PRE-TAS 2026 MEDIA ROUNDTABLE | NEW DELHI

Words Matter

Reporting mental health and suicide responsibly



THE PREMISE

Two years of media tracking

Indicative patterns in how Indian media reports mental health and suicide

2 years

September 2024 to September 2026

3 formats

Newspapers, TV and digital

3 language groups

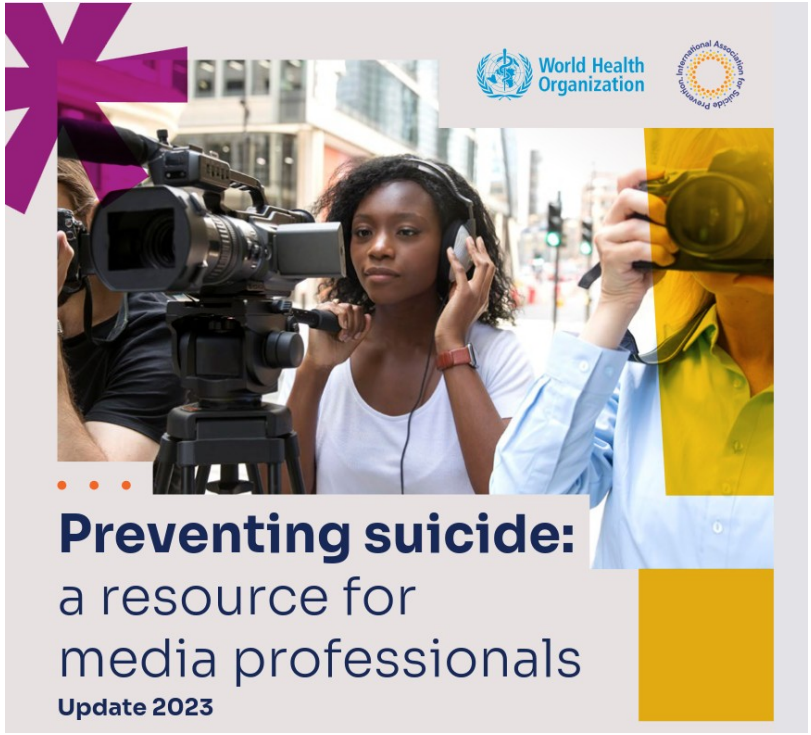
English, Hindi and regional languages

- Media tracking over 2 years points to indicative patterns. It is not a representative picture of all Indian media
- Published research helps confirm these patterns: Armstrong et al, BMJ Open (2025); Industrial Psychiatry Journal (2026)
- Shared to support efforts to close the mental health gap reportage and reduce the stigma around mental health

Indicative patterns and guidelines

Checked against published guidance and research

1. WHO guidance for media on reporting suicide (2023)
2. Press Council of India norms on reporting suicide and mental health
3. India's National Suicide Prevention Strategy (2022)
4. Indian studies of newspaper, online and television reporting
5. Project SIREN's work with Indian journalists*



*SIREN (Suicide Reporting India Watch) is an initiative launched on World Suicide Prevention Day in 2020 by the Keshav Desiraju India Health Observatory and the Centre for Mental Health Law and Policy (CMHLP) at the Indian Law Society.

Mental health is reported mainly when someone dies

Distress, treatment and recovery get little coverage before a crisis

- For most newsrooms, a mental health story starts with a suicide
- Suicide reporting has guidelines in India. Reporting on mental health conditions does not
- India also has very few studies on how mental health is reported, apart from suicide

A real headline

"Neeraj Yadav death: 3-time Asian Para Games gold medallist found dead at 42 amid doping suspension"

However, the story says: …*The coach also suggested that Yadav may have been dealing with emotional distress after missing the Aichi-Nagoya Asian Para Games because of a doping suspension. However, he said it was not possible to know for certain what the athlete had been going through.*

Source: media tracking; Press Council of India, Norms of Journalistic Conduct (2022); WHO Mosaic toolkit (2024).

People are described by their diagnosis: recurring patterns

The condition becomes the person's whole identity

How people are introduced

- a schizophrenic
- a bipolar patient
- the mentally ill

Medical words used loosely

- psycho
- so OCD
- bipolar weather

When a condition becomes a label, people hide it instead of seeking help.

Source: UNICEF India media tracking; Newslaundry, How not to depict mental illness and suicide in news reports (June 2020).

Mental illness is linked to violence without evidence

Crime stories often mention a mental condition with little proof it played a part

- Crime headlines use words associated with mental illness
- A diagnosis is mentioned even when no doctor has confirmed it
- Readers learn to connect mental illness with danger

The fact

People with mental health conditions are more likely to be victims of violence than to cause it.



Words such as "psycho", "deranged" and "maniac" can reinforce stigma when used casually in crime reporting.

Images link mental illness with darkness

Even a carefully written story can be undone by its photo

What we often see

“HEADS to bridge India’s mental healthcare gap with AI”



A hopeful story, illustrated with despair

What works better

“Let’s Talk Mental Health”: a family, together and at ease



Connection and conversation, people shown as people

Recovery and treatment are rarely shown

Stories focus on the crisis, rarely on what comes after

- Treatment, support and recovery are seldom reported
- Readers are left thinking conditions are permanent
- Many people recover, and their stories encourage others to seek help

A recovery story told well

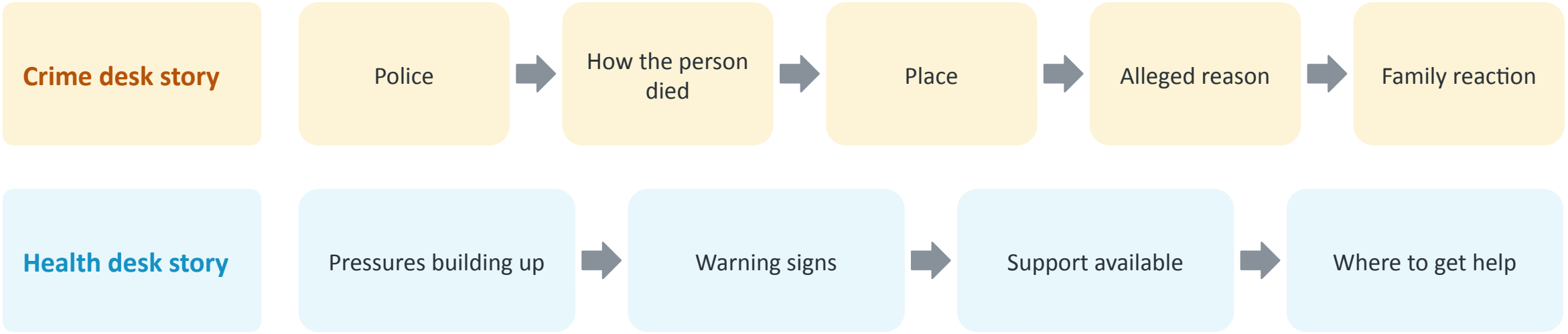
“Caregiving for mental health: How a sister’s 30-year fight helped a brother battle schizophrenia, inspired a film”



Source: Media tracking; Project SIREN.

Who reports the story shapes how it is told

The same death becomes a different story depending on the desk



- Most local and regional suicide reporting comes from crime and city desks
- This is about how newsrooms are set up

Source: UNICEF India media tracking; Indian research with media professionals (PubMed Central).

The language of crime is still common

The words we choose shape how readers judge the person

- Regional-language reports more often use sensational, emotional words
- More sensitive words are entering some reporting

Still common

committed suicide

Entering some reporting

died by suicide

suicidal thoughts

Good to know: attempting suicide is not treated as a crime in India under the Mental Healthcare Act, 2017.



Source: media tracking; Industrial Psychiatry Journal (2026); Mental Healthcare Act, 2017, Section 115; SPIRIT Media Guidelines.

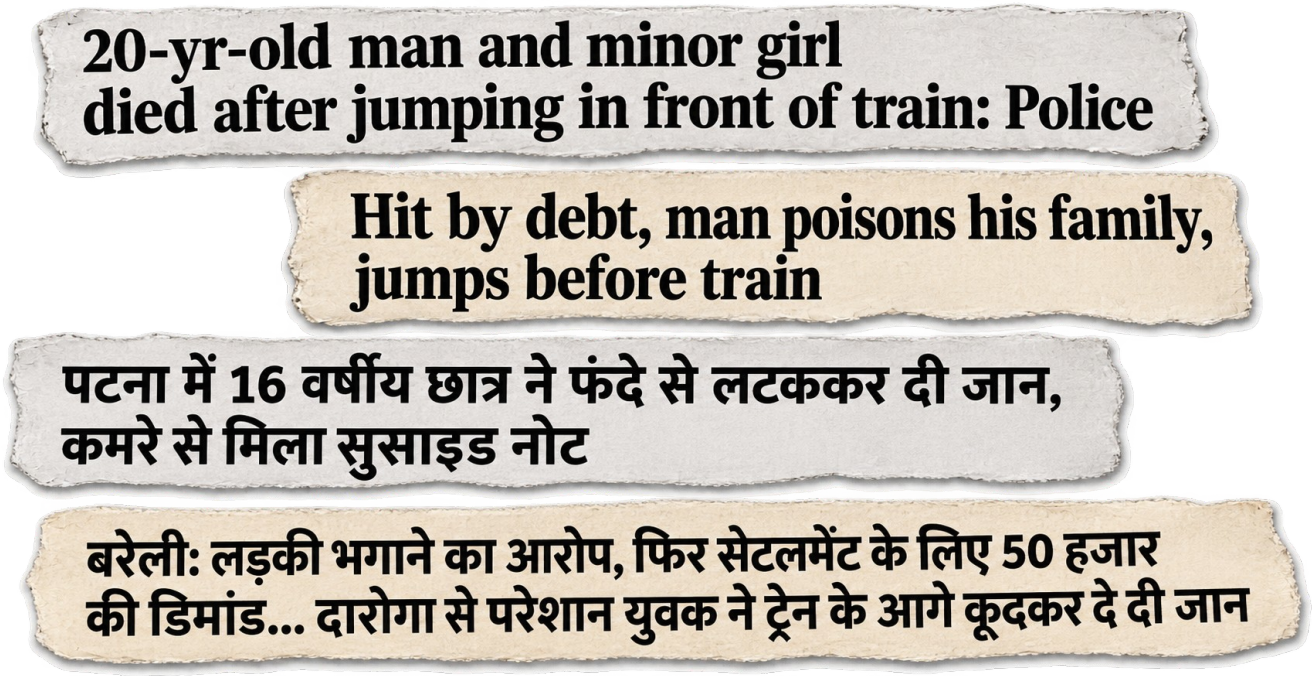
Many reports still describe how the person died

Often in the headline, often with the place

8 in 10

suicide reports described how the person died

- Many reports put it in the headline
- Names, ages and home locations are printed in most reports
- Research shows these details can lead young people at risk to copy the act



Source: Armstrong et al, BMJ Open (2025); Industrial Psychiatry Journal (2026); Project SIREN ratings; WHO, Preventing suicide: a resource for media professionals (2023).

Suicide is often explained by one cause

A reason may be real, but it is never the whole story

1 in 2

reports give one simple reason for the death

The usual single reasons

- an exam result
- a breakup
- money trouble
- social media

A single cause hides the bigger questions: what pressure was building up, and what help was missing?

Source: Industrial Psychiatry Journal (2026); Indian newspaper content studies; UNICEF India media tracking.

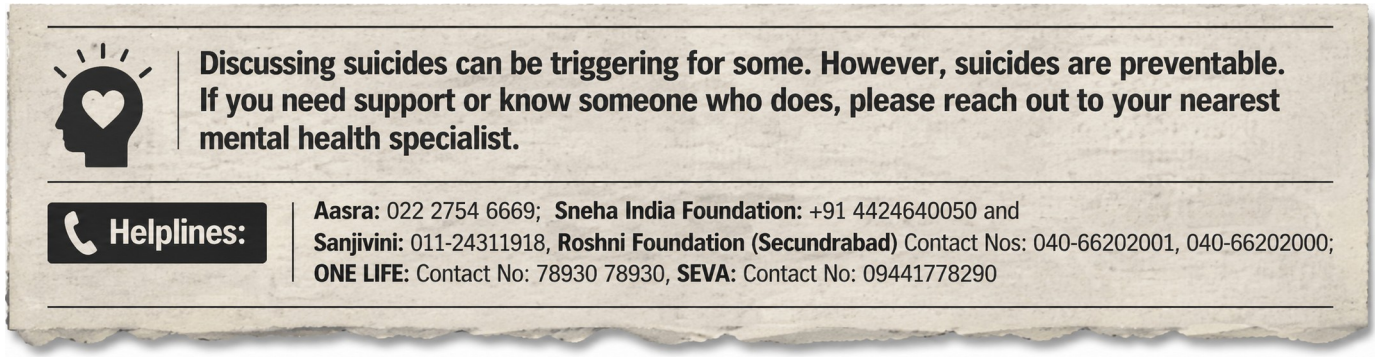
Most reports leave out where to get help

The easiest thing to add, and the most often missing

1 in 5

or fewer suicide reports include a helpline or support service

- Readers learn about a death, but not where help is available
- Where newspapers have started adding helplines, it has quickly become routine
- A helpline costs one line of space and can save a life



Discussing suicides can be triggering for some. However, suicides are preventable. If you need support or know someone who does, please reach out to your nearest mental health specialist.

Helplines:

Aasra: 022 2754 6669; **Sneha India Foundation:** +91 4424640050 and **Sanjivini:** 011-24311918, **Roshni Foundation (Secundrabad)** Contact Nos: 040-66202001, 040-66202000; **ONE LIFE:** Contact No: 78930 78930, **SEVA:** Contact No: 09441778290

Source: Armstrong et al, BMJ Open (2025); Industrial Psychiatry Journal (2026); Project SIREN ratings (via India Development Review).

Television needs stronger, consistently applied safeguards

Print and television work under different regulatory and self-regulatory arrangements

13%

rise in suicide risk linked to heavy coverage of a celebrity's suicide

30%

rise in deaths by the same method when it is named



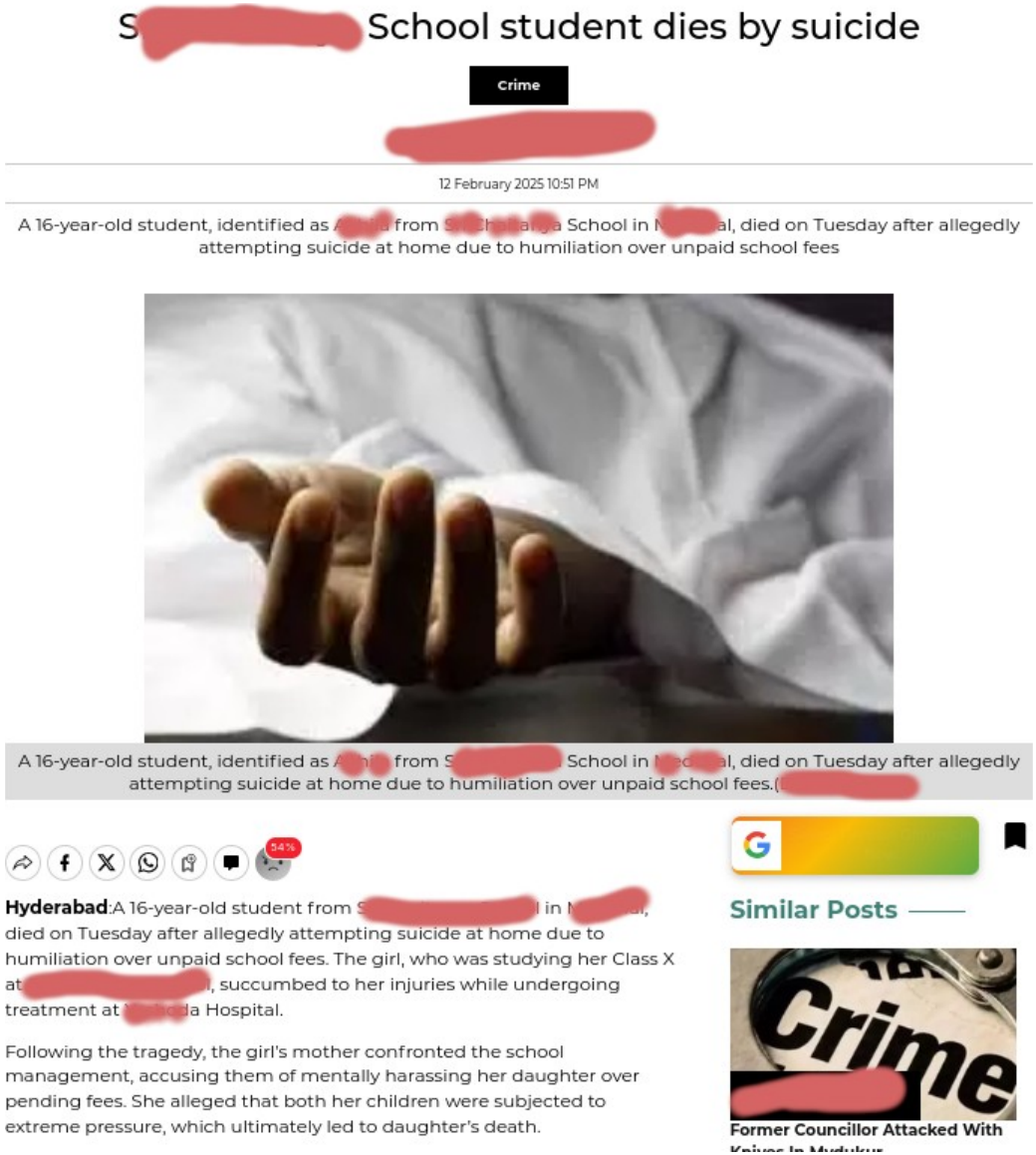
- In one widely watched case in 2020, channels showed images from the scene, said how and where the person died, and ran dramatic on-screen headlines for weeks
- The coverage drew a complaint to the National Human Rights Commission and a warning from the Press Council

Source: Newslaundry (June 2020); Press Council of India; risk figures via India Development Review.

Children can be identified without being named

Holding back the name is not enough

- Many reports hold back a child's name but show the school, home or neighbourhood
- This can identify the child, and also classmates and siblings
- Student deaths are often blamed on a single exam result
- Child protection and suicide reporting are usually treated as separate subjects



[redacted] School student dies by suicide

Crime

[redacted]

12 February 2025 10:51 PM

A 16-year-old student, identified as [redacted] from [redacted] School in [redacted], died on Tuesday after allegedly attempting suicide at home due to humiliation over unpaid school fees

A 16-year-old student, identified as [redacted] from [redacted] School in [redacted], died on Tuesday after allegedly attempting suicide at home due to humiliation over unpaid school fees.([redacted])

Hyderabad:A 16-year-old student from [redacted] in [redacted], died on Tuesday after allegedly attempting suicide at home due to humiliation over unpaid school fees. The girl, who was studying her Class X at [redacted], succumbed to her injuries while undergoing treatment at [redacted] Hospital.

Following the tragedy, the girl's mother confronted the school management, accusing them of mentally harassing her daughter over pending fees. She alleged that both her children were subjected to extreme pressure, which ultimately led to daughter's death.

Similar Posts

Former Councillor Attacked With Knives In Mydukur

Source: UNICEF India media tracking; SPIRIT Media Guidelines

Each gap can be addressed : mental health

The gap	The fix
Mental health is covered only after a death	Cover distress, treatment and recovery before a crisis
People described by their diagnosis	Put the person first: "a person living with schizophrenia"
Mental illness linked to violence	Mention a condition only if it is confirmed and relevant
Dark, hopeless images	Use ordinary images of people, with consent
Recovery is missing	Include stories of treatment and recovery

Fixes at a glance: suicide

Each gap, matched to a simple fix

The gap	The fix
Uneven progress	Guidance in regional languages, for regional newsrooms
Crime desk framing	Health reporters cover these stories, or crime desks get a checklist and expert contacts
Language of crime	"Died by suicide", avoid "committed suicide"
How the person died	Never in the headline, never in detail
Single cause	Mention more than one factor, and what support was missing
No helpline	A helpline in every story
Television	Simple limits for on-screen headlines and images
Children	Protect identity beyond the name

Mental health language: what to avoid and what to use

Put the person before the condition

Avoid	Use
the mentally ill, a schizophrenic, a bipolar patient	a person with a mental health condition, a person living with schizophrenia
suffers from, a victim of, afflicted by	lives with, has, is being treated for
psycho, crazy, lunatic, deranged, mad	describe the behaviour, or leave the label out
mental asylum, madhouse	mental health facility, psychiatric hospital
locked up, committed to an asylum	admitted for treatment
normal people	people without a mental health condition
"so OCD", "bipolar weather"	use medical terms only in their medical sense
a hopeless case	many people recover with support

Source: Person-first language principles from the WHO Mosaic toolkit (2024) and the Mindframe media guidelines.

Suicide language: what to avoid and what to use

Simple words, no drama

Avoid	Use
committed suicide	died by suicide, took their own life
successful suicide, failed suicide	died by suicide, suicide attempt
suicide epidemic	rising rates, high rates
lost the battle, gave up, ended it all	died by suicide
found peace, freed from suffering	avoid any words that present suicide as a solution
a life cut short in full bloom (for children)	avoid romantic words about a child's age
political suicide, suicide mission	do not use suicide as a metaphor

Source: SPIRIT Media Guidelines for Reporting Suicide, adapted from Mindframe (Hunter Institute of Mental Health, 2014).

How mental health and suicide connect

Mental health is a range, not a ladder



Media can help most here: early, openly and without stigma

- Most people move along this range and back, and most recover with support
- Suicide has many causes. A mental health condition can be one of them, but is often not the only one
- The earlier people talk about distress and get help, the less likely a crisis becomes

Source: WHO, Preventing suicide: a resource for media professionals (2023); SPIRIT Media Guidelines.

Reporting on children: a checklist

The child's interest comes before the audience's interest

- ✓ Put the child's best interests first
- ✓ Do not name or show the school, home, family or neighbourhood
- ✓ Do not interview grieving classmates or siblings with caution on care and consent
- ✓ Do not explain a child's death through one exam or event
- ✓ Always include a child helpline
- ✓ Report what schools and colleges are doing to support students

Source: SPIRIT Media Guidelines (child suicide section); UNICEF ethical reporting guidelines; TAS 2026 concept note.

Progress points

Indian journalism is already producing strong, prevention-focused work

- More stories use health terms: help-seeking, warning signs, early support, recovery
- Doctors, counsellors and researchers are quoted more often
- Young people's mental health is now a regular subject, not only a crisis story
- People with lived experience are starting to speak in their own words
- Some newspapers now leave out harmful details and carry helplines

The News Minute

Teen suicide reported through support systems, not a single cause

NDTV

Warning signs and coping skills on World Suicide Prevention Day

The Week

A NIMHANS psychiatrist on gaps in care for adolescents

Hindustan Times

Support for families after a suicide loss

Source: UNICEF India media tracking, September 2024 to September 2026.

Thank You