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Suicide is devastating to families, and this would seem self-evident. Despite this, it is common for the individual contemplating suicide to want to somehow lessen the imagined burden to their loved ones. This could not be farther from the truth. Ripples from such a loss extend beyond family and friends, and this loss causes pain that persists for decades.

The contagion effect associated with suicide clusters, seen in teenagers and young adults (12-24y/o) is one of communities' most dreaded challenges. Though relatively rare (associated with 1-5% of suicides), clusters can move quickly through a community and may even be experiencing a rise in intensity and propagation due to the popularity of social media in adolescent populations.

Recorded cases of suicide clusters go back to antiquity, and the "contagion effect" term was coined by researcher David Phillips in 1974, after the publication of Goethe's 1774 novel, *The Sorrows of Young Werther*. There were as many as 2000 suicides associated with Werther's character, though this may be an exaggeration. Young people would dress in the same blue and yellow attire and shoot themselves with the book open on a desk, mimicking the protagonist. It became such a concern that the novel was banned across much of Europe in the 1780s.

The media creates other complex challenges to suicide clusters. Media attention and dissemination of information about suicides have been associated with more intense contagion effects.

Intervention and support efforts to help reduce the effects of suicide contagion are challenging. In 1987, about a year after their friend fell off a cliff and died, four teenagers died of carbon monoxide poisoning, only leaving a note that they wished to be buried together. Worried that this event would lead to a suicide contagion effect, the CDC published guidelines in 1988 that outlined various supports communities can use to reach out to young people challenged by loss and despair.

A Time magazine report cautioned: "Public reaction can exacerbate the contagion effect. Recent studies by the University of California at San Diego and Columbia University in New York City found that the number of teenage suicides increases after television news segments or dramatic programs on the phenomenon" The article also reported "the day after the media publication of the 4 youth who died in Bergenfield New Jersey, two girls, 17 and 19 years old, killed themselves in Chicago using the same method."

The CDC commented:

“Every effort should be made to promote and implement the proposed plan as a community endeavor. During past suicide clusters, a single agency has often found itself “in the hot seat,” that is, as the focal point of demands that something be done to contain the suicide cluster. No single agency, however, has their resources or expertise to adequately respond to an evolving suicide cluster. Moreover, the emergence of one agency as a sole focus for responding to an apparent suicide cluster has several unfortunate consequences. The agency and its representatives run the danger of becoming scapegoats for a community's fear and anger over the apparent cluster. Such a focus can potentially blind a community to other valuable resources for responding to the crisis and to basic community problems that may have engendered the crisis.

The concept of a “host” agency was developed because--even though the response will involve a variety of different agencies and community groups-- one person must necessarily take responsibility for establishing a notification mechanism, maintaining the response plan, and calling meetings of the coordinating committee as outlined above. Which agency should serve as the host agency should be decided by each community. In past clusters, for example, a school district, a municipal government, mental health association and even a private nonprofit mental health center have taken the lead in organizing their community's response. State or local public health or mental health agencies might also serve as host agencies for the plan. The role of host agency might also be rotated. Among the various agencies represented on the coordinating committee.”

Despite the resources and expertise devoted to this problem, communities continue to struggle with the issue.

In 2009 and 2010, Palo Alto California was challenged by the loss of about 6 youth who killed themselves on train tracks near the high school. In an attempt to understand the cause, the Stanford community consulted world experts in the CDC. They designed a number of interventions, including a peer support campaign that suggested asking for help for a friend. This campaign emphasized that losing a friendship was a better alternative to keeping their despair a secret and later losing them to suicide. Despite these efforts, Palo Alto experienced an “Echo Cluster” in 2014 and 2015 with the deaths of 8 high-achieving Asian youth.

The CDC's 1988 recommended community-coordinated efforts to reach out to at risk youth and to study victims and the circumstances surrounding their deaths, including possible connections to other suicides.

However, recent changes in youth culture further complicate the issues of suicide contagion in teenage populations. Social media now provides youth with the ability to communicate with massive numbers of peers in real time. This can create a “wildfire” of sensationalized and distorted information with potentially toxic effects for peers outside the safety of adult supervision or support. In two recent suicide cases, youth published their suicide notes and hanging nooses via Facebook or a text message while they planned, and then executed their own deaths.

Recent studies have explored how to use social media to reach out to youth in positive ways, through things like providing information about support resources and agencies that can be contacted when in need of help. However, there are yet to be studies that examine managing the amplification of contagion through social media.

Suicide contagion prevention presents abundant challenges to parents, teachers, administrators, and mental health professionals. It will take a concerted effort to study this problem and create solutions that can begin to mitigate factors that lead to this devastating phenomenon.