Suicide and self-harm content on social media platforms:

Tips and tools for safe and sensitive communication

This information has been developed by the Social Media Sub-Group of the
HSE Resource Officers for Suicide Prevention (ROSPs) Learning Community of Practice.
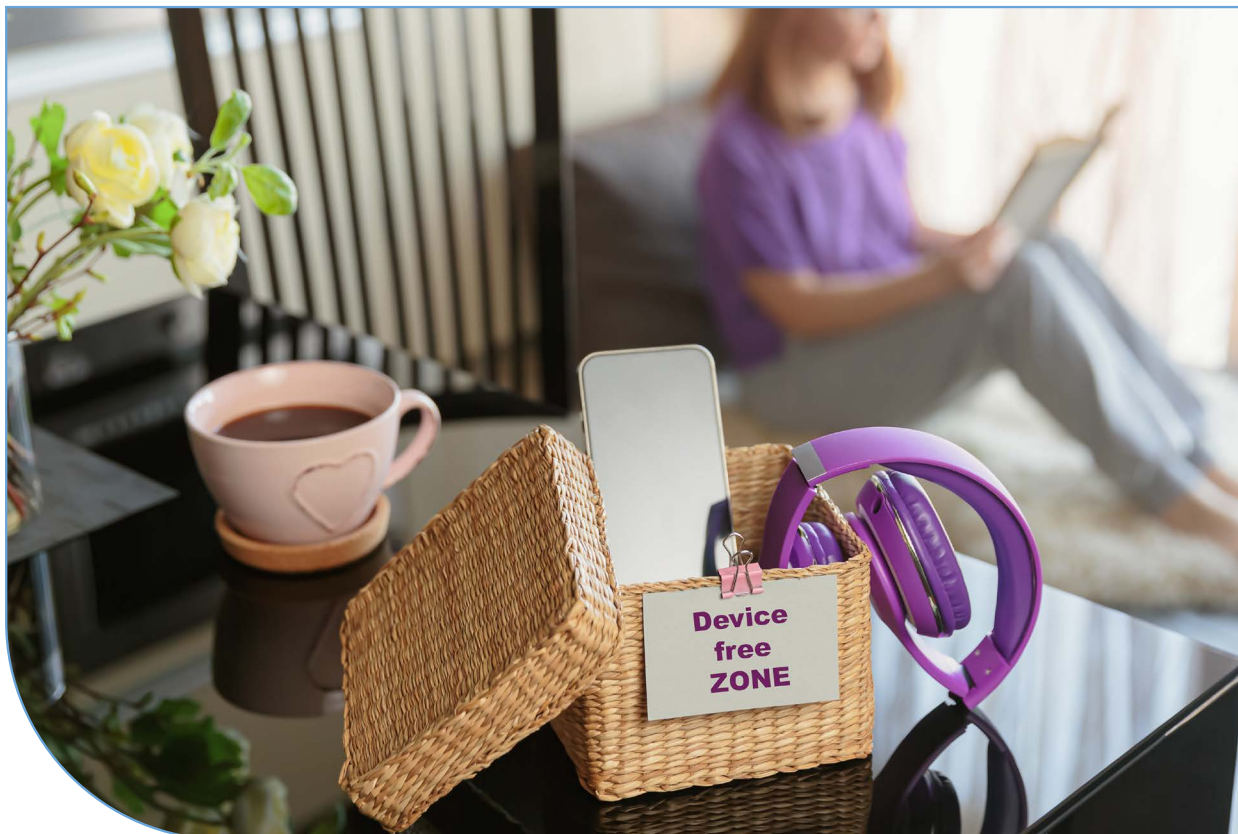
It has been supported by the network of HSE ROSPs nationally, and the HSE National Office for Suicide Prevention (NOSP).

To contact this Sub-Group, or for more information, email info@nosp.ie.

Version 1.0 | July 2024

Contents

1. Introduction and context

Social media is a topic at the forefront of debates around suicide and self-harm in the digital age, with research indicating that the use of social media platforms to share and interact with suicide and self-harm-related content offers potential benefits, while also being potentially harmful.

Benefits associated with online communications on these topics include the provision of accessible and wide-reaching platforms for sharing experiences, the ability to share helpful messages with large numbers of individuals, and the potential to detect at-risk individuals and intervene in and prevent suicide attempts.[1]

However, social media also presents challenges in suicide prevention, particularly when a death by suicide has already occurred, when efforts are focused on effective suicide 'postvention'. Information is disseminated at an accelerated speed, may be difficult to monitor, and can contain false or misleading information. This could include details of suicide locations and method, or adopting language that may be perceived as glorifying or sensationalising the death, all of which can influence those exposed to suicide directly or indirectly. This can lead to an increased risk – a phenomenon known as contagion.[2] [3]

Adolescents and young adults are particularly susceptible to these contagion effects; as the most active age group on social media platforms in Ireland and worldwide,[4] young people aged 16-24 are often at the forefront of information dissemination following a suspected suicide, and suicide clusters occur predominantly among this group.[5] It is therefore especially important for concerned professionals to be aware that young people are a particularly vulnerable audience and are more likely to be influenced by what they see and hear through social media and media exposure than other age groups.[6]

The HSE Resource Officers for Suicide Prevention (ROSP) Learning Community of Practice (LCOP) is a group that shares a common interest and, through their interactions with one another, seek to learn how to carry out their work more effectively. This LCOP agreed to establish a Social Media Sub-Group in response to the growing concern among ROSPs of social media posting and reporting of deaths by suspected suicides around the country. The primary objective of the sub-group was to develop a resource providing information for ROSPs on responding to social media coverage locally on self-harm, suicidal behaviour and suspected suicide. As the process evolved, it became apparent that this resource would be of benefit to the wider network of concerned professionals.

In developing this information, input was sought from the HSE National Office for Suicide Prevention (NOSP) and other relevant organisations with expertise in this field. One of the first actions facilitated by the sub-group was to carry out a literature review on responding to content relating to suicide and self-harm on social media platforms. This document; Addressing and Managing Suicide and Self-Harm-Related Content on Social Media: A Literature Review, was compiled by Méabh O'Shea (Research and Administrative Support, Resource Office for Suicide Prevention Dublin North City and County) and Sandra Taylor (Resource Officer for Suicide Prevention Dublin North City and County).[7]

This review highlighted that best practice guidelines for responding to harmful content relating to suicide

and self-harm on social media that aim to prevent contagion are in their infancy. However, current recommendations include: contacting administrators of memorial pages and groups; reporting content that is inappropriate, or with the potential to cause an emotional response, to social media platforms; and sharing helpful resources.

Another objective of the sub-group was to link with the HSE NOSP and ROSP colleagues to support implementation at local level of the national Connecting for Life action 1.4.1: Engage with online platforms to encourage best practice in reporting around suicidal behaviour, so as to encourage a safer online environment in this area (Lead: Department of Communications, Energy and Natural Resources (DCENR), Partners: NOSP, Non-statutory partners).[8]

Additional resources to support and guide people in this challenging area are provided in this document. Other background information for the community and voluntary sector is provided in 'Suicide Prevention in the Community – Connecting, Communicating, Caring: A Practical Guide'.[9]

Who these tips and tools are for

These tips and tools have been developed to raise awareness and offer practical advice to professionals working in statutory, voluntary and community services, in particular, in the mental health area. They may also be of benefit to community leaders, volunteers, parents, carers or those with an interest in learning more about the way in which social media can be used to communicate in a safe and sensitive way about suicide and self-harm.

In addition, the information contained in this document may be of support to organisations operating websites or platforms that host user-generated content, for example, for website moderators or those responsible for communications.
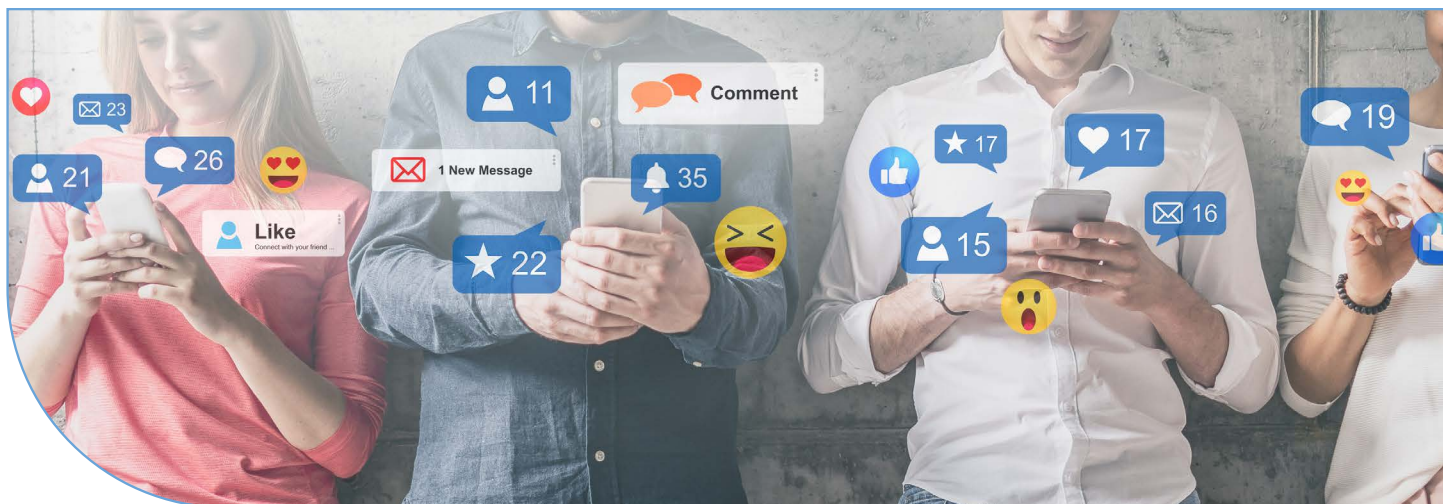
2. Glossary of terms

Clickbait – Content designed to encourage users to click on a link to a specific page or website by utilising sensationalised or misleading headlines or graphics.

Community Response Plan – Guidelines on the development and activation of a community response plan for incidents of suspected suicide.[10]

Contagion – Suicidal behaviour in one or more people can influence those who are exposed to or affected by it. This can happen either directly (for example, knowing someone) or indirectly (for example, through the media). This is known as suicide contagion. It can lead to some people being at increased risk of suicidal behaviour themselves, particularly adolescents and young adults. Not all suicides that occur in clusters are the result of contagion. A rise in suspected suicides after a widely publicised suspected suicide is known as the Werther effect (see further definition).

Content warning – A statement made prior to sharing potentially disturbing content. That content might include graphic references to topics such as sexual abuse, self-harm, violence, eating disorders, and so on, and can take the form of an image, video clip, audio clip, or piece of text.

Cyberbullying – Cyberbullying is a form of bullying which occurs on social media, online forums, text, email or by other electronic means.

Dark web – An extension of the deep web not usually discoverable by standard search engines and often operates on encrypted internet connections.

Deep web – Areas of the internet that protect private accounts and information not meant for public viewing (e.g. medical and bank account records).

Means – Any method that a person may use to end their life.

Murder-suicide – Occurs when someone takes the life of another person or persons before taking their own life.[11]

Papageno Effect – The preventative effect of responsible reporting of suicide and the presentation of non-suicide alternatives to crises in the media.[12]

Post – The act of publishing your own original content online. This includes, but is not limited to, art, GIFs, images, links, memes, messages, photos, poetry, videos, and vlogs to other websites/posts.

Pile on – When online harassment is co-ordinated against an individual. 'Pile on' culture has become commonplace on the internet, via apps and across social media platforms.

Postvention – Postvention or responding to suicide refers to the response, or intervention, to support relatives, friends and communities after someone dies by suicide.

Private message – Also known as PM or DM ('Direct Message'), it is a private message sent between specific people which cannot be initially viewed by others. Messages can be shared by recipients by forwarding or screen-shot, regardless of the initial intention.

Screenshot – A means of capturing what you are seeing on the display screen which you can then share with others. It is also referred to as 'screen recording' or 'screen grabs.'

Self-harm – The various methods by which people harm themselves. Varying degrees of suicidal intent can be present and sometimes there may not be any suicidal intent, although an increased risk of further suicidal behaviour is associated with all self-harm.

Social media platform – Online platforms such as websites and mobile applications (apps) that allow users to create, share and discuss content that can be viewed by others. Popular examples include but are not limited to, Facebook, Instagram, X (formerly Twitter), Tumblr, Snapchat and YouTube.

Suicide cluster – A series of three or more closely grouped suicides that are linked psychologically and/or by locality and/or by social relationships.[10]

Thread – The list of comments and discussion on a social media post, which can be viewed in ascending or descending order.

Trolling – Negative, offensive and often abusive content posted online with the intention to provoke or upset users, usually in comment threads.

Vaguebooking – An online post that is cryptic but also alarming such that it prompts outreach from friends and family.

Viral – When an image, video or other content is circulated rapidly online from one user to another.

Werther effect – This describes a risk of suicide associated with a highly publicised suicide. The term comes from the name of the main character, a young man, in Johann Wolfgang von Goethe's novel The Sorrows of Young Werther who died by suicide. Following its publication in 1774, there were indications of imitative suicides among young men in Germany, and in Denmark and Italy.[13]

3. Types of social media

Detailed below are the most popular social media platforms that are currently available. These have been categorized into the types of social media content people engage with. While these guidelines define social media platforms as online platforms that allow users to create, share and discuss content that can be viewed by others, it is important to note that content originally posted on social media platforms can be easily shared through other mediums such as messaging applications, by email or on gaming platforms. Given that the impact of viral sharing is now being more widely acknowledged, providers are responding by introducing measures that give more control to the content sender, thereby improving protection of privacy.

It is also worth noting that the social media arena is an ever evolving and changing landscape, as are the patterns of use of those who interact with the various sites and platforms.[14] The list below is not definitive and is subject to change.

Type of social network	What they are used for	Examples
Social networking	To connect people and organisations so that they can share knowledge, information and different ideas.	Facebook X (formerly Twitter) Mastodon Threads
Media sharing	To find and share online resources, such as videos and photos. Some also have a variety of different interactive features.	Instagram YouTube TikTok Snapchat Telegram Whatsapp
Discussion forums	A way to find information, ask a question, make a comment and share ideas.	Reddit Discord
Blogs	To share information that is written in a more conversational style and is uploaded onto a webpage.	Wordpress Tumblr
Professional	For professional networking and career development. Users can display resumes, search for jobs, and enhance and maintain professional reputation and relationships.	LinkedIn
Bookmarking	To promote and explore interests by pinning content on virtual bulletin boards.	Pinterest
Audio sharing	To communicate via audio with others using voice chat rooms and live audio discussions.	Clubhouse

The regulatory framework for online safety in Ireland

In 2023 Coimisiún na Meán became the new media regulator for online safety, television broadcasting, and video-on-demand services in Ireland.

Coimisiún na Meán is currently developing Ireland's first Online Safety Code. After consultation, the finalised Code will form part of Ireland's overall online safety framework, making digital services legally accountable for how they keep people safe online. This framework will also include the EU Digital Service Act (DSA) and the EU Terrorist Content Online Regulation, enforced in Ireland by Coimisiún na Meán.

In 2024 Coimisiún na Meán published details of the designation of ten services as named video-sharing platform services. The draft Online Safety Code will be applied to these services. They are:

- Facebook
- Instagram
- YouTube
- Udemy
- TikTok
- LinkedIn
- X (formerly Twitter)
- Pinterest
- Tumblr
- Reddit

In 2024 Coimisiún na Meán outlined how it may award the status of 'Trusted Flagger' to entities or agencies. Trusted Flaggers will work within designated areas of expertise to identify illegal content. Where a Trusted Flagger identifies illegal content, they may submit a notice to the relevant online platform. Online platforms will be legally obliged to give their notices priority, and to process and decide on these reports without undue delay.

To become a Trusted Flagger, an applicant body must:

- have expertise and competence for the purposes of detecting, identifying and notifying illegal content;
- be independent from any provider of online platforms;
- carry out its activities for the purposes of submitting notices diligently, accurately and objectively.

Coimisiún na Meán can also receive complaints from users of online services who believe the provider of an online service has not complied with its obligations under the EU Digital Service Act (DSA). They provide additional information on their website about your right to complain, and how to do so.

4. How to respond to content and post safely

In any setting, the topic of suicide should always be approached with care and compassion. It should be remembered that behind any commentary on suicide, there are real people, people who have died, people who are bereaved, or people who might be quite vulnerable themselves.

It is important to use sensitive and non-stigmatising language when engaging in a conversation, talking or writing about suicide. Using language and words that are helpful and respectful, will encourage open and safe conversations about suicide, and its prevention. They can help to create environments that are free of stigma, judgment or prejudice.

Whatever the scenario, be mindful that being exposed to suicide or self-harm content can be upsetting. In particular, witnessing a self-disclosure about suicide or self-harm online, can be emotionally difficult, could lead to feelings of helplessness or could cause an emotional response. As a professional, make sure that you source the support that you need when handling such content, during or after the fact.

- More information on using safe and appropriate language associated with suicide and self-harm, from the HSE National Office for Suicide Prevention (NOSP).

- More information on safe language and using appropriate imagery associated with suicide, from Roses in the Ocean (Australia).

- Samaritans Ireland provide top tips for media reporting of suicide-related stories – these tips could also apply to online content on social media.

- The World Health Organisation provides Preventing Suicide, a Resource for Media Professionals – this media resource now applies to new media (i.e. online, digital and social media) as well as more traditional media (i.e. print, broadcast by radio or television).


What is covered in this document?

The information in this document has been compiled to raise awareness of how to respond to suicide and self-harm content on social media. It sets out what to avoid doing when posting, and why. It also explains how to post content in a safe and sensitive way, and the reasons why this is important.

The information covers two general scenarios for suicide and self-harm content:

Intervention - when a person may be at risk of suicide or engaging in self-harm.

**Postvention** - after a suspected suicide has occurred.
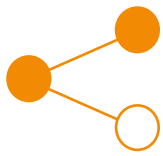
Intervention

Content where a person may be at risk of suicide or engaging in self-harm.

This type of content might include:

- A self-disclosure about suicide (including suicide thoughts, plans and attempts) or self-harm on social media.

- A change in behaviour or the presence of entirely new behaviours is something to look out for when concerned that a person may be suicidal. This includes how an individual is behaving online and on social media. For example:

  - Vaguebooking, i.e., posting unclear but alarming sounding posts, e.g., 'Don't know what to do anymore, wondering if life is worth it'. Vaguebooking can be a sign of a more serious issue.

  - Deletion of a social media account or wiping an account of content. This may be a sign of an individual withdrawing from social interaction and 'putting their affairs in order' while planning for suicide.

- Harmful content from pro-suicide and pro-self-harm communities, sometimes on less accessible areas of the internet such as the Deep web or Dark web. In these areas, content can be more explicit, and contain pro-self-harm, or pro-suicide information, forums or communities. These communities are not commonly-used and are not as widely accessible as sites providing helpful information. However, they can still communicate very risky or harmful information.[14]
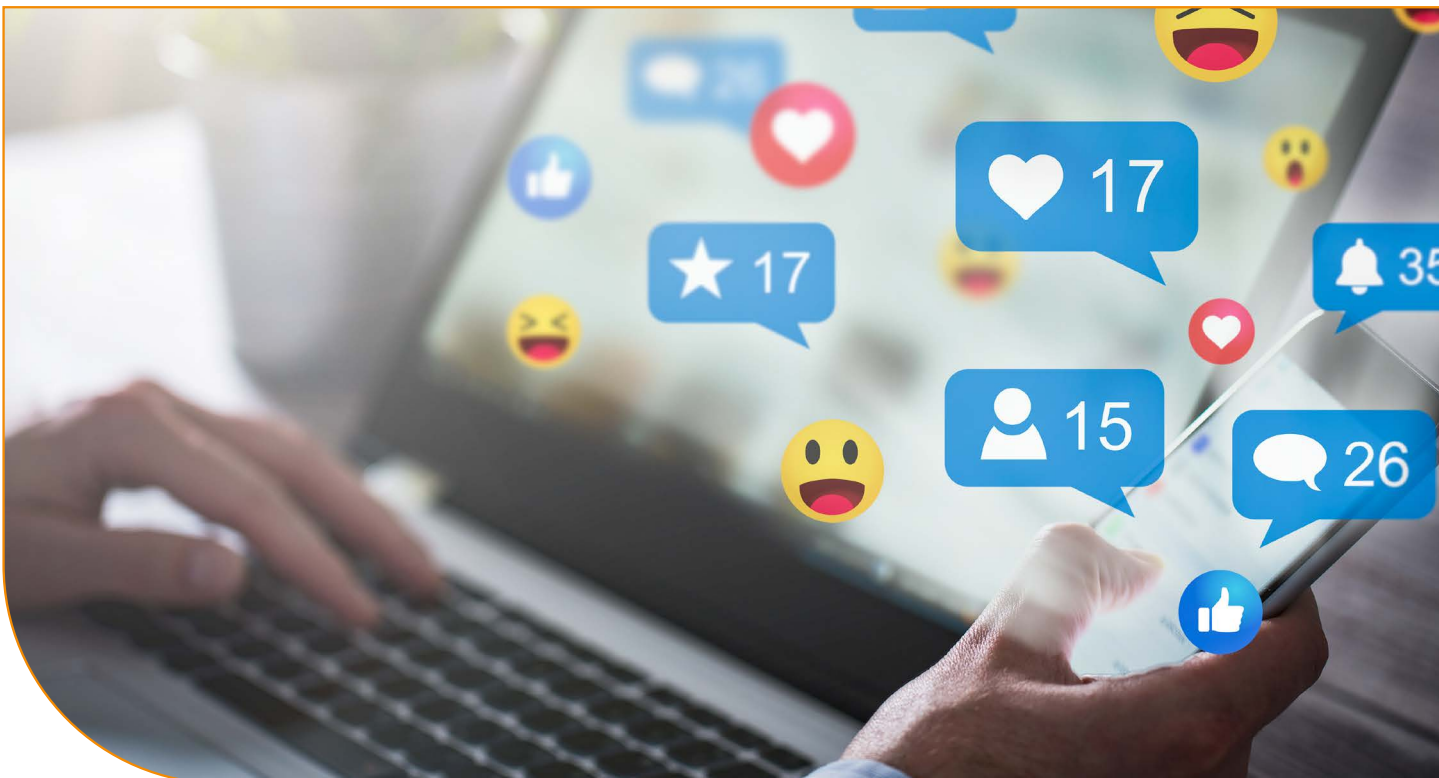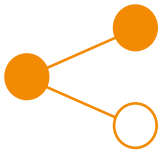
Intervention

Content where a person may be at risk of suicide or engaging in self-harm.

What to do

Take action – do not assume that someone else will intervene.

- Always respond in private message.

- Look at the person's posts to acknowledge their feelings and specify why you are worried.

- Ask the person directly if they are thinking of suicide.

- Reassure the person that support is available and encourage them to seek professional help.
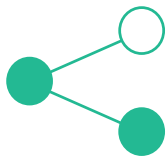
If you are still concerned for the persons safety, or cannot reach them.

- Contact the person's family or someone in their social network who may be able to check on them.

- Report the content to the Gardaí or Emergency Services.

- Report the content to the social media platform. Reporting Social Media Content that Promotes Suicide or Self-harm is available from the HSE National Office for Suicide Prevention).[15]

If you do not feel comfortable responding to a post that suggests someone may be at risk of suicide or engaging in self-harm, you should immediately inform a trusted individual, and seek professional advice (for example, a phone or online service, or health professional) to ensure the person is contacted and/or the content is reported without delay.
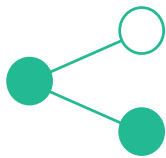
For parents/concerned adults:

- Parents can take an interest in their young people's internet use and discuss content with them. This can help to support young people to learn how to manage their social media use safely.

- Webwise provide information, advice and education - for young people, teachers and parents.

- Consider the young person's time spent online. Useful information on this topic is available from Jigsaw - Time spent online.

- If there are concerns about a young persons use of the Dark Web, helpful information is available from internetmatters.org - What is the dark web? Advice for parents.

Postvention

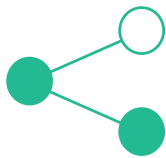Content after a suspected suicide has occurred in a local community, including posts on memorial pages.

What to avoid	Why
Those close to the person who has died finding out about the death through social media and/or after others who did not know the person that well.	This can be very upsetting for family and friends. A more gentle way of letting them know would be better (in person, if possible).
Writing something that you would not say directly to a family whose loved one has died by suspected suicide. Remember even if you post something privately, it could become public.	Remember what goes online may be there forever. People in your community may be already going through a complex grief process and it is important that you do not post something that might make them feel worse.
Posting suicide notes, final text messages, social media posts and emails from the person who has died.	This is unhelpful and unsafe and can cause even greater pain and risk in your community. Individuals may over identify with the deceased, the death could be romanticised or sharing this information could cause greater distress to the family.[6]
Giving descriptions of the methods used, including how the means were obtained.	This level of information may increase risk among some vulnerable individuals in the community.
Providing detailed information about suicide in a particular location.	This may put other vulnerable people at greater risk, including those living outside your community as information can be spread to a wide geographical area through social media. It could also draw unhelpful attention to the particular location, as a site where people go to die by suicide, or stigmatise a particular area.
Using language which implies that suicide is noble or brave.	Use of language that glorifies or sensationalises the suicide may increase risk among some vulnerable individuals in the community.
Using stigmatising language which reinforces myths, stigma or stereotypes about suicide or self-harm.	This can make it harder to reach out for help, as people might worry that they will be judged if they do so.

Postvention

Content after a suspected suicide has occurred in a local community, including posts on memorial pages.
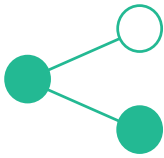
What to avoid	Why
Oversimplifying the cause of suicide by saying it happened for one reason, for example, a break-up, job loss, or that there was no cause at all.	Others may identify with or feel at one with the person who has died as they may be going through a similar experience. This might put them at risk too. It might also present suicide as an understandable response to a difficult situation. Describing a suicide as having no cause, for example, in a person that seemed to be happy and healthy, might give the impression that suicide cannot be prevented.
Assigning blame to any one person or group of people as to the cause of the death.	While blame is a common response, the circumstances that result in someone taking their own life are very complex and cannot be put down to one thing.

Postvention

Content after a suspected suicide has occurred, in a local community, including posts on memorial pages.

| What to do	Why
Post information on factors that protect against suicide.	There are some individual characteristics or things that we can do in communities to help to protect against suicide. For further reading see Suicide Prevention in the Community – Connecting, Communicating, Caring: A Practical Guide.[9]
Post messages to say that suicide is preventable.	While blame is a common response, the circumstances that result in someone taking their own life are very complex and cannot be put down to one thing. Communities can play a very important role in preventing suicide by looking out for those who are vulnerable, supporting them and encouraging them to seek help. Most of the time, there is no one event or thing that leads someone to take their own life. It is usually a lot of different things coming together.
Share information on how to access support resources for those who are, or might become, distressed or suicidal due to the death. Make sure that you are posting accurate information from reliable sites.	This lets people know where to reach out for help if they need it for themselves or for someone they are concerned about.
Share stories of people who have got through a difficult situation, without mentioning the suicide method or location. Post messages of hope and recovery.	This can help others to cope who are going through a similar experience, or encourage them to seek help. It can also spread messages which offer hope that recovery is possible. Note: Before you post details of your own personal story, it is important to consider that people who did not know about your experience may find out about it through social media. It may alos be difficult to remove your content later, if you change your mind or feel differently.
Report harmful posts, videos, pictures, information or links that you come across on social media content on suicide or self-harm to that particular online platform. Reporting Social Media Content that Promotes Suicide or Self-harm is available from the HSE National Office for Suicide Prevention).[15]	This is the best and fastest way of having them removed so that this kind of information is not seen and read by people who may be vulnerable.

Postvention

Content after a suspected suicide has occurred, in a local community, including posts on memorial pages.

| What to do	Why
Set out the 'Terms of Use' that outline the rules for posting on an online memorial page or group, and encourage users to look after their own wellbeing.	It sets out the rules on how messages can be safely communicated.
Block or unfollow a person or an account that you think is posting harmful material.	This reduces your exposure to harmful content.
Consider if you should take a break from social media, not use it as much – or instead engage with content that is more reliable and helpful.	If the memorials or posts that you are reading are upsetting for you, it might be better to set limits on your social media use, be more selective about the content you engage with, or take a break. Instead, look after yourself by doing other activities that you enjoy.
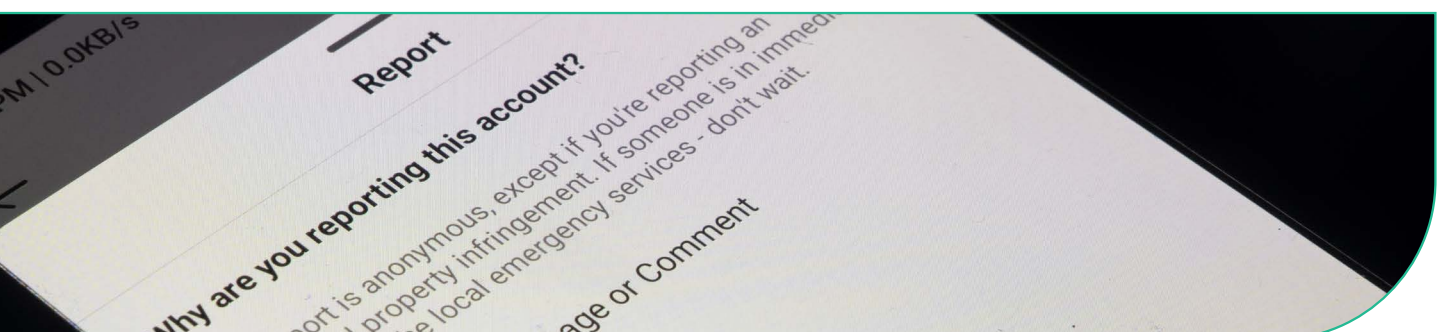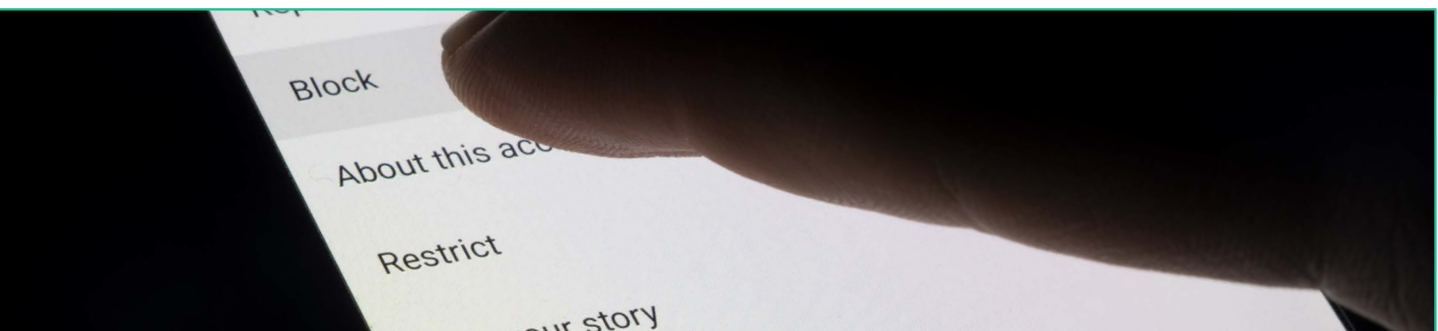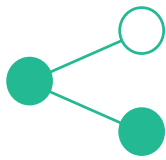
Postvention

Content relating to the suspected suicide of a celebrity or other well-known person.

What to avoid	Why
Speculating that the death is by suicide when the cause is not immediately known.	This is unhelpful. Do not retweet or repost information that has not been confirmed. It may cause even more pain to an already grieving family, workplace or community.
Posting one message after another about the celebrity who has died.	Too many messages of this nature can affect others who might feel vulnerable at this time.
What to do	**Why**
Focus on the celebrity's life, how they contributed to society and how their death can be used as an opportunity to raise awareness of suicide prevention.	The death of a celebrity by suspected suicide is usually widely reported. This can glamorise and normalise suicide. It is important to strike a balance between highlighting what the person had achieved, while also describing their death as a lost opportunity for them to have received support.
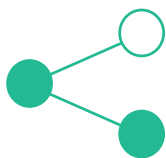
Postvention

Content relating to a suspected murder-suicide.

What to avoid	Why
Avoid posting graphic details and speculating about the reasons why this has happened.	Not only are these very upsetting to view, but this type and level of information may increase risk among some vulnerable individuals in the community.
What to do	**Why**
Share information on how to access support resources for those who are, or might become, distressed or suicidal due to the deaths.	This lets people themselves, or others who they are concerned about, know where to reach out for help if they need it.
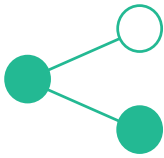
Postvention

Content relating to stories of suicide in, for example films, television programmes or books.

What to avoid	Why
Using language to describe the actions of the characters which may imply that suicide is noble or brave.	This may make suicide more appealing to a person who is watching or reading this, and who is also feeling vulnerable.[16] Sometimes people, in particular, young people may not fully understand the finality of their actions in real-life, unlike the world of the characters in works of fiction.
Presenting suicide or self-harm in an appealing or positive manner.	It is not helpful to present suicide as a good or common way of coping with difficult life situations. Note: Online series and social media can be accessed at all times, which can change or increase viewing patterns, such as 'marathon' or 'binge watching'. This can make vulnerable viewers over-identify or feel even more at one with a person who takes their own life (real and fictional). [14]

5. **Key points to remember when posting online**

The way suicide and self-harm are discussed online, is very important. Here are some key points to remember:[17]

- Think before you post anything online about suicide and self-harm.*

- Choose the words that you use carefully – use sensitive language.

- Think about whether the content is safe and helpful to others – use a content warning, if necessary.

- Think about whether you feel comfortable to share your own story.

- Remember once something is posted it can exist forever.

- Think about how often you post.

- Be careful of what you repost or share.

- Don't speculate about suicide.

- Be mindful of how you talk about people who have died by suicide or suspected suicide.

- Never post details about suicide methods or locations.

- Report content that is harmful. Reporting Social Media Content that Promotes Suicide or Self-harm is available from the HSE National Office for Suicide Prevention).[15]

- Post information on support services available locally and nationally, including 24/7 services.

- Encourage others to seek support.

- Share messages of hope and recovery.

*The **THINK** acronym was created to help people be kinder when posting on social media. It suggests that before posting something to ask:

T	Is it true?
H	Is it helpful?
I	Is it inspiring?
N	Is it necessary?
K	Is it kind?

6. Self-care

It is important to be mindful of the impact that exposure to negative online content such as conversations, videos or images relating to self-harm or suicide can have on your own wellbeing. Research has shown that even passive exposure (i.e., viewing content but not creating or posting content) to suicide or self-harm-related social media content can increase emotional disturbance and even suicide ideation in viewers, including in those with no prior history of suicide ideation.[3],[18]

It is important to prioritise self-care at times when incidents or content related to suicide and self-harm impact on our well-being. Listed below are some practical things which we can do to manage our wellbeing in response to difficult/stressful experiences:[19]

- Talk to a friend/colleague/line manager about your experience and feelings. Talking to someone can help to reduce feelings of isolation and stress.

- Participate in staff de-briefing sessions if appropriate or utilise peer support, through either formal or informal networks of peer support.

- Take time to relax. Relaxation techniques can be helpful as stress is completely normal at a time like this. Learn some stress management strategies and use them frequently. Give yourself time to recover from the crisis.

- Get enough sleep. Make sure you allow enough time for a full night's sleep. If you have difficulty sleeping for more than a week you should consult with your GP.

- Get some exercise. A brisk walk is good for the body and has a calming effect on the mind as well. Mild exercises can help to combat stress.

- Spend time with family and friends. Don't isolate yourself - it is important to have people around you or available to you during stressful times.

- Maintain a good diet. Foods can help tame stress in several ways. Comfort foods (such as warm oatmeal) can boost levels of serotonin, a calming brain chemical. Other foods can cut levels of cortisol and adrenaline, stress hormones that take a toll on the body over time. A healthy diet (including limiting alcohol intake) can counter the impact of stress, by shoring up the immune system and lowering blood pressure.

- If one is available to you, contact your Employee Assistance Programme (EAP) or Occupational Health (OH) department, especially if you are concerned that your response to the event is too intense or lasting too long.

- It is also important to talk to your GP about how you are feeling.

It can also be helpful, at organisational level, to support self-care practices in practical ways by, for example, building in a short mindfulness exercise at the start of meetings or by creating a culture which encourages teams to support one another to look after their well-being and help reduce the stigma that can act as a barrier to staff accessing support for their own mental health.

Organisations may also want to consider a guidance document jointly developed by the Health and Safety Authority and the State Claims Agency – Psychosocial Risk Assessment: Guidance for Exposure to Sensitive Content.

7. Information and resources

Young people

Samaritans: Guidance for reporting on youth suicides and suicide clusters. This information highlights that young people may be:

- At increased risk of suicide if they have been affected by suicide. For example, after a death at their school or university.

- More likely to imitate suicidal behaviour.

- More likely to self-harm or have thoughts of suicide.

- More likely than other groups to behave spontaneously and respond more emotionally to life experiences.

- Less likely to possess a level of emotional maturity that would help them see a way through difficult life problems. For example, issues such as a relationship breakdown or anxiety relating to academic failure can feel all-consuming and never-ending, which can increase the likelihood of these being experienced as overwhelming.

- Less likely to grasp the permanent nature of death.

Guide for communities on using social media following the suicide of a young person and to help prevent suicide clusters. A resource developed to help communities, who may have experienced the suicide of a young person, to provide information and support via social media in a safe and supportive way, from Orygen Youth Mental Health Australia.

Tips for talking safely online about suicide. #chatsafe Top 10 Tips, from Orygen Youth Mental Health Australia.

Young person's guide for communicating safely online about suicide. These guidelines provide tips for young people on how to communicate safely online about suicide, from Orygen Youth Mental Health Australia.

Parents' Guide to a Better Internet. A booklet developed to support parents, as they support their children to be safer online, from Tusla.

Bereavement support

You Are Not Alone: Support for people who have been bereaved by suicide. A support guide for those bereaved by suicide, developed by a working group made up of individuals who have lost loved ones through suicide and ROSP and NOSP representatives.

Bereavement information from the HSE. Advice on coping with grief after bereavement or loss and how to support others.

The Irish Childhood Bereavement Network. Information, guidance, resources and support on children, young people and grief.

Good practice guidelines

WHO: Preventing Suicide, a Resource for Media Professionals. Produced by the WHO in collaboration with the International Association for Suicide Prevention, summarises current evidence on the impact of media reporting of suicide, and provides practical guidance for media professionals on how to report on suicide responsibly.

Managing self-harm and suicide content online: Guidelines for sites and platforms hosting user-generated content. The guidelines have been developed by Samaritans for policymakers, moderators of websites and individuals wanting to ensure that they can protect users and employees from potentially harmful content on self-harm and suicide.

Samaritans: Media guidelines in Ireland. Guidelines by Samaritans Ireland for reporting suicide offer practical advice on how to reduce the risk of media coverage negatively impacting on people who may be vulnerable.

Samaritans: The internet and suicide. A range of resources including Online harm advisory service, Guidance for practitioners and Online Excellence Programme – a hub of resources relating to online suicide prevention.

Briefing: Murder-Suicide and Media Reporting. A briefing by the NSRF, reinforcing the need for sensitive and factual reporting of murder-suicide incidents in order to minimise harm and increase awareness.

Lifeline Online Postvention Manual. Recommendations by the National Suicide Prevention Lifeline (USA) detailing how to safely memorialise someone who has died by suicide which can be applied to online memorials and online messages about the deceased.

Recommendations for blogging on suicide. Best practices for blogging on suicide are a project of Suicide Awareness Voices of Education (SAVE) and were developed with the guidance and expertise of an international advisory panel of experts and bloggers.

Technology, mental health and suicide prevention: A good practice guide. Good practice guidelines developed by ReachOut Ireland for the safe delivery of online mental health information and support.

13 Reasons Why Netflix series: Considerations for educators, national association of school psychologists. Guidelines to help adults (educators, school-employed mental health professionals, parents, caregivers, clinicians and youth leaders) to identify and help students who are concerned with or affected by the Netflix Series 13 Reasons Why.

Strategies

Connecting for Life, 2015-2024. Connecting for Life, Ireland's National Strategy to Reduce Suicide developed in partnership with voluntary, statutory and community groups working in suicide prevention in Ireland.

Sharing the Vision – a Mental Health Policy for Everyone. A policy framework for the continued development and enhancement of mental health services in Ireland from 2020 to 2030.

Online safety

Coimisiún na Meán. In March 2023, Coimisiún na Meán became the new media regulator for online safety, television broadcasting, and video-on-demand services. Coimisiún na Meán is currently developing Ireland's first Online Safety Code.

Action Plan for Online Safety 2018-2019. The Irish Government's first Action Plan for Online Safety which aims to set out and implement actions which will improve online safety for everyone in Ireland.

Be Safe Online. Ireland's official online safety hub by the Government of Ireland, providing access to a wide range of resources to support online safety for all.

Webwise. Information for parents and young people on staying safe online. A website by the Department of Education which offers advice and education on online safety for young people, teachers and parents.

Guide to reporting content to social media platforms: Reporting social media content that promotes suicide or self-harm. A helpful booklet developed by the HSE NOSP (2019) outlining how social media content that promotes suicide or self-harm can be harmful, and how to report it.

Online safety, suicide and self-harm. General resources and information from the HSE National Office for Suicide Prevention.

Language

Information on language and suicide. Information from the HSE NOSP highlighting the importance of using sensitive and non-stigmatising language.

#chatsafe for Parents and Carers – Ireland Edition 2. Developed by Orygen, the National Centre of Excellence in Youth Mental Health, Australia.

Safe language and using appropraite imagery. Information and resources from Roses in the Ocean (Australia).

General mental health supports and services

Your Mental Health. The HSE website offering a comprehensive guide to mental health supports and services available in Ireland.

Get urgent help. Information on getting urgent help, from the HSE National Office for Suicide Prevention (NOSP).

References

1   Robinson, J., Cox, G., Bailey, E., Hetrick, S., Rodrigues, M., Fisher, S. & Herrman, H. (2016). Social media and suicide prevention: A systematic review. Early Intervention in Psychiatry, 10, 103–121.

2   Luxton, D.D., June, J.D. & Fairall, J.M. (2012). Social media and suicide: A public health perspective. American Journal of Public Health, 102, 195–200.

3   Arendt, F., Scherr, S. & Romer, D. (2019). Effects of exposure to self-harm on social media: Evidence from a two-wave panel study among young adults. New Media & Society, 21(11–12), 2422–2442. https://doi.org/10.1177/1461444819850106

4   Eurostat. (2019). Individuals - Internet Activities [isoc_ci_ac_i]. [Public Dataset] Available at: http://appsso.eurostat.ec.europa.eu/nui/show.do

5   Robertson, L., Skegg, K., Poore, M., Williams, S. & Taylor, B. (2012). An adolescent suicide cluster and the possible role of electronic communication technology. Crisis, 33(4), 239–245.

6   Samaritans. (2020). Samaritans Media Guidelines. Available at: https://www.samaritans.org/ireland/about-samaritans/media-guidelines/

7   O'Shea, M. & Taylor, S. (2021). Addressing and Managing Suicide and Self-Harm-Related Content on Social Media: A Literature Review.

8   HSE National Office for Suicide Prevention. (2015). Connecting for Life: Ireland's National Strategy to Reduce Suicide 2015–2024. Available at: https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/connecting%20for%20life.pdf

9   O'Sullivan, M. & Tiernan, E. (Ed.), in collaboration with the HSE, and other statutory, voluntary and community groups working in suicide prevention in Ireland. (2023). Suicide Prevention in the Community: Communicating, Connecting, Caring. A Practical Guide. Dublin: HSE National Office for Suicide Prevention. Available at: https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/suicide-prevention-in-the-community.html

10 HSE National Office for Suicide Prevention. (2021) Developing a Community Response to Suicide. Available at: https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/developing-a-community-response-to-suicide.html

11 National Suicide Research Foundation. (2021). Briefing: Murder-suicide and Media Reporting. Available at: https://www.nsrf.ie/wp-content/uploads/2021/02/Briefing_Murder-suicide_NSRF_26-02-2021-Final-1.pdf

12 Spencer-Thomas, S. (2018). The Papageno effect: What does it mean to promote the positive in suicide prevention? Interview with Dr. Thomas Niederkrotenthaler. www.sallyspencerthomas.com/hope-illuminated-podcast/18

13 Arensman, E. (2022). Self-harm and suicide in young people: Associated risk factors and evidence based interventions, UCD ACAP Webinar 15th July 2022. Available at: https://www.nsrf.ie/wp-content/uploads/2022/07/Webinar_UCD-ACAP_15-07-2022_Prof-Ella-Arensman.pdf

14 McTernan, N. & Ryan, F. (2020, updated 2023). The Harmful Impact of Suicide and Self-harm Content Online: A Review of the Literature. National Suicide Research Foundation. Available at: https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/the-harmful-impact-of-online-content-a-literature-review.html

15 HSE National Office for Suicide Prevention. (2019). Reporting Social Media Content that Promotes Suicide or Self-Harm. Available at: https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/reporting-social-media-content-v1.pdf

16 Samaritans. (2022). Guidance on depictions of suicide & self-harm in drama & film. Available at: https://www.samaritans.org/ireland/about-samaritans/media-guidelines/guidance-portrayals-suicide-and-self-harm-drama/

17   Samaritans. (2022). How to talk about suicide safely online. Available at: https://www.samaritans.org/ireland/about-samaritans/research-policy/internet-suicide/online-safety-resources/how-talk-about-suicide-safely-online/

18   Swedo, E.A., Beauregard, J.L., de Fijter, S., Werhan, L., Norris, K., Montgomery, M.P., Rose, E.B., David-Ferdon, C., Massetti, G.M., Hillis, S.D. & Sumner, S.A. (2020). Associations between social media and suicidal behaviours during a youth suicide cluster in Ohio. J Adolescent Health, 68(2), 308–316. https://doi.org/10.1016/j.jadohealth.2020.05.049

19   Health Service Executive & the State Claims Agency. (2013). Supporting Staff Following an Adverse Event. Available at: https://www.hse.ie/eng/about/who/qid/other-quality-improvement-programmes/opendisclosure/staff-guide-supporting-staff-following-an-adverse-event.pdf

Connecting for Life