Suicide and the Media

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ABSTRACT: Evidence continues to amass on the significant impact of media coverage on suicide. The research literature on the impact of news reports of nonfictional suicides as well as fictional suicide stories is reviewed in order to determine the nature and scope of the influence of the mass media on suicide. The current review, building upon earlier reviews, is limited to English language publications or English translations of articles and/or abstracts. The interactive factors that may moderate the impact of media stories are also reviewed. Such interactive factors include characteristics of the stories (agent), individuals’ attributes (host), and social context of the stories (environment). Recommendations are presented for the reporting of suicide stories, which may minimize the risk of imitative suicides. The media’s positive role in educating the public about risks for suicide and shaping attitudes about suicide is emphasized. In summary, the existence of suicide contagion no longer needs to be questioned. We should refocus our research efforts on identifying which particular story components promote contagion under which circumstances and which components are useful for preventive programming.

KEYWORDS: Behavioral contagion; Imitative suicide; Media coverage of suicide; Prevention of suicide

INTRODUCTION

The media affords the opportunity for indirect transmission of suicide contagion, the process by which one suicide becomes a compelling model for successive suicides.1,2 This means of influence is potentially more far reaching than direct person-to-person propagation. Suicide contagion can be viewed within the larger context of behavioral contagion, which has been described as the situation in which the same behavior spreads quickly and spontaneously through a group.3 Behavioral contagion has also been conjectured to influence the transmission of conduct disorder, drug abuse, and teenage
pregnancy. According to behavioral contagion theory, an individual has a preexisting motivation to perform a particular behavior, which is offset by an avoidance gradient, such that an approach-avoidance conflict exists. The occurrence of suicides in the media may serve to reduce the avoidance gradient—the observer’s internal restraints against performing the behavior. Social learning theory also provides a foundation on which aspects of suicide contagion may build. According to this theory, most human behavior is learned observationally through modeling. Imitative learning is influenced by a number of factors, including the characteristics of the model and the consequences or rewards associated with the observed behavior. Consequences or rewards, such as public attention, may lower behavior restraints and lead to the disinhibition of otherwise “frowned upon” behavior. Last, a public health or infectious disease model of contagion is also useful for a conceptualization of suicide contagion. This model acknowledges the role that the agent, host, and environment play in the overall transmission process. Applying these three classic theoretical models, the current chapter presents available information on the agent (i.e., model), host (i.e., vulnerable individual), and environmental characteristics that may moderate the impact of the media.

The presentation of these interactive factors follows the review of the studies on the impact of nonfictional suicide stories and fictional stories.

**NONFICTIONAL SUICIDE STORIES**

The occurrence of imitative suicides following media stories is largely known as the “Werther effect,” derived from the general impression that Goethe’s novel *The Sorrows of Young Werther* in 1774 triggered an increase in suicides, leading to its ban in many European states. Research on the Werther effect was advanced by the systematic work of Phillips, whose research consistently found a strong relationship between reports of suicide in newspapers or on television and a subsequent increase in the suicide rate. Several studies within the past decade have reported findings that are consistent with the substantial number of earlier studies (see Table 1). This body of research has clearly demonstrated that extensive newspaper coverage of suicide is associated with a significant increase in the rate of suicide. The magnitude of the increase is proportional to the amount, duration, and prominence of media coverage. While most of the studies examined an excess of deaths following the appearance of suicide stories, other early studies examined the decrease in deaths during the cessation of stories, which occurred during newspaper strikes.

Prior to 1990, most of the studies focused on U.S. populations, raising the question of whether the findings could be generalized to other countries. Since 1990, the effect of media coverage on suicide rates has been document-
<table>
<thead>
<tr>
<th>Citation</th>
<th>Country studied</th>
<th>Source of study</th>
<th>Support of imitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barraclough, Shepherd &amp; Jennings (1977)</td>
<td>England</td>
<td>Newspaper (reports of suicide inquests in daily newspaper)</td>
<td>Yes (age-sex specific)</td>
</tr>
<tr>
<td>Blumenthal &amp; Bergner (1973)</td>
<td>USA</td>
<td>Newspaper cessation (no specific articles per se; compared suicide mortality during newspaper strike to periods without strike)</td>
<td>Yes (age-sex specific)</td>
</tr>
<tr>
<td>Bollen &amp; Phillips (1981)</td>
<td>USA</td>
<td>Newspaper (front page suicide stories)</td>
<td>Yes</td>
</tr>
<tr>
<td>Bollen &amp; Phillips (1982)</td>
<td>USA</td>
<td>TV network news (multiprogram suicide stories, i.e., aired on 2 or more networks)</td>
<td>Yes</td>
</tr>
<tr>
<td>Ganzeboom &amp; de Haan (1982)</td>
<td>Netherlands</td>
<td>Newspaper (front page suicide stories)</td>
<td>Trend (nearly significant)</td>
</tr>
<tr>
<td>Horton &amp; Stack (1984)</td>
<td>USA</td>
<td>TV network news (number of seconds of coverage of suicide on 6 o’clock national news)</td>
<td>No</td>
</tr>
<tr>
<td>Kessler, Downy, Milavsky &amp; Stipp (1988)</td>
<td>USA</td>
<td>TV network news (any suicide news report on ABC, CBS, or NBC)</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Kessler, Downy, Stipp &amp; Milavsky (1989)</td>
<td>USA</td>
<td>TV network news (any suicide news report on ABC, CBS, or NBC)</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Littman (1985)</td>
<td>Canada</td>
<td>Newspaper (all suicide-related reports: articles, features, editorials)</td>
<td>No</td>
</tr>
<tr>
<td>Motto (1967)</td>
<td>USA</td>
<td>Newspaper cessation (no specific articles per se; compared suicide mortality during newspaper strike to periods without strike)</td>
<td>No</td>
</tr>
<tr>
<td>Motto (1970)</td>
<td>USA</td>
<td>Newspaper cessation (no specific articles per se; compared suicide mortality during newspaper strike to periods without strike)</td>
<td>Yes (age-sex specific)</td>
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<tr>
<td>Phillips (1979)(^{13})</td>
<td>USA</td>
<td>Newspaper (front page suicide stories in <em>Los Angeles Times</em> and <em>San Francisco Chronicles</em>)</td>
<td>Yes</td>
</tr>
<tr>
<td>Phillips &amp; Carstensen (1986)(^{14})</td>
<td>USA</td>
<td>TV network news (news or feature stories on ABC, CBS, or NBC)</td>
<td>Yes</td>
</tr>
<tr>
<td>Phillips &amp; Carstensen (1988)(^{15})</td>
<td>USA</td>
<td>TV network news (multiprogram suicide stories, i.e., aired on 2 or more networks)</td>
<td>Yes</td>
</tr>
<tr>
<td>Stack (1983)(^{79})</td>
<td>USA</td>
<td>Newspaper/TV network (no articles per se; examined suicide mortality after extensive media coverage of Jonestown mass suicide)</td>
<td>No</td>
</tr>
<tr>
<td>Stack (1984)(^{37})</td>
<td>USA</td>
<td>TV network (number of seconds per month devoted to suicide stories)</td>
<td>No</td>
</tr>
<tr>
<td>Stack (1987)(^{74})</td>
<td>USA</td>
<td>Newspaper (nationally publicized suicide story of a celebrity - separate analyses for front page stories and for number of column inches)</td>
<td>Yes(^{d})</td>
</tr>
<tr>
<td>Stack (1988)(^{92})</td>
<td>USA</td>
<td>Newspaper (front page suicide stories in <em>New York Times</em> and two other papers)</td>
<td>Yes(^{d})</td>
</tr>
<tr>
<td>Wasserman (1984)(^{73})</td>
<td>USA</td>
<td>Newspaper (front page suicide stories in <em>New York Times</em>)</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Since 1990**

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<tbody>
<tr>
<td>Cantor, Tucker &amp; Burnett (letter) (1991)(^{98})</td>
<td>Australia</td>
<td>Newspaper/TV-multimedia (all types of media and word-of-mouth negative publicity about a psychiatry unit experiencing patients’ suicides)</td>
<td>Yes</td>
</tr>
<tr>
<td>Deisenhammer, Kemmler, Fleischhaker &amp; Hinterhuber (1997)(^{16})</td>
<td>Austria</td>
<td>TV network (television report on stress suffered by train engineers due to railway suicides)</td>
<td>Yes</td>
</tr>
<tr>
<td>Etzersdorfer, Sonneck &amp; Nagel-Kuess (1992)(^{17})</td>
<td>Austria</td>
<td>Newspaper (no specific articles per se; examined period following implementation of newspaper guidelines)</td>
<td>Yes</td>
</tr>
</tbody>
</table>

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\(^{d}\): The study by Stack (1987) and Stack (1988) are considered to have conflicting results.

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**TABLE 1. Studies examining media influences on imitative suicides: nonfictional suicide stories (contd)**
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<tbody>
<tr>
<td>Etzersdorfer &amp; Sonneck (1998)(^{18})</td>
<td>Austria</td>
<td>Newspaper (no specific articles per se; examined period following implementation of newspaper guidelines)</td>
<td>Yes</td>
</tr>
<tr>
<td>Fekete &amp; Macsai (1990)(^{19})</td>
<td>Hungary</td>
<td>Newspaper/book/TV/film (extensive publicity following suicide of beauty queen in Hungary)</td>
<td>Yes</td>
</tr>
<tr>
<td>Gundlach and Stack (1990)(^{25})</td>
<td>USA</td>
<td>Newspaper (front-page suicide stories in <em>New York Times</em>)</td>
<td>Yes</td>
</tr>
<tr>
<td>Hassan (1995)(^{20})</td>
<td>Australia</td>
<td>Newspaper (any suicide story—weighted according to its position, size, and contents)</td>
<td>Yes</td>
</tr>
<tr>
<td>Ishii (1991)(^{21})</td>
<td>Japan</td>
<td>Newspaper (any suicide story — total amount of suicide news calculated based on number of headlines and circulation of papers)</td>
<td>Yes</td>
</tr>
<tr>
<td>Jobes, Berman, O’Carroll, Eastgard &amp; Knickmeyer (1996)(^{27})</td>
<td>USA</td>
<td>Newspaper/TV/multimedia (extensive publicity in Seattle following suicide of Kurt Cobain)</td>
<td>No(^{a})</td>
</tr>
<tr>
<td>Jonas (1992)(^{22})</td>
<td>Germany</td>
<td>Newspaper (any story about a suicide of a prominent person)</td>
<td>Yes</td>
</tr>
<tr>
<td>Koepping, Ganzeboom &amp; Swanborn (1989)(^{29})</td>
<td>Netherlands</td>
<td>Newspaper (any story including obituaries)</td>
<td>No</td>
</tr>
<tr>
<td>Martin &amp; Koo (1997)(^{78})</td>
<td>Australia</td>
<td>Multimedia (extensive publicity following suicide of Kurt Cobain)</td>
<td>No(^{a})</td>
</tr>
<tr>
<td>Sonneck, Etzersdorfer &amp; Nagel-Keuss (1994)(^{23})</td>
<td>Austria</td>
<td>Newspaper (no specific articles per se; examined period following implementation of newspaper guidelines)</td>
<td>Yes</td>
</tr>
<tr>
<td>Stack (1990a)(^{34})</td>
<td>USA</td>
<td>Newspaper (front-page suicide stories in <em>New York Times</em> and listed in <em>Facts on File</em> also indicating marital problems)</td>
<td>Yes(^{a})</td>
</tr>
<tr>
<td>Stack (1990b)(^{25})</td>
<td>USA</td>
<td>Newspaper (front-page suicide stories in <em>New York Times</em> and listed in <em>Facts on File</em>)</td>
<td>Yes(^{a})</td>
</tr>
<tr>
<td>Stack (1990c)(^{76})</td>
<td>USA</td>
<td>TV network news (multiprogram suicide stories, i.e., aired on 2 or more networks)</td>
<td>Yes(^{a})</td>
</tr>
</tbody>
</table>
ed in many other countries besides the U.S.—Western countries, including Austria,17 Germany,22 and Hungary,19 Australia,20 and East Asian countries, such as Japan.21,29 While most of the recent studies investigating the impact of nonfictional suicide stories have continued to find an increase in rates of suicide following exposure to media reports, one group of researchers found a significant decrease in rates of suicide following implementation of media guidelines for news reporting by the Austrian Association for Suicide Prevention in 1987.17,18,23 These latter studies are consistent with the earlier ones reporting a decrease in the suicide rate during periods of “blackouts” due to newspaper strikes.31,32

As can be seen in TABLE 1, the vast majority of studies have examined the impact of newspaper coverage of suicide. Fewer studies have examined the association of television coverage and subsequent suicides.11,14,16,26,28,33–37 While earlier findings were equivocal, recent studies support an imitative effect of television news reports on suicide.

### FICTIONAL SUICIDE STORIES

Studies of the effects of fictional stories on suicide have produced varying results, with some indicating a significant effect38–50 and others reporting no association between media reports and subsequent suicides51–55 or equivocal results56,57 (TABLE 2).

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**TABLE 1. Studies examining media influences on imitative suicides: nonfictional suicide stories (contd)**

<table>
<thead>
<tr>
<th>Citation</th>
<th>Country studied</th>
<th>Source of study</th>
<th>Support of imitation</th>
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<tbody>
<tr>
<td>Stack (1991)26</td>
<td>USA</td>
<td>TV network news (multiprogram suicide stories, i.e., aired on 2 or more networks)</td>
<td>Yes(^a)</td>
</tr>
<tr>
<td>Stack (1992)27</td>
<td>USA</td>
<td>Newspaper (front-page suicide stories in at least five of seven newspapers searched)</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Stack (1993)28</td>
<td>USA</td>
<td>TV network news (multiprogram suicide stories, i.e., aired on 2 or more networks)</td>
<td>Yes(^a)</td>
</tr>
<tr>
<td>Stack (1996)29</td>
<td>Japan</td>
<td>Newspaper (front-page suicide stories)</td>
<td>Yes</td>
</tr>
<tr>
<td>Wasserman (1992)30</td>
<td>USA</td>
<td>Newspaper (front-page suicide stories—replicated Stack, 1988)</td>
<td>Yes(^a)</td>
</tr>
</tbody>
</table>

\(^a\)Examined specific type of story (e.g., celebrity status), individual characteristic (e.g., specific age group), or environmental context (e.g., depression, crisis intervention).
TABLE 2. Studies examining media influences on imitative suicides: fictional suicide stories

<table>
<thead>
<tr>
<th>Citation</th>
<th>Country studied</th>
<th>Source of study</th>
<th>Support of imitation</th>
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<tbody>
<tr>
<td><strong>Prior to 1990</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Berman (1988)56</td>
<td>USA</td>
<td>Partial replication of Gould &amp; Shaffer (1986)41 evaluating two of four made-for-TV movies and one additional broadcast not in original study</td>
<td>No</td>
</tr>
<tr>
<td>Daniels (1986) (letter)51</td>
<td>UK</td>
<td>TV soap opera episode, <em>EastEnders</em>, depicting an overdose</td>
<td>No</td>
</tr>
<tr>
<td>Fowler (1986)40</td>
<td>UK</td>
<td>TV soap opera episode, <em>EastEnders</em>, depicting an overdose</td>
<td>Yes</td>
</tr>
<tr>
<td>Gould &amp; Shaffer (1986)41</td>
<td>USA</td>
<td>Four made-for-TV movies</td>
<td>Yes</td>
</tr>
<tr>
<td>Gould, Shaffer &amp; Kleinman (1988)42</td>
<td>USA</td>
<td>Replication and extension of Gould &amp; Shaffer (1986)</td>
<td>Yes</td>
</tr>
<tr>
<td>Häfner &amp; Schmidtke (1989)43</td>
<td>Germany</td>
<td>Six-episode TV movie, <em>Death of a Student</em> (rebroadcast 18 months after original broadcast)</td>
<td>Yes</td>
</tr>
<tr>
<td>Holding (1974, 1975)45, 46</td>
<td>Scotland</td>
<td>11-episode weekly series on BBC TV, <em>The Befrienders</em> portraying the Samaritans</td>
<td>Yes</td>
</tr>
<tr>
<td>Jackson &amp; Potkey (1974)100</td>
<td>USA</td>
<td>One-act stage play shown to college undergraduates</td>
<td>No</td>
</tr>
<tr>
<td>Ostrow et al. (1985, 1987) (letters)47, 48</td>
<td>USA</td>
<td>Made-for-TV movie</td>
<td>Yes</td>
</tr>
<tr>
<td>Phillip (1982)58</td>
<td>USA</td>
<td>TV soap opera episodes in which a suicide or suicide attempt occurred</td>
<td>Inconclusive because an inaccurate and nonexhaustive index of TV suicide stories was used (see Kessler &amp; Stipp, 1984)</td>
</tr>
</tbody>
</table>
TABLE 2. Studies examining media influences on imitative suicides: fictional suicide stories (contd)

<table>
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<tr>
<th>Citation</th>
<th>Country studied</th>
<th>Source of study</th>
<th>Support of imitation</th>
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<tbody>
<tr>
<td>Phillips &amp; Paight (1987)</td>
<td>USA</td>
<td>Partial replication of Gould &amp; Shaffer (1986), evaluating three of four made-for-TV movies</td>
<td>No</td>
</tr>
<tr>
<td>Range, Goggin &amp; Steede (1988)</td>
<td>USA</td>
<td>Videotaped vignette of an emotionally distressed female high school student shown to college undergraduates</td>
<td>Yes&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Sandler, Connel &amp; Welsh (1986)</td>
<td>UK</td>
<td>TV soap opera episode, <em>EastEnders</em>, depicting an overdose</td>
<td>Yes</td>
</tr>
<tr>
<td>Schmidtke &amp; Häfner (1988)</td>
<td>Germany</td>
<td>Six-episode TV movie, <em>Death of a Student</em> (rebroadcast 18 months after original broadcast)</td>
<td>Yes</td>
</tr>
<tr>
<td>Steede &amp; Range (1989)</td>
<td>USA</td>
<td>Videotaped vignette of an emotionally disturbed female high school student, shown to high school students</td>
<td>No&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Since 1990</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biblarz, Biblarz, Pilgrim &amp; Baldree (1991)</td>
<td>USA</td>
<td>Films on suicide or violence or neutral films shown to college undergraduates</td>
<td>Yes&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Gibson &amp; Range (1991)</td>
<td>USA</td>
<td>Vignettes read by high school students</td>
<td>Yes&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Hawton, Simkin, Deeks, O’Connor, Keen, Altman, Philo &amp; Bulstrade (1999)</td>
<td>UK</td>
<td>One episode on TV series, <em>Casualty</em> (Nov. 1996), depicting an RAF’s pilot’s overdose</td>
<td>Yes</td>
</tr>
</tbody>
</table>
While the studies on nonfictional suicide stories have been confined to reports of completed suicides, the investigations of fictional suicide stories have often focused on suicide attempts as the modeled behavior. The impact of the stories does not appear to vary by the nature of the suicidal behavior modeled. Moreover, studies on fictional suicide stories have often examined suicide attempts as the outcome of inquiry, providing the opportunity to measure actual exposure to the stories. This is a notable advance, since earlier studies were limited by not knowing whether the victims had actually seen the broadcasts. Hawton and colleagues reported that of the interviewed patients who presented to emergency rooms and psychiatric services after a television broadcast of a deliberate self-poisoning with paracetamol, 20% stated that the broadcast had influenced their decision to take an overdose, and 17% stated the broadcast had influenced their choice of drug.
Newer paradigms to examine the impact of suicide stories include experimental designs, which examine youths’ reactions to media dramatizations or written vignettes about suicide. Biblarz and colleagues randomly assigned healthy college students to one of three experimental conditions involving exposure to a film depicting teenage suicide, physical violence, or neither. Subjects exposed to the suicidal movie reported transient increases in arousal, and changes in arousal were associated with some attitudinal change. The research by Range and colleagues has focused on the assessments of attitudes and perceptions of suicide contagion, rather than on actual behavior of high school or college students who have been exposed to vignettes about suicidal individuals. The evidence of suicidal contagion from these experimental studies has been mixed. Another experimental study examined the physiological reactions to a suicide film by suicide attempters, suicide ideators, and nonsuicidal patients. The suicide attempters had significantly lower postscreening heart rates and significantly lesser change in heart and respiration rates than the other two groups. Furthermore, the suicide attempters revealed less anxiety than nonsuicidal psychiatric patients following exposure to a simulated suicide. These results emphasize the need to consider host characteristics when evaluating the impact of a suicide story (to be discussed under INTERACTIVE FACTORS).

Another new research design to examine the impact of televised suicide stories employed a cross-sectional survey of normal high school students to assess television viewing habits, television life events, symptomatology, and suicidal ideation and attempts. Students reporting frequent exposure to television suicide reported more suicide attempts. A strong association was also found between knowledge of a real-life suicide, reporting of frequent television suicide, and a suicide attempt. When knowledge of a suicide in real life was controlled, the relationship between television suicide and suicide attempts was no longer significant. The cross-sectional nature of the study precludes the determination of causality; the associations could have resulted from self-selected viewing of television suicides by suicide attempters or selective memory of viewing such programs. Nevertheless, the reported associations are intriguing and warrant further study.

Despite the contradictory results from the studies on the impact of fictional suicide stories, there is ample evidence of an imitative effect from these broadcasts. As discussed in the next section, interactive factors, such as stimulus variability, may moderate the impact of the media. It is unrealistic to expect a monolithic effect from a heterogeneous set of broadcasts.

**INTERACTIVE FACTORS**

There is an increasing effort to examine the media’s differential impact as a function of the characteristics of the stories (agent), individuals’ attributes
(host), and social context of the stories (environment). Many theoretical perspectives, as discussed previously, predict that an individual’s motivation and attention will moderate the impact of the media stories. Such motivation and attention may reflect the life situation or demographic characteristics of the victim, features of the story, and/or a correspondence between the victim and the story.

**Agent/Stimuli Characteristics**

There is overwhelming evidence that the magnitude of the increase in suicidal behavior after newspaper coverage is related to the amount of publicity given to the story and the prominence of the placement of the story in the newspaper.10–14,70,71 Imitation appears more likely when the suicide is covered on the front page, in large headlines, and is heavily publicized, suggesting a “dose-response” relationship.72 Phillips72 has argued that repetition is a key factor for news stories’ imitative potential.

In contrast to these “structural” elements of the story, there is less information on what characteristics of the models or content of the story have an imitative effect. One characteristic of the model that has been studied is the celebrity status of the suicide victim. Wasserman73 found that a significant rise in the national suicide rate occurred only after celebrity suicides were covered on the front page of the *New York Times*. Stack74 replicated this study, but upon correcting substantial measurement error, a later analysis25 found that non-celebrity stories also had a significant impact, although not as great as publicized celebrity stories. Gundlach and Stack75 reported that non-celebrity stories yielded imitative suicides if they received enough publicity. Continuing the examination of celebrity suicides, Stack76 found that only celebrity suicide stories had an imitative effect on suicides among the elderly. Yet, celebrity suicides do not always yield imitative suicides, as evidenced by the lack of a significant increase in suicides following the death of Kurt Cobain.77,78 As discussed in a later section, the substantial efforts by Kurt Cobain’s widow, Courtney Love, to present his suicide in a negative fashion may have counteracted any potential glamorization of his death.

Stories about group or mass suicides36,79 or about people who first harm others before committing suicide (e.g., murder-suicide)13,36 do not appear to have an imitative effect. This has been postulated to be due, in part, to the “nonattractiveness” of the victims or the circumstances of the deaths.80

Another characteristic of a model to be studied has been the marital background of the suicide victim in the story. Stack24 found a differential impact of the presence or absence of divorce or marital problems in the suicide stories. Stack24 conjectured that the victim’s marital problems in the story yielded greater identification by suicidal individuals.
Given the vast heterogeneity of the news stories, including villains and heroes, further research is needed to determine which features of the models or stories have an impact on suicide. Only a few studies have formally investigated the specific story elements believed to either facilitate or limit the contagious effects of a news report on suicide. In one study Fekete and Schmidtke\textsuperscript{81} conducted a content analysis of suicide-related headlines in German and Hungarian newspapers to examine cross-cultural differences in reporting style. German accounts reflected a tendency to characterize suicidal behavior as criminal or psychiatric in nature, whereas Hungarian newspapers more frequently depicted suicide in a romantic manner. The investigators conjectured that this may partially account for the higher rates in Hungary. Fekete and colleagues\textsuperscript{82} expanded the comparison of newspaper headlines to other countries—Austria, West and East Germany, Greece, Hungary, and Lithuania. Consistent with the earlier findings, there were more depictions of attractive, prominent personalities and positive consequences and fewer “negative” prominent people and negative consequences of suicides in the Hungarian and Lithuanian press than in the German and Austrian newspaper headlines.

In another study Castellanos et al.\textsuperscript{83} developed and performed a content analysis of the four televised suicide dramatizations that were the focus of the 1986 report by Gould and Shaffer.\textsuperscript{41} Thirty adult subjects viewed the four films in a randomized fashion and rated the films’ content on a structured scale developed for the study. The ratings included the extent to which specified characteristics applied to each movie, including depictions of the suicide methods, consequences of the suicidal behavior, presentation of mental health problems, stressors, precipitants, personal characteristics of the victims, and help-seeking behavior. Knowledge and attitudes about suicide were assessed. This study found that the movies could be significantly differentiated by their content profiles. In addition, the movies had a small but definite impact on viewer beliefs about suicide (both appropriate and inappropriate).

Weimann and Fishman\textsuperscript{84} conducted a systematic content analysis of more than 430 suicide cases published in the two leading daily newspapers in Israel. Each suicide report was analyzed for the form of its coverage—including space allocation, placement in the paper, and inclusion of picture—and for the content of its coverage—including demographic characteristics of the victim, mode of suicide, attribution of responsibility, and general attitude toward the act or person. They found that the space devoted to suicide stories and the prominence of the stories increased steadily during the 1980s and 1990s. Newspaper reports focused on the more violent modes of suicide. An economic/financial motive was attributed mainly to males, while romantic motives or problems with a partner were attributed mainly to females. Most of the reports were neutral, but among those that did express an attitude, approximately 18% were positive and 8% were negative. Positive coverage was
more likely when external causes were presented and when suicides were committed during military service.

A quantitative and qualitative analysis of suicide reports in Swiss print media was conducted by Michel and colleagues. Quantitative aspects of the review included the length and positioning of the article, presence or absence of a picture, size of headline, and frequency of reporting. Qualitative aspects included contents of the report, whether articles might serve as a model, and presence of prevention or treatment resources. A coding and scoring scheme was devised, such that an “imitation risk score” was calculated for each report. Approximately 400 newspapers and magazines were examined. During an 8-month period, 74 newspapers and magazines were found to have articles about suicide, yielding 151 articles. The headline in 47% of the stories was considered to be sensational. In 13% of the articles, the headline was judged as romanticizing the event or glorifying the person. This was the case for 26% of the articles’ text. Inappropriate pictures were found in 20% of the articles. Overall, 44% of the articles were considered to be in the high imitation risk group. The topic of prevention was covered in detail in only about 11% of the articles, and therapeutic advice was also scarce (9%). Considerable differences were found between newspapers. The results of these analyses were presented at a national press conference as a means to launch guidelines for suicide reporting; they were sent to all newspaper editors. These efforts are discussed in a later section.

Host Characteristics

While there is a paucity of research on the specific host characteristics that may yield a greater susceptibility to suicide imitation, age- and sex-specific effects have been noted. Phillips and Carstensen found that the impact of suicide stories on subsequent completed suicides was greatest for teenagers. Similarly, the most marked reduction in suicides during a newspaper strike period was reported for women in the younger age groups, 15–24 and 25–34. This is consistent with the findings that the incidence of cluster suicides is highest among teenagers and young adults. Thus, younger individuals appear more susceptible to suicide contagion. The effect of gender is equivocal: some studies reported the greatest impact among women, others found men to be most susceptible, while no difference for males or females was also reported. Generally, the imitative impact of media reports does not appear to be stronger for demographic groups that are already strongly predisposed to suicide—males, whites, unmarried people, or retired persons.

There are some data to suggest that prior suicidal behavior may be a moderating host characteristic. Suicide attempters, suicide ideators, and nonsui-
suicidal patients have been reported to have different physiological reactions to a suicide film. Furthermore, Fekete and Schmidtke found, in an interview study of suicide attempters, psychiatric patients without suicidal history, and nonpsychiatric controls in Germany and Hungary, that suicide attempters reported experiencing more media presentations of fictional suicides than normal controls. The attempters were more apt to report the description of these presentations in more detail and report more imitation fantasies concerning the models. Thus, preliminary evidence suggests that prior suicidal behavior may moderate the imitative effect of the media.

Host/Agent Correspondence

Stack has postulated that certain stories promote “differential identification” among individuals who are similar to the suicide victim in the story in certain key respects, such as shared life and demographic circumstances. There is increasing research evidence to support this postulation. Schmidtke and Häfner found that imitation effects were most notable in the groups whose age and sex were closest to those of the victim in a weekly serial in Germany. Following the showing of a railway suicide of a 19-year-old male student, the number of railway suicides increased most sharply among 15- to 19-year-old males. Fekete and Macsai examined the number of suicides attributable to lidocaine overdose following the highly publicized suicide by this method of a nationally recognized teenage beauty contest winner in Hungary. The subsequent increase in suicides attributable to lidocaine overdose was most evident in females ages 15–39 years old, who were most similar to the victim with respect to age and gender. Stack reported that exposure to newspaper coverage in Japan triggered subsequent suicides only if the reported victims were Japanese; non-Japanese victims did not yield these imitative effects. Phillips found, in an examination of motor vehicle fatalities as “disguised” suicides, that the age of drivers in motor vehicle fatalities was correlated to the age of the suicide victims described in the story. Similarly, Stack found evidence for age identification an increase in subsequent suicides among individuals aged 65 and over was greatest following stories about elderly suicides.

Environmental Characteristics

Much of the work examining the effect of the social context of the suicide story has been conducted by Stack. Stack, studying the period of 1910 to 1920, found that publicized suicide stories during war had no impact on suicide. In contrast, suicide stories during peacetime were associated with a significant increase in subsequent suicides. Another environmental characteristic examined was the Great Depression (1930s). Stack did not find sup-
port for his hypothesis that audience receptivity to suicide stories would be high in the Great Depression, given widespread unemployment. Similarly, using a more recent set of data (1968 to 1980), Stack found that suicide stories’ influence on subsequent suicides was independent of economic conditions.

MEDIA EDUCATION

Given the substantial evidence for suicide contagion, a recommended suicide prevention strategy involves educating reporters, editors, and film and television producers about contagion in order to yield media stories that minimize harm. Moreover, the media’s positive role in educating the public about risks for suicide and shaping attitudes about suicide should be encouraged.

In the United States, the Centers for Disease Control published a set of recommendations on reporting of suicide that emerged from a national workshop. The American Association of Suicidology has adopted these as their official guidelines for journalists in an attempt to minimize contagious effects from news reports of suicides. Guidelines for media reporting now exist in several countries, including Australia, Austria, Canada, Germany, Japan, New Zealand, and Switzerland. Additional guidelines have recently been developed by the World Health Organization and the American Foundation for Suicide Prevention (AFSP). (The AFSP guidelines are described later in this chapter.) These guidelines generally include descriptions of factors that should be avoided because they increase attention to the media reports and are more likely to induce contagion (e.g., front-page coverage). Also included are suggestions on how to increase the usefulness of the report (e.g., describing treatment resources).

Regrettably, the media guidelines that have been developed thus far have not, for the most part, had the advantage of empirical validation. An evaluation of the implementation of media guidelines has been conducted in Austria. Following implementation of media guidelines for news reporting by the Austrian Association for Suicide Prevention in 1987, a significant decline in suicide rates occurred within the first year (7% decline). In the 4-year period following implementation, the suicide rate decreased nearly 20%, with an even sharper decline (75%) in subway suicides (a particular focus of the media guidelines). Another evaluation of media guidelines implemented in Switzerland was conducted by Michel and colleagues. As previously discussed, this team of investigators had conducted an 8-month analysis of newspaper and magazine reports prior to the implementation of the media guidelines. Following implementation of the guidelines, a second analysis was conducted in order to evaluate the effect of the guidelines on the style and
content of the media reports. Although the number of articles increased, the articles were significantly shorter and less likely to be on the front page; headlines, pictures, and text were rated as less sensational or glorifying; there were relatively fewer articles with pictures; and the overall imitation risk scores were lower. Given the successful strategy of engaging the media in Austria and Switzerland as a means of suicide prevention, efforts to systematically evaluate its efficacy in the United States are warranted. A promising application of media recommendations appeared in Seattle in the aftermath of the suicide of Kurt Cobain. However, the substantial efforts by Kurt Cobain’s widow to present his suicide in a negative fashion may have had an impact on influencing attitudes toward preventive ends.

While it is important to begin educating the media on our current state of empirical knowledge, we need to simultaneously improve that knowledge base. In particular, we need to better understand which particular story elements under which circumstances act as the active ingredients for promoting contagion and which components of stories and broadcasts are useful for preventive programming. There are only a few studies that have formally investigated the specific story elements believed to either facilitate or limit the contagious effects of a news report on suicide (see Fekete and Schmidtke and Castellanos et al., described above). Until this systematic work is completed, interim efforts to disseminate the current state of knowledge are necessary. The findings from the reviewed research literature form the basis for the following interim recommendations, which the author originally compiled for the American Foundation for Suicide Prevention in its efforts to disseminate information on suicide contagion to the media.

**Recommendations**

The following suggestions may be useful in minimizing the risk for contagion, while still maintaining the integrity of the report:

1. Question if the suicide is newsworthy. Suicide is a common cause of death. Indeed, it accounts for more teen deaths than all natural causes combined.
2. Do not misrepresent suicide as a mysterious act by an otherwise “healthy” or “high achieving” person.
3. Indicate that suicide is most often a fatal complication of different types of mental illness, many of which are treatable.
4. Do not present suicide as a reasonable way of problem solving.
5. Do not portray suicide in a heroic or romantic fashion.
6. Exercise care with pictures of the victim and/or grieving relatives and friends to avoid fostering overidentification with the victim and inadvertently glorifying the death.
(7) Avoid providing a detailed description of method and site.
(8) Limit the prominence, length, and number of stories about a particular suicide. Avoid front page coverage.
(9) Try to oversee headlines. Some responsibly written stories are spoiled by sensational and inappropriate headlines.
(10) Provide local treatment resource information.

These recommendations are forming the basis for national consensus guidelines that are currently under development and can be found on the website for the American Foundation for Suicide Prevention (www.afsp.org). The website also provides examples of appropriate and problematic coverage.

**CONCLUSION**

Overall, the evidence to date suggests that suicide contagion is a real effect. There is substantial evidence of the significant impact of nonfictional stories on subsequent suicides. While the research on fictional suicide stories is contradictory, there is ample research evidence that highlights the imitative effect of suicide dramatizations. A review of the influence from other modes of media, such as music and the internet, is beyond the scope of this chapter. For a review of this burgeoning research effort see Martin and Schmidtke and Schaller.

Evidence of imitation should not negate the role of individual susceptibility and stresses in suicide. Nevertheless, it is crucial for mental and public health professionals and the media to develop a partnership to enhance the effectiveness of the reporting of suicide, while minimizing the risk of imitative suicides. The media’s power to educate the public in an appropriate fashion and change attitudes toward suicide needs to be underscored. The Society of Professional Journalists’ Code of Ethics aptly summarizes our joint goals, “Seek Truth and Report It” and “Minimize Harm.”

**REFERENCES**


DISCUSSION

D. SHAFFER: Behavioral contagion is frequently observed on college campuses. As a psychiatrist on a college campus, what advice would you give about whether a suicide or a suicide attempt should be communicated to the rest of the student body?
M. S. Gould: I think one should first consider the newsworthiness of the suicide attempt or completed suicide. I expect that some will disagree with what I am about to say: the suicide or suicide attempt need not be shared with the community, the campus as a whole. It depends on the circumstances. If it was a very public suicide, then clearly it does have to be shared because a number of other students would have witnessed the death. If it occurred while the student was home on spring break, then perhaps it doesn’t have to be shared. If a student killed himself (the epidemiology of suicide suggests that it would be a male) in his dorm room, it doesn’t necessarily have to be made public, but if he was found by a roommate, rumors will fly if you don’t do something. I don’t think presenting it in the school newspaper is necessarily the way to inform the other students. If it took place in a dorm, you may want to have grief counselors come in and have discussions with people living in the dorm. You could have drop-in centers. You don’t have to say there’s been a suicide, but can invite anyone who is feeling distressed to go to the college health service.

What we’re doing as a project in high schools, although not directly comparable to colleges because the students do not live on the campus, might be useful: we are conducting ongoing screenings of the total student population in schools that have had a suicide, because there are a lot of kids at risk for suicide beyond the social network of a suicide victim. The youngsters who seem to be most vulnerable to the impact of a suicide are not necessarily the victim’s best friends. We’re finding from our research on suicide clusters that it’s people far more distant in the social network or even people who know of the death through indirect means who may be most at risk. So the best way to prevent suicides or to have a program that deals with the impact of a suicide may be general screenings, rather than a newspaper article in the school newspaper that says so-and-so killed himself or to just limit follow-up counseling with the victim’s best friends.

Shaffer: I agree with Madelyn. I think you are faced with a fairly general dilemma with respect to suicide if you are the psychiatrist or psychologist at a school or college. On the one hand, there is the remote possibility that what you do may induce some form of copycat behavior or imitation, and, on the other hand, there is the much higher likelihood that two phenomena will occur. There will be friends or acquaintances who are directly affected by the death and who will, according to David Brent’s study on the consequences for friends of a suicide, experience quite significant impairment during the period following the death. It’s probably worthwhile to follow some strategy to identify those people and try to use some preemptive intervention because we know that that morbidity is going to occur.

The other phenomenon that very frequently occurs in a closed community and can have quite serious consequences is scapegoating. It’s common both
within a family and within a small community after a suicide occurs that people are blamed. In a family it will often be the parents, or maybe an older sibling, for treating the child unfairly or bullying the child. In a college or school community it will often be another peer, or perhaps a teacher or professor, who is blamed for allegedly unfair behavior. We know it’s very rare that that’s the whole story. By simply closing the whole thing off by not exploring the prevailing rumors and beliefs, you deny yourself the opportunity to correct the scapegoating myths that go around, and this may actually have a role in allowing imitative suicide to occur. I think you are caught in a dilemma. The truth is we don’t yet know how best to handle these psychological events, but I suspect that Madelyn’s suggestion of screening that doesn’t involve saying too much that might be misunderstood to too many people, coupled with discreet inquiries about the nature of the prevailing myths and trying to correct them, are a fairly safe compromise.

Another question: what are the high-status elements you said were sometimes associated with suicide?

GOULD: We know from a number of studies that the celebrity status of a suicide victim increases the impact of the suicide. A movie star or “all-American” athlete who commits suicide is usually not presented as a person with psychiatric problems, so the suicide can appear to be acceptable.

SHAFFER: While suicide contagion may be real, what about the idea of developed immunity? Perhaps there is a suicide contagion pattern because suicide has been so suppressed, stigmatized, and judged, particularly by faith communities. When suicide is heard about in the media, people who have been struggling experience relief and become free to act accordingly. On the other hand, if suicide prevention were to become a common concern and seeking mental health services were destigmatized, we might not see suicide contagion. Do we deliberately repress ideas about suicide, and does seeing it in somebody else allow it to be unrepressed?

GOULD: We’re not saying to not report about suicide. What we’re hoping is that if you report about suicide in a realistic fashion without misinformation, if you provide resource lists and so on, people who are vulnerable may then seek help. That’s why we would like to develop a collaboration with media representatives and journalists to find that balance where you avoid negative influence but present just enough information so that those who don’t know what to do with their inner turmoil and perhaps aren’t in treatment will know where to go. We want responsible reporting. Reporting about suicide in itself is not the problem, but how suicide is reported is a critical concern. It can be done in such a way that people who are vulnerable may learn how to get help or, unfortunately, it may contribute to the problem.
SHAFFER: This is a fantasy question: what do you recommend we as a professional group do to control or reduce the strong hold of the media on the public mind?

GOULD: That’s what we’re trying to do now with the American Foundation for Suicide Prevention. It’s such a tough nut but it cheers me to think about 20 years ago: I don’t think we public health professionals would ever have dreamt that we could have had the impact on cigarette smoking that has occurred in this country. I see our attempt to have some impact on the media as a similar process that will go on for the next couple of decades. I think we must start with nonfictional media stories. We have evidence that the artistic media can have a negative impact, but I don’t think it would be realistic to attempt to curb it at this point. I don’t think media professionals are going to be willing to be talked at. Rather, we need to build collaborations with journalists and other media representatives and get them involved so that this may become their issue rather than our issue—a fantasy, perhaps, but I hope not too much of a fantasy.