

Submission to IPSO's public consultation to the Editors' Code of Practice – Dr Lucy Biddle, Professor David Gunnell, Dr Dee Knipe and the Bristol University SASH (Suicide and Self-harm) Research Group.

Summary of recommendations

Clause 5:

- Is amended to state there should be no reporting of methods of suicide.
- Explicitly instructs journalists to exercise caution in referencing online content or re-publishing social media posts of the deceased
- Stipulates that sources of support should be included in all articles discussing the topic of suicide.

Clause 2:

- Publication of photographs of the individual who has died, without the permission of next of kin, should be avoided. Even when permission has been obtained, repeated publication is unhelpful

We are academics at the Bristol Medical School, University of Bristol, with a long-standing record of conducting high quality research in the field of suicidal behaviour and suicide prevention. An important strand of our research activity has addressed the impact of media reporting on suicidal behaviour both at an individual and societal level. We therefore welcome the opportunity to submit the following evidence to this public consultation on the Editors' Code of Practice.

An international body of research shows that media reporting of suicide is associated with an increase in suicide rates. A recent example of this is the death of celebrity Robin Williams. In the US, increased media reporting of his suicide was paralleled by a 10% increase in suicide rates (over 1800 additional suicide deaths) in the 4 months after his death. A disproportionate amount of this increase was in suicides using the same method as Robin Williams (Fink et al, 2018).

Earlier this month, the British Medical Journal published the most comprehensive review of research evidence examining the association between media reporting of suicide and suicide rates (Niederkröthenthaler et al, 2020). This synthesised findings from 31 studies and provides an estimate of the potential effects of reporting. *On average, suicide rates increased by 13% in the weeks following media reporting of a celebrity suicide.* In our accompanying editorial we estimated that in the UK, in 2018, this would equate to an extra 70 deaths by suicide. Such increases occur through a number of mechanisms including identification with the deceased (contagion) and normalisation of suicide as a solution to adversity.

Niederkröthenthaler et al's publication makes a strong case for new regulation around suicide reporting. Based on this and other evidence we recommend that **clause 5 is amended to state there should be no reporting of methods of suicide.**

Reporting of a method can lead to this becoming cognitively available to individuals – that is appearing within the individual’s mind as a ‘doable’, effective, and acceptable method of suicide. Niederkrotenthaler et al show that reporting a celebrity’s method of suicide leads to a 30% increase in deaths using the same method. This is even more significant if the method involved is a high lethality method since the chance of survival is reduced. Our own research, including with individuals who have made a near-fatal suicide attempt, documents clearly many instances where the individual’s choice of suicide method was determined by having seen this method reported in the media (Biddle 2012). Reporting a method presents this as a possibility, irrespective of the level of detail provided. The accounts of our participants demonstrate how, once made cognitively available in this way, further instructions for implementing a suicide method are accessed with ease online (Biddle 2018). This effect was seen to apply to both celebrity and non-celebrity reports of suicide.

“I tried to um kill myself with carbon monoxide. I set a barbecue up in the garden shed. Why did I do that? I read that people had tried to kill themselves or succeeded in killing themselves with carbon monoxide... don’t get me wrong, I don’t go seeking chat rooms or news rooms, it’s just the BBC website and trawling the news - this happened, that happened. I’m not really into negative surfing in the sense of looking for trouble like that but um you just pick up snippets in the news. It may even have been in the local newspaper...

Interviewer: Do you think we shouldn’t report on things like methods that people use?

I think um. ‘so and so killed themselves while the balance of the mind was disturbed or whatever’. It doesn’t, you don’t need to say how they killed themselves, which is may be where they draw the line... you could argue that what I tried to do was a copycat – I’d read about it”

Participant quotation, Biddle et al 2012

Media reporting of emerging or ‘novel’ methods of suicide is also problematic as this can lead to the uptake of new methods within a society, for instance the use of charcoal burning in Taiwan (Chen et al 2016) and South Korea (Chen 2014). Research evidence shows an increase in suicide rates in such instances, not substitution of methods. This of particular concern where the new method has high lethality.

We also recommend that journalists are ***explicitly instructed to exercise caution in referencing online content or re-publishing social media posts of the deceased*** since the online world can pose a hazardous environment for distressed individuals, particularly where this includes unmoderated suicide-related dialogue and exchange.

Counterbalancing the risks of media reporting of suicide, it is notable that reporting on how individuals have overcome suicidal crisis and signposting routes to help can have a beneficial effect and contribute to efforts to prevent suicide (Niederkrotenthaler et al 2010). On this basis, we recommend that ***clause 5 stipulates that sources of support should be included in all articles discussing the topic of suicide.***

We have worked closely with the Bristol Post over several years and they often use the following wording at the end of articles about suicide: *“Most people who are thinking of taking their own life have shown warning signs beforehand. These can include becoming depressed, showing sudden changes in behaviour, talking about wanting to die and feelings of hopelessness. These feelings do improve and can be treated. If you are concerned about someone, or need help yourself, please contact the Samaritans on 116 123.”* see <http://www.bristolpost.co.uk/three-first-year-students-at-bristol-university-have-committed-suicide-in-the-last-few-weeks/story-29926008-detail/story.html>

This is an example of good practice, and if this could be highlighted in the guidance, it may help save lives.

In relation to clause 2 on Privacy, we would comment that the publication of photographs of a person who has died by suicide and the location of the scene of death may cause considerable upset to friends and family members of the deceased. This particularly seems to occur when there has been a cluster of suicide deaths. Photographs of those who have previously died are often repeatedly published following each new death. The photos are often obtained via social media without the consent of family members. This may trigger/re-awaken memories of events that close friends and relatives were coming to terms with, adding to their grief. We thus recommend that **publication of photographs of the individual who has died, without the permission of next of kin, should be avoided. Even when permission has been obtained, repeated publication is unhelpful.**

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