1	The Role of Generative Artificial Intelligence in Evaluating Adherence to
2	Responsible Press Media Reports on Suicide: A Multi-Site, Three-
3	Language Study
4	Z. Elyospeh, PhD ^{1$\underline{\Psi}$} , B. Nobile, PharmD, PhD ^{2,3$\underline{\Psi}$} , I. Levkovich, PhD ⁴ , R. Chancel, MD ² , P.
5	Courtet, MD, PhD ^{2,3} , Y. Levi-Belz, PhD ⁵
6	¹ University of Haifa, Mount Carmel, Haifa, Israel, <u>zohar.j.a@gmail.com</u>
7 8 9	² Department of Emergency Psychiatry and Acute Care, CHU Montpellier, France, <u>benedicte.nobile@gmail.com</u> , <u>philippecourtet@gmail.com</u>
10 11	³ IGF, Univ. Montpellier, CNRS, INSERM, Montpellier, France
12	⁴ Faculty of Education, Tel Hai College, Upper Galilee, Israel, <u>levkovinb@telhai.ac.il</u>
13	⁵ Lior Tsfaty Center for Suicide and Mental Pain Studies, Ruppin Academic Center, Israel,
14	yossil@ruppin.ac.il
15	Ψ These authors contributed equally, and are co-first author

16

This peer-reviewed article has been accepted for publication but not yet copyedited or typeset, and so may be subject to change during the production process. The article is considered published and may be cited using its DOI.

This is an Open Access article, distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivatives licence (http://creativecommons.org/licenses/bync-nd/4.0/), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is unaltered and is properly cited. The written permission of Cambridge University Press must be obtained for commercial re-use or in order to create a derivative work.

17 ABSTRACT

Background: Improving media adherence to World Health Organization (WHO) guidelines is crucial for preventing suicidal behaviors in the general population. However, there is currently no valid, rapid, and effective method to evaluate adherence to these guidelines.

21 Methods: This comparative effectiveness study (January-August 2024) evaluated the ability 22 of two Artificial Intelligence (AI) models (Claude Opus 3 and GPT-4O) to assess adherence of 23 media reports to WHO suicide reporting guidelines. A total of 120 suicide-related articles (40 24 in English, 40 in Hebrew, 40 in French) published within the past 5 years were sourced from 25 prominent newspapers. Six trained human raters (two per language) independently evaluated 26 articles based on a WHO guideline-based questionnaire addressing aspects such as prominence, 27 sensationalism, and prevention. The same articles were also processed through the AI models. 28 Intraclass correlation coefficients (ICC) and Spearman correlations were calculated to assess 29 agreement between human raters and AI models.

30 **Results:** Overall adherence to WHO guidelines was approximately 50% across all languages. 31 Both AI models demonstrated strong agreement with human raters, with GPT-4O showing the 32 highest agreement (ICC = 0.793 [0.702; 0.855]). The combined evaluations of GPT-4O and 33 Claude Opus 3 yielded the highest reliability (ICC = 0.812 [0.731; 0.869]).

34 Conclusions: AI models can replicate human judgment in evaluating media adherence to WHO 35 guidelines. However, they have limitations and should be used alongside human oversight. 36 These findings may suggest that AI tools has a potential to enhance and promote responsible 37 reporting practices among journalists, and thus, may support suicide prevention efforts globally.

38 KEYWORDS: Suicide; Artificial Intelligence; Media; Suicide prevention; Natural Langage
39 Processing

40 **INTRODUCTION**

41 With more than 800,000 deaths by suicide each year, preventing suicide is a global 42 imperative [1]. Since it is a major cause of premature death, stronger prevention strategies must 43 be developed to address it. While most studies and prevention efforts have focused on indicated 44 and selected prevention (*i.e.* for specific high-risk group and for patients with previous suicide 45 attempt or current suicidal ideation, respectively), growing evidence suggests that universal 46 prevention (for the general population) strategies are promising for reducing suicide rates [2-47 4]. Among universal prevention efforts, media coverage of suicide and suicidal behavior is a 48 critical area of focus.

49 Traditional media plays a key role in shaping public perception and has a significant 50 influence on the general population. Consequently, the way suicide and suicidal behaviors are reported can have either a preventive effect (i.e., the "Papageno" effect) or a harmful one (i.e., 51 52 the "Werther" effect) [5]. Numerous studies have demonstrated that irresponsible traditional 53 media coverage of suicide (e.g., sensationalist reporting) leads to an increase in suicide rates 54 and behaviors by triggering imitative or "copycat" suicides [2,5-10]. On the other hand, 55 responsible traditional media coverage (e.g., providing information about available resources 56 and avoiding details on suicide methods) has been shown to be effective not only for the general 57 population but also for vulnerable groups such as youth [2,5,11,12]. Given the impact of 58 traditional media on public behavior, the World Health Organization (WHO) published 59 guidelines in 2008 for reporting suicide in traditional media (excluding social media), which 60 were updated in 2017 [13]. However, adherence to these guidelines among journalists found to 61 be poor [2]. For instance, a recent study reviewing 200 articles on suicide published in the last 62 10 years found an adherence of only approximately 49% to the WHO guidelines [14].

63

Therefore, evaluating traditional media adherence to these guidelines and educating journalists

64 is crucial for improving suicide prevention efforts at the primary level [5].

65 Manual screening and evaluation of every traditional media report on suicide is 66 practically impossible due to the volume of reports and the variety of languages in which they 67 are written. Thus, developing a simple valid tool which capable of screening and assessing 68 whether traditional media reports on suicide comply with WHO guidelines is compelling. Such 69 a tool could greatly enhance the monitoring and encourage journalists and traditional media 70 organizations to adhere to guidelines more consistently. Artificial Intelligence (AI) offers 71 valuable support in this regard [15,16]. Interest in the use of AI in the mental health field is 72 growing, and it has shown promising results in various applications [17–20]. Notably, 73 numerous studies are emerging on the use of AI for the prevention of suicidal behavior [21,22]. 74 Most existing research on AI and suicidal behavior focuses on clinical applications, such as 75 improving the detection of suicidality through automated language analysis, assisting in risk 76 assessment and diagnosis, enhancing accessibility to crisis counseling, supporting training for 77 mental health professionals, contributing to policy development, and facilitating public health 78 surveillance and data annotation [22]. While some studies examine social media, particularly 79 in the context of predicting suicide risk, no study to date has evaluated AI's ability to assess 80 whether traditional media reports on suicide comply with WHO guidelines. Compared to 81 conventional machine learning classifiers, which typically rely on manually engineered features 82 and labeled training datasets, Large Language Models (LLMs) are better suited for assessing 83 complex linguistic guidelines due to their advanced contextual understanding and ability to 84 process unstructured text across multiple languages. Previous studies have demonstrated that 85 LLMs can match or even outperform traditional classifiers in text classification tasks, 86 particularly in domains requiring nuanced comprehension of natural language [23–25].

87 In a preliminary study, we evaluated the use of generative artificial intelligence (GenAI) 88 to assess suicide-related news articles in Hebrew according to WHO criteria. In that study, two 89 independent human reviewers and two AI systems, Claude.AI and ChatGPT-4, were employed. 90 The results demonstrated strong agreement between ChatGPT-4 and the human reviewers, 91 suggesting that AI-based tools could be effective in this domain [26]. Building on these 92 preliminary findings, the present study aimed to assess the capacity of AI, utilizing two different 93 LLMs, to evaluate to what extent traditional media reports on suicide and suicidal behavior 94 adhere to WHO guidelines. The evaluation was conducted in comparison with human raters 95 and across three languages: English, Hebrew, and French. Specifically, we examined to what 96 extent AI models could match the performance of human raters across multiple languages. If 97 successful, such tools could serve as accessible and practical resources for journalists to screen 98 their reports prior to publication, improving adherence to WHO guidelines and, ultimately, 99 contributing to suicide prevention efforts.

100 To the best of our knowledge, no previous studies have attempted to evaluate traditional 101 media adherence to WHO suicide reporting guidelines using GenAI or other computational 102 methods. As mentioned, while some prior research has employed machine learning or rule-103 based systems to address related challenges in other domains of mental health (14–19), the 104 novelty of this study lies in its application of AI to this specific and crucial aspect of suicide 105 prevention. This study seeks to bridge an important gap in both mental health research and AI 106 applications, while highlighting the potential for AI tools to make a meaningful impact in global 107 suicide prevention efforts.

108

110 **METHODS**

111 Data Collection

112	In this study, we systematically reviewed a corpus of 120 articles concerning suicide
113	published in newspapers in three languages during the last 5 years: 40 articles in English, 40 in
114	Hebrew, and 40 in French. The sample size was determined using G*Power software, assuming
115	a minimum correlation of 0.8 between raters [14], a confidence level of 0.8, and an alpha level
116	of 0.05. The results of the analysis indicated the need for a sample size of 40 articles by
117	languages.
118	The selection process followed a structured approach to ensure the inclusion of widely
119	read and influential sources. Newspapers were chosen based on the following criteria:
120	- High Readership & National/Regional Influence - We selected newspapers with
121	significant circulation and impact on public discourse in their respective countries.
122	- Geographical & Political Diversity - To capture different reporting styles and
123	perspectives, we included both national and regional newspapers.
124	- Availability of Online Archives – Only newspapers with accessible digital archives
125	were included to ensure consistency in data collection.
126	Based on these criteria, the newspapers selected for each language were: English: The
127	Guardian and The New York Times (representing internationally recognized, high-impact
128	journalism); Hebrew: Israel Hayom and Yedioth Ahronoth (two of Israel's most widely read
129	newspapers, offering different political perspectives); French: La Provence, Midi Libre, and
130	La Dépêche (major regional daily newspapers in the south of France, where suicide rates are a
131	significant public health concern).

132 The selection process involved querying the electronic archives of these newspapers 133 using relevant keywords for "suicide" (in the masculine, feminine, and plural forms), "self-134 destructive behavior," "attempted suicide," and "ended his/her life" in each respective language. 135 Articles that employed any of these terms colloquially described suicide bombings in the 136 context of terror attacks or used them metaphorically were excluded from the search results. 137 Additionally, articles whose primary focus was not on suicide or self-destructive behavior but 138 merely mentioned an individual's death by suicide in passing were also omitted. Furthermore, 139 articles debating whether the described death constituted suicide or homicide were not included 140 in the study.

141 Article Screening Criteria

142 The screening of articles was guided by criteria established by the WHO, as detailed in 143 a study by Levi-Belz et al. (2023), which outlined 15 parameters for article screening. The 144 criteria used are listed in Suppl Mat. Table 1. Two items (items 2 and 8) pertaining to the 145 presence of images in articles were excluded from consideration given the current limitations 146 in analyzing image content. The questionnaire's items assess different aspects of traditional 147 media coverage of suicide such as: prominence (e.g., avoiding explicit mention of suicide in 148 the headline, two items), complexity (e.g., avoiding speculation about a single cause of suicide, 149 three items), sensationalism (e.g., avoiding glorifying the suicidal act, five items), and 150 prevention (e.g., providing information about risk factors for suicide, three items) (Levi-Belz 151 et al., 2023). Each criterion was assessed based on whether it was met or not.

152 Large Language Models

For this study, we employed two versions of LLMs, Claude.AI, using the Opus 3 model and ChatGPT-40, each with a temperature setting of 0. This setting was chosen to minimize

155 randomness in the output and ensure that the models produced consistent deterministic results 156 in the analysis of the articles. The selection of these specific LLMs was informed by three 157 methodological considerations. First, both models represent current computational approaches 158 in natural language processing, as reflected by their commercial deployment status. Second, 159 their established presence across research applications provides documented evidence of their 160 capabilities. Third, and particularly relevant to this study's aims, both models have 161 demonstrated effectiveness in multilingual processing, including documented performance 162 with Hebrew text analysis, supporting their appropriateness for cross-linguistic evaluation 163 tasks.

164 Claude.AI, created by Anthropic, was designed to generate beneficial, inoffensive, and 165 truthful outputs by employing a constitutional approach. The Opus 3 version utilized in this 166 study incorporates over 12 billion parameters and aims to ethically address linguistic 167 complexity. This model was selected for its emphasis on educational data curation, alignment 168 with human values, and safety considerations. A temperature setting of 0 was chosen to 169 maximize the reliability of the model and reduce the variance in its assessments.

170 GPT-40, developed by OpenAI, was configured similarly with a temperature setting of 171 0 for this study. The temperature setting was selected to enhance the model's accuracy and 172 content policy adherence by reducing output variability. This configuration was applied 173 uniformly across all three languages. Claude Opus 3 and GPT-4O were selected based on our 174 empirical testing, which demonstrated these models' superior performance in Hebrew language 175 processing—a critical requirement given our multilingual study design. From our experience, 176 these were the only models at the time that could effectively analyze Hebrew content with 177 sufficient accuracy for research purposes. Image analysis capabilities of AI models were

178 relatively limited during the study period, and the inconsistent presence of images across179 articles further justified our text-only approach.

The prompt architecture integrated three methodological elements to ensure reliable guideline assessment. Role assignment positioned the AI model as both academic expert and traditional media editor, while a structured thought-chain protocol guided systematic evaluation of each WHO parameter. The implementation of binary scoring (0/1) with clear operational definitions enabled consistent cross-linguistic assessment. This framework aimed to maintain standardized evaluation while accommodating different linguistic contexts. The prompt used to analyze the 120 articles is available in supplementary materials (Suppl mat table 1).

187 Human benchmark

188 For English articles, the evaluation was conducted independently by a master's student 189 in educational psychology (from Israel) and a resident in psychiatry (from France). Two trained 190 psychology students, one pursuing a B.A. and the other an M.A., independently evaluated each 191 of the 40 Hebrew articles, according to the screening criteria. The French articles were 192 independently evaluated by one resident in psychiatry and one researcher specializing in suicide 193 research. All evaluators were trained and supervised by researchers specializing in suicide 194 research (one from Israel for Israelis students and one from France for French students). This 195 dual-assessment approach was employed in each language group to enhance the reliability of 196 the data through inter-rater agreement. The inter-rater agreement was calculated to ensure high 197 consistency between human evaluators (see Results section).

198 Procedure

Evaluations were conducted from January 2024 to August 2024. Manual evaluations ofthe 120 articles were done by the six trained students. Following manual evaluation, all 120

articles were processed through two LLMs, ChatGPT-4o and Claude.AI Opus, to document their respective assessments. This procedure was designed to compare the analytical capabilities of LLMs against human-coded data, thereby enabling an examination of the efficacy and consistency of automated text analysis in the context of psychological research on suicide reporting.

206 Statistical Analysis

The study employed a comprehensive analytical framework to assess the agreement between human evaluators and AI systems across multiple dimensions. The primary analysis focused on three complementary approaches to evaluate inter-rater reliability and agreement across the full corpus of 120 articles, with additional analyses performed separately for each language group (English, Hebrew, and French).

The first analytical component utilized Intraclass Correlation Coefficients (ICC) with 95% confidence intervals to assess the consistency and agreement between different rater combinations. This included examining the reliability between human evaluators, between AI models (Claude Opus 3 and GPT-4O), between individual AI models and human evaluators, and between combined AI evaluations and human ratings. The ICC analysis was particularly valuable for providing a comprehensive measure of rating reliability that accounts for both systematic and random variations in ratings.

The second analytical component employed Spearman correlation coefficients to examine the consistency of ranking patterns between different rater pairs. This non-parametric measure was selected to assess how well the relative ordering of articles aligned between human and AI evaluators, providing insight into the consistency of comparative judgments across raters. The analysis included correlations between individual AI models and human ratings, as well as between the combined AI ratings and human evaluations.

225	The third component focused on examining absolute score differences between human
226	raters and AI models through paired samples t-tests. This analysis was crucial for determining
227	whether the AI models' evaluations showed systematic differences from human ratings in terms
228	of their absolute magnitudes. The comparison specifically examined differences between mean
229	scores of human raters and combined AI evaluations across the entire corpus of articles.
230	For language-specific analyses, the same analytical framework was applied separately
231	to each subset of 40 articles in English, Hebrew, and French, with results reported in
232	supplementary materials.
233	All statistical analysis were done with SPSS statistical software (version 28.0.1.1; IBM
234	SPSS Statistics for Windows. Armonk, NY: IBM Corp). The significance level for all statistical
235	tests was set at $p < .001$, and analyses were conducted using appropriate statistical software.
236	This analytical approach provided a robust framework for evaluating both the overall reliability
237	of AI evaluations and their specific performance characteristics across different languages and
238	rating contexts.

239 Ethical Considerations

240 This study was exempt from ethical review since it only evaluated AI chatbots, and no241 human participants were involved.

242 **RESULTS**

The analysis presented here focused on the agreement between human evaluators and AI models (Claude Opus 3 and GPT-4O) across 120 articles, with additional breakdowns by language (English, Hebrew, and French). The results are structured to first present the ICC between human evaluators and AI models, followed by an analysis of the agreement between each AI model and the average human ratings, as well as the agreement between the combined

- AI models and human evaluators. The results are then separately detailed for each language
- 249 group in the supplementary files (Suppl mat table 2).

250

251 Insert Table 1 here.

252 Assessing Consistency and Agreement Across All 120 Articles

The ICC between human evaluators across all 120 articles was .793, indicating a high level of consistency among human raters. Similarly, the ICC between the AI models (Claude Opus 3 and GPT-4O) was .812, reflecting strong agreement between the two AI systems when evaluating the same set of articles.

257 Claude Opus 3 vs. Human Evaluators

The average ICC between Claude Opus 3 and the average human evaluator across all and the average human evaluator across all articles was r=.724. This ICC value indicates a good level of agreement between Claude Opus 3 and the human evaluators, suggesting that Claude Opus 3 provides evaluations that are consistent with human judgments.

The Spearman correlation between Claude Opus 3 and the average human evaluators was r=.636, which was statistically significant at p < .001. This positive correlation further supports the alignment between Claude Opus 3 and human evaluators in terms of the relative ranking of articles.

266 GPT-40 vs. Human Evaluators

For GPT-4O, the average ICC with the average human evaluators was .793. This higher ICC value compared to that of Claude Opus 3 suggests that GPT-4O is more closely aligned with human evaluators.

The Spearman correlation between GPT-4O and the average human evaluator was r=.684, which was also statistically significant at p < .001. This strong correlation indicates that GPT-4O aligns well with human evaluators in terms of absolute ratings and the ranking of articles.

274 Combined AI Models vs. Human Evaluators

When considering the average ratings of both AI models combined (Claude Opus 3 and GPT-4O), the average measure ICC with the human evaluators was .812. This ICC suggests that combined AI models provide an even more robust measure of agreement with human evaluators.

The Spearman correlation coefficient between the combined AI models and human evaluators was .703, which was significant at p < .001 (Figure 1). This further confirms that the combined evaluations from both AI models are closely aligned with those of the human evaluators.

283 Comparison of Overall Evaluations Across All 120 Articles

The comparison between human raters and the combined LLMs (ChatGPT-4O and Claude Opus 3) across the 120 articles revealed no significant differences in the overall mean evaluations. The paired samples t-test indicated that the mean score for human raters was 7.00 (SD = 1.46), whereas the mean score for the AI evaluations was 7.12 (SD = 1.54). The mean difference was -0.12 (SD = 1.19), with a t-value of -1.09 and a two-sided p-value of .28,

- suggesting that the AI models generally align closely with human judgments in their
- evaluations (Figure 2).

291 Example of divergence between human and AI evaluations

- 292 Table 2 presents the ratings of a specific Hebrew-language article, comparing the
- 293 evaluations of two human raters (Human Rater 1 and Human Rater 2) and two AI models (GPT-
- 40 and Claude Opus 3) across the WHO guideline criteria.
- 295 Insert Table 2 here
- 296 This example demonstrates several interesting patterns of divergence:
- Headline interpretation (Item 1): Both AI models identified a mention of suicide in
 the headline, while both human raters did not.
- Causation and life events (Items 4-5): Claude Opus 3 did not identify single-cause
 reporting or links between specific life events and suicide, while the other three
 evaluators did.
- 302 3. Prevention and intervention information (Items 14-15): Human Rater 2 determined
 303 that the article lacked prevention and intervention information, while both AI models
 304 and Human Rater 1 found that such information was present.

305 Despite the overall strong agreement observed in our statistical analysis, this example 306 demonstrates that significant variation can exist in specific cases, both between human raters 307 themselves and between AI and human evaluations.

308 DISCUSSION

Traditional media coverage significantly impacts public perception and suicide rates, making adherence to WHO guidelines crucial. This study main goal was to explore the potential of AI models to evaluate traditional media adherence to these guidelines in real-time across different languages. To our knowledge, this study is the first to assess AI's ability to evaluate 313 the adherence of traditional media reports to WHO guidelines in comparison with human raters, 314 across three languages: English, Hebrew, and French. The results showed that across all 120 315 articles, the AI models Claude Opus 3 and GPT-4O demonstrated strong consistency with 316 human raters, as evidenced by the high ICC and Spearman correlation values, especially for 317 GPT-40. The combined evaluations from both AI models provided the highest level of 318 agreement with the human raters. Language-specific analyses revealed that AI models 319 performed best in Hebrew, followed by French and English. This variation may be attributed 320 to linguistic complexity. Hebrew is a relatively direct language with simpler syntax and fewer 321 ambiguities, which may allow AI models to interpret adherence criteria more effectively. In 322 contrast, French tends to be more nuanced and context-dependent, potentially making it more 323 challenging for AI to assess guideline compliance accurately. Regarding English-language 324 articles, one possible explanation for the slightly lower AI agreement is that the human raters 325 evaluating these articles were non-native speakers, which may have introduced variability in 326 their assessments. Future advancements in language-based AI models are likely to enhance 327 performance across all languages, including those with greater linguistic complexity. As models 328 become more adept at handling nuance, ambiguity, and contextual variation, their ability to 329 accurately assess guideline adherence is expected to improve accordingly.

330 Several studies already showed that adherence to WHO guidelines are essentials in 331 related to suicide rates [11]. Unfortunately, as observed in other studies, there are poor 332 adherence from traditional medias to these guidelines [14] and as mentioned in the goals of this 333 study, we also found a poor adherence to the WHO guidelines in the different newspapers from 334 which the 120 articles were taken. In fact, the overall mean score in our study, for each 335 language, whether rated by humans or AI models, was around 7 out of a total score of 15 (with 336 a higher score indicating worse adherence). These results suggest that adherence to WHO 337 guidelines by the traditional media, whether in English, Hebrew, or French, is around 50%,

338 reinforcing the need to improve compliance. Beyond individual media reports, the broader 339 societal impact of suicide coverage must also be considered. Social network theory suggests 340 that emotions, including distress and suicidal ideation, can spread through interpersonal 341 connections, increasing vulnerability within communities [27]. Additionally, a shift in suicide 342 prevention efforts is needed to move beyond psychiatric diagnoses and focus on emotional 343 distress as a key risk factor [28]. Responsible media reporting can play a crucial role in this 344 paradigm shift by promoting narratives of hope, coping, and available resources. Future 345 research should explore how AI-driven assessments of media adherence to WHO guidelines 346 can be integrated into broader suicide prevention strategies.

347 The main finding of our study is that our prompt shows high accuracy compared to 348 human ratings, regardless of the language used in the traditional media reports, suggesting that 349 this prompt could be applied globally. In addition, AI models analyze adherence to guidelines 350 faster than human raters (around 2 minutes per article for AI models), facilitating the review of 351 traditional media reports. Thus, this prompt could be easily used by journalists and editors 352 before publishing articles on suicidal behavior to assess whether they comply with the WHO 353 guidelines. Moving forward, the next step in our project is to improve our prompts by 354 incorporating the automatic correction of articles. This would not only allow the prompt 355 verification of whether an article adheres to the WHO guidelines but also correct problematic 356 sentences. In this way, journalists and editors may be more likely to respect WHO guidelines 357 by using a quick and easy tool to verify their articles, such as our prompt. To encourage 358 adherence to these guidelines, regulatory bodies that oversee journalism should promote the use 359 of such tools. For example, in France, the Journalistic Ethics and Mediation Council, a body 360 responsible for regulating traditional media reporting, could help disseminate this tool to 361 encourage journalists and editors to comply with the WHO guidelines on reporting suicide. To 362 facilitate the integration of AI tools into journalistic workflows, AI could function as a pre-

363 publication checker, assisting journalists and editors in evaluating adherence to WHO 364 guidelines prior to publication. Collaboration between AI, researchers, media professionals, and 365 policymakers is essential to align AI models with journalistic standards while maintaining 366 editorial independence. Additionally, AI could assist regulatory bodies in tracking media 367 compliance systematically, providing automated feedback to improve adherence. To ensure 368 responsible implementation, governments and media organizations should establish clear 369 ethical guidelines that support AI-assisted reporting without restricting journalistic freedom. 370 However, the current monitoring process requires manual review of articles, making 371 comparisons, and tracking changes - a labor-intensive process that rarely happens due to its 372 complexity and resource requirements. Our proposed solution is to develop an automated 373 system capable of collecting suicide-related articles from online sources (by screening and 374 looking for the words suicide, suicide attempt and suicidal behavior, in the titles but also body texts of newspapers) and evaluating their compliance with WHO guidelines. This automation 375 376 would enable us to generate a standardized index, allowing for both national and international 377 comparisons. This system could assign each country a compliance score (ranging from 0-15) 378 based on the average compliance of all relevant articles published within that country. The 379 system would operate automatically and be language-independent, making it truly global in 380 scope. By implementing such a measurement system, we could address one of the fundamental 381 issues in improving traditional media coverage of suicide: the lack of systematic monitoring 382 and comparison. Nevertheless, differences in journalistic practices across countries may also 383 impact AI reliability and should be considered. For example, some countries have strict media 384 regulations regarding suicide reporting (e.g., South Korea [29]), while others allow greater 385 editorial freedom (e.g., India [30]), leading to variations in how suicide is framed in news 386 reports. Additionally, cultural attitudes toward mental health and suicide may influence how 387 journalists present such topics (e.g., current debate in India in the interpretation of suicide being punishable [30]), affecting AI models trained on global datasets. These factors suggest that AI tools may require further fine-tuning to adapt to country-specific journalistic norms, ensuring that adherence evaluations remain accurate across diverse reporting styles. However, our prompt has already demonstrated strong accuracy in evaluating traditional media from three different languages and countries, suggesting its robustness across various cultural contexts. Further refinements can enhance its adaptability, but its current performance indicates potential for broad application.

395 Our study has several limitations. While it concentrated on traditional media articles, it 396 did not examine news shared on social networks, television serials or films, which host a 397 substantial volume of reports. This study focused solely on textual content analysis and did not 398 include evaluation of images accompanying media reports. This limitation stemmed from the 399 limited capabilities of AI models in image processing at the time of the research and the absence 400 of images in all examined articles. With recent technological advancements in models such as 401 Claude 3.7 Sonnet and GPT-4.5, we are currently developing follow-up research specifically 402 focused on analyzing visual aspects in media reports on suicide. This omission highlights a 403 promising avenue for future research. While no prior automated methods have specifically 404 assessed adherence to WHO guidelines, not allowing us to compare AI models with existing 405 content analysis techniques, future research could perform such comparison to further evaluate 406 their strengths and limitations. Additionally, the evaluators in this study came from diverse 407 educational backgrounds; however, all of them received standardized criteria, specialized 408 training on the topic, and guidance from a senior researcher in the field. Another limitation is 409 the lower agreement between AI model predictions and human ratings for English articles 410 compared with French and Hebrew articles. As mentioned before, this discrepancy may be 411 explained by the fact that the individuals who rated the English articles were not native English 412 speakers, whereas native speakers rated the French and Hebrew articles. This finding suggests

413 that future assessments of English-language articles would benefit from the ratings provided by 414 native English speakers to enhance their accuracy. However, it is important to note that the 415 overall reliability of the study remains robust, as the agreement levels across all languages, 416 including English, were sufficient to support the validity of the findings. Furthermore, the 417 results indicate that the AI models can evaluate adherence to WHO guidelines consistently, 418 regardless of minor variations in human rater performance. Despite these limitations, our study 419 demonstrates a significant strength: a high alignment between AI models predictions and 420 human ratings across all comparison methods. We evaluated this agreement using Intraclass 421 Correlation Coefficients (ICC), Spearman correlations, and comparisons of global means. In 422 each case, the AI models displayed strong accuracy relative to the human ratings.

423 While our findings demonstrate that LLMs can replicate human judgment in assessing 424 adherence to WHO suicide reporting guidelines, it is essential to acknowledge the broader 425 limitations of AI in mental health applications. AI models, including LLMs, rely on statistical 426 language processing rather than true comprehension. As highlighted by Tononi & Raison 427 (2024) [31], there is an ongoing debate about whether AI can ever possess human-like 428 understanding or subjective awareness, with theories such as Integrated Information Theory 429 (IIT) arguing that AI lacks the neural structures necessary for genuine consciousness. This 430 distinction is particularly relevant in sensitive areas like suicide prevention, where human 431 expertise remains critical for interpreting nuanced contexts and ethical considerations. Beyond 432 issues of comprehension, generative AI models also raise important challenges related to 433 privacy, reliability, and integration into mental health systems. While AI has the potential to 434 enhance healthcare workflows and support tasks such as screening and risk assessment, 435 concerns remain regarding data security, AI biases, and the risk of over-reliance on models that 436 lack clinical validation [32]. The application of AI in mental health must therefore be 437 accompanied by rigorous oversight, regulatory safeguards, and a complementary role for

438 human professionals. This integration should be approached with caution and supported by 439 empirical evidence to ensure both safety and effectiveness. These considerations are 440 particularly relevant to our study, as AI-driven assessments of traditional media reports should 441 be used to support rather than replace expert human evaluation since nuanced human 442 interpretation remains essential. Additionally, AI misclassification poses a significant risk, as 443 incorrect assessments may lead to harmful media reports being mistakenly deemed compliant 444 or responsible articles being unnecessarily flagged. Such errors could reduce journalists' trust 445 in AI-driven evaluations and, at scale, hinder suicide prevention efforts rather than support 446 them. To mitigate these risks, AI models should always be used as an assistive tool rather than 447 a replacement for expert human review, particularly in cases where guideline adherence is 448 ambiguous or context dependent. Furthermore, as AI continues to be integrated into mental 449 health applications, regulatory frameworks such as the WHO's "Key AI Principles" and the EU 450 Artificial Intelligence Act (2024) [33,34] provide critical guidelines for ensuring transparency, accountability, and ethical AI deployment. These regulations emphasize the need for human 451 452 supervision, fairness, and privacy protection, which are essential when applying AI in sensitive 453 areas such as suicide prevention. Recent discussions, such as those by Elyoseph et al. [20], 454 highlight the risks associated with AI's role in mental health, particularly its impact on human 455 relationships and emotional well-being.

Improving traditional media adherence to WHO guidelines is crucial for preventing suicidal behaviors in the general population. Developing tools to facilitate adherence is a way to enhance compliance. Our results highlight the effectiveness of AI models in replicating human judgment across different languages and contexts. Therefore, the use of AI models can help assess and improve traditional media adherence to WHO guidelines. However, AI still faces limitations, particularly in identifying subtle linguistic nuances and adapting to regional variations in journalistic practices. Overcoming these challenges will require ongoing

- 463 refinement of AI models and sustained human oversight, both of which are essential to ensuring
- 464 the reliability of AI-assisted evaluations. Collaboration between technology and human
- 465 expertise will be key.

466 **COMPETITING INTERESTS**

467 The authors declare no conflicts of interest related to this study.

468 FUNDING

469 This study did not receive any funding from any sources.

470 ACKNOWLEDGEMENTS

- 471 Authors of this manuscript thanks the students that rated the media's papers on suicide: Emma
- 472 Sebti, Manon Malestroit, Tal Szpiler, Eden Ben Siimon, Gal Shemo.

473 AUTHOR CONTRIBUTIONS

474 Pr. Z. Elyoseph designed the prompt used in Claude Opus 3 and GPT-4O, contributed to the 475 design of the study, to the supervision of the students that evaluate the articles and to the writing 476 of the manuscript. Dr. B. Nobile contributed to the design of the study, to the supervision of the 477 students that evaluate the articles and to the writing of the manuscript. Dr. I. Levkovich 478 contributed to the writing of the manuscript. Dr. R. Chancel contributed to the supervision of 479 the students that evaluate the articles. Pr. P. Courtet contributed to the supervision of the study 480 and to the writing of the manuscript. Pr. Y. Levi-Belz contributed to the design of the study, the 481 creation of the prompt used in AIs models, supervision of the study and to the writing of the 482 manuscript. All authors have contributed to the manuscript and have accepted the final version 483 of the paper.

484 Data Availability Statement

- 485 The prompt used for AIs models is available in the supplementary materials file. On demand
- 486 we can send articles used for this study as well as scores to the WHO guidelines found by

487 human raters.

488 **REFERENCES**

- 489
 48. An S, Lim S, Kim HW, Kim HS, Lee D, Son E, et al. Global prevalence of suicide by latitude: A systematic review and meta-analysis. Asian J Psychiatr 2023;81:103454.
- 491 2. Altavini CS, Asciutti APR, Solis ACO, Wang YP. Revisiting evidence of primary
 492 prevention of suicide among adult populations: A systematic overview. Journal of
 493 Affective Disorders 2022;297:641–56.
- 494 3. Mulder R. Suicide prevention: Time to change the paradigm. Aust N Z J Psychiatry
 495 2020;54:559–60.
- 496
 4. Sinyor M, Schaffer A. What would cardiology do? Lessons from other medical specialties
 497
 498
 499
 499
 499
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 491
 491
 491
 492
 492
 493
 493
 494
 494
 495
 495
 496
 496
 497
 497
 497
 498
 498
 498
 498
 498
 498
 499
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 490
 4
- 498 5. Sufrate-Sorzano T, Di Nitto M, Garrote-Cámara ME, Molina-Luque F, Recio-Rodríguez
 499 JI, Asión-Polo P, et al. Media Exposure of Suicidal Behaviour: An Umbrella Review.
 500 Nursing Reports 2023;13:1486–99.
- 501 6. Zalsman G, Hawton K, Wasserman D, van Heeringen K, Arensman E, Sarchiapone M, et
 502 al. Suicide prevention strategies revisited: 10-year systematic review. Lancet Psychiatry
 503 2016;3:646–59.
- Vijayakumar L, Shastri M, Fernandes TN, Bagra Y, Pathare A, Patel A, et al. Application
 of a Scorecard Tool for Assessing and Engaging Media on Responsible Reporting of
 Suicide-Related News in India. IJERPH 2021;18:6206.
- Pirkis J, Rossetto A, Nicholas A, Ftanou M, Robinson J, Reavley N. Suicide Prevention
 Media Campaigns: A Systematic Literature Review. Health Commun 2019;34:402–14.
- 509 9. Asharani P, Koh YS, Tan RHS, Tan YB, Gunasekaran S, Lim B, et al. The impact of
 510 media reporting of suicides on subsequent suicides in Asia: A systematic review. Ann
 511 Acad Med Singap 2024;53:152–69.
- Ishimo MC, Sampasa-Kanyinga H, Olibris B, Chawla M, Berfeld N, Prince SA, et al.
 Universal interventions for suicide prevention in high-income Organisation for Economic
 Co-operation and Development (OECD) member countries: a systematic review. Inj Prev
 2021;27:184–93.
- 516 11. Niederkrotenthaler T, Braun M, Pirkis J, Till B, Stack S, Sinyor M, et al. Association
 517 between suicide reporting in the media and suicide: systematic review and meta-analysis.
 518 BMJ 2020;368:m575.

- 519 12. Niederkrotenthaler T, Voracek M, Herberth A, Till B, Strauss M, Etzersdorfer E, et al.
 520 Role of media reports in completed and prevented suicide: Werther v. Papageno effects.
 521 Br J Psychiatry 2010;197:234–43.
- 522 13. World Health Organization. Preventing suicide: a resource for media professionals, update
 523 2017. Geneva: World Health Organization; [Internet]. 2017; Available from:
 524 https://www.who.int/publications/i/item/9789240076846
- Levi-Belz Y, Starostintzki Malonek R, Hamdan S. Trends in Newspaper Coverage of
 Suicide in Israel: An 8-Year Longitudinal Study. Arch Suicide Res 2023;27:1191–206.
- 527 15. Shinan-Altman S, Elyoseph Z, Levkovich I. Integrating Previous Suicide Attempts,
 528 Gender, and Age Into Suicide Risk Assessment Using Advanced Artificial Intelligence
 529 Models. J. Clin. Psychiatry [Internet] 2024 [cited 2024 Oct 21];85. Available from:
 530 http://www.psychiatrist.com/jcp/Suicide-Risk-Evaluation-Advanced-AI-ChatGPT
- 531 16. Shinan-Altman S, Elyoseph Z, Levkovich I. The impact of history of depression and
 532 access to weapons on suicide risk assessment: a comparison of ChatGPT-3.5 and
 533 ChatGPT-4. PeerJ 2024;12:e17468.
- 534 17. Elyoseph Z, Levkovich I, Shinan-Altman S. Assessing prognosis in depression:
 535 comparing perspectives of AI models, mental health professionals and the general public.
 536 Fam Med Community Health 2024;12:e002583.
- Elyoseph Z, Hadar-Shoval D, Asraf K, Lvovsky M. ChatGPT outperforms humans in
 emotional awareness evaluations. Front Psychol 2023;14:1199058.
- 19. Levkovich I, Elyoseph Z. Suicide Risk Assessments Through the Eyes of ChatGPT-3.5
 Versus ChatGPT-4: Vignette Study. JMIR Ment Health 2023;10:e51232.
- 541 20. Elyoseph Z, Levkovich I. Beyond human expertise: the promise and limitations of
 542 ChatGPT in suicide risk assessment. Front Psychiatry 2023;14:1213141.
- 543 21. Kirtley OJ, Van Mens K, Hoogendoorn M, Kapur N, De Beurs D. Translating promise
 544 into practice: a review of machine learning in suicide research and prevention. The Lancet
 545 Psychiatry 2022;9:243–52.
- 546 22. Holmes G, Tang B, Gupta S, Venkatesh S, Christensen H, Whitton A. Applications of
 547 Large Language Models in the Field of Suicide Prevention: Scoping Review. J Med
 548 Internet Res 2025;27:e63126.
- 549 23. Singhal K, Azizi S, Tu T, Mahdavi SS, Wei J, Chung HW, et al. Large language models
 550 encode clinical knowledge. Nature 2023;620:172–80.
- 551 24. Guo Y, Ovadje A, Al-Garadi MA, Sarker A. Evaluating large language models for health 552 related text classification tasks with public social media data. J Am Med Inform Assoc
 553 2024;31:2181–9.

- 554 25. Huang J, Yang DM, Rong R, Nezafati K, Treager C, Chi Z, et al. A critical assessment of
 555 using ChatGPT for extracting structured data from clinical notes. NPJ Digit Med
 556 2024;7:106.
- 557 26. Elyoseph Z, Levkovich I, Rabin E, Shemo G, Szpiler T, Shoval DH, et al. Applying
 558 Language Models for Suicide Prevention: Evaluating News Article Adherence to WHO
 559 Reporting Guidelines [Internet]. 2024 [cited 2024 Oct 21];Available from:
 560 https://www.researchsquare.com/article/rs-4180591/v1
- 561 27. Bastiampillai T, Allison S, Perry SW, Licinio J. Social network theory and rising suicide
 562 rates in the USA. The Lancet 2019;393:1801.
- 28. Pompili M. The increase of suicide rates: the need for a paradigm shift. The Lancet
 2018;392:474-5.
- 565 29. Kang DH, Marques AH, Yang JH, Park CHK, Kim MJ, Rhee SJ, et al. Suicide prevention
 566 strategies in South Korea: What we have learned and the way forward. Asian J Psychiatr
 567 2025;104:104359.
- Vijayakumar L, Chandra PS, Kumar MS, Pathare S, Banerjee D, Goswami T, et al. The national suicide prevention strategy in India: context and considerations for urgent action.
 Lancet Psychiatry 2022;9:160–8.
- 571 31. Tononi G, Raison C. Artificial intelligence, consciousness and psychiatry. World
 572 Psychiatry 2024;23:309–10.
- Torous J, Blease C. Generative artificial intelligence in mental health care: potential
 benefits and current challenges. World Psychiatry 2024;23:1–2.
- World Health Organization. Guidance on ethics and governance of artificial intelligence
 for health. 2024;
- 577 34. European Union. Regulation (EU) 2024/XXX of the European Parliament and of the
 578 Council on Artificial Intelligence (Artificial Intelligence Act) [Internet]. 2024;Available
 579 from: https://www.artificial-intelligence-act.com/
- 580

582 Table 1. ICC (95%CI) and Spearman correlation between human evaluators and AI

583 models (n=120).

	ICC (95%CI)	Spearman
Claude Opus 3	0.724 (0.605; 0.808)	0.636 p<0.001
GPT-40	0.793 (0.702; 0.855)	0.684 p<0.001
Both	0.812 (0.731; 0.869)	0.703 p<0.001

588 589

590 Table 2: Comparison of human and AI evaluations for a single article

WHO Guideline Criterion	Human Rater 1	Human Rater 2	GPT- 40	Claude 3
(1) Is suicide mentioned in the headline?	0	0	1	1
(3) Is the person who died by suicide described as a celebrity?	0	0	0	0
(4) Does the article report on a single cause for suicide/suicidal behavior?	1	1	1	0
(5) Does the article imply a link between a specific life event and suicide/suicidal behavior?	1	1	1	0
(6) Does the article imply a link between social status and suicide/suicidal behavior?	0	1	1	1
(7) Does the article imply a link between mental state and suicide/suicidal behavior?	1	1	1	1
(9) Does the story present any myths about suicide/suicidal behavior?	0	0	0	0
(10) Does the story include glorifying descriptions of suicide/suicidal behavior?	0	0	0	0
(11) Is the method of suicide/suicidal behavior described in detail?	0	0	0	0
(12) Does the story describe the location of suicide/suicidal behavior?	0	0	0	0
(13) Does the story not inform the reader about warning signs for suicide/risk factors?	0	0	0	0
(14) Does the story not include any information about prevention?	0	1	0	0

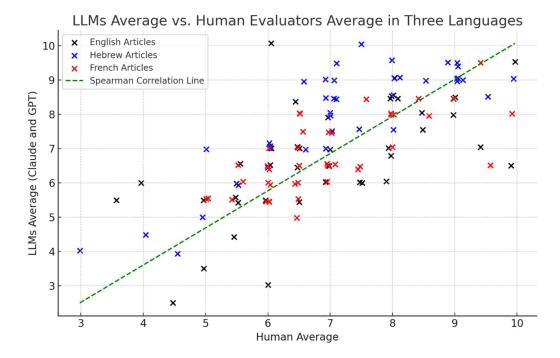
WHO Guideline Criterion	Human Rater 1	Human Rater 2	011	Claude 3
(15) Does the story not include any information about intervention?	0	1	0	0
Total violations	3	6	5	3

591 Note: 1= adhere to the criterion, 0= not adhere to the criterion. Items are numbered according to the

592 original WHO criteria numbering system. Items 2 (front page placement) and 8 (inappropriate images)

593 were excluded from our analysis as explained in the Methods section.

594



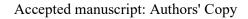
596

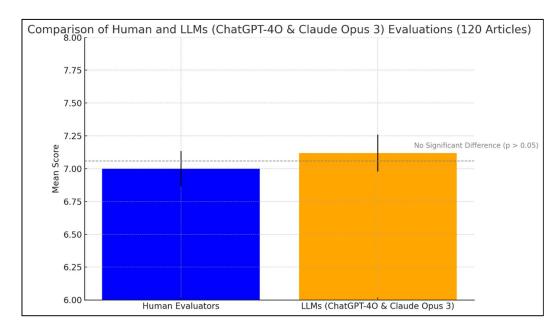
597

Figure 1: Average evaluations of large language models (LLMs) with human evaluators across three languages: English (black × marks), Hebrew (blue × marks), and French (red × marks). Notes: Each point represents an individual article evaluated by both human evaluators and language models (Claude and GPT). The x-axis shows human average ratings (scale 1-10), while the y-axis shows LLMs average ratings (scale 1-10). The green dashed line indicates Spearman's correlation coefficient between these averages, demonstrating the overall alignment between human and AI judgments across all three languages.

605

606





608

- 609 Figure 2: Comparison of mean scores between human evaluators and LLMs (ChatGPT-40
- 610 and Claude Opus 3) across 120 articles.
- 611 Notes: The bar chart illustrates that there was no significant difference in the evaluations
- between the two groups (p > 0.05). Error bars represent standard error of the mean.

613