$test193593 \rightarrow base$  16.06.2020, 06:25

#### Page 01 Meta

#### **PHP** code

```
$number = caseNumber();
$text = (string)$number; // Converts the number into text and saves it into $text
html($text); // Prints the text stored in $text
```

#### 1. The identification code (ID) of the item

The identification code (ID) of the item (combination of the assigned number, month, and state).

#### Example: 19AprO (assigned number, month - first 3 letters, state - 1st letter)

Item identification code

**AC01\_01** Item identification code Free text

#### 2. Who is doing the coding of this item?

Coder identity

[Please choose]

#### CO01 Coder

1 = TN

2 = BT

-9 = Not answered

#### 3. Is this item a duplicate?

Code positive if this item was previously reported and if the content is identical; i.e. the item is a duplicate. IF it is a duplicate, INSERT THE ID of one of the already coded versions. This applies to any of the versions, but IT HAS TO BE SAME MEDIA TYPE, SAME STATE

Item is a duplicate -- provide ID of previous version

#### ADO1 AR

1 = Item is a duplicate -- provide ID of previous version

-9 = Not answered

**AD01\_01** Item is a duplicate -- provide ID of previous version

Free text

## 4. Inclusion of item: Is the content of this item relevant, i.e. related to the topic of suicidal behaviour, suicidal ideation and suicide prevention and does it satisfy the inclusion criteria stated below?

NOTE: Inclusion / exclusion criteria: The item addresses issues related to suicide, suicide attempts, suicidal ideation, homicide-suicide, suicide prevention, assisted suicide. Items that use suicide as a metaphor, mention suicide briefly (less than 50% of length); are not on topics related to suicide, are not relevant and should be excluded.

"Related to suicide" includes any aspects that directly or indirectly relate to suicide (i.e., this is a broad / inclusive definition)

All items have already been assessed for relevance previously, typically they should be relevant.

This item satisfies the inclusion criteria

AR01\_01 This item satisfies the inclusion criteria

1 = No

2 = Yes

-9 = Not answered

## 5. Has this event been previously reported? If yes, insert an item number about the same event.

"Event" can be a case of suicidal behavior, suicidal ideation, a prevention programme, a research study – with some specific details etc.

NOTE: The "event" is defined based on the actual content of the item; whereas the "item" refers to the specific media article / broadcast. The event has to be specific enough – not just saying CDC study.

**RE01\_01** [01]

Free text

#### 6. Date when the item was published / broadcast

Insert the date of the item

Example: 30.03.1999 or dd.mm.yyyy

Date

**AT01\_01** Date

Free text

#### 7. Time of broadcast

The time of broadcast (eg, early morning 6-8 am). Please, consider the beginning of broadcast. For example: if the item was broadcast at 18.00, choose the time from 18.00-21.00.

[Please choose]

#### **TB01** Time of broadcast

1 = Early morning (6-8 AM) [1]

2 = Morning (8-11AM) [2]

3 = Noon (11-13PM) [3]

4 = Afternoon (13-18) [4]

5 = Early evening (18-21) [5]

6 = Later evening (21-00) [6]

7 = During night (00-06) [7]

8 = [8]

-9 = Not answered

#### 8. In which state was this item published / broadcast?

#### The item was published / broadcast in:

[Please choose]

ST01 State - origin

1 = Oregon

2 = Washington

3 = National

-9 = Not answered

#### 9. Which type of media is the source of this item?

#### Type of media

[Please choose]

#### TM04 Type of media

- 1 = Online news media
- 2 = Print media
- 3 = Broadcast--TV
- 4 = Broadcast--radio
- -9 = Not answered

#### 10. Which section contains the item?

Select from the newspaper's SECTION (if any) where the item was published. The section is typically written on the pdf.

Section name

[Please choose]

#### SF01 Section of print medium

- 1 = Editorial
- 2 = Opinion
- 3 = Health
- 4 = Crime
- 5 = Leisure
- 6 = Adds & Commercials
- 7 = National / regional news
- 8 = International
- 9 = Chronicle
- 10 = General
- 11 = Progress\_edition
- 12 = State
- 13 = Politics\_Government
- 14 = Puyallup\_herald
- 15 = Local
- 16 = matt\_driscoll
- 17 = Other
- -9 = Not answered

#### **SF01\_13** Politics\_Government

Free text

#### 11. Article length: Insert total word count as stated below text.



#### 12. The item's tone.

Please, insert the item's emotionality as stated below text.

**EM01\_01** [01]
Free text

#### 13. Item transcript is not fully comprehensible

The text of the transcript is not fully comprehensible

[Please choose]

**BC02** Broadcast content

1 = Yes

-9 = Not answered

Page 02
Content

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#### 14. What is the MAIN focus of the item?

The item's main focus is EITHER about completed suicide, OR attempted suicide (also includes a suicidal act stopped by another immediately before the act), homicide suicide (item is on a homicide or the attempt, perpetrator is suicidal), suicidal ideation (not accompanied by suicide or suicide attempt, also aborted suicide attempt qualifies as suicidal ideation), prevention /policy programme (programme or policy to prevent suicide, not a specific case of suicidal behaviour), advocacy effort (typically an event eg fundraiser or support events agains stigma, improvement in health care; suicide prevention; often organized by survivors or any other advocats, NGOs), suicide research, or other "e.g. depression treatment".

Main focus means the main theme of the item. The following aspects contribute to the designation as a "main focus" (RULE 1):

- ++Proportion of media item dedicated to the specific focus
- ++Framing of the item. E.g., an item about a community event at the anniversary of the mass shooting might have "mass murder" as the main focus even if the main proportion of the text is focused on that event and a smaller proportion a recapitulation of the shooting. Keep in mind, however, that the advocacy event would typically make the "main focus" if the reporting on the actual mass shooting is "considerably" shorter than the one on the event.

To make the further determination, take the following approach to determine main focus (RULE 2):

+++ If the focus – see item MF03 is "individual". For different behaviours that occur in the same item, code the most severe and most specific: E.g. a suicide attempt followed by suicide -> suicide (most severe event); a suicide attempt followed by a suicide and murder of several individuals-> mass murder suicide (most specific).

+++If the focus—see item MF03 – is "general": Take the most specific category. E.g. an advocacy event is more specific than the general "suicide prevention" determination. However, if the advocacy event is only mentioned briefly, it would still be "suicide prevention" (see rule 1 above).

ABORTED suicide attempt – an individual, who wants to die by suicide, stops himself

ATTEMPTED suicide – an individual, who wants to die by suicide, was stopped by somebody else.

Main focus "SUICIDAL IDEATION": Note that this code typically means that suicidal ideation is the most severe type of experience/ behaviour shown. Suggestions e.g., "to speak about hard times" in the context of suicide prevention, can indicate "suicidal ideation"; however only if the connection to suicide prevention is clear. Also note that a healing story would be coded there, not as suicidal ideation.

Main focus SUICIDE CLUSTER/COMMUNITY CRISIS: If an item states that many or more than usual suicides have happened A) in a specific region; B) setting (e.g., all statewide prisons); or C) in a specific short time span (weeks); or D) a specific group (natives; police..) in a short time frame (weeks); or E)in relation to a specific Internet challenge (e.g. Momo), this should code positive as cluster / hotspot

Main focus POLICY/PREVENTION PROGRAMME: Note that this code comprises two different types of items: (1) items on law-making (see differentiation to "legal issues" above); and (2) specific prevention programmes that are set up.

Main focus "POLICY/ PREVENTION PROGRAMME" versus "LEGAL ISSUE": If the item is about the law-defining process, code as "policy". E.g., a bill that is discussed/ debated by policy-makers, or going to be signed, is "policy"; as this applies to the formal process of making law. If it is about advocacy for a change in law by members of the public or specific groups of non-law-makers, code advocacy event if this group is advocating for change. If the item is about specific legal conflicts,

i.e. about using (rather than making) law; e.g. someone suing individually, pressing charges etc; code "LEGAL ISSUES" (but if this is organized in some way also consider advocacy event). Death investigations do only qualify as "legal issues" if it is made clear in the item that the process has already reached legal experts (as opposed to first responders, or the police / FBI, i.e. the police).

Main focus "LEGAL ISSUE" – if there are protests about a law or the absence of a law, this is not about the law-defining/law-making process, but about using law. So, it is coded then positive as "legal issue".

Main focus "ADVOCACY EFFORT": Advocacy efforts are typically coded as actions taken by groups (e.g., associations of medical doctors) or individuals (e.g., those bereaved by suicide); to increase awareness, trigger legislative changes, etc. These are typically grass-root, "bottom-up" efforts; i.e. it is not a government action but a citizen action. Just commenting on something in response to a media request is not sufficient to code as "advocacy effort".

Main focus "RESEARCH": If an item reports from a study to give more background information ,e.g. by adding lived experience of individuals affected, and then relates the findings back to the research, research qualifies as the "main focus" provided that the lived experience section is not considerably longer or more dominant in the item. Suicide research must go beyond the sheer reporting of a suicide rate. More detailed elaborations on suicide data however might qualify if they are the MAIN focus.

Main focus "HEALING STORY": This is a story of hope / recovery from suicidal ideation, attempt, or bereavement from suicide. Note that the story does not have to explicitly mention a positive outcome; rather, the process of finding hope and getting better can be coded as "healing story" as soon as the characters affected provide a narrative of how they have coped (e.g, doing an awareness march for suicide prevention).

Main focus "SUICIDE PREVENTION": This code should be reserved for items with focus on prevention that is not covered more specifically with the other prevention-related codes (differs from healing story, advocacy efforts, or policy-prevention programme. Item may contain some reference to suicidal behaviour or ideation, but main focus is on suicide prevention (other than healing stories; advocacy efforts; policy/ programmes). It gives e.g., specific recommendations on what to do to prevent suicide; advice how to change risk factors).

Main focus "OTHER": This code should be reserved for cases where suicidal behaviour or ideation is only mentioned in passing and the rest of the item is more or less unrelated to suicide / suicidal ideation/ suicide prevention. This might qualify if the item is e.g., about depression, and mentions suicide only briefly. In that case, depression would be the "other" focus area. This category also includes media items that focus on specific risk factors for suicidal behaviour; e.g. depression, bullying, and mention their relation to suicide or suicidal ideation only briefly. If focus "other" is selected, please define further, for example "treatment of depression".

NOTE: If there is a case report about suicidal ideation followed by an attempt and suicide, code "completed suicide". Always the most severe form of behaviour IN THE SAME INDIVIDUAL makes the main focus, even if more text is dedicated to a less severe form. This applies even if the more severe behaviour is only briefly mentioned. However, if most text is dedicated to suicidal ideation in person X, and there is some additional text on a suicide of person Z, code as "suicidal ideation".

IF SEVERAL CATEGORIES APPLY GO WITH INSTRUCTIONS

Please, select one MAIN focus (strongest focus in

[Please choose]

this item). Take into account the instruction notes.

#### MF01 Main focus of the item

- 1 = Completed suicide (if cluster--code under cluster; if assisted suicide--code as assisted suicide; ilf legal issue: code legal issue; if healing story after a suicide--code there, if research--code there))
- 2 = Attempted suicide (if healing story-code there)
- 3 = Suicidal Ideation (if healing story--code there)
- 4 = Individual murder suicide (up to 3 persons)
- 5 = Mass murder suicide (four or more persons)
- 6 = Assisted suicide including legal issues on assisted suicide
- 7 = Suicide cluster/or Community Crisis
- 9 = Policy/Prevention Programme
- 14 = Advocacy effort
- 10 = Suicide research
- 11 = Legal issues (if about assisted suicide--code under assisted suicide)
- 12 = Healing story (personal recovery after crisis, attempt, or suicide)
- 13 = Other
- 15 = Suicide prevention (if healing story, advocacy efforts, or policy / prevention programme -> code there.
- -9 = Not answered

#### MF01\_13 Other

Free text

## 15. Is the MAIN focus more on INDIVIDUAL behaviour, or GENERAL on such behaviour, or both?

If the item covers mainly INDIVIDUAL behaviours (e.g., a specific suicide, attempt, an action that prevented suicide in a specified individual), code "individual".

If the item is more about the phenomenon of suicide, suicide prevention in GENERAL (e.g. in school settings), code GENERAL. If both are present and in a BALANCE (no dominance of either individual components and general components) code "both".

For example, the story of an individual bereaved from suicide who is walking across the country to raise awareness: There is a clear individual focus due to the personal involvement of the individual, which is described in the item. The action taken by that individual, to walk, has a clear broader focus on general suicide prevention. If both proportions are about equally distributed across the item in terms of length; or if they are framing as personal (taking action in response to personal bereavement) versus general (prevention in others), code "both".

Revise: If it is unclear if there is a balance or not there is an option to code "both—but unclear balance". For this category, note that it is only a last-option if none of the others work. Do not code this just because one aspect (individual versus general) is only very briefly mentioned as compared to the other. This is really only for candidates that seem roughly equal but doubts persist. Not taking this category is preferable.

Please, select one		
MAIN focus		
(strongest focus in	[Dlagge shapes]	
this item). Take into	[Please choose]	
account the		
instruction notes.		

MF03 Main focus on individual or general?

13 = individual

14 = general

15 = both

16 = not clear but both are present

-9 = Not answered

#### 16. What are the focus areas of the item?

Different from "main focus", ALL codes that APPLY need to be coded here.

A category needs to fullfill the following aspects to code positive:

- 1) Needs to be a FOCUS point; i.e. normally 1 SENTENCE in an average length text should be dedicated to the specific category; OR the framing of the item suggests that the content is related to that category. Only few words to make this link can be sufficient.
- 2) SPECIFICITY does not matter-code all that apply.
- 3) SEVERITY still matters but in a restricted form as compared to the main focus code: For "individual focus items (code MF03—individual); code the most severe behaviour only that applies to individual focus (see this rule under "main focus") IF any less severe forms are only mentioned in passing. E.g., a person who is portrayed as speaking about suicidal ideation briefly but then more space is given to the subsequent attempt, this would only code as suicide attempt (not as suicidal ideation). However, if the suicidal ideation receives enough space to define as "focus" and is followed by an attempt; code both, attempt and ideation.

NOTE: At average text length, a brief section (1-2 sentences) is sufficient to make a focus point.

Please, select ALL focus points that are specified below in the item.

Main focus "LEGAL ISSUE" – if there are protests about a law or the absence of a law, this is not about the law-defining/law-making process, but about using law. So, it is coded then positive as "legal issue".

SUICIDE RESEARCH – could involve only one sentence, but it has to refer to the study, or research. Simply saying that " suicide is leading cause of death among ..." does not qualify in here.

All focus: "SUICIDE PREVENTION": Basically, any awareness raising or prevention , or policy initiative, healing story, is part of "suicide prevention".

All focus: "SUICIDE CLUSTERS/HOTSPOTS"

If an item states that many or more than usual suicides have happened A) in a specific region; B) setting (e.g., all statewide prisons); or C) in a specific short time span (weeks); or D) a specific group (natives; police..) in a short time frame (weeks); or E) in relation to a specific Internet challenge (e.g. Momo), this should code positive as cluster / hotspot.

chancings (e.g. Florito), this should code positive as claster, hotspot.
☐ Completed suicide
☐ Attempted suicide
☐ Suicidal Ideation
$\square$ Individual murder suicide (up to 3 persons)
$\square$ Mass murder suicide (four or more persons)
$\square$ Assisted suicide including legal issues on assisted suicide
☐ Suicide cluster/or Community Crisis
$\square$ Self-harm (NOT suicidal behaviour, e.g. cutting for stress relief)
☐ Policy/Prevention Programme
☐ Advocacy efforts

☐ Suicide research
$\square$ Legal issues (not on assisted suicide)
$\square$ Healing story (personal recovery after crisis, attempt, or suicide)
Other
Suicide prevention (if healing story, advocacy efforts, or policy / prevention programme, code there)

**MF02** ALL focus areas of the item: Residual option (negative) or number of selected options

Integer

MF02\_01 Completed suicide

MF02\_02 Attempted suicide

MF02\_03 Suicidal Ideation

**MF02\_04** Individual murder suicide (up to 3 persons)

MF02\_05 Mass murder suicide (four or more persons)

MF02\_06 Assisted suicide including legal issues on assisted suicide

MF02\_07 Suicide cluster/or Community Crisis

**MF02\_08** Self-harm (NOT suicidal behaviour, e.g. cutting for stress relief)

MF02\_09 Policy/Prevention Programme

MF02\_14 Advocacy efforts

MF02\_10 Suicide research

MF02\_11 Legal issues (not on assisted suicide)

MF02\_12 Healing story (personal recovery after crisis, attempt, or suicide)

MF02\_13 Other

**MF02\_15** Suicide prevention (if healing story, advocacy efforts, or policy / prevention programme, code there)..

1 = Not checked

2 = Checked

MF02\_13a Other (free text)

Free text

#### 17. The item reports one or several methods of suicidal behavior

One or several methods of suicidal behavior are mentioned (code all that apply)

Please, select from the list:
☐ Hanging (X70)
$\square$ Jumping or falling from a height (X80)
$\square$ Jumping in front of a moving object (X81)
☐ Cutting (X78-X79)
☐ Shooting (X72-X74)
☐ Drowning (X 71)
☐ Poisoning (X60-X69)
$\square$ Explosive materials (X 75)
$\square$ Burning / electrocution
$\hfill\Box$ Crashing of a motor vehicle (X 82) - excludes crashing of aircraft
☐ Suicide by cop
Other method

**RM01** Reported method of suicidal behavior: Residual option (negative) or number of selected options

Integer

**RM01\_01** Hanging (X70)

**RM01\_02** Jumping or falling from a height (X80)

**RM01\_03** Jumping in front of a moving object (X81)

RM01\_04 Cutting (X78-X79)

**RM01\_05** Shooting (X72-X74)

**RM01\_06** Drowning (X 71)

**RM01\_07** Poisoning (X60-X69)

**RM01\_08** Explosive materials (X 75)

RM01\_09 Burning / electrocution

**RM01\_10** Crashing of a motor vehicle (X 82) - excludes crashing of aircraft

RM01\_11 Suicide by cop

RM01\_12 Other method

1 = Not checked

2 = Checked

RM01\_12a Other method (free text)

Free text

#### 18. The item contains the method of suicidal behaviour in the headline.

Reference to a specific method in the headline

NOTE: Subheadlines (normally, one line long and headline-style) qualify as headline

Example: Car damaged: 18year-old boy threw himself in front of the car

Yes No Method in headline 0 0

**SA01\_01** Method in headline

1 = No

2 = Yes

-9 = Not answered

#### 19. The item headline (or subheadline) clearly indicates that item is about suicidal behaviour and/or suicidal ideation, suicide prevention

The reader knows that the article is about suicide (incl. prevention) simply from reading the **HEADLINE or SUBHEADLINE** 

NOTE: Headlines suggesting a crisis but not suicidal bahaviour do not qualify.

NOTE II: Subheadlines (normally, one line long and headline-style) qualify as headline

**Example: Man found** 

hanged..OR Tragedy: it was a

suicide OR: Suicide

No Yes prevention now 24/7

Headline explicitly on suicidal  $\bigcirc$ 0 behaviour and/or suicidal ideation

> **HS01\_01** Headline explicitly on suicidal behaviour and/or suicidal ideation

1 = No

2 = Yes

-9 = Not answered

#### 20. The item contains a "step by step guide" on how to conduct a suicide

This item contains the description of how to use a suicide method. At least TWO consecutive steps in the accomplishment of a specific suicide method are reported.

Example: She opened kitchen window, climbed on the window sill, and jumped. OR She dissolved the tablets in the water..swallowed the poison, and laid down on her bed to die.

"Step by step guide"

O

Yes

O

SA02\_01 "Step by step guide"

1 = No
2 = Yes
-9 = Not answered

## 21. The item includes information about the state or country where the reported EVENT occured

Provide the location of the event based on the drop-down menue.

☐ Oregon
☐ Washington
$\hfill\Box$ Other state in US
☐ In US
☐ International (outside of US)

**EV02** Event: location: Residual option (negative) or number of selected options

Integer

EV02\_01 Oregon

EV02\_02 Washington

EV02\_03 Other state in US

EV02\_04 In US

**EV02\_05** International (outside of US)

1 = Not checked

2 = Checked

The item describes or briefly mentions hotspots for suicidal

behaviour.

## 22. The item includes information about the state or country where the reported EVENT occurred

Provide the location (country, state) of the event based on the drop-down menu. If no country, or state is specified, and nothing refers that it is outside of US, then it can be coded positive for US.			
☐ Oregon			
☐ Washington			
☐ In USA			
☐ International			
	<b>US01</b> Country of every selected opt	ent: Residual option (negative tions	e) or number of
	Integer		
	US01_01 Oregon		
	US01_02 Washingto	on	
	<b>US01_03</b> In USA		
	US01_04 Internation	onal	
	1 = Not checked		
	2 = Checked		
23. The item describes or mentions hotspots for suicidal behaviour. A hotspot means that a cluster of suicides is reported at that place, or it is labelled as a			
hotspot for suicide.	•	• •	
If an item states that many or more than usual suicides have happened A) in a specific region; B) setting (e.g., all statewide prisons); or C) in a specific short time span (weeks); or D) a specific group (natives; police) in a short time frame (weeks); or E) in relation to a specific Internet challenge (e.g. Momo), this should code positive as cluster / hotspot.			
		No	Yes

SL01\_01 The item describes or briefly mentions hotspots for suicidal behaviour.

1 = No
2 = Yes
-9 = Not answered

0

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0

## 24. The item describes a suicide cluster or community crisis with regard to suicide

No Yes

The item describes a suicide
cluster or community crisis in 
relation to suicide

**SL02\_01** The item describes a suicide cluster or community crisis in relation to suicide

1 = No

2 = Yes

-9 = Not answered

## 25. The item includes information on several independent individual suicidal acts (attempts or lethal suicides).

It requires at least a brief description of independent events. The shortest possible qualification would be e.g. "Just one day earlier, a very similar incident occurred in a Baker street".

Several independent suicidal acts reported

**SA05\_01** Several independent suicidal acts reported

1 = No

2 = Yes

-9 = Not answered

Yes

## 26. The item enhances (a) public myth(s) on suicidal behavior. It includes also implicit enhancement.

One or more of the following public myths enhanced in the text:

- \*those who talk about suicide are less likely to attempt suicide,
- \*there are no preceding warning signs,
- \*there is nothing you can do about suicidality,
- \*someone who has history of making "cries for help" will not die by suicide,
- \*talking about suicide encourages suicide,
- \*only the mentally ill exhibit suicidal behavior,
- \*once a person is suicidal, he or she is always suicidal,
- \*suicide can be a blessed relief for the individual or those around him/her,
- \*suicide is the only option to cope with difficult situation.

#### Examples:

- \*\*The act of desperation happened without any warning signs OR
- \*\*The act was not foreseable.. None of the 19 suicides was foreseable.
- \*\*IMPLICIT EXAMPLE: His colleagues thought he (the 19th suicide victim) went home happily but then they heard the lethal shot (suggests there are no warning sings).

No

Public myth enhanced	0	0
	PR01_01 Public myth enhanced  1 = No 2 = Yes -9 = Not answered	

## 27. The item promulgates obvious misinformation about suicidal behavior, not covered by myths.

#### Example:

"Why the fears of contagion and copy-cat acts aren't based in reality"

	No	Yes
The item contains misinformation	0	0

#### **IM01\_01** The item contains misinformation

1 = No

2 = Yes

-9 = Not answered

#### 28. The item DEBUNKS a public myth, directly or implicitly.

Always check this list; do not code any other possible myths that are not on the list.

#### **LIST OF MYTHS:**

One or more of the following public myths enhanced in the text:

- \*those who talk about suicide are less likely to attempt suicide,
- \*there are no preceding warning signs,
- \*there is nothing you can do about suicidality,
- \*someone who has history of making "cries for help" will not die by suicide,
- \*talking about suicide encourages suicide,
- \*only the mentally ill exhibit suicidal behavior,
- \*once a person is suicidal, he or she is always suicidal,
- \*suicide can be a blessed relief for the individual or those around him/her,
- \*suicide is the only option to cope with difficult situation.

IMPLICIT Example: In the last minute before his suicide, she decided to knock on his door and asked: How are you doing? Are you suicidal? He opened, and started to talk... That was the beginning of a long journey of healing. (suggests that talking about it does NOT encourage suicide)

Example: Many think that that people who talk about suicide will not do it. That is not true. 80% of suicide victims talk about suicide shortly before they die.

Myths, as listed in the field "public myths reported", are debunked.

Normally, the myth debunked should be debunked in an explicit way. But there can be cases where the myth is debunked implicitly. These implicit debunking is mainly present when individual behaviour that is described counteracts one of the myths on the list. E.g., a person who describes how he/she got help to cope with suicidal ideation counteracts the myth the "there is nothing you can do" about suicidality. However, note that the outcome must be positive for that person in order for this to qualify as a "debunking of a myth". If the outcome is negative (e.g., help-seeking was futile); or uncertain; this does not qualify as a debunking of myths.

If the specific legislation/policy clearly targets one of the outlined myths, then it \*potentially\* contributes to the debunking of a myth,. E.g. a bill for suicide prevention in youth suggests that suicide is preventable. However, if that specific media item primarily addresses that suicide is \*hard\* to prevent, then saying that a bill will be introduced to prevent suicide, this would still not qualify as a "debunking of the myth"."

	No	Yes
Myth debunked	0	0

Yes

	_
<b>4Y01_01</b> Myth debunked	
1 = No	
2 = Yes	
-9 = Not answered	
	J

#### 29. Item uses stigmatising language related to suicidal behaviour

Check if this item uses stigmatising language related to suicidal behaviour or mental health problems such as commit suicide,

a successful suicide / attempt, an unsuccessful suicide, a failed attempt, suicide victims / cases, crazy, disturbed

Stigmatising language	0	0	
IL01_01 Stigmatising language			
	1 = No		
	2 = Yes		
	-9 = Not answered		

No

## 30. The item contains reference to a suicide "epidemic" or similar wording (see below)

WORDING that describes suicide as a spreading phenomen; involving more and more individuals, or an extraordinarily high number of individuals. It includes expressions such as "waves" of suicide / suicide attempts, "epidemic" "series" of suicide, "highest rate" of suicide (suicidal behaviour), "suicide is spreading".

Highlighting high suicide rates or the "highest suicide rates" alone should be coded as "suicide epidemic" but not as "increasing societal problems".

NOTE: Report of an increase in suicides without sensationalist wording alone does NOT qualify. Sheer reporting of increases in rates do not qualify. A message of "higher rates than last year" do not qualify. BUT: The "highest" rate (SUPERLATIVE) or "extreme wording" qualifies.

Example: A wave of suicides, a series of massacres, highest suicide rate in the world, the series does not stop...

	No	Yes
Wording suggestive of suicide as "epidemic"	0	0

☐ Decrease

SE01_01 W	ording suggestive of suicide as "epidemic"	
1 = No		
2 = Yes		
-9 = Not ans	swered	

# 31. The item contains reference to an increase or decrease in suicidal behaviour/increase in mental health problems resulting in a mental health crisis linked to suicide in US (either in a subgroup of people or overall population, or in a state – any setting in the US).

The text reports on an increase or decrease in suicidal behaviour/increase in mental health problems resulting in a mental health crisis linked to suicide in US (if multiple apply, code all that apply).

Note:	The	mental	health	crisis	needs	to	be	linked	to	suicide	in	order	to	qualify.
☐ Inc	creas	e												

SE02 Reference to an increase or decrease in suicidal behaviour/increase in mental health problems resulting in a mental health crisis linked to suicide in US: Residual option (negative) or number of selected options

Integer

SE02\_01 Increase

**SE02\_02** Decrease

1 = Not checked

2 = Checked

#### 32. The item reports suicide-related statistical data

A quantitative summary/analysis of any suicide (attempt) data-set, or of morbidity data (e.g. depression) or social data related to suicide is reported. One sentence eg. on suicide rates is sufficient. This differentiates this item from the item "focus on suicide research".

Example: 58.000 people die from suicide each year in the EU. In Austria, 1456 people take their lives each year, which compares with 876 traffic injury fatalities...Suicide rates are on the decrease.

	No	Yes
Suicide-related statistical data reported	0	0

Yes

SD01_01 Suicide-related statistical data reported	
1 = No	
2 = Yes	
-9 = Not answered	

## 33. The item contains glorified and/or romanticized portrayals of suicidal individuals or their acts (independently of the type of story, e.g. suicide case story or healing story).

The death is glorified or romanticized; e.g. the act is portrayed as noble, or a suicidal person seen as a hero (because of their suicidal behaviour).

NOTE: ALSO POSSIBLE FOR HEALING or PREVENTION STORIES! Someone is portrayed as brave because he/she managed to cope.

THIS VARIABLE IS SUBJECTIVE AND A BASIS FOR MACHINE LEARNING ONLY. STILL; INTERCODER-RELIABILITY NEEDS TO BE ACCEPTABLE – DISCUSS WHEN NEEDED.

NOTE: Also prevention articles might have these features (not only stories on suicide cases).

Example: "She did it to be with her children", "He was a hero to those who watched him on the internet"

Glorification_romantization	0	0
	GR01_01 Glorification_romantization	
	1 = No	
	2 = Yes	
	-9 = Not answered	

No

## 34. The item includes a statement suggesting that suicide is inevitable / the only option

The item contains wording suggestive of inevitability of suicidal behaviour, e.g. .." there was no way to stop it" or"it was going to happen no matter what anyone did.." . Includes statements suggesting that suicide is very hard to prevent or not preventable.

It includes a possible clinician (or somebody else's) statement that "suicide is difficult to prevent".

It shows that everything possible was done, all measures to stop it were taken, but still somebody died by suicide (despite of all taken measures).

	No	Yes
Statement that "suicide is inevitable"	0	0

	SB01_01 Statemen	nt that "suicide is inevitable"	
	1 = No		
	2 = Yes		
	-9 = Not answered		_
35. The item contains a suicidal behaviour / ass	-	at might suggest approva c.	al of the
	n individual who end	might appear as having benefit courages someone to suicide or nan right.	•
·	•	d as not painful and very effecti statement does not have the ir	_
Note: Just the portrayal of sui sufficient to code as "approva		in a specific setting (e.g., in jai	ils) alone is not
EXAMPLES:			
* "Many encouraged him to ta	ake his life"		
		No	Yes
Approval of Suicidal Behaviou	r	O	0
		of Suicidal Behaviour	
	1 = No		
	2 = Yes -9 = Not answered		
	y = Not unswered		
26 The item's content	ic (mainly) abou	ut fiction	
36. The item's content			t Ctarias Whasad
•		es,movies with fictional content portion of text is fictional, do no	
on real events do not quality	i ii oiliy a siriali prop	ortion of text is fictional, do fic	t code as netional.
		No	Yes
Fictional content		$\circ$	$\circ$
rictional content			
	FI01_01 Fictional of	content	
	1 = No	JOHNGHE	
	2 = Yes		
	-9 = Not answered		

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## 37. Does the item describe suicidal behaviour and/or suicidal ideation AS A PROBLEM (without offering solutions), or is the main focus more on a SOLUTION rather than the problem?

The item describes suicidal behaviour and/or suicidal ideation as a problem, or it shows how to solve suicidal behaviour and/ or suicidal ideation. The focus of the item in terms of highlighting the problem of suicide or solutions to it.

It is important to address if the text does represent more the problem or the solution or if this is balanced. In order to assess "BALANCE", one should check the overall quantity of text devoted to the problem and solution; but also investigate the prominence / framing of both.

E.g., a text that has about equal proportions but uses much stronger wording for the solution-aspects than the problem-aspects, should still qualify as more related to a solution. If both, problem and solution aspects come up repeatedly, with about similar amount of text and similar overall prominence, code "both".

NOTE: In order to code "both", a balance needs to be present. If one, problem or solution is clearly stronger than the other, code either "problem" or "solution".

#### **EXAMPLES:**

Problem: "every 40 secs someone commits suicide, and that 2160 lives a day" ..or "More than 96 in-patients died by suicide in Ontario hospitals since 2007"

Problem: I have had those terrible thoughts non-stop, for most of my whole life.

Solution: Main emphasis is about solutions to suicide (prevention strategy):

Solution: I have had those terrible thoughts non-stop, for most of my whole life. But one day I took the phone and called the Lifeline.. I was on the phone and it was the first time for me to realise that I was born this way and...

SOLUTION - CAN BE ON PRIMARY; SECONDARY OF TERTIARY LEVEL OF PREVENTION:

Suicidal behaviour and/or suicidal ideation are described as:

[Please choose]

#### PS01 Problem/Solution

1 = Problem

2 = Solution

3 = Both

-9 = Not answered

## 38. The item includes some positive or negative description of the character / personality of a suicidal person

Description of a suicidal person's character BEYOND the sociodemographic traits and illness. Reporting of mental illness (e.g. "he was ill", "depressed", alone does not qualify as a character description).

Only code for the description of INDIVIDUALS; not for group characteristics.

EXAMPLE: "He was a terrible man", "He never did anything right" or "She was ...a loving mother", "She was gentle.."

Please, select from the list one of the following options:

[Please choose]	e]
-----------------	----

#### **ID02** Description of the character /personality

- 1 = Negative statement about a suicidal person
- 2 = Positive statement about a suicidal person
- 4 = Not clear if positive or negative
- -9 = Not answered

# 39. The item has a focus (i.e., 1-2 sentences minimum depending on total text length) on one or several specific genders (e.g. it is about the suicide of a female person; or it is about suicide prevention in females and in males). It also includes a subgroup of gender (subgroup of male, female transgender).

Do not code any if there is no focus on a gender group or individuals of particular genders(s).

If focus is "INDIVIDUAL": If specification is made about the age / gender / specific group of the person affected by suicidality; code according to the gender of that person.

If focus is "GENERAL", check if the focus of the reporting is on a specific gender. A focus would mean (1-2 sentences minimum depending on total text length) on one or several specific gender group. Different from the "individual focus" items, a gender of a specific individual in that item is irrelevant for this determination.

For items with "INDIVIDUAL" focus, as soon as a group is in the focus (even if mentioned briefly), this GROUP should be coded.

☐ Male	
☐ Female	
☐ Transgender	

**ID03** Gender: Residual option (negative) or number of selected options

Integer

**ID03\_01** Male

ID03\_02 Female

ID03\_03 Transgender

- 1 = Not checked
- 2 = Checked

## 40. The item has a focus (i.e., 1-2 sentences minimum depending on total text length) on one or several specific age group(s) (e.g. it is about the suicide of a young person; or it is about suicide prevention in adults).

Do not code any if there is no focus on an age group or individuals of particular age. It is possible to infer age based on clear indicators, e.g. individuals attending school (youth); university (adult); retired (elderly)

If focus is "INDIVIDUAL": If specification is made about the AGE of the person affected by suicidality; code according to the age of that person.

If focus is "GENERAL", check if the focus of the reporting is on a specific age group. A focus would mean (1-2 sentences minimum depending on total text length) on one or several specific age group. Different from the "individual focus" items, an age etc. of a specific individual in that item is irrelevant for this determination.

For items with "INDIVIDUAL" focus, as soon as a group is in the focus (even if mentioned briefly), this GROUP should be coded.

	Youth	or	young	persons
--	-------	----	-------	---------

☐ Adults

☐ Older people

**ID04** Age of a suicidal person: Residual option (negative) or number of selected options

Integer

**ID04\_01** Youth or young persons

ID04\_02 Adults

**ID04\_03** Older people

1 = Not checked

2 = Checked

41. The item has a focus (i.e., 1-2 sentences minimum depending on total text length) on one or several or specific population group(s) (e.g. it is about the suicide of a gay person or person believed to be gay; or it is about suicide prevention in veterans; or what first responders do in relation to sucide prevention).

Do not code WHO is providing the information but the group that is targeted. E.g. if a medical professional speaks about suicide in LGBTIQ, code "LGBTIQ+".

For items with "INDIVIDUAL" focus, as soon as a group is in the focus (even if mentioned briefly), this GROUP should be coded.

Note: code all that apply. Infer if clear from text. E.g. if a male person has a husband, assume LGBTIQ+.

Focus – includes at least two sentences (1-2 sentences)
□ LGBTIQ+
$\square$ Veterans / military
☐ Artist
$\square$ First responders – police, firebrigade, emergency service
$\square$ Specific race / ethnicity / religion
$\square$ Medical/Psychologist/Social care professionals
Other

**ID06** Specific populations: Residual option (negative) or number of selected options

Integer

ID06\_01 LGBTIQ+

ID06\_02 Veterans / military

ID06\_03 Artist

**ID06\_04** First responders - police, firebrigade, emergency service

ID06\_05 Specific race / ethnicity / religion

**ID06\_06** Medical/Psychologist/Social care professionals

**ID06\_07** Other

1 = Not checked

2 = Checked

ID06\_07a Other (free text)

Free text

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#### 42. The item reports on suicidal ideation or suicidal behaviour of a celebrity

This variable applies to anyone who was famous prior to their suicidal ideation or suicidal behaviour, but not because of it (.i.e. Robin Williams, Ariel Castro, Whitney Houston's daughter..but not Amanda Todd) . Also code local celebrities if there are indicators of celebrity status in the text., e.g. someone who run a TV show.

NOTE: Celebrities include close relatives of celebrities, e.g. children, if they are likely reported based on the celebrity status of their releative (e.g. parent).

	No	Yes	
Celebrity	0	0	
	<pre>ID05_01 Celebrity  1 = No 2 = Yes -9 = Not answered</pre>		

43. The item reports on celebrity role in suicide prevention, advocacy efforts, supporting programs for suicide prevention. Healing story or suicidal behaviour does not qualify in here.

	No	Yes
Celebrity role in prevention of suicidal behaviour	0	0

CB01\_01 Celebrity role in prevention of suicidal behaviour

1 = No
2 = Yes
-9 = Not answered

## 44. The item includes details on life event(s) portrayed as relevant to suicide / prevention.

Any EVENT portrayed as having a considerable impact on the life of the person before a suicide (attempt), or triggered suicidal ideation. This is typically an event that marks a turning point in one's life. E.g. the moment when someone gets diagnosed with a mental or somatic diagnosis, or gets fired or when a breakup of a romantic relationship occurs. Background vulnerabilities (e.g. mental health problems) do not qualify as "life events", IF THEIR ACTUAL IMPACT on someone's life is not properly described. E.g., "now new reporting suggests that she was depressed" would not qualify as life event.

But "her mental health problems had a strong negative impact on her life and culminated in suicide" would qualify as a life event.

Further examples:

The background (of the suicide) was...that he was fired.

After the man found his wife dead on the floor, he wanted to follow her into the death

	No	Yes
Life event(s) reported	0	0
	CS01_01 Life event(s) reported	
	1 = No	
	2 = Yes	
	-9 = Not answered	

## 45. The item reports about a connection / link between mental disorders (mental health crisis) and suicidal behavior

The relationship between mental disorder or mental health problems and suicide (attempt) is acknowledged, either at the level of an individual suicide, or in general terms. Colloquial and discriminating wording such as "crazy" do not qualify as a reference to mental disorder.

Example: The reason for her suicide was probably depression. OR When a child suffers, this may manifest itself as an eating disorder, in the form of behavioural problems or, in the worst case, in suicide.

	No	Yes
Compostion between months		
Connection between mental	0	0
disorder and suicidal behaviour		

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<b>1D01_01</b> Connection between mental disorder and suici	dal
behaviour	
1 = No	
2 = Yes	
-9 = Not answered	

#### 46. The item suggests that suicidal behaviour is \*monocausal\*

Exactly one possible motive, cause, or trigger of suicidal beaviour is reported.

#### Examples:

\*The 19-year old boy, who suffered from depression, listened to voices in his head, and committed suicide.

\*She wanted to break up with him, that was his death sentence (no other reason/trigger reported)

	No	Yes	
Monocausality suggested	0	0	
	CS02_01 Monocausality suggested  1 = No 2 = Yes		
	-9 = Not answered		

## 47. The items reports about an increase of (assumed) societal problems or pressing societal problems

Unemployment, bullying, violence, isolation, stress

Example: Nowadays there are fewer and fewer ways of recovering from stress. People fear for loss of work, and there is bullying...OR Communication itself is on the decrease...OR We have to live in a world of increasing violence and brutality ..OR People cannot cope with this any more..and choose to die. OR Nowadays, people live longer, and they get more isolated and lonely. This is why they end their lives...

	No	Yes
Societal problems (pressing or	0	0
increase)		0

	<b>CS03_01</b> Societal problems (pressing	•
	1 = No	
	2 = Yes	
	-9 = Not answered	
48. The item include:	s a citation from a suicide note or	a text message / email
and similar texts anr	nouncing the suicide.	
Example: K. C. left a suici	de note: "Don't expect money from my li	fe assurance – they won 't pay,
pecause it's a suicide", he	e wrote.	
	No	Yes
Suicide note	0	0
Suicide Hote	Č	_
	CS04_01 Suicide note	
	1 = No	
	2 = Yes	
	-9 = Not answered	
ndividuals	any effects of the suicidal behavio	
Any effects on bereaved poersons involved in the supersons. In order to code must have been present a Examples:	any effects of the suicidal behavior person(s) reported. Relatives, friends of the suicidal act or in the investigation of the suicidal act or some relationship with the already before the suicidal act.  The bloody act when they got home.  The suicidal act or in the investigation of the suicidal act.	e victim, and other *private* cide are defined as bereaved suicide attempter / decedent
Any effects on bereaved poersons involved in the subersons. In order to code must have been present a Examples:  The children discovered to the subersons.	person(s) reported. Relatives, friends of the suicidal act or in the investigation of the suicidal act or some relationship with the already before the suicidal act.  the bloody act when they got home.	e victim, and other *private* cide are defined as bereaved suicide attempter / decedent
Any effects on bereaved poersons involved in the subersons. In order to code must have been present a Examples:  The children discovered to the subersons.	person(s) reported. Relatives, friends of the sicidal act or in the investigation of the suicas a bereaved, some relationship with the already before the suicidal act.  The bloody act when they got home.  The ned the door, found his parents lying on the	e victim, and other *private* cide are defined as bereaved suicide attempter / decedent ne ground, and called the
Any effects on bereaved poersons involved in the supersons. In order to code must have been present at Examples:  The children discovered to the supersons involved in the supersons. In order to code must have been present at Examples:  The 15 year-old boy ope emergency services.	person(s) reported. Relatives, friends of the suicidal act or in the investigation of the suicidal act or in the investigation of the suicidal as a bereaved, some relationship with the already before the suicidal act.  The bloody act when they got home.  The bloody act when they got home.  No  No  Properties on bereaved  1 = No	e victim, and other *private* cide are defined as bereaved suicide attempter / decedent ne ground, and called the
Any effects on bereaved poersons involved in the supersons. In order to code must have been present at Examples:  The children discovered to the supersons involved in the supersons. In order to code must have been present at Examples:  The 15 year-old boy ope emergency services.	person(s) reported. Relatives, friends of the sicidal act or in the investigation of the suice as a bereaved, some relationship with the already before the suicidal act.  The bloody act when they got home.  The ned the door, found his parents lying on the No	e victim, and other *private* cide are defined as bereaved suicide attempter / decedent ne ground, and called the

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50. The item includes an interview with (a) bereaved person(s) or a citation of what (a) bereaved person(s) say.		
	No	Yes
Interview / citation bereaved person	0	0
	IBO1_01 Interview / citation bereaved p  1 = No 2 = Yes	person
	-9 = Not answered	
<b>51. The item includes or</b> Only photos *relevant and rel Note: This excludes ads.	ne or more photos.  ated to the item* are to be coded.	
	No	Yes
Item contains photo (s)	0	0
	PT01_01 Item contains photo (s)	

PT01\_01 Item contains photo (s)

1 = No
2 = Yes
-9 = Not answered

## 52. What does the photo (or more photos) show? Please, select only those relevant for the article (no commercials)

Please, select from the list. Code all that apply.
☐ Suicide method
$\square$ A setting / location of suicidal behavior (location, site, maps)
☐ Photo of suicidal person alive
$\square$ Photo of a deceased (victim of suicidal behaviour)
☐ Funeral, funeral ceremony, grave
☐ Farewell letter/text message/email of suicidal person
☐ Police investigation
$\hfill\Box$ Statistics, epidemiological graphs, charts, tables.
$\hfill\Box$ Symbolic representation of positive emotion or behaviour including hope, seeking help / reaching out
$\hfill \square$ Symbolic representation of negative emotion including death or someone looking sad
□ Other

**PH01** Content of the photo: Residual option (negative) or number of selected options

Integer

PH01\_01 Suicide method

PH01\_08 A setting / location of suicidal behavior (location, site, maps)

PH01\_09 Photo of suicidal person alive

**PH01\_10** Photo of a deceased (victim of suicidal behaviour)

PH01\_11 Funeral, funeral ceremony, grave

**PH01\_13** Farewell letter/text message/email of suicidal person

PH01\_15 Police investigation

**PH01\_19** Statistics, epidemiological graphs, charts, tables.

**PH01\_23** Symbolic representation of positive emotion or behaviour including hope, seeking help / reaching out

**PH01\_24** Symbolic representation of negative emotion including death or someone looking sad

PH01\_27 Other

1 = Not checked

2 = Checked

### 53. The item includes alternatives to suicidal behaviour. ANY alternative counts.

This might include a specific action taken by an individual instead of suicidal behaviour; a suggestion / advice to seek help; "going for a walk to calm down"; "how to make new friends".

NOTE: A reference to the lifeline or another support service at the end of the text does not qualify. It needs to be a part of the story, irrespective if suicidal behaviour occurred or not.

NOTE II: If the "alternative" is very general and unspecific (i.e. without any likely practical use to someone in the state of suicidal ideation, do not code as alternative. E.g., "You can get new friends" (without any additional information on how to potentially accomplish this).

NOTE III: Only code an item as positive on "alternatives" if the message is not inconsistent with a possible effectiveness. E.g. if a media item emphasises that there are many suicides because there is no treatment available; this would not qualify as an "alternative". In other words, the item cannot portray the alternative as unavailable in order to code positive for highlighting an alternative.

		No	Yes
Alternatives to suicidal behav	iour	0	0
	<b>AU01_01</b> Alternativ 1 = No 2 = Yes -9 = Not answered	es to suicidal behaviour	

#### 54. The item contains a story of someone's life being saved

There is story about individuals describing themselves, someone else, a first responder, or celebrity who saved another person's life who had suicidal ideation or displayed suicidal behaviour.

The item must inlcude one person coming to someone else's rescue; otherwise this does not qualify.

	No	Yes
Someone's life being saved	0	$\circ$

Yes

S	<b>V01_01</b> Someone 's life being saved
	1 = No
	2 = Yes
	-9 = Not answered

### 55. The item includes example(s) of some positive outcome related to a suicidal crisis.

The item contains an example of a person experiencing a suicide attempt or suicidal ideations, and mastering his/her crisis or leading to positive behaviour – someone calling a suicide hotline/getting help, or someone making new friends. Ending is positive.

NOTE: Positive outcomes after lethal suicide / bereavement do not qualify (see next variable).

Examples of a positive outcome of suicidal crisis	0	0
D001_01_F	vamples of a positive ou	teams of avioidal aviois

No

**PO01\_01** Examples of a positive outcome of suicidal crisis

1 = No

2 = Yes

-9 = Not answered

### 56. The item includes example(s) of healing story for a bereaved person after a suicide.

Any personal story of coping should code positive here; even if the "positive outcome" is not explicitly stated. Just like for "healing stories"; any outcome that is constructive and positive as such should code here.

NOTE: Positive outcomes after suicidal ideation or attempt do not qualify (see last variable)

	No	Yes
Examples of a healing story for a bereaved person after suicide	0	0

**PO02\_01** Examples of a healing story for a bereaved person after suicide

1 = No

2 = Yes

-9 = Not answered

#### 57. Information about preventing suicide at the individual level

The item provides information about specific strategies and/or resources for suicide prevention (other than a contact to a support service) on an individual level; i.e. what can YOU (the reader, person exposed to the item) do if you are worried about someone else or if you feel suicidal. This might, e.g. include useful information on how to approach a suicidal person.

The essential part is that the focus is on the individual level of prevention, i.e. what THE PERSON EXPOSED TO THIS MEDIA ITEM OR OTHER INDIVIDUALS can do to prevent suicide. The information can either be part of an individual story e.g., saying that someone approached someone else by asking directly about suicidal ideation; OR it can show up as a general recommendation (e.g., if you feel someone might think about suicide, ask him / her directly about it").

For individual prevention to code positive, the item should include:

- A) a statement that can be used by the audience to prevent suicide; OR
- B) an activity that can serve as a basis for others struggling with similar issues (e.g., walking for suicide prevention as an activity by someone who has been bereaved can be both, an individual measure because others resonating with the story might do the same; but it is always also population-based because the activity addresses a broader public.

Note: If a (individual or population-based) prevention approach is \*only\* mentioned in a way that highlights a) its absence / inaccessability or b) seeking it being futile (e.g., some items on suicide in prison, mention absence of mental health support in prisoners and their roles in specific suicides); this should not result in either of these codes being positive. If there is, however A) an additional statement that presence or accessability might decrease suicide; or B) some prospect is made in the item that the situation can be improved; or C) that this kind of support would have been available or might be available elsewhere; or D) if there is an explanation of what such an effort would entail (e.g., taking away the ropes from prisoners in order for them no to hang themselves instead of just saying that nobody took away the rope), code positive.

Preventing suicide – at the individual level

**II01\_01** Preventing suicide - at the individual level

1 = No

2 = Yes

-9 = Not answered

#### 58. The item includes details about population-based suicide prevention efforts

The item provides information about specific strategies and/or resources for suicide prevention on how to prevent suicide in the general population or in specific settings / subgroups. This can show up as general information or as a specific action taken in a prevention programme.

The essential part is that the focus is on the societal rather than individual level of prevention (e.g., bridge barriers, improved media reporting, suicide means safety). The information can be included in a personal (individual) story, e.g. someone saying that he/she refrained from suicide because there was a suicide prevention barrier at the bridge when he considered jumping from the bridge. In that case, the item also reports on a population-based strategy at that individual example (i.e., having barriers on bridges).

Population-based measures are measures such as policies, projects or advocacy efforts, laws, while individual measures are what one individual person can do in order to prevent suicide (this also includes advocacy efforts of an individual if this is a way of coping with bereavement or suicidal ideation; or somebody taking certain measures to prevent somebody else to die by suicide). Items including only the name of the advocacy project (e.g., project safe family) it is only a population based measure.

Note: If a (individual or population-based) prevention approach is \*only\* mentioned in a way that highlights a) its absence / inaccessability or b) seeking it being futile (e.g., some items on suicide in prison, mention absence of mental health support in prisoners and their roles in specific suicides); this should not result in either of these codes being positive. If there is, however A) an additional statement that presence or accessability might decrease suicide; or B) some prospect is made in the item that the situation can be improved; or C) that this kind of support would have been available or might be available elsewhere; or D) if there is an explanation of what such an effort would entail (e.g., taking away the ropes from prisoners in order for them no to hang themselves instead of just saying that nobody took away the rope), code positive.

Population-based suicide prevention efforts

PQ01\_01 Population-based suicide prevention efforts

1 = No

2 = Yes

-9 = Not answered

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## 59. The item includes details about contacts / a support service. It specifically reports where affected individuals can go or who they can call in order to get help.

A reference to a specific public support service, including address or telephone number. For online services, the web address is provided. For example: " If in distress, call the local number....."

Example: A support is available from (address, telephone number):

		No	Yes
Contact – support services de	etails	0	0
	SS01_01 Contact -	support services details	
	1 = No		
	2 - Voc		

## 60. Does the item provide a contact / reference to the LIFELINE or mentions "Breaking the silence/ Break silence?"

	No	Yes
Contact / reference to LIFELINE	0	0
Breaking the silence /Break the silence	0	0

-9 = Not answered

CT02\_01 Contact / reference to LIFELINE

CT02\_02 Breaking the silence /Break the silence

1 = No
2 = Yes
-9 = Not answered

## 61. The item includes details about how a support service works, e.g. what happens when someone calls, what are the requirements for clients; how does it work; general descriptions but also examples of individual cases qualify.

This only applies to support services for clients/patients that are targeting either the general public or parts thereof.

The service needs to be easily available for the target group, normally in their everyday lives. This is most likely the Lifeline, or some regional Lifeline service; or e.g. a counselling center with onsite visits for the general public or a specific target group. E.g. the Veterans Line or Youth Lifeline qualify.

A specific suicide prevention programme, e.g. in one or a few particular schools does not qualify, because this code is really for services that are available for anyone in the target group.

Example: The Lifeline is available 24/7.

		No	Yes
Support services: how they w	vork	0	0
	<b>SS02_01</b> Support set 1 = No 2 = Yes -9 = Not answered	ervices: how they work	

#### 62. The item contains an expert opinion

A statement from an expert defined as a person belonging to a professional group dealing with suicidal behaviour or involved in the investigation about the case of suicidal behaviour

Example: Only 25% of patients receive the right diagnosis and treatment. The illness (bipolar disorder) is often mixed up with depression. About 15% of patients with bipolar disorder commit suicide, an expert says.

	No	Yes
Expert opinion reported	0	$\circ$

```
EX01_01 Expert opinion reported

1 = No
2 = Yes
-9 = Not answered
```

#### 63. The type of expert

Select the types of experts whose opnion is reported in the item (check all that apply).

Please, select the expert's group	t tne expert s group	up:
-----------------------------------	----------------------	-----

Ш	dedicated Mental Health expert (treating patients/ clients: MD; counsellor, psychologist, therapist)
	Politician
	First responder (police, emergency service, firebrigade)
	Legal expert
	Other
	Health expert (exclude dedicated mental health expert categorised above)

**TE01** Expert type: Residual option (negative) or number of selected options

Integer

**TE01\_01** dedicated Mental Health expert (treating patients/ clients: MD; counsellor, psychologist, therapist)

TE01\_02 Politician

**TE01\_03** First responder (police, emergency service, firebrigade)

TE01\_04 Legal expert

**TE01\_08** Other

**TE01\_09** Health expert (exclude dedicated mental health expert categorised above)

1 = Not checked

2 = Checked

#### 64. The item includes warning signs of suicidal behaviour

The item contains text indicating several (i.e. more than one) warning signs of suicidal behaviour

NOTE: CHECK LIST OF WARNING SIGNS

Examples:

"Warning signs of suicidal behaviour (suicide, suicide attempts) include...", "Get help if your teen experiences..."

"He showed some withdrawal from the environment and started drinking".

LIST:

Talking about wanting to die or to kill oneself;

Looking for a way to kill oneself;

Talking about feeling hopeless or having no purpose;

Talking about feeling trapped or being in unbearable pain;

Talking about being a burden to others;

Increasing the use of alcohol or drugs;

Acting anxious, agitated, or reckless;

Sleeping too little or too much;

Withdrawing or feeling isolated;

Showing rage or talking about seeking revenge; and

Displaying extreme mood swings.

Not communicating with friends or family

Giving away possessions or writing a will

Driving recklessly

Increased aggression

Searching about suicide on the Internet

Gathering materials (pills or a weapon)

Drop in grades, cutting classes

https://www.psycom.net/suicide-warning-signs

save.org

Warning signs of suicidal behaviour

**WS01\_01** Warning signs of suicidal behaviour

1 = No

2 = Yes

-9 = Not answered

**Last Page** 

### Thank you for completing this questionnaire!

We would like to thank you very much for helping us.

Your answers were transmitted, you may close the browser window or tab now.

Dr. med. Zrinka Laido, Medizinische Universität Wien – 2020