15/12/2020

Dear Editor,

We are writing to you on the behalf of the International COVID-19 suicide prevention research collaboration (ICSPRC) - an international group of suicide prevention researchers and charity leaders from 39 countries. Our group aim is to share knowledge to minimise the impact of the pandemic on suicide deaths globally.

There is a large body of research literature documenting the potentially harmful effect of news reporting of suicide deaths on population suicide rates. Concerning aspects of reporting include description of suicide methods, sensational headlines, and excessive reporting - these can lead to suicidal behaviour among vulnerable people. Furthermore, associating the negative effects of the pandemic with suicidal behaviour can normalise it as a way of coping at a time of crisis.

Academics or journals promoting / press-releasing findings, sometimes with sensational headlines, are a frequent source of these news stories. These may be used by individuals and/or news organisations with particular agendas which can have dangerous consequences.

In the UK, Samaritans closely monitors news reporting of suicide. They have observed that media stories linking suicide to COVID-19 mostly originate from bereaved families and mental health/suicide prevention experts and organisations releasing data and using alarmist language. In keeping with this, over the last few months we have seen a number of sensational headlines and news stories based on reports of academic articles and wanted to alert you to the potential impact this may have on suicide risk more widely.

At this challenging time, it is vitally important that the research community does not contribute to increasing the risk of suicide in vulnerable populations We recommend that editors consider the following points when reviewing articles or commentaries about suicidal behaviour during the COVID-19 pandemic and its aftermath (adapted from Hawton et al (2020) and Samaritans' guidelines) :

1) Remove references to methods of suicide from article titles and avoid *detailed* (e.g. how a ligature was attached) description of methods in the body of the article. Descriptions of a novel method of suicide should be avoided.
2) Avoid speculation about 'triggers' or cause of suicide (in this case COVID-19 and its associated public health measures). Suicide is extremely complex, and it is rarely the case that a single event or factor leads someone to take their own life. We recommend that a statement about the complexity prefaces any speculation.
3) Avoid sensational language, such as "surge", "spike", "crisis", "tsunami" and "epidemic" when describing the potential impact of the pandemic – these terms have been used out of context, generating sensational news headlines. There is currently no strong evidence of increases in suicide deaths during the first few months of the pandemic (John et al (2020))
4) Care should be taken when referring to suicidal behaviour in young people, as this group is particularly susceptible to suicide contagion.

In the era of open access publishing the accessibility of academic research has improved, which increases subsequent media coverage and engagement by members of the public. This is a particular

problem when articles are published as either correspondence or pre-prints as findings are yet to undergo careful scientific assessment via peer review.

We urge editors to be mindful of the potential negative impact of articles related to suicide might have on your readers because of inappropriate reporting at this time. For comprehensive guidance on reporting of suicide during the COVID-19 pandemic please refer to The International Association for Suicide Prevention guidance.

We are very happy to answer any questions you may have about the content of this letter.

Yours faithfully,

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