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Frederick County Health Department

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A message from the Local Behavioral Health Authority:

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Ethical Reporting on Suicide: A Matter of Life and Death

Every word in a story about suicide carries weight. The details an editor highlights, the language they choose, and the prominence given to a story can determine whether a vulnerable reader sees hope or justification.

Reporting on suicide is not just journalism — it is public health. That is why the standards for covering suicide are a matter of life and death.

Why reporting standards matter

Research has shown that certain kinds of media coverage are linked to increases in suicide rates, especially among youth and those already at risk. This phenomenon, sometimes called “suicide contagion” or the Werther effect, describes how vulnerable individuals may imitate suicide behaviors after exposure to detailed or sensational news coverage. The way newspapers frame these stories has consequences beyond readership — it can shape community health outcomes.

Journalists have a responsibility to inform the public. But with suicide, how that information is presented is as important as the facts themselves. Ethical reporting does not hide the truth, but shares it in ways that reduce harm and increase hope.

Guidance from suicide prevention experts

National organizations like the American Foundation for Suicide Prevention (AFSP), the World Health Organization (WHO), and the U.S. Department of Health and Human Services have developed best practices for covering suicide. Their guidelines provide clear dos and don’ts for the press.

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Key recommendations include:

- Use accurate, non-stigmatizing language. Avoid saying “committed suicide,” which implies crime. Instead, use “died by suicide” or “took their own life.” Avoid terms like “successful” or “failed” attempt.
- Do not describe the method or location in detail. Reports that describe how or where can increase the risk of imitation.
- Avoid oversimplifying causes. Suicide is complex, rarely the result of a single event. Suggesting that one factor, such as a job loss or breakup, is “the cause” misrepresents reality and misleads the public.
- Be cautious with placement and tone. Avoid front-page headlines or dramatic images. Don’t glamorize or romanticize the death, especially when covering celebrities.
- Always include help and hope. Every story should list resources like the 988 Suicide & Crisis Lifeline and highlight that recovery and treatment are possible.

The role of local newspapers

Local journalism has particular influence. When a suicide occurs in a community, the local paper often provides the first, and sometimes only, coverage.

Done poorly, this reporting can increase risk among peers and neighbors. Done well, it can open conversations about prevention, highlight resources, and help shift community culture.

Newsrooms can adopt practical steps:

- Create an internal suicide reporting checklist for editors and reporters.
- Train staff in AFSP and WHO guidelines.
- Standardize a sidebar or box that automatically runs with any suicide-related article: “If you or someone you know is struggling, call or text 988 for immediate support.”
- Build relationships with local crisis providers to ensure accurate, timely resources are included.

Shifting culture, saving lives

Changing how we talk about suicide does not erase its tragedy, but it can prevent additional loss. Stories of hope, survival, and people who found help are just as newsworthy as stories of loss. And they can model pathways out of despair for readers who need them most.

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Readers also play a role. If you encounter unsafe reporting such as headlines that sensationalize, articles that speculate about causes, or coverage that omits resources, call your paper and ask them to do better. Just as we hold the press accountable for accuracy in politics or crime, we can demand responsibility in reporting on suicide.

Readers can also inquire about the well-being of loved ones without fear of pushing someone toward suicide. It is a myth that asking someone about suicide gives them the idea. Research shows the opposite: Asking directly, in an open and nonjudgmental way can reduce risk and provide relief. Compassionate questions create space for connection and hope.

The truth is that suicide is preventable. Our words matter. Our headlines matter. And when newspapers commit to reporting with care, they can do more than tell a story — they can save a life.

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This was written by Andrea Walker, an Inaugural Fellow of the Bloomberg American Health Initiative at Johns Hopkins Bloomberg School of Public Health. She is a national leader in public behavioral health systems design. She has led the development of mobile crisis response systems, firearm risk reduction protocols, school-based prevention initiatives, and cross-sector strategies that integrate public health, law enforcement, violence prevention and clinical care. Her work has been recognized for its innovation, durability, and commitment to building systems that protect people before, during, and after crisis. She is the director of the Behavioral Health Services Division for the Frederick County Health Department.