

Kentucky Guidelines for Suicide Reporting

Suicide prevention and communication experts in Kentucky recognize the profound role of the media in shaping public perceptions of suicide and influencing public safety around suicide.

These guidelines were developed by Sarah Geegan, Ph.D., assistant professor in the University of Kentucky Department of Integrated Strategic Communication, whose research focuses on evidence-based messaging, mental health communication and suicide prevention, and Julie Cerel, Ph.D., professor in the UK College of Social Work, director of the Suicide Prevention & Exposure Lab and an internationally recognized expert in suicide exposure, bereavement and suicide prevention. Together, their work brings expertise in both suicide prevention research and strategic communication to help ensure safe, effective public messaging. CC Rhein, an Integrated Strategic Communication major at the University of Kentucky and a Gaines Center for the Humanities Fellow, facilitated the interviews with journalists that formed the basis of this project.

Research shows that language used to describe suicide can influence outcomes such as suicide contagion, defined as "an increase in suicide rates after both nonfictional and fictional stories about suicide."¹

The following guidelines offer advice to help ensure that stories inform the public without unintentionally causing adverse effects (deepening the stigma, triggering grieving loved ones, or—most importantly—contributing to suicide contagion).

For more information or to submit a media request, please visit the [Suicide Prevention and Exposure Lab website](#) or email spel@uky.edu.

Families and loved ones impacted by suicide likely are experiencing overwhelming grief and guilt. They will read your stories.

- Overly sensationalized language or sad photographs have been shown to exacerbate grief.²
- Memorial pages or tributes may appear online. These often are created without family consent.
- Story angles and/or headlines that portray dramatic circumstances (e.g., breakup leads to tragic suicide) tend to oversimplify the information.²
- Experts recommend publishing images that show the victim engaging in life, rather than appearing sad, to show that the person was more than the final awful moments of their life.²
- Experts recommend avoiding including details on the methods of a person's suicide (or attempt).³
- Seeing personal content, such as a suicide note, final text messages or social media posts may be traumatizing to those impacted. It also may oversimplify the circumstances.³
- Each suicide leaves behind entire families and communities like schools or workplaces. Research from Kentucky shows that approximately 135 people are left behind for each death by suicide.⁶

Suicide is a preventable form of death and a serious public health issue. Journalism can inform the public in ways that shift conversations toward prevention.

- Suicide is never the result of just one thing and several underlying causes often influence one's decision to die by suicide.
- The public tends to make assumptions about single causes of suicide (e.g., marriage, career, tragedy).⁴
- Common words and phrases like "without warning" and "inexplicable" fail to convey the complexity of suicide.¹
- This public health issue requires community action and education. Resources exist for those surviving a suicide attempt or coping with loss.

Stigma represents a momentous barrier to suicide prevention.

- Sensationalistic terms like “suicide epidemic” or “skyrocketing suicide rates” may contribute to suicide contagion or stigma. Experts recommend using “increasing rates” instead.¹
- Suicidal ideation does not make people dangerous, nor do mental illnesses (1 in 4 Americans reported poor mental health, according to the CDC).⁵
- Referring to suicide objectively (e.g., “took their life,” “died by suicide,” or “suicide attempt”) is a good practice, according to the International Association for Suicide Prevention.⁵ Suicide is often, unintentionally, associated with criminal behavior, through phrases like “committed suicide” (e.g., committed a crime). Additionally, words like “successful” or “failed” may unintentionally introduce judgment.
- Suicide attempts are not ploys for attention or selfish acts; they result from deep pain and suffering—experiences that should be met with empathy and compassion.

References

1. Hawton, K., & Williams, K. (2002). Influences of the media on suicide. *BMJ*, 325(7377), 1374–1375. <https://doi.org/10.1136/bmj.325.7377.1374>
2. O'Carroll, P. W., et al. (1998). Suicide contagion and the reporting of suicide: Recommendations from a national workshop. *MMWR Recommendations and Reports*. <https://www.cdc.gov/mmwr/preview/mmwrhtml/00031539.htm>
3. Abou Chahla, M. N., Khalil, M. I., Comai, S., Brundin, L., Erhardt, S., & Guillemin, G. J. (2023). Biological factors underpinning suicidal behaviour: An update. *Brain Sciences*, 13(3), 505. <https://doi.org/10.3390/brainsci13030505>
4. Substance Abuse and Mental Health Services Administration. (2023). Key substance use and mental health indicators in the United States. <https://www.samhsa.gov/data/report/2023-nsduh-annual-national-report>
5. International Association for Suicide Prevention. (n.d.). Language guidelines for reporting on suicide. <https://www.iasp.info/languageguidelines/>
6. Cerel, J., Brown, M., Maple, M., Singleton, M., van de Venne, J., Moore, M. & Flaherty, C (2018). How many people are exposed to suicide? Not six. *Suicide and Life Threatening Behavior* <https://doi.org/10.1111/sltb.12450>