

# Internet and Suicide

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## INTRODUCTION

It is now commonly accepted that the appearance and expansion of Internet-based communication has given rise to new possibilities for forging social networks and establishing “communities of interest.” One such ‘interest group’ which has found a community online comprises those who wish to end their lives. This has become a cause for concern to public health officials, governments, and suicide prevention professionals, while on the other hand possibilities for outreach and prevention in the new medium are being explored. The ways in which suicidal individuals have availed themselves of the information resources and connective possibilities of the Internet are outlined below, along with how governments and other parties interested in suicide prevention have responded to this new domain of risk.<sup>1</sup>

## Suicide and Public Health

Suicide is both a personal tragedy and a public health issue. In 2002, 877,000 lives were lost worldwide, representing 1.5% of the global burden of disease (WHOSIS, 2003). Suicide rates vary from country to country, with the highest in eastern Europe and the lowest in Muslim countries and Latin America. For every individual who dies by suicide, it is estimated that 10 to 25 make a non-fatal suicide attempt. Over and above the distress caused to survivors, suicide and suicide attempts cost billions of dollars each year in lost productivity and health care costs (Goldsmith, Pellmar, Kleinman, & Bunney, 2002). In the United States, suicide is the third leading cause of death in the 15- to 24-year age group (WISQARS, 2003). In the majority of cases, suicide is not an informed choice in the context of terminal illness, rather it is most often a complication of mental illness. Over 90% of those who die by suicide have a diagnosable psychiatric disorder. Most commonly suicidal individuals suffer from a depressive disorder, but can also suffer schizophrenia,

personality disorders, and alcohol or substance abuse (Arsenault-Lapierre, Kim, & Turecki, 2004).

## Suicide and Media

The traditional print and electronic media have been the focus of suicide prevention efforts on two fronts. First, the media are seen to represent an avenue for educating populations about mental illness and its treatment, and for the dissemination of information about help and support for suicidal individuals. Second, there are concerns that the media sometimes practice ‘irresponsible reporting’ of suicide that misinforms the public as to its causes and preventability, and glamorize suicide in ways that are thought to incite vulnerable individuals to engage in suicidal behavior. This phenomenon is termed contagion and has been well documented in the scientific literature (Gould, 2001).

As an information and communication medium, particularly as one favored by younger sections of the population, the Internet is seen as both a medium that might extend the possibilities of suicide prevention beyond the scope of the traditional media, and as a site for the emergence of new and, for many, worrisome practices. This article will discuss the four major contexts in which suicidal behavior and the Internet intersect: (1) the role of the Internet as a source of information on means and methods to end one’s life; (2) the Internet as a communal space where people can meet and make arrangements for suicide pacts; (3) the Internet as an important avenue for pursuing preventative measures; and (4) steps that governments have taken to intervene in the use of the Internet for the promotion of suicide.

The issue of suicide and the Internet has only come to the attention of the general public, suicide prevention professionals, and governments in recent years. As such, there is a dearth of published research, either scientific, public policy, or sociological. For example, there is currently little reliable data available on the prevalence of suicide-related content on the Internet.

Estimates range from 900 sites to more than 100,000 suicide sites on the Web (Dobson, 1999; Arnold, Slater, & Sparks, 2005), with a Chinese report claiming that 566,000 Chinese-language Web sites related to suicide, of which 500 contain detailed instructions (Yan, 2005). There are no data available on what proportion of these sites are concerned with prevention or with supporting and facilitating suicidal behavior, or with assisted suicide/euthanasia. Initial research on this issue is available mainly from case reports in medical and public health literature, mass media reports, and online discussions and forums.

### The Internet and Suicide Methods

A key strategy in suicide prevention is reducing access to methods of suicide, particularly the most lethal means such as firearms, domestic gas, and highly toxic pesticides (Mann et al., 2005). Epidemiological research has demonstrated that such restrictions do indeed result in a decline in suicides using those means, and in many cases, if the method is widely used, a decline in overall suicide rates (Mann et al., 2005). Suicide attempts are often impulsive reactions to an immediate event or a cry for help, and with many there is little intention to die (Mann, 2002). While this is certainly not the case for all suicide attempts, when someone who is making such an impulsive attempt has access to or knowledge of highly lethal methods, they are more likely to succeed.

The Internet has become a source of readily accessible information on methods of suicide. The medical literature reports case studies of individuals finding suicide method information on the Internet (Becker, Mayer, Nagenborg, El-Faddagh, & Schmidt, 2004; Dobson, 1999). For example, Becker et al. (2004) describe the case of a 17-year-old girl who researched reliable suicide methods on the Internet and made contact online with an anonymous person who sold her pharmaceuticals she later used to make a suicide attempt. Suicide sites not only give descriptions of methods, but advice on how best to deploy them. Contributors to discussion lists report their experiences with various methods, and discuss why the attempt failed and possible steps to take to avoid such failures. For example, from the Church of Euthanasia (2006) site, in article 89h7fl\$hrm\$1@news8.svr.pol.co.uk, "James" wrote in response to the questions, "How long does it take to hang oneself?" and "Is it painful for long?":

*You should experience extreme pain, but you will more than likely black out before it becomes unbearable. Make sure that the ligature will not break or become loose. After you lose consciousness, your body will convulse, so it's better not to hang near anything (like I did). You need halfhour—at least—without interruption, so that you will be dead, and not a vegetable, if they try resuscitation (sic).*

Studies of the electronic media have demonstrated that once a particular suicide method is publicized, the number of suicides and attempts using that method increase (Goldsmith et al., 2002). Lee, Chan, and Lee's study (2002) of charcoal burning in Hong Kong describes the phenomenon. Charcoal burning was little used as a method of suicide, however in early 1998 in the month after wide publicity of a suicide by charcoal burning, nine more suicides were committed using this method, and by the end of the year it was the third most common suicide method. While this seems to propose a straightforward casual model of communication, one that has been shown as overly simplistic by media theory, it is not necessarily the case. No one suggests that exposure in itself precipitates suicidal behavior, rather that in vulnerable individuals, for example those suffering depression and under stress, exposure to stories that portray suicide as a solution to life's problems, or inevitable, as well as giving clear information on methods for suicide can increase not only the risk of an attempt, but the likelihood of succeeding. Thus it is not considered that the possession of knowledge of suicide methods gained from the Internet is the principal cause of a person making a suicide attempt; however, it can be reasonably assumed that if a person has knowledge of an effective and available means of suicide, when they do make an attempt it is more likely that it will be fatal.

Moreover, beyond providing information on suicide methods, forums where information on suicide methods is available such as alt.suicide.methods are openly supportive of suicide acts, and discourage participation from those who seek to dissuade anyone from undertaking it. This is clearly expressed in the alt.suicide.holiday FAQ (ASH, 2006):

*The regular posters on ash see suicide as a valid option. They are not interested in reading anti-suicide or pro-suicide messages, both of which are seen as denying the right to choose....In general, discussing*

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