

Suicide news reporting in Türkiye: Compliance with World Health Organization guidelines

Türkiye’de intihar haberi raporlamasının Dünya Sağlık Örgütü kılavuzlarına uygunluğu

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OBJECTIVE(S)

Purpose: Suicide is a significant public health problem worldwide and in Turkey, where more than 4,000 people die by suicide each year. Responsible media reporting is a critical component of suicide prevention, as outlined in the World Health Organization (WHO) guidelines. These guidelines discourage sensationalism, the inclusion of explicit details, and personal disclosures, while promoting the dissemination of help-seeking resources. This study evaluates the adherence of Turkish media to these guidelines through a content analysis of suicide-related news published between 2022 and 2024.

METHODS

The study employed a cross-sectional content analysis, using Google News to collect 467 eligible reports from an initial pool of 600 articles. A coding framework based on WHO recommendations assessed adherence to criteria such as sensational language, explicit method details, and the inclusion of supportive resources. Two independent coders reviewed the reports to ensure objectivity and reliability.

RESULTS

The results show widespread non-compliance with WHO guidelines. Sensationalist language was common in headlines, and 57.6% of the reports analyzed were murder-suicide cases. The method of suicide was mentioned in 87.3% of the reports, and all reports provided detailed information about the location. Personal information, such as names (67.6%) and ages (55.8%), was often given. Notably, only one report included information on how to get help, and none included expert opinions or references to scientific research.

DISCUSSION

These findings underscore the urgent need for reform in Turkish media practices. Recommendations include integrating ethical reporting training into journalism curricula, adopting internal guidelines, and reinstating a national suicide hotline to support vulnerable populations and mitigate public health risks associated with sensational reporting.

KEYWORDS

media, reporting, suicide, Türkiye, WHO guideline

AMAÇ

İntihar, hem dünya genelinde hem de Türkiye’de önemli bir halk sağlığı sorunudur. Türkiye’de her yıl 4.000’den fazla kişi intihar nedeniyle yaşamını yitirmektedir. Dünya Sağlık Örgütü (DSÖ) rehberlerinde vurgulanan sorumlu medya haberciliği, intiharı önleme çalışmalarının kritik bir bileşenidir. Bu rehberler, sansasyonel içerikten, ayrıntılı yöntem açıklamalarından ve kişisel bilgilerin ifşasından kaçınılmasını, bunun yerine yardım arama kaynaklarının yaygınlaştırılmasını önermektedir. Bu çalışma, 2022-2024 yılları arasında yayımlanan intihar içerikli haberlerin içerik analizi yoluyla Türk medyasının bu rehberlere uyumunu değerlendirmektedir.

YÖNTEM

Çalışma, kesitsel bir içerik analizidir. Google Haberler aracılığıyla 600 haberden oluşan bir havuzdan 467 uygun rapor toplanmıştır. DSÖ tavsiyelerine dayalı bir kodlama çerçevesi kullanılarak sansasyonel dil, yöntem ayrıntıları ve destekleyici kaynakların dahil edilmesi gibi kriterlere uyum değerlendirilmiştir. Raporların objektifliğini ve güvenilirliğini sağlamak için iki bağımsız kodlayıcı tarafından incelenmiştir.

BULGULAR

Bulgular, DSÖ rehberlerine uyumda yaygın bir eksiklik olduğunu ortaya koymaktadır. Başlıklarda sansasyonel dil yaygındır ve analiz edilen raporların %57,6’sı cinayet-intihar vakalarını içermektedir. Haberlerin %87,3’ünde intihar yöntemi belirtilmiş ve tüm raporlarda olay yerinin ayrıntılı bilgileri verilmiştir. Kişisel bilgiler, örneğin isimler (%67,6) ve yaşlar (%55,8), sıklıkla ifşa edilmiştir. Dikkate değer bir şekilde, yalnızca bir raporda yardım arama bilgileri verilmiş ve hiçbir haberde uzman görüşü veya bilimsel araştırma referansı yer almamıştır.

SONUÇ

Bu sonuçlar, Türk medyasındaki uygulamalarda acil reform gerekliliğini vurgulamaktadır. Öneriler arasında etik habercilik eğitimlerinin gazetecilik müfredatına dahil edilmesi, kurum içi yönergelerin benimsenmesi ve sansasyonel habercilikle ilişkili halk sağlığı risklerini azaltmak için ulusal bir intihar yardım hattının yeniden oluşturulması yer almaktadır.

ANAHTAR KELİMELE

Dünya Sağlık Örgütü kılavuzu, haber, intihar, medya, Türkiye

Suicide is a significant global public health problem, with more than 700,000 people dying by suicide each year [1].

Suicide is the fourth leading cause of death among people aged 15–29 years worldwide, underscoring its profound impact on younger populations (1). In Türkiye alone, more than 4,000 people die by suicide each year, further highlighting the scale of the problem at a national level (2). In addition to the individual loss, each suicide has far-reaching social, emotional, and economic consequences, affecting families, communities, and health systems (1).

The World Health Organization (WHO) emphasizes that suicide is preventable through coordinated efforts that include early mental health intervention, reducing access to means of suicide, and promoting responsible media reporting to minimize the risks of imitation and stigma. Holistic approaches to suicide prevention require a combination of public health strategies, community support, and awareness initiatives (1).

There is considerable evidence of both the harmful and beneficial effects of the media on suicide prevention. Irresponsible reporting of suicides, whether celebrity or non-celebrity, has the potential to contribute to an increase in suicide rates. This phenomenon is known as the "Werther effect" (3). Sensationalized coverage of suicide, particularly when it includes explicit details of the method used, increases the risk of imitation, especially among vulnerable groups (4–5). This risk is further increased by repeated and prominent reporting, which can contribute to a contagion effect within communities (6).

Conversely, studies of the "Papageno effect" demonstrate that stories emphasizing hope and resilience can reduce suicide rates (7). In Austria, the implementation of media guidelines led to a 75% reduction in subway suicides and a 20% reduction in the overall suicide rate [8]. Campaigns featuring stories of recovery have also been associated with increased help-seeking behavior (9), while positive discussions in digital media offer additional protective effects (10).

Various national guidelines on responsible suicide reporting exist, such as the Mindframe guidelines (Australia), the Samaritans media guidance (UK), and the Reporting on Suicide recommendations (USA). Although valuable, these are often tailored to specific national contexts (11–13). The WHO guidelines on responsible suicide reporting are among the most frequently cited resources in this area (14). The guidelines, last updated in 2023, provide comprehensive recommendations for media professionals on how to report on suicide in a way that minimizes the risk of imitation and promotes public awareness of suicide prevention. The WHO

resource places particular emphasis on key practices, including the avoiding of sensationalism, the avoiding specific details regarding methods and locations, and the inclusion of information on how individuals can access mental health support or psychiatric services. This resource, developed in collaboration with the International Association for Suicide Prevention, addresses the complex and nuanced impact of media coverage on public perceptions of suicide and provides detailed guidance for both traditional and new media platforms (14). This study aims to determine the opinions of training facilitators and students regarding the application of the Critical Appraisal Special Study Module (CA-SSM). This module is implemented as a structured programme at Dokuz Eylül University Faculty of Medicine (DEUFM) and conducted as a small group study.

Several studies conducted in different countries have assessed the extent to which suicide news coverage is consistent with WHO media guidelines (15–30). These studies examine the extent to which media coverage is consistent with WHO recommendations for responsible reporting. Although research has previously examined the compliance of suicide reporting with the media guidelines in Turkey, there is currently no comprehensive and up-to-date evaluation based on the latest WHO guidelines (31–34).

This study aims to evaluate the extent to which suicide-related news in the Turkish media adheres to WHO's guidelines for responsible reporting. By identifying areas of compliance and gaps, this research seeks to support more responsible media practices in Turkey and ultimately contribute to suicide prevention efforts.

Materials and Methods

Study design

This study is a cross-sectional content analysis designed to assess the extent to which Turkish media follow the WHO guidelines for reporting on suicide. Content analysis was chosen as the optimal method for a systematic review and categorization of the media's approach to suicide-related news, facilitating a comprehensive evaluation of their alignment with the WHO's recommendations (11).

Data collection

Data for this study was collected through Google News searches, as it is one of the most widely used search engines, allowing for comprehensive access to relevant news sources. The keywords used for searches included "took their own life" and "died by suicide" in Turkish. The data collection



was carried out in October and November 2024 and focused on news articles published within the last three years.

To ensure the relevance and focus of the analysis, certain types of articles were excluded. These included videos, articles not related to Turkey, cases involving euthanasia, suicides related to terrorist attacks, and editorial content such as opinion columns and analytical pieces that did not present a specific incident in a news reporting format. The aim was to focus on news reporting directly related to suicide cases specific to the Turkish context.

Checklist and coding criteria

The coding framework developed for this study was based on WHO guidelines for responsible reporting of suicide. The aim was to reduce the risk of imitation and promote suicide prevention. Key recommendations included avoiding sensationalism, omitting explicit details of the method or location, and including information about sources of help.

Based on these guidelines, a checklist was developed to assess the degree of compliance with the to WHO recommendations. The checklist included criteria such as the presence of help-seeking information, expert opinions, scientific events, and specific elements such as the use of sensational language, method details, and location. In addition, the framework allowed for the coding of identifiable information (e.g., name, age) and visual elements (e.g., personal photographs or scene images). This approach facilitated a structured assessment of compliance with WHO standards.

Data analysis

To ensure objectivity and reliability, the coding process was carried out by two independent coders. Any discrepancies between the two coders were reviewed and discussed until a consensus was reached. Data analysis was primarily descriptive, using Excel to summarize the level of adherence to WHO guidelines across the coded items.

Ethical considerations

This study is based solely on publicly available news articles, and no personal data were collected from individuals. Given the public nature of the data sources, no formal ethical approval was sought for this research. Furthermore, the content of this study was carefully curated to exclude any personal or potentially identifiable information about individuals involved in suicide cases. All analyses and discussions in this article are conducted in a manner that respects the privacy and dignity of individuals, adhering to the ethical standards set for the reporting on sensitive topics such as suicide.

Results

The study initially identified 600 reports, which were then screened to determine eligibility for inclusion. After initial screening, 115 reports were excluded because they did not meet the pre-established inclusion criteria. These included reports that were not related to suicide, duplicates, or articles that lacked substantial textual content. As a result, 485 reports were analyzed in detail. Furthermore, 18 reports were then excluded from further analysis. Six of these were duplicates, ten contained only videos, and two described accidental shootings. In total, 467 reports were included in the final analysis, as detailed in Table 1.

Table 1. Key characteristics of suicide reports in the Turkish media

Key Characteristics of Suicidal Reports	N (Total=467)	%
Suicidal behaviour		
Completed Suicide	427	91.4
Attempt	40	8.6
Murder related with suicide	269	57.6
Celebrity suicide	22	4.7
Identity of the person		
Name stated	316	67.6
Initials stated	139	29.7
Age stated	261	55.8
Gender stated	435	93.1
Occupation mentioned	188	40.2

The reports covered three years. The dataset includes 424 reports from 2024, 41 from 2023, and two from 2022. Figure 1 illustrates the distribution of reports published in 2024.

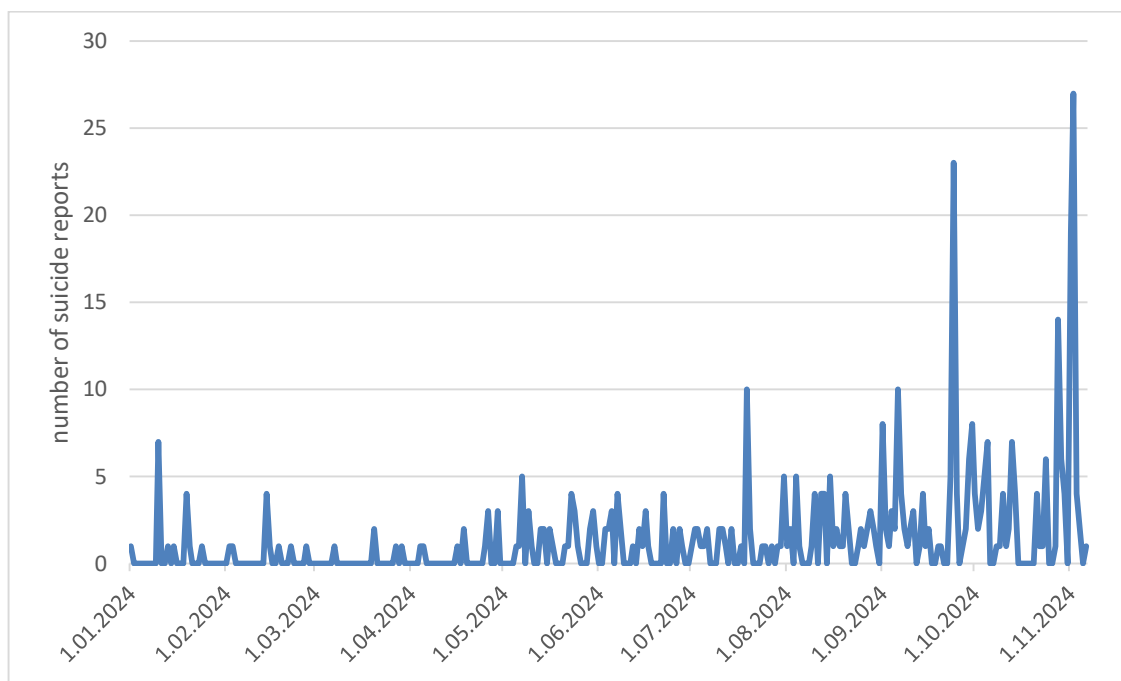


Figure 1. Number of suicide reports by time

Characteristics of reported suicides

The vast majority of reports (91.4%) described completed suicides, of which 57.6% were suicide-related homicides. A total of 4.7% of the reports were of celebrity suicides. The disclosure of personal details about the people involved was a common occurrence. Full names were given in 67.6% of the reports, while initials were used in 29.7% of the reports, gender in 93.1%, and occupation in 40.2%. Table 1 illustrates the disclosure of various personal details in the reports.

One report provided information on the availability of mental health support by directing the reader to a website of a medical association offering psychological counseling services. Only two reports included educational content. The perspectives of family members were mentioned in 21 reports, but none of these included the perspective of children. In addition, no reports included expert opinions, references to scientific research, or suggestions for coping mechanisms related to suicide prevention (Table 2).

Visual and content analysis

Each report included at least one photograph, with half of which were of the person who died by suicide or the scene of the suicide. The method of suicide was mentioned in 87.3% of the reports, and all reports provided detailed information about the location. Suicide notes were mentioned in 14.3% of the reports, of which 11.1% contained direct quotations from the notes. In addition, 15.4% of the reports gave an oversimplified account of the reasons for suicides. Of the reports, 15.6% (n=73) did not mention any life event as a reason for the suicide. In addition, 31 (6.6%) reports described suicides that occurred in institutions such as prisons, courts, dormitories, or schools (Table 2) exam contributes 5% to the student's overall grade at the end of the year.

Table 2. Quality assessment of adherence to WHO guidelines

Quality Assessment Indicators	n	%
Information about where and how to seek help for suicidal thoughts	1	0.2
Education with the facts about suicide and suicide prevention	2	0.4
Stories of how to cope with life stressors	0	0
Expert opinion	0	0
Research findings	0	0
Perspectives of the bereaved family	21	4.4
Followed a cautionary approach when reporting celebrity suicides	0	0
No life event was specified as a reason for the suicide	73	15.6
Photo		
Any photo	467	100
Photo of the victim	237	50.7
Photo of the scene	246	52.6
Description of method	408	87.3
Details about the site/location	467	100
Information on the institutional setting of suicide	31	6.6
Suicide note		
Present	67	14.3
Citation from note	52	11.1
Oversimplifying the reason for suicide	72	15.4
Headline		
Suicide in the headline	308	65.9
Reason for suicide in the headline	33	7.0
Suicide note	32	6.8
Method in headline or sub-headline	323	69.1

Headline analysis

The term "suicide" was present in 65.9% of headlines, and 6.8% of headlines referred to either suicide notes or reasons, with phrases such as "committed suicide due to depression" or "Doctor divorced from spouse committed suicide with a farewell message." The use of sensational language was widespread, with examples such as "Horror in the hospital garden! Spouse killed and committed suicide" or "The suicide that shook Izmir...". The method of suicide was mentioned in 69.1% of headlines or sub-headlines, such as "Horrific event! Suicide with a gun on the balcony" (Table 2).

Discussion

The results of this study illustrate a widespread failure by the Turkish media to follow guidelines for reporting on suicide. Of the 467 reports analyzed, only one included information about help-seeking resources, a critical element in suicide prevention. In contrast, prohibited practices were widespread: sensational language was often used in headlines, explicit details about suicide methods were included in 87.3% of reports, and all reports described the site or location of the

incident. In addition, personal details, including full names (67.6%) and ages (55.8%), were often published.

These patterns of non-compliance are consistent with findings from countries such as Pakistan, Ghana, Bangladesh, Nigeria, and Indonesia, where similar lapses in responsible reporting practices have been observed (13,17,18,20,24). However, the level of non-compliance observed in the Turkish media appears to be more severe compared to countries such as Australia and Ireland, where media practices reflect a more ethical approach to suicide reporting (19-30). This study also corroborates previous research in Türkiye that found high levels of guideline violations in suicide-related news articles (26,27,31).

The phenomenon of "suicide contagion," whereby exposure to sensational or explicit reporting increases the likelihood of similar behaviors, is well-documented in the literature (35-36). This risk is particularly pronounced among vulnerable populations, including adolescents, those with mental health problems, and those facing socio-economic challenges (37). Furthermore, the oversimplification of suicide motives in 15.4% of reports not only trivializes the complex factors behind suicides but also risks fostering harmful narratives that could influence vulnerable individuals. (38). Such sensationalist headlines risk normalizing suicide and trivializing its complex causes, particularly among vulnerable populations (38). Based on the patterns observed, there appears to be a need for improved media practices in Türkiye, particularly in the reporting of suicide cases, to help minimize the associated public health risks.

Adherence to suicide reporting guidelines could make a significant contribution to public health efforts. Responsible reporting, which avoids sensationalism and includes information on how to seek help, could discourage suicide as a perceived solution and encourage those in distress to seek help. For example, the consistent inclusion of a national suicide prevention hotline in news articles could provide a vital resource for those at risk (32). However, such a hotline has not existed in Türkiye since 2008, representing a critical gap in the suicide prevention infrastructure. Targeted interventions are needed to address these issues. Media organizations should establish internal policies in line with international guidelines, and a regulatory body should monitor media compliance to ensure accountability. In addition, the reintroduction of a national suicide hotline, promoted alongside suicide-related news coverage, could serve as a vital safety net for those at risk.

Compared to previous studies conducted in Türkiye (31-34, 39), which often focused on limited time frames or specific types of media outlets, this study provides a more comprehensive and up-to-date analysis by systematically applying the 2023 version of the WHO guidelines. In addition, the larger sample size and broader range of news sources analyzed allow for more generalizable conclusions. By incorporating the most recent international standards, the study adds new insights to the national literature and addresses previously unmet needs for assessing media compliance in Türkiye.

Further research at the national level is necessary to explore how media coverage influences suicidal behavior in Türkiye. Understanding the impact of specific reporting practices could inform both media reforms and public health interventions aimed at reducing preventable suicide-related deaths.

This study was limited to articles available on Google News and focused on text-based reporting over three years. Future research should explore broader media formats and assess the direct public health impact of reporting practices.

Conclusion

This study highlights a notable lack of adherence to suicide reporting guidelines in the Turkish media. The pervasive use of sensational language, explicit details of suicide methods, and the lack of information about help-seeking resources highlight the need for improved media practices. While the precise impact of such reporting on suicide rates in Türkiye remains unclear, evidence suggests that responsible reporting could play a pivotal role in suicide prevention, particularly among vulnerable groups.

Targeted interventions are needed to address these issues, including media training, the development of internal guidelines, and the reintroduction of a national suicide hotline. By adopting responsible reporting practices, the Turkish media can contribute to public health efforts aimed at reducing suicide rates and promoting a more informed and supportive approach to mental health.

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