**PROMOTING RESPONSIBLE PORTRAYAL OF SUICIDE: LESSONS FROM THE UK**

**AND THE REPUBLIC OF IRELAND**

**Lorna Frasera, Lisa Marzanob, & Keith Hawtonc**

a Samaritans; bMiddlesex University; c Centre for Suicide Research, University of Oxford

***Summary***

Promoting responsible portrayal of suicide is an important priority in national suicide prevention strategies around the world. Samaritans, a suicide prevention charity in the UK and Republic of Ireland, has extensive experience of achieving this policy objective in practice and is the recognised lead organisation on the subject for UK media.

Over the years, this has involved a number of proactive initiatives to raise awareness and educate the industry, at all levels; lobbying for change in media regulation; careful and ongoing monitoring and analysis of media reports of suicidal behaviour (on average 6,000 articles per year); and extensive work with the media and key stakeholders to improve coverage, not least in relation to high profile stories and programmes.

In this chapter, we discuss and reflect on the potential of this multi-level approach to encouraging responsible media portrayal of suicide. Drawing on case examples, we illustrate what can be achieved through this strategy, highlighting key challenges and successes, as well as emerging concerns for research, policy and practice.

***Promoting Responsible Portrayal to Save Lives: A Multi-Strand Approach***

In the UK and Republic of Ireland more than 6,000 people take their own lives each year, with many thousands more attempting suicide (Office for National Statistics, 2016). Samaritans, founded in 1953, provides a 24-hour helpline service across the UK and ROI for people who are struggling to cope with life. This service is delivered by volunteers who respond to more than 5.3 million calls for help each year, from the charity’s 201 branches.

Because of the proven link between sensationalist or detailed coverage of suicide and imitative behaviour (Sisask & Värnik, 2012), Samaritans initiated working proactively with UK media on the portrayal of suicide over two decades ago, to improve standards of reporting and reduce the likelihood of media coverage influencing imitative suicidal behaviour.

The need to promote responsible portrayal of suicidal behaviour in the media is a core part of the Government’s suicide prevention policy in England and the equivalent strategy in the Republic of Ireland, as well as the suicide prevention strategies of the devolved administrations in Wales, Scotland and Northern Ireland (see e.g. Department of Health, 2012). Samaritans’ approach in this context focuses on developing and maintaining good relationships with the media, to enable cooperation and constructive dialogue to raise awareness of the impact inappropriate reporting can have on vulnerable audiences. In line with international guidelines (Pirkis et al., 2006), this approach seeks to promote accurate, responsible and ethical reporting; not censorship. This work supports Samaritans’ vision that fewer people die by suicide.

*Identifying and Promoting Best Practice*

There are a number of strands to this area of suicide prevention work and underpinning all of this is Samaritans’ *Media Guidelines for Reporting Suicide* (2013)*.* Thisis a comprehensive best practice guide, providing information and advice on how to cover the topic of suicide sensitively and responsibly. The first edition of this guidance was published in 1994. Samaritans’ guidelines are widely recognised and used across the UK media industry as a whole. The current edition was developed following wide consultation with academic experts on suicide, the media and the regulatory bodies.

New to the current edition of Samaritans’ *Media Guidelines for Reporting Suicide* is the addition of a suite *of supplementary factsheets. These* provide quick-reference guidance for media across a range of mediums (e.g. digital, broadcast and drama) and covering a range of specific topics, including railway incidents, murder-suicides and how to work with bereaved families in the aftermath of a suicide. Journalists can quickly refer to these more concise documents when reporting on any of these issues, for specific guidance.

Samaritans has also now published a *Guide for Coroners in England* to support them in their dealings with the press in relation to inquests. In England inquests are generally held as open hearings in a Coroner’s court. Therefore journalists are able to attend these and report on the case. Due to the nature of this type of investigation inquest hearings do present some unique challenges. The level of detail which is covered during an inquest, particularly in relation to establishing the cause of death, can lead to potentially harmful information being published in media reports (e.g., in 2012-15 the proportion of inquest stories rated by our team as potentially concerning was significantly higher than for reports published pre-inquest (21% vs. 16%) (data available on request)). This has been particularly problematic with cases involving new, or lesser known, suicide methods.

There have also been a number of difficult cases where a death has occurred while the person was under the care of the state - in a children’s home, in psychiatric care or in custody. In complex cases such as these an appropriate balance between raising a matter of legitimate public interest on the one hand, and negatively influencing the behaviour of vulnerable audiences on the other, can be difficult to achieve.

*Working with Media Regulators*

Over the years Samaritans has developed good working relationships with the UK’s media regulatory bodies. These include: the Independent Press Standards Organisation (IPSO), Ofcom – the broadcast regulator, the British Board of Film Classification (BBFC) and the Advertising Standards Authority (ASA). All of these bodies have been cooperative in working constructively with Samaritans to encourage responsible coverage of suicide.

In England, mainstream media regulation is divided by print and broadcast; The Ofcom Broadcasting Code for broadcast and IPSO enforces the Code of Practice, framed by the Editors’ Code of Practice Committee, for print media. In 2006, following the submission of evidence by Samaritans and other groups to the Code Committee that overt description of suicide by a particular method may lead to increases in actual suicidal behaviour involving that method (e.g., Ashton, & Donnan, 1981; [Etzersdorfer](http://www.ncbi.nlm.nih.gov/pubmed/?term=Etzersdorfer%20E%5BAuthor%5D&cauthor=true&cauthor_uid=16006399), [Voracek,](http://www.ncbi.nlm.nih.gov/pubmed/?term=Voracek%20M%5BAuthor%5D&cauthor=true&cauthor_uid=16006399) & [Sonneck](http://www.ncbi.nlm.nih.gov/pubmed/?term=Sonneck%20G%5BAuthor%5D&cauthor=true&cauthor_uid=16006399), 2001, 2004; Veysey, Kamanyire, & Volans, 1999; Hawton et al., 1999), a new sub-clause 5(ii) was added to England’s Editors’ Code of Practice:

Clause 5 (Intrusion into grief or shock) of the Editors’ Code of Practice read as follows:

*i) In cases involving personal grief or shock, enquiries and approaches must be made with sympathy and discretion and publication handled sensitively. This should not restrict the right to report legal proceedings, such as inquests.*

*and*

*ii) When reporting suicide, care should be taken to avoid excessive detail about the method used.*

Following further revision to the code in January 2016 suicide reporting is now included as a stand-alone clause (5) and the risk of influencing imitative behaviour has been incorporated. The revised code now states that “*When reporting suicide, to prevent simulative acts care should be taken to avoid excessive detail of the method used, while taking into account the media's right to report legal proceedings.”*

**Ofcom’s code for broadcasters also now covers the issue of contagion, its rule 2.5 was updated in July 2015 and states:**

***This rule reflects a continued concern about the impact of real or portrayed suicide, and self-harm, on those whose minds may be disturbed. Whilst it is always difficult to prove causality, various studies have shown that there may be a short-lived increase in particular methods of suicide portrayed on television. Broadcasters should consider whether detailed demonstrations of means or methods of suicide or self-harm are justified.***

Samaritans has also carried out some recent work with the Press Council of Ireland on suicide reporting, requesting the addition of a new clause advising the press to avoid inclusion of excessive details of suicide methods. This was added to its Code of Practice in June 2015.

Approaching the topic of suicide is clearly a challenging area where journalists must balance the pressure to report ‘of the moment’ stories which are in the public interest with the responsibility not to publish potentially harmful information, or intrude into the grief and shock of those affected. The existence of a code specific to coverage of suicide raises the importance of approaching this complex topic responsibly and supports Samaritans’ work in this area.

*Monitoring Media Reports of Suicide*

On a daily basis Samaritans monitors press and online news reporting of suicidal behaviour (including suicide and attempted suicide) in national, regional and local publications, assessing around 6,000 articles each year. The coding frame used is modelled on previous research in Australia (Pirkis et al., 2009), and records identifying information (e.g., the name of the specific newspaper and article title), descriptive information (e.g., the date of the article, details on its content and genre), as well as quality ratings for each item, using a set of dimensions that operationalise criteria in media guidelines (e.g. whether the article includes excessive details of the method/s used, inappropriate language, and details of support services and organisations).

This monitoring activity serves a dual purpose. First, it provides valuable data for analysis, to identify trends in reporting over time and continuing to inform Samaritans’ work in this area. For example, comparisons of these data with official statistics (e.g. Office for National Statistics publications and online data) and other scientific evidence (e.g. reports of ‘psychological autopsy’ studies (Cavanagh et al., 2003))enable examination of over- and under-reporting of suicidal behaviour involving particular groups (including by gender and age) and method used for suicide (e.g. rare vs. common methods, jumping and railway suicides), over time and in different types of media.

In addition, careful and ongoing monitoring of media reports of suicidal behaviour enables collaborative working with the press to ensure that the detail reported about a suicide is safe, without unduly affecting the freedom of the press. For example, in cases where a suicide has been poorly reported, this can in part be mitigated by the removal of detailed, potentially harmful content online, to reduce the risk of ongoing coverage influencing imitative behaviour.

*Anticipating and Responding to Problematic Press Coverage*

When potentially harmful content is identified, Samaritans makes direct contact with editors to request amendments to online stories. Many media outlets are seemingly receptive to Samaritans’ approach and respond positively to suggestions to amend articles. Indeed, **Samaritans’ experience is that media professionals** are increasingly aware of the risks and the role the media can potentially have in influencing imitative behaviour. **We have found editors, by-and-large, to be receptive to working with us** to increase their understanding of the issues surrounding suicidal behaviour and to raise the standard of how this is covered. We have witnessed concerted efforts by the press to achieve this and in recent years have seen a marked improvement in media portrayal of suicide (discussed below).

Despite substantial progress, there are still occasions when the press clearly struggles to rein itself in collectively. This is usually when a suicide involves the death of a well-known public figure or because it involves a particularly newsworthy element – such as a suicide pact or cluster, or a method that is unusual or new to the UK.

News coverage of such cases tends to follow a regular pattern of initial widespread reporting of the incident as the story breaks, often placed on front pages and sensational in tone, fuelled by increased pressure to cover the story quickly. Numerous photographs of the deceased are included and details of the suicide method often appear in headlines. This is typically followed by intense media speculation of probable causes over the subsequent days and weeks. Following the initial flurry of intense media activity, Samaritans’ experience is that there is often a willingness by the media to engage and take steps to improve how a story is being covered, when made aware that the reporting may have a harmful effect.

In cases where a suicide is likely to attract widespread, potentially *problematic*, press coverage Samaritans will immediately publish a confidential media briefing, reminding the press of the need to report responsibly and providing concise and case-specific advice. These briefings were first initiated by the charity in 2009 and are issued relatively infrequently, approximately only half a dozen per year. Samaritans limits publication in this way so as not to diminish the impact when there is a compelling need to brief the media, to effect change in how a story is being covered.

Recent examples of Samaritans’ confidential media briefings include:

* The death of Mick Jagger’s partner, L’Wren Scott, in March 2014 - Samaritans received over 3,000 unique visitors to the web page of its media briefing for this case.
* The death of Robin Williams’ in August 2014. Following a live press conference by the US Coroner, which included a very detailed description of the method of hanging used, some UK news stories reported potentially harmful details.
* The attempted suicide of ex-footballer Clarke Carlisle, reported in 2015.

**Our monitoring activity suggests** that these media briefings do affect change in the tone and content of reports, influencing subsequent coverage and ultimately reducing the risk of news coverage influencing imitative behaviour.

In cases where there is a risk of a cluster of suicides forming in a particular location, Samaritans works closely with local media outlets, alerting them of the situation and requesting that they refrain from reporting the method of suicide in great detail and from linking the suicides together. There is of course a risk here of potentially increasing coverage by alerting the media to a situation which they may not have been aware of. However, Samaritans’ view is that, on balance, proactive intervention is more likely to prevent inappropriate coverage.

*Media Advisory Service*

Much of the work described above is of a reactive nature, including contacting media outlets in response to concerns over coverage. A more proactive element of this work is the media advisory service Samaritans provides to journalists, offering bespoke guidance ahead of publication and transmission. This has proved a very effective way of preventing harmful content appearing in articles and programmes in the first place. This advice service spans all media from mainstream news to documentaries, dramas and soaps.

There is a growing literature suggesting that appropriate, responsible portrayal of suicide in the media can play a vital role in preventing suicides (the ‘Papageno effect’ (Niederkrotenthaler et al., 2010)). Programmes can help educate the wider public about issues, such as the type of problems which may lead to a person becoming vulnerable and the signs which may indicate they are struggling to cope, and also encourage help-seeking behaviour by promoting the benefits of talking. However, achieving this in practice can be a very delicate balance to strike, perhaps particularly when dealing with such a complex topic in a drama.

To support this important but challenging task, Samaritans’ media advisor works proactively with researchers, script writers, producers and directors, advising on scripts and scenes to support programme makers in creating content that is appropriate and as safe as possible for audiences. In addition, Samaritans provides training for programme makers and editorial teams. These sessions offer a useful opportunity for media professionals to learn about the key issues surrounding suicidal behaviour and recommended safe approaches to this. They also allow for valuable discussion around the challenges faced by journalists when covering this complex topic, and are often delivered with the support of an academic expert on suicide.

In recent years we have seen a significant increase in programme makers using this service, which clearly demonstrates an awareness of the potential risks and a willingness to approach the topic responsibly. By way of illustrating the nature and potential impact of such collaborative work with programme makers, some recent examples are described below.

|  |
| --- |
| ***EastEnders***  One of the UK’s most popular soap operas, the BBC’s EastEnders, has been running since the mid-eighties with viewing figures now reaching over eight million. Over the years EastEnders has run a number of suicide-related storylines and its production team regularly works with Samaritans for guidance.  In January 2015 *EastEnders* approached Samaritans with a draft script which included a lead character’s suicide attempt. The producers were keen to develop this as safely as possible and shared their script with Samaritans for advice.  Character, Kat Moon, was to attempt to end her life by use of an overdose. This formed part of a longer running storyline where the character had been struggling to come to terms with her experience of childhood sexual abuse.  Kat’s story contained potential for identification with audiences, especially as she is a long-standing character of the soap with a loyal following. Her history of abuse was thought to increase the risk of identification among viewers who may relate to this experience.  Samaritans’ media advisor worked with EastEnders’ researchers and scriptwriters on the storyline. This advice included:   * Not identifying the type of medication used or giving quantities or details of how this drug was obtained; * Avoiding romanticising the scenes where the character’s husband discovers Kat in a semi-conscious state; * Not showing immediate recovery after an overdose, and sticking with the reality of this type of suicide attempt by including a follow-up psychological assessment being carried out.   These recommendations were incorporated into revised scripts. Samaritans’ helpline number was also given at the end of the episode via the BBC Action Line service, signposting any viewers who were affected by the programme to an immediate source of support. |

|  |
| --- |
| ***Panorama: A Suicide in the Family***  Producers of a Panorama documentary, Keo Films, contacted Samaritans late in 2014 for advice on a programme covering men and suicide, aware that this would require sensitive handling. The programme makers were keen to minimise any risk to viewers.  The aim was to examine why so many middle-aged men kill themselves, explored through the personal journey of the presenter, Simon Jack, BBC Economics Correspondent, who lost his own father to suicide.  Samaritans gave advice around messaging, citing our *Men and Suicide: Why it’s a social issue* report (Samaritans, 2012) and advised on the potential risk areas.  The result was a very powerful film which raised a number of important points, including the potential consequences of suffering in silence and encouraging men to seek help. Sources of support were given at the end of the programme.  *A Suicide in the Family* was shortlisted for the 2015 Mind Media awards. |

|  |
| --- |
| ***Professor Green: Suicide and Me***  During 2015 Samaritans also worked with *Antidote Productions* supporting the development of a BBC documentary aimed at highlighting the issues of male suicide with a younger audience in mind.  The programme was presented by UK rapper Professor Green, aka Stephen Manderson, who lost his father to suicide. The film poignantly examined some of the root causes of suicide, including the psychological impact of loss and the fear among British men of seeking help and talking about emotions.  Stephen’s quest to uncover the truth behind his father’s suicide presented a very personal portrayal of the devastation left behind following a suicide. Sources of support were given at the end of the programme. |

|  |
| --- |
| ***The Clarke Carlisle Story***  Commercial radio station, *Absolute Radio*, contacted Samaritans in February 2015 for pre-broadcast advice on a programme covering a suicide attempt made by ex-footballer, Clarke Carlisle. This was a lengthy interview in which Clarke Carlisle shared his personal emotional struggles, following a number of significant life events, resulting in him attempting to end his life in December 2014.  Aware of the possible risks in covering a suicide attempt and keen to avoid these, Absolute Radio shared their pre-recorded interview piece with Samaritans for review and advice. We recommended a number of edits to the content, all of which were agreed and made.  The end result was a candid, thought-provoking interview highlighting the intensity of suicidal feelings, including the sense of complete hopelessness, demonstrating that this can be overcome. Sources of support were signposted at the end of the programme and listeners were encouraged to seek help if touched by the content.  This programme went on to win a prestigious radio award – ‘*Best Single Programme of the Year’* at the Arqiva Commercial Radio Awards. Absolute Radio included having worked with Samaritans in their award application and this was cited at the awards presentation event. |

This collaborative work with programme makers ordinarily goes on quietly behind the scenes. However when a popular soap storyline made headline news in January 2014, Samaritans’ media advisory service was thrust into the media spotlight. This was the heavily-publicised *Coronation Street* storyline of the suicide of character, Hayley Cropper. Samaritans had worked with ITV’s production team to help limit the risk of this storyline influencing imitative suicidal behaviour. Following the transmission of this episode, in January 2014, Samaritans saw a 30% increase in calls to its helpline.

In developing this work with the media, both in news and non-factual programmes, Samaritans has built excellent working relationships with the BBC’s and ITV’s editorial policy and compliance departments. This has generated opportunities to work collaboratively with news and drama teams, providing expert advice on suicide and self-harm content, ahead of transmission.

Samaritans very rarely takes the route of making formal complaints to the regulators. We believe that the best approach to preventing inappropriate portrayal of suicide is to nurture constructive relationships with the media, providing advice and building understanding about the benefits associated with responsible reporting.Our experience is that journalists and editors appreciate our cooperative and constructive approach, given the complexity of the issues involved. Arguably, a confrontational approach can be counter-productive and therefore best avoided.

***Promising Trends and Future Challenges***

A study of UK journalists carried out shortly after the introduction of the 2006 sub-clause on reporting of suicide in the England’s Editors’ Code of Practice found that many were unfamiliar with relevant guidelines, and less than 1 in 5 reported that their workplace had a policy on suicide coverage (Jempson et al., 2007). Whilst a follow-up study is arguably warranted, our experience is that much has changed in the intervening years. More importantly, our monitoring data suggest some clear improvements in how suicidal behaviour is portrayed in the UK and ROI media. For example, between 2012 and 2015, the percentage of news reports including details of support helplines has increased year on year (from 6% in 2012 to 57% in 2015), whilst the percentage of articles internally rated as potentially concerning (e.g. due to the level of detail provided or because a potential ‘hotspot’ is identified) has dropped from 17% in 2012 to 3% in 2015. It is also worth noting that over this period the proportion of articles rated by our media monitoring team as being of poor overall quality has been consistently low (around 2% of all reports).

Nonetheless, some aspects of current reporting practice remain problematic. For instance, our data shows that the percentage of news headlines which include details of the method(s) used remains high and is increasing (from 21% in 2012 to 32% in 2015), particularly in relation to specific methods (most notably, suicides involving the railways and jumping from a high place), and that the number of articles focusing on incidents involving women (40%) and young people under the age of 25 (33%) remains disproportionate compared to official statistics. Also potentially of note is the observed increase in reports featured on pages 1 and 3 (5% in 2012; vs. 10% in 2015), which may contribute to making suicide more prominent.

In addition, our monitoring data suggest some potentially important changes in how, and where, suicide stories are being reported. For example, in recent years there has been a marked increase in the proportion of online (vs. printed media) suicide news reports (almost 75% in 2015 vs. just over 50% in 2012), and in stories including one or more photographs of the incident, deceased and/or methods/locations involved (a feature in almost all reports in 2015 vs. 66% in 2012). This underscores the need for ongoing research to understand the impact of these changes, if any, on actual suicidal behaviour, and to ensure that relevant guidelines and other initiatives to promote responsible portrayal of suicide remain relevant and up-to-date.

There remain a number of specific challenges, including that:

* New and emerging methods are not sufficiently covered by current media regulation, where minimal detail is enough to influence increases in use (see e.g. Gunnell et al., 2015);
* High profile/celebrity suicides continue to attract unprecedented and sensationalised news coverage, where there is greater risk of unintentionally glamorising suicide (Koburger et al., 2015; Niederkrotenthaler et al., 2012)
* Reports of suicides by young people tend to attract increased media attention and are often more romantically reported, including outpourings of grief and memorials lifted from social media, with intense focus on possible causes (i.e. bullying, pressures of study and relationship breakdown). It is known that young people are more likely to be influenced by what they see and hear in the media (Phillips & Carstensen, 1986) and at increased risk of imitative suicidal behaviour (Haw et al., 2013; Sisask & Värnik, 2012), and that the risk of imitation is accentuated when the coverage is extensive, prominent, sensationalist and/or repeated (Pirkis et al., 2007).

Looking to the future our aim is to focus on developing more proactive opportunities, building on educating the media industry as a whole by widely promoting our media advisory service and training programme. Following developments in the editorial codes in recent years, media coverage appears to have improved and therefore we see very few actual breaches of the codes. However, in their current form these do not protect against media coverage potentially influencing increases in the use of new suicide methods (e.g. helium, disposable BBQs).

We need to build on research in this field to inform this work going forwards and provide evidence for the need to ensure that regulation continues to influence improved coverage of suicide, specifically in relation to preventing the spread of new and emerging methods. More research is also needed to systematically evaluate the impact of such interventions, or combination of interventions, on the nature and quality of media portrayal of suicide, and on actual suicidal behaviour. Ongoing progress in this field is thus unlikely unless organisations promoting the responsible portrayal of suicide continue working in close collaborative partnership with media outlets and regulators, academics, and other key stakeholders, both nationally and internationally.

**Author Information**

**Lorna Fraser**, leading advisor to UK media on the portrayal of suicide, launched the current edition of Samaritans’ *Media Guidelines for Reporting Suicide.* Combining her experience as media professional with her clinical work as a psychodynamic therapist, she manages this area of the charity’s work, supporting media to improve standards and reduce the risks of media coverage influencing suicidal behaviour.

**Lisa Marzano**, PhD, is a Senior Lecturer in Psychology at Middlesex University, specialising in suicide and self-harm research. She works closely with Samaritans on the ongoing monitoring and analysis of media reports of suicidal behaviour in the UK, and has authored a number of publications in the field of suicidology.

**Keith Hawton**, DSc, FMedSci, is Professor of Psychiatry at Oxford University Department of Psychiatry, UK, where he is Director of the Centre for Suicide Research. His research encompasses epidemiology, causes, treatment and prevention of suicidal behaviour, and has resulted in over 500 publications and a number of international awards. His team has had a longstanding interest in suicidal behaviour and the media.

**References**

Ashton, J.R., & Donnan, S. (1981). Suicide by burning as an epidemic phenomenon: an analysis of 82 deaths and inquests in England and Wales in 1978-79. *Psychological Medicine, 11*, 735-739.

Cavanagh, J. T., Carson, A. J., Sharpe, M., & Lawrie, S. M. (2003). Psychological autopsy studies of suicide: a systematic review. *Psychological Medicine*, *33*, 395-405.

Department of Health (2012). *Suicide Prevention Strategy for England.* London: Department of Health.

Etzersdorfer, E., Voracek, M., & Sonneck, G. (2001). A dose-response relationship of imitational suicides with newspaper distribution. *Australian and New Zealand Journal of Psychiatry, 35,* 251.

Etzersdorfer, E., Voracek, M., & Sonneck, G. (2004). A dose-response relationship between imitational suicides and newspaper distribution. *Archives of Suicide Research, 8,* 137-145.

Gunnell, D., Coope, C., Fearn, V., Wells, C., Chang, S. S., Hawton, K., & Kapur, N. (2015). Suicide by gases in England and Wales 2001–2011: evidence of the emergence of new methods of suicide. *Journal of Affective Disorders*, *170*, 190-195.

Haw, C., Hawton, K., Niedzwiedz, C., & Platt, S. (2013). Suicide clusters: a review of risk factors and mechanisms. *Suicide and life-threatening behavior*, *43*(1), 97-108.

Hawton, K., Simkin, S., Deeks, J., O'Connor, S., Keen A, Altman DG, et al. (1999). Effects of a drug overdose in a television drama on presentations to hospital for self-poisoning: time series and questionnaire study. *British Medical Journal, 318*, 972-977.

Jempson, M., Cookson, R., Williams, T., Thorsen, E., Khan, A., & Thevanayagam, P. (2007). *Sensitive Coverage saves lives: Improving Media Portrayal of Suicidal Behaviour.* London: National Institute for Mental Health in England.

Koburger, N., Mergl, R., Rummel-Kluge, C., Ibelshäuser, A., Meise, U., Postuvan, V., ... & Hegerl, U. (2015). Celebrity suicide on the railway network: Can one case trigger international effects? *Journal of Affective Disorders*, *185*, 38-46.

Niederkrotenthaler, T., Fu, K. W., Yip, P. S., Fong, D. Y., Stack, S., Cheng, Q., & Pirkis, J. (2012). Changes in suicide rates following media reports on celebrity suicide: a meta-analysis. *Journal of Epidemiology and Community Health*, *66*, 1037-1042.

Niederkrotenthaler, T., Voracek, M., Herberth, A., Till, B., Strauss, M., Etzersdorfer, E., ... & Sonneck, G. (2010). Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *British Journal of Psychiatry*, *197*(3), 234-243.

Office for National Statistics (2016). *Suicide in the United Kingdom – 2014 Registrations.* London: Office for National Statistics.

Phillips, D.P., & Carstensen, L.L. (1968). Clustering of teenage suicides after television news stories about suicide. *New England Journal of Medicine*, *315,* 685-689.

Pirkis, J., Blood, R. W., Beautrais, A., Burgess, P., & Skehan, J. (2006). Media guidelines on the reporting of suicide. *Crisis*, *27*, 82-87.

Pirkis J, Burgess A, Blood RW, Francis C. (2007). The newsworthiness of suicide. *Suicide and Life-Threatening Behavior*, 37, 278-283.

Pirkis, J., Dare, A., Blood, R.W., Rankin, B., Williamson, M., Burgess, P., & Jolley, D. (2009). Changes in media reporting of suicide in Australia between 2000/01 and 2006/07. *Crisis, 30,* 25-33.

Press Complaints Commission (2006). *Editors' Code of Practice*. London: Press Complaints Commission.

Press Complaints Commission (2016). *Editors' Code of Practice*. London: Press Complaints Commission.

Samaritans (2012). *Men and Suicide – Why it’s a Social Issue.* Ewell: Samaritans.

Samaritans (2013). *Media Guidelines for Reporting Suicide.* London: Guardian News and Media Limited.

Sisask, M., & Värnik, A. (2012). Media roles in suicide prevention: a systematic review. *International Journal of Environmental Research and Public Health*, *9*, 123-138.

Veysey, M.J., Kamanyire, R., & Volans, G.N. (1999). Effects of drug overdose in television drama on presentations for self poisoning: Antifreeze poisonings give more insight into copycat behaviour. *British Medical Journal*, *319*, 1131.