

# SAMARITANS' GUIDE FOR CORONERS

## Background

More than 6,000 people across the UK and Ireland take their own lives each year, with tens of thousands more attempting suicide.

There is a significant body of research worldwide which demonstrates strong links between media reporting of suicide and imitative behaviour among vulnerable people, especially when detail is given about the method used and when the reporting is dramatic. Such behaviour often results in the deaths of individuals who would not have otherwise taken their own lives.

While most media professionals are mindful of the need to report suicide responsibly, inquest hearings can present challenges. 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, is sometimes hard to achieve. It can be particularly problematic when the case involves new and emerging methods of suicide.

This Guidance for Coroners forms part of the suite of support that is contained within *Samaritans' Media Guidelines for Reporting Suicide*.

Samaritans has been working with the media for over two decades to improve the portrayal of suicide and reduce the risk of imitative suicidal behaviour. Our *Media Guidelines for Reporting Suicide* are widely recognised and used across the media industry as a whole.

While new methods of suicide can be newsworthy, the attention given to them in the media has been shown to result in an increase in use of these methods, without reducing the use of other methods, resulting in more suicides through a phenomenon called 'social contagion'.

Some groups are at higher risk of suicide than others. For example, the suicide rate among men is 3-4 times higher than the rate among women. Men from low socio-economic backgrounds living in deprived areas are ten times more likely to die by suicide than men from high socio-economic backgrounds living in the most affluent areas. People bereaved by suicide are at a higher risk of suicide than the general population.

## Important things to consider

- Suicide is a complex issue and there is often no simple explanation for why someone chooses to die by suicide, it is rarely due to one particular 'cause'. Some underlying factors that can lead to suicide include mental ill-health, alcohol and substance misuse, feelings of desperation, shame, helplessness or hopelessness.
- Commenting publicly in the media about the circumstances surrounding a suicide to promote public health messages, including campaigning for change in legislation to prevent future suicides, can be dangerous. This can inadvertently highlight suicide methods and result in imitative behaviour.
- The publication of suicide notes and speculation about the 'reasons' for the suicide can result in sensationalist coverage, which encourages imitative suicidal behaviour.
- Media reporting of inquests is often more detailed and therefore carries a higher risk of encouraging vulnerable people to harm themselves.

CONTINUED OVERLEAF

- Media regulation aims to reduce the risk of encouraging imitative behaviour as a result of media coverage through codes of practice. These continue to apply even in public inquests.
- Care should be taken with the use of language when reporting a suicide. Certain words or phrases can perpetuate stigma, sensationalise a death or cause distress to bereaved family members and friends. For example, the expression 'commit suicide' is factually incorrect because the behaviour is not illegal and can cause offence to loved ones. The phrases 'died by suicide' or 'took one's own life' should be used instead.
- Compared to older adults, teenagers and young adults are more at risk of imitative or copycat suicide as a result of irresponsible media reporting.

## Best practice when the media attend an Inquest

### Briefings

Samaritans' bespoke briefings for the media, providing relevant guidance according to the circumstances surrounding the death, can be prepared. These can be sent direct to the media by Samaritans and/or to the Coroner's office for dissemination during the hearing.

### Reminders

In order to encourage best practice in reporting of suicide inquests, it is helpful to remind the media of the points below:

- Even where details about a suicide have been discussed during the hearing, the media must abide by the Codes of Practice and should give due consideration to *Samaritans' Media Guidelines for Reporting Suicide*.
- Technical details about the method used in a suicide should not be published.
- It should never be suggested that a method is quick, easy, painless or certain to result in death, as this can encourage 'copycat' behaviour.
- A location where a suicide has occurred should not be labelled a 'suicide hotspot'. Such a label is likely to attract vulnerable people, who are feeling suicidal, to the location.
- The content of suicide notes should not be published in the media. This can lead to sensational or romanticised accounts of the death, which in turn increases the risk of imitative suicidal behaviour.

Samaritans' press office is available to support the media when reporting suicide, including inquests, and can provide confidential advice on individual cases. This service is also provided outside of office hours by calling the press out-of-hours line.

**Samaritans' Press Office 020 8394 8300 or 07943 809162 (out-of-hours) [press@samaritans.org](mailto:press@samaritans.org)**

***Samaritans' Media Guidelines for Reporting Suicide can be found at [samaritans.org/mediaguidelines](https://samaritans.org/mediaguidelines)***

## Supporting bereaved families

The loss of a loved one is typically associated with grief and mourning, but the emotions experienced in the aftermath of a death by suicide can differ in quality and intensity from those experienced after other types of death.

Not only do these bereaved family members have to cope with the loss of a loved one, but they are also left with painful questions about the reasons for the death, as well as experiencing feelings of intense guilt and blame.

**Samaritans' service is available round the clock, every single day of the year, for anyone struggling to cope.**

 **116 123**   
This number is FREE to call  
 [jo@samaritans.org](mailto:jo@samaritans.org)  
 [samaritans.org](https://samaritans.org)



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## Codes of practice

**Media regulation** aims to reduce the risk of encouraging imitative behaviour as a result of media coverage through codes of practice, which continue to apply even at public inquests.

Independent Press Standards Organisation's Editors' Code – Clause 5: Intrusion into grief or shock

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

The Ofcom Broadcasting Code, July 2015 – Section 2: Harm and Offence

Violence, dangerous behaviour and suicide:

- 2.4) Programmes must not include material (whether in individual programmes or in programmes taken together) which, taking into account the context, condones or glamorises violent, dangerous or seriously antisocial behaviour and is likely to encourage others to copy such behaviour.
- 2.5) Methods of suicide and self-harm must not be included in programmes except where they are editorially justified and are also justified by the context.