings indicate that articles were more likely to breach the media guidelines at the end of the reporting period than at the beginning. Articles monitored in 2012 were more likely to use sensationalised language, inappropriate terminology, mention if the death by suicide occurred at a high risk time of the year, and more likely to refer to what may have caused the individual to take their own life and overemphasise community grief. The only guideline which saw a reduction in non-compliance over time was the inclusion of information on support services. Although, this remained consistently high throughout the duration of the study.

When a comparison was made between cases of well-known persons or ‘celebrities’ and those who are less well-known, reports involving well-known individuals were more likely to contain a description of method of suicide, and not to include supportive information. Reports relating to well-known individuals were less likely to include incorrect terminology, mention time of transition and make reference to what may have caused the suicide.

Figure 1: Outcomes of quality rating of media articles



Discussion

In Ireland, there is a lack of systematic research into the quality of media reporting and adherence to media guidelines by journalists. This study provides a systematic examination of adherence to the media guidelines by journalists and is unique in that trends were analysed over a specified time period. The findings offer an insight into the impact of the guidelines and the challenges which remain.

Consistent with international research, (Barker et al, 2016; Niederkrotenthaler & Sonneck, 2007) adherence to media guidelines for the reporting of suicide appears to be improving in key areas in Ireland. This study has identified that the use of sensationalised and inappropriate language to describe the event or person is relatively low in Ireland (11.6%) when compared with research in other countries which ranges from 45% in Slovenia (Roskar et al, 2017) to 21% in the United Kingdom (Pitman & Stevenson, 2015). Furthermore, media articles in Ireland rarely included photographs (4.2%) in comparison with international findings which range from 57.5% in China (Fu & Yip, 2008) to 12.9% in Austria (Niederkrotenthaler et al, 2010). Moreover, the media in Ireland seldom reported location (2.4%), with lower rates than India (80%; Chandra et al, 2014), Slovenia (65%; Roskar et al, 2017), the U.S (58%; Tatum et al, 2010), and Austria (13.3%; Niederkrotenthaler et al, 2010), and no information regarding a suicide note was disclosed in any of the articles compared to 14% in India (Chandra et al, 2014) and 4.8% in Austria (Niederkrotenthaler et al, 2010). Placement of reports on the front or prominent pages in newspapers (9.5%) was also moderate in Ireland but was slightly higher than that in Austria (3.2%; Niederkrotenthaler et al, 2010) and the U.S (6%; Tatum et al, 2010), but lower than Australia (16.9%; Pirkis et al, 2002) and India (32%; Chandra et al, 2014).

These findings indicate that the quality of media reporting is improving in these important areas, and may reflect the positive impact of the guidelines in alleviating stigma and reducing distress for bereaved family members and friends. Moderate image publishing, appropriate placing of stories and limited reference to location and content of a suicide note is a positive development as inappropriate imagery, content, and placement can influence vulnerable readers and extensive media reporting of a location may attract vulnerable individuals to so called suicide 'hot spots', with the intention of taking their own life (The Samaritans, 2013; Reisch & Michel, 2005). It must be noted, however, that in this instance all four cases involved death by suicide at the individuals place of residence, and a suicide note was only present in one case.

Nevertheless, important challenges remain. Nearly all articles (99.2%) were not in compliance with at least one media guideline and 58.9% of articles were found to breach 3 or more guidelines. This is higher than the 86.9% of online articles found to be non-compliant with at least one of the Samaritans guidelines recently reported in the United Kingdom (Utterson et al, 2017). This suggests that a widespread lack of awareness of the guidelines is still apparent and indicates that guidelines need to be positively and proactively re-enforced. Indications that articles were more likely to breach the media guidelines at the end of the reporting period than at the beginning add weight to this requirement.

Of particular note, this study has identified that three out of every four articles (75.8%) failed to include information on support services, more than half of articles did not refer to wider issues when reporting a death by suicide (53.8%), and only 5.3% of articles examined, contained accurate statistics and credible representation of the scale of the problem. Moreover, almost half of articles screened (48.3%) were found to include an over-emphasis of collective community grief and mourning following a death by suicide. Details such as support websites and helpline numbers are vital to facilitate help-seeking among readers who are at risk of suicide (WHO, 2017; WHO, 2014; The Samaritans, 2013). The Irish findings are in line with research in other countries which range from 97% in India and the United States (Chandra et al, 2014; Tatum et al, 2010) to 87% in the United Kingdom (Pitman & Stevenson, 2015). The media has an important role in this regard, and can help reduce the risk of suicide by promoting help seeking behaviour (Barney et al, 2009; Wright et al, 2007).

Similarly, failure to refer to wider issues when reporting suicide and failure to include accurate statistics are of concern. Even though lack of reference to wider issues was lower than other countries such as Slovenia (59%; Roskar et al, 2017), Austria (81% ; Niederkrotenthaler et al, 2010), India (84%; Chandra et al, 2014) and the United States (88%; Tatum et al, 2010), this is still a significant concern as reference to wider issues such as mental health status, service use history, bereavement and self-harm is paramount in order to provide the general public with a better understanding of the circumstances of the death and the topic of suicide in general (WHO, 2017; WHO, 2014; The Samaritans, 2013).

Accurate statistics and credible representation of the scale of the problem within a particular community or area, equally, are important to inform the reader (The Samaritans, 2013). Misinformation in this regard can have a harmful and distressing effect on communities. An overemphasis on community grief, additionally, may suggest

that people are honouring and normalising the suicidal behaviour (Gould et al,1988) rather than mourning a death. Guidelines indicate that reporting suicide as a tragic event and avoidable loss is more beneficial in preventing further deaths (The Samaritans,2013). Irish non-compliance relating to community grief was significantly higher than reported in the UK (27%; Pitman & Stevenson, 2015), and although this may be aligned to the circumstances of the specific cases, increased adherence to this guideline is needed.

Other areas of concern include a lack of adherence to media guidelines surrounding what may have caused the suicide (29.1% of articles) and the inclusion of quotations from bereaved family members (25.9% of articles). A similar trend regarding monocausality has been reported in Austria (29.7%; Niederkrotenthaler et al, 2010), and a much higher violation of this media guideline has been reported in India (61%; Chandra et al,2014).

Suggestions on what may have contributed to the fatal event such as job loss, breakdown of a marriage or financial debt should be avoided because it may lead to individuals identifying with a person who has died, or with their circumstances and consider taking a similar course of action (The Samaritans,2013). Reporting on potential causes may also increase distress among bereaved family and friends (Chapple et al, 2013). Findings on the Irish media's inclusion of quotations were consistent with those reported in Australia (18%; Pirkis et al,2002).

Use of the term 'committed' in the headline (20.1%), reporting details of the method of suicide (19.9%) and time of transition (17.9%) were often mentioned. One in five articles contained inappropriate terminology in the headline, excessive detail of the means of suicide and mentioned the specific time of year. Findings in Ireland regarding inappropriate wording in headlines are similar to Austria (13.9%; Niederkrotenthaler et al, 2010), India (23%; Chandra et al,2014) and Australia (29.5%; Pirkis et al,2002), and markedly lower than Slovenia (43%; Roskar et al, 2017), the U.S (50%; Tatum et al, 2010) and China (80.5%; Fu & Yip,2008). Non-compliance in Ireland in relation to method corresponds with research in Austria (21.5%; Niederkrotenthaler et al, 2010), however, the rates of non-compliance in India (89%; Chandra et al,2014), Slovenia (79%; Roskar et al, 2017), the US (56%; Tatum et al, 2010), Australia (49.6%; Pirkis et al,2002) and the UK (38%; Pitman & Stevenson, 2015) were considerably higher.

Despite the low level of non-compliance with regard to reporting details of the suicide method when compared with other countries, one in five articles is still a significant concern. The imitative and 'copycat' effects of reporting of method of suicide are well-known (Fink et al, 2018; Koburger et al 2015; Hegerl et al, 2013; Ladwig et al,2012; Halgin & Whitbourne 2006; Reisch & Michel,2005). Accounts or depictions reported in the media, such as a description of a ligature used or specifying drugs taken in an overdose, can influence at risk individuals and provide them with a plan to take a similar course of action using the same method (WHO,2017; WHO,2014; The Samaritans,2013). This is particularly applicable in cases where an uncommon or previously unknown method has been used, as one instance of intense media coverage of a novel method can rapidly increase the incidence of suicide by that method (Lee et al,2014; Chang et al,2010). In addition, citation of a specific time of year can influence an individual's train of thought and should not be highlighted (The Samaritans,2013). This was apparent in one of the cases which occurred two weeks before Christmas, a time of increased familial distress.

Strengths and limitations

The study examined changes in media reporting relating four cases of suicide over a period of three years and three months. Evaluation was conducted using a systematic approach using standardised procedures. In Ireland, this is the first systematic study of the quality of media reporting of suicide and adherence to guidelines, and one of few international studies in this area.

The study analysed newspaper articles only. Although many of the articles were disseminated online and in print, it would be beneficial to specifically examine other media sources. Due to the ever increasing influence and relevance of the internet and social media, it is necessary to obtain greater insight into the potential risks and benefits of the internet.

Coding was based on four researchers' (AS, EC, BW, T'OR) interpretation of the media guidelines and thus increases the validity and reliability of the study. However, correspondingly, articles referred were based on the expertise of media monitors at Headline. These individuals are experienced and highly qualified; nevertheless, it is possible that some articles could have been missed.

Given that this study analysed data from September 2009 to December 2012, an analysis of articles in the interim period is necessary.

Future research

The emergence of the internet and social media as platform for news distribution, requires further examination to obtain greater insight into potential risks and benefits. Research indicates that social media sites can reach large numbers of otherwise hard-to-engage individuals including young people (Robinson et al,2016; Carew et al, 2014). As a result, it may allow others to intervene following expression of suicidal behaviour (Robinson et al,2016), provide support and information on coping strategies for vulnerable individuals (Daine et al,2013), and aid with the delivery of therapy and outreach services (Marchant et al,2017).

However, social media use has been found to be associated with risk of self-harm, suicidal ideation, depression, and the possibility of contagion (Robinson et al, 2016; O'Connor et al,2014). Furthermore, it can 'normalise self-harm', hinder professional help-seeking, expose highly lethal methods of self-harm and assist cyberbullying (Marchant et al,2017; Daine et al,2013; Hagihara et al, 2012). Additional in-depth interdisciplinary research into adherence to online media guidelines by digital platforms is necessary (WHO,2017).

The quality of media reporting of murder-suicide also warrants further research. Analogous with most other countries, incidences of murder-suicide are rare in Ireland, yet since 2004, there have been at least 23 cases (National Suicide Research Foundation, 2016). The impact of these events can be devastating on families and communities and extreme caution when reporting cases of murder-suicide is required, particularly with regard to the method of suicide.

Conclusion

Adherence to media guidelines on reporting suicide in Ireland improved in key areas from September 2009 until December 2012. However, important challenges remain, in particular with the potential dangers associated with the emergence of social media as a platform for news distribution, and the difficulties in regulating such a vast amount of information (Robinson et al, 2016; Daine et al, 2013). Increased monitoring by media monitoring agencies such as Headline, regulators and government departments is required (Biddle et al, 2017).

Our findings suggest that the media guidelines need to be positively reinforced and implemented on an on-going basis, particularly, with regards to increasing inclusion of appropriate support services for people at risk of suicide, ensuring appropriate references to wider issues, and minimising reporting of community grief.

Additional mechanisms of enforcement are necessary, and implementation of guidelines should be conducted using a pro-active approach and as part of the curriculum of journalists and editors. In line with international standards (Maloney et al, 2013), the inclusion of guidelines for the reporting of suicidal behaviour in press ethics codes for journalists warrants consideration. Concurrent with the emergence of social media and the internet as platforms for news distribution, in-depth interdisciplinary research into adherence to online media guidelines by digital platforms is recommended.

As stipulated in a comprehensive world-wide review in 2010 (Pirkis & Blood, 2010), media censorship is not necessary, rather responsible and considerate media reporting by media agencies is warranted. The media have a primary role to play in increasing awareness of suicide as a public health issue and spreading the message that suicide is preventable and support services are available (WHO, 2017; WHO, 2014; The Samaritans, 2013).

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Conflict of Interest

The authors declare no potential conflicts of interest with respect to the research, authorship and/or publication of this article.

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