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Simulating Suicide through Special Effect Makeup: A Visual Elicitation Study on Suicide Perceptions in Ghana

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ABSTRACT: This study employs visual elicitation to highlight the complex social perceptions surrounding suicide in Ghana. Suicide is a pressing public health issue in Ghana, with official data obscured by stigma and underreporting, while media estimates suggest around 1,556 annual deaths. Suicide by jumping stands out for its public, traumatic visibility, especially on campuses. Existing literature maps epidemiology but overlooks raw social and witness perspectives. Grounded in an integrated theoretical framework of Social Constructionism and Symbolic Interactionism, the simulation is conceptualised as a deliberately constructed cultural artefact designed to trigger and externalise communal discussions. Following a structured creative design process, a realistic dummy depicting injuries consistent with a fall from a significant height was created and exhibited at the University of Education, Winneba. Data were collected through semi-structured interviews with participants who witnessed the simulation. Thematic analysis of participant responses identified four key themes: (1) the revelatory nature of special effects makeup as a local artistic and communicative medium; (2) the simulation's achieved verisimilitude, which successfully suspended disbelief and elicited visceral reactions; (3) the clear decoding of the simulation's intent as an awareness-raising and deterrent tool; and (4) the channelling of visceral revulsion into strong personal and social deterrent messages against suicide. The findings demonstrate that the simulated artefact functioned as a potent symbolic stimulus, enabling access to the often-unspoken social scripts and stigmatising attitudes that define the aftermath of suicide in Ghana. The study concludes that special effects makeup, repurposed as a scholarly tool for visual elicitation, provides a valuable ethical means to explore sensitive social perceptions, making internalised stigma externally visible and analysable. This approach offers critical insights for developing culturally sensitive postvention strategies, destigmatisation campaigns, and preventive interventions in Ghana and similar socio-cultural contexts.
Keywords: *Suicide, Visual Elicitation, Special Effects Makeup, Social Constructionism, Symbolic Interactionism.*

I.　INTRODUCTION

Suicide is a significant and growing public health challenge in Ghana. However, official statistics fail to capture its full scope. For instance, the 2010 Population and Housing Census grouped deaths by suicide with those from accidents, violence, and homicide, providing no isolated data (GSS, 2013). This statistical obscurity stands in stark contrast to anecdotal and media reports suggesting a far more prevalent crisis, with estimates of approximately 1,556 suicide deaths annually (Citifmonline, 2012). This discrepancy underscores a critical issue: the powerful social stigma surrounding suicide in Ghana likely leads to significant underreporting, as families may conceal the true cause of death to avoid shame or judgment (Osafo, 2011).

Within this context, suicide by jumping from a height is a particularly potent and problematic phenomenon. Unlike more private methods, jumping is an inherently public act. It leaves a visible, often traumatic scene, forcing the community to confront the reality of the death directly (Wilkonson-Weber, 2015). It is also highly lethal and has been reported with increasing frequency in Ghana, notably within university settings, where such incidents leave a lasting psychological impact on the student body (Adjei, 2016). The public nature of this method makes it a critical focal point for studying the immediate social aftermath and the powerful, judgmental perceptions it triggers.

While existing research in Ghana has begun to address suicide epidemiology and general attitudes, a substantial gap remains. There is limited understanding of the complex social perceptions, including stigma,

blame, sympathy, and communal narratives, that are triggered in the immediate aftermath of a publicly witnessed suicide attempt. To highlight these sensitive perceptions rigorously and ethically, this study proposes an innovative methodological approach. It draws on the domain of special effects makeup.

Originally pioneered in cinema to create believable illusions, special effects makeup is an art form dedicated to simulating reality, spanning ageing and character work to the precise depiction of injuries and wounds (Gillan, 2019). This study harnesses the power of simulated realism not for entertainment, but as a scholarly tool for visual elicitation. By designing and applying special effects makeup to realistically depict the physical aftermath of a suicide attempt by jumping, this research creates controlled visual stimuli. These stimuli will serve as the foundation for in-depth discussions, allowing the exploration of deeply held social attitudes without causing real-world harm or perpetuating stigma. Consequently, this study aims to use this unique methodological bridge to illuminate the fraught social landscape surrounding suicide in contemporary Ghana.

Suicide is a critical global public health issue, particularly among adolescents. The World Health Organisation estimates that approximately 71,000 adolescents die by suicide each year, and attempts are up to forty times more frequent, making it a leading cause of death in this age group (WHO, 2014). This trend is reflected in Ghana, where suicide is an emerging public health concern (Adinkrah, 2012). Despite its prevalence, official statistics on suicide in Ghana remain scarce (Eshun, 2003), underscoring a significant gap in systematic data and understanding.

Research in Ghana has begun to address suicidal behaviour, primarily focusing on epidemiological patterns and societal attitudes. However, a critical gap persists: there is limited understanding of the perceived immediate social aftermath, stigmatisation, and communal judgements that follow a suicide attempt, especially from the dual perspectives of the individual and the witnessing community. This gap is particularly salient within Ghana's proscriptive moral and cultural framework, which often condemns both the act and the individual (Hjelmeland et al., 2008). Understanding these social and perceptual dynamics is essential for developing effective, culturally sensitive postvention and support strategies.

To address this sensitive topic without causing real harm, this study proposes an innovative approach. It will utilise specially designed special-effect makeup to create realistic visual stimuli depicting injuries consistent with a suicide attempt by jumping. These stimuli will serve as the foundation for eliciting in-depth discussions on stigma, social reactions, and perceived consequences.

To achieve this, the study has the following specific objectives: to design and utilise special-effect makeup to create controlled visual stimuli that realistically depict the physical aftermath of a suicide. To examine, through interviews with role-playing participants, the experience of embodying a suicide survivor and the anticipated personal and social consequences. To highlight, through focus group discussions using the visual stimuli, the immediate perceptions, emotional responses, and social judgements of a witnessing audience regarding the causes, effects, and appropriate societal response to a suicide attempt.

II.   LITERATURE REVIEW

This review establishes the dual foundation on which this study is built. First, it examines the artistic discipline of special effects makeup, detailing its evolution from a tool of cinematic illusion into a sophisticated medium capable of depicting realistic bodily trauma. This review establishes its core competency: the controlled simulation of reality to manipulate perception and elicit visceral audience responses. Second, it synthesises the sociological and public health literature on suicide in Ghana, highlighting a critical research gap concerning the immediate social aftermath and stigmatisation of suicide. It frames special effects makeup as a tool for visual elicitation; this review argues for its unique capacity to bridge the identified gap, providing a concrete, ethical stimulus to access and analyse the complex, often unspoken communal judgements that define suicide's social impact in the Ghanaian context.

Theoretical framework

To effectively analyse the process of simulating suicide and the social perceptions it elicits, this study is guided by an integrated theoretical framework that bridges the sociology of knowledge and the psychology of social interaction. This framework combines Social Constructionism and Symbolic Interactionism, providing a robust lens for understanding both the creation of simulated trauma and its interpretation by an audience.

Social Constructionism, pioneered by Berger and Luckmann (1966), holds that reality is not an objective truth waiting to be discovered but is actively built, maintained, and transformed through human social processes. What a society defines as "real," including concepts such as deviance, mental illness, and appropriate ways to die, is a product of shared agreements, language, and cultural narratives. In Ghana, the powerful stigma surrounding suicide is not a natural law but a socially constructed reality, reinforced by religious doctrine, familial honour codes, and communal discourse. This study engages directly in this process of construction: by using special effects makeup to create a realistic artefact (the simulated victim), we are actively participating in the social construction of a "suicide scene." The framework thus positions the simulation not as a fake but as a deliberate cultural text whose meaning is up for negotiation.

Symbolic Interactionism, as developed by Blumer (1969), provides the framework for analysing this negotiation of meaning. It holds that people act towards things based on the meanings those things have for them, and that these meanings are derived from social interaction and modified through interpretation. The core of this study is an interaction with a powerful symbol: the bodily trauma of a suicide attempter. This symbol is not inert; it is laden with potential meanings—a "sinner" receiving due punishment, a "tragic victim" of unseen pain, a "public nuisance," or a "warning sign" for others. Symbolic Interactionism directs the analysis towards several key questions: How do participants define the situation upon encountering the simulation? What symbols (religious, moral, medical) do they use to interpret the "victim's" body and story? How do they imagine others in their community would react, indicating their understanding of shared social scripts?

The fusion of these theories creates a powerful analytical tool for this project. Social Constructionism explains why we can study stigma by building a simulation, because stigma itself is a constructed phenomenon that can be made visible through a constructed artefact. Symbolic Interactionism explains how we can study it by observing the interpretive process as individuals interact with the symbol we have created. Together, they frame the study as a dynamic, three-part process: First, the Construction of a Symbolic Artefact, using special-effect makeup techniques (grounded in the literature on verisimilitude and visual communication) to materialise a culturally loaded symbol of trauma. Secondly, the Elicitation of Interpretive Interaction, using this artefact in focus groups and interviews to trigger the very social interactions where meanings are formed, revealed, and contested. Thirdly, the Analysis of Constructed Meanings, interpreting the elicited data to map the landscape of shared and conflicting understandings about suicide in Ghana, reveals the underlying cultural "rules" and narratives that constitute the social reality of the aftermath of suicide.

This framework elevates the study beyond a technical demonstration or a simple survey of opinions. It positions the work as an investigation into the intersubjective construction of social reality around a deeply taboo subject. The visceral reactions of the audience, such as shock, pity, condemnation, or curiosity, are not merely data points but the raw material of meaning-making, offering direct insight into how the spectacle of suicide is processed, judged, and integrated into Ghanaian social life. Consequently, the findings will not merely describe attitudes but will illuminate the interpretive processes that sustain stigma or could foster empathy, providing a nuanced foundation for culturally informed postvention strategies.
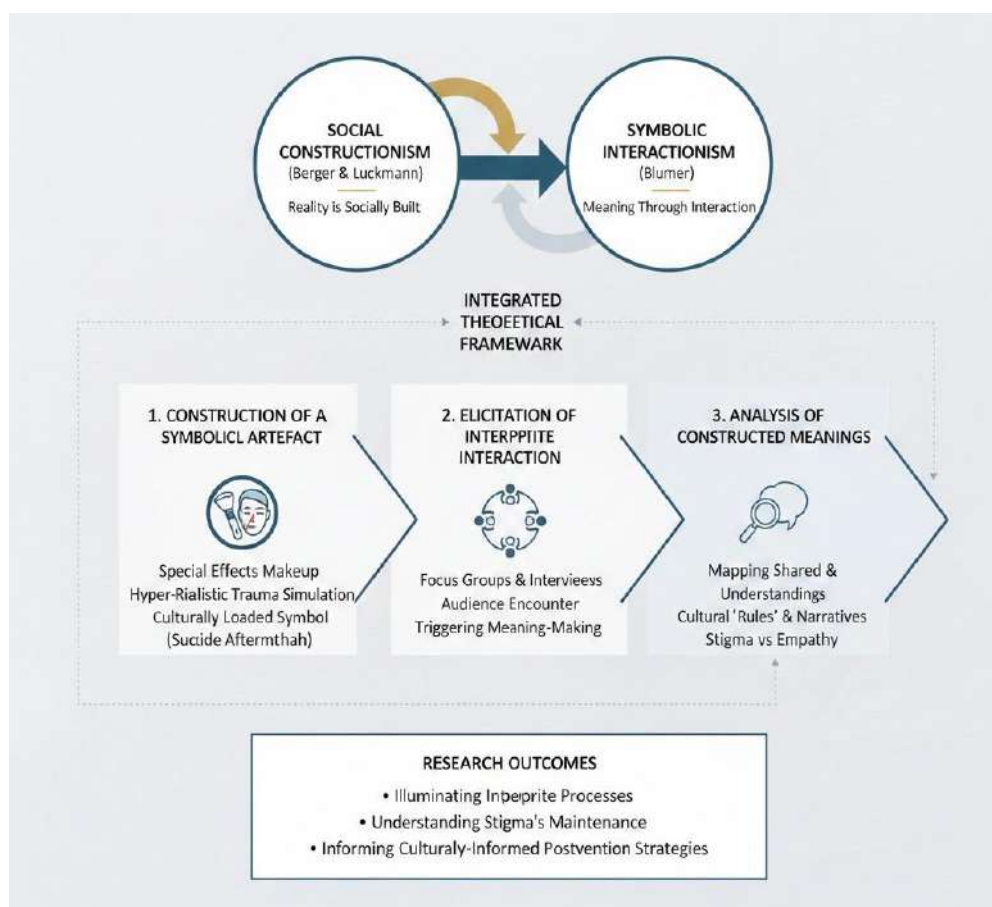

Figure 1: *Theoretical Framework*
Source: *Researchers' construct using Google Gemini*

Special Effect Makeup

Special effects makeup is a sophisticated artistic discipline dedicated to simulating reality through the application of specialised materials, techniques, and three-dimensional prosthetics. Its primary function is to create vivid, believable alterations to the human form, ranging from subtle ageing and character traits to extreme injuries, fantastical creatures, and monstrous transformations that are unattainable through conventional cosmetics (Lee, 2012; Debreceni, 2013). Historically rooted in theatrical traditions, the craft has evolved most prominently within the film industry, where it is now an indispensable component of visual storytelling. As Kim (2006) notes, the relentless pursuit of heightened realism and viewer immersion has driven the rapid technical advancement of special effects makeup, particularly in global cinema hubs.

The scholarly consensus regards special effect makeup as far more than a technical afterthought; it is a critical narrative and psychological device. It functions as a primary visual language, communicating core aspects of character, such as personality, history, health, and social status, directly and instantaneously to the audience (Kang, 1999; Bott, 2018). This communicative power is essential for achieving theatrical and cinematic verisimilitude. As Brooke (2015) asserts, makeup is vital for creating illusion, showing emotion, and ultimately, "bringing a character to life." Whether realising the tragic visage of a historical figure, the weathered face of a survivor, or the grotesque wound of a victim, special effect makeup's ultimate goal is to foster believable empathy or authentic revulsion, thereby bridging the gap between the audience's perception and the narrative's intended emotional truth (Beatrice, 2019; Tüzün, 2020).

The discipline's significance is matched by its demands. It is often characterised as meticulous, time-intensive, and resource-intensive. The creativity required of the artist must be grounded in a rigorous understanding of anatomy, colour theory, and material science. Furthermore, specialised materials such as silicone, gelatine, and foam latex are often scarce and costly, particularly in regions without a developed film infrastructure (Kehoe, 2017). Despite these challenges, the makeup artist's role is transformative, often determining the success of a character's physical realisation and, by extension, the production's overall persuasive power.

This established capacity of special effect makeup to construct, control, and communicate a simulated reality provides a compelling methodological bridge to social science research. If it can make an actor's fictional wound palpably real for a cinema audience, its techniques can be ethically repurposed to create controlled, realistic visual stimuli for academic inquiry. This potential shift in special effect makeup from a solely artistic tool to a potent instrument for visual elicitation, a research method where constructed images are used to trigger deep, discursive exploration of attitudes, biases, and social narratives (Harper, 2002; Banks, 2018). It is precisely this applied potential that this study seeks to harness.

The power of special effects makeup to materialise trauma and physical catastrophe on the body presents a unique, if unexplored, opportunity to engage with one of society's most stigmatised and challenging subjects: suicide. Just as a prosthetic wound can make the aftermath of a fictional conflict feel immediate, a carefully designed simulation of self-inflicted injury can serve as a catalyst for accessing and analysing the complex, often unspoken social perceptions of blame, tragedy, morality, and consequence that surround actual suicidal acts. Therefore, the subsequent review will examine the sociological and psychological literature on suicide, particularly focusing on stigma and public perception, to establish the substantive problem for which special effects makeup will be employed as a novel investigative lens.

Suicide and Its Prevalence in Ghana

Suicide, defined as the deliberate act of ending one's own life, is a complex phenomenon resulting from the convergence of psychological, social, and biological factors (Apter, 2012; O'Connor & Kirtley, 2018). It is a critical global public health crisis, with the World Health Organisation (WHO, 2021) estimating over 700,000 deaths annually, a figure acknowledged as a significant undercount due to pervasive stigma, religious sanctions, and inconsistent reporting protocols across nations.

In Ghana, this global challenge is acutely felt within a distinct socio-cultural context. The country faces a severe shortage of mental health professionals, compounded by widespread stigma that frames suicide as a moral transgression, a familial disgrace, or a spiritual failing rather than a health issue (Fournier, 2011; Osafo et al., 2015). This confluence of scarce resources and potent stigma creates an environment in which the aftermath of a suicide attempt is often more traumatising and isolating than reparative for survivors. They may encounter social ostracism, blame, and hostility rather than empathy and professional support (Hjelmeland et al., 2013; Quarshie et al., 2020). Crucially, while Ghanaian research has productively mapped epidemiological patterns and general societal attitudes towards suicide (Adinkrah, 2012, 2015), a pronounced gap remains: a deep understanding of the lived, immediate social aftermath from the dual perspectives of the attempter and the witnessing community.

This gap is particularly salient in relation to suicide by jumping from a height, a method increasingly documented in Ghanaian media and academic reports. Jumping is distinguished by its inherently public and violent nature. Unlike private methods, it transforms personal despair into a visible communal spectacle, forcing

an involuntary audience to witness its graphic consequences (Pirkis et al., 2015). Media reports from 2017 to 2021, as cited, consistently highlight incidents involving university students and community members, underscoring its presence as a recurring public health emergency in institutional and community settings (GhanaWeb, 2019; Atinka TV, 2021). This method's lethality and public visibility create a double trauma: the loss of life and the collective psychological injury inflicted on witnesses and the broader community, which risks normalising or sensationalising the act.

The socio-cultural backdrop intensifies this crisis. Ghanaian socialisation emphasises respect for authority and familial obedience (Gyekye, 2003), which can sometimes suppress open dialogue about emotional distress, particularly among young people. As Hjelmeland et al. (2013) found, suicidal behaviour can, for some Ghanaian women, constitute an act of defiance against oppressive social expectations. Furthermore, harsh social reactions, ranging from condemnation to abuse, towards a suicide survivor are not merely unjust; they are potent risk factors for re-attempt, creating a dangerous cycle of distress and rejection (McKeon, 2009). The 2012 Mental Health Act of Ghana represents a progressive legal shift towards protection rather than criminalisation, yet its principles have not fully permeated public consciousness or community-level responses.

The identified research void demands an innovative methodological approach. Traditional surveys struggle to capture the depth of stigmatising attitudes, while interviews with survivors, though invaluable, access memories filtered through time and trauma. There is a need for a method that can provoke and capture the raw, communal perceptions that erupt in the moments following such a public act. This is where the established craft of special effects makeup converges with sociological inquiry. If, as established, special effects makeup is a premier tool for constructing believable, visceral realism and manipulating audience perception in film, its core competency can be ethically redirected. It can be used not for storytelling but for controlled social science elicitation.

Therefore, this study posits that the application of special-effect makeup to simulate injuries from a suicide attempt by jumping creates a powerful, non-harmful visual stimulus. This stimulus serves as a catalyst for focus group discussions and in-depth interviews, allowing researchers to bypass abstract questions and directly interrogate instinctive judgements, emotional responses, and narratives of blame or sympathy that a real-life scene would trigger. The simulation does not seek to replicate trauma but to safely externalise and make discussable the internalised stigma and social scripts surrounding suicide in Ghana.

In this way, the artistry of illusion becomes a rigorous research tool. The "gory nature of the scene," crafted through makeup, is not for shock value but for analytical access. It provides a concrete, shared reference point for exploring how Ghanaians perceive, judge, and would respond to a suicide attempter, thereby generating crucial insights to inform culturally sensitive postvention strategies and destigmatization campaigns, and ultimately to support the preventive frameworks advocated by scholars like Zalsman (2017).

III.   METHODOLOGY

In creative practice, a structured design process is fundamental to translating abstract concepts into tangible realities. This process is not merely procedural but represents a deliberate cognitive and artistic journey from ideation to realisation. As Gillette (2000) conceptualises it, the design process is a sequence of steps pursued with the intent of creating a coherent work of art. This framework ensures methodological rigour, guiding the artist through the complexities of creation while allowing for iterative refinement. For this project, J. Michael Gillette's structured design process, comprising Commitment, Analysis, Research, Incubation, Selection, Implementation, and Evaluation, served as the principal methodological framework for developing, executing, and assessing the project.

Commitment

The commitment phase marks the definitive initiation of the project, during which the artist dedicates themselves to addressing a specific creative or social problem (Gillette, 2000). For this project, the directive was to identify a potent social issue that could be communicated viscerally through special effects makeup. After extensive deliberation with my supervisor, the project crystallised around simulating the physical aftermath of suicide by jumping from a significant height. This choice was predicated on the method's increasing prevalence in Ghana, its graphic public nature, and the critical need to interrogate societal perceptions surrounding it. Committing to this sensitive topic required significant emotional and intellectual preparation, as it involved pioneering a new form of project within the department, thereby setting a precedent and managing heightened expectations from faculty and peers.

Engaging in smaller-scale practical applications, such as face-painting for departmental events, served as crucial technical and psychological preparation. This phase was characterised by navigating external pressures and internal doubts, ultimately strengthening resolve to apply the acquired technical skills to meet the project's ambitious goal. The commitment, therefore, was not merely to execute a makeup effect but to undertake a form of social inquiry through artistic realism.

Analysis

The analysis stage involved a systematic deconstruction of the core concept to determine its essential components and feasibility. This required brainstorming potential design solutions and critically evaluating their pros and cons. Central questions were posed: What specific injuries would result from a fall from approximately 60 feet? How can these injuries be rendered with maximum believability using available materials? What is the intended emotional and cognitive impact on the audience?

Three primary concepts were analysed: a vehicular accident scene, a supporting role in a directed stage production, and the suicide simulation. The suicide concept was selected for its direct social relevance, logistical feasibility in a university setting, and potent visual narrative. A key analytical task was translating medical and traumatic reality into a visual plan. Following Effah's (2017) principle that a makeup artist must pre-visualise the effect, detailed sketches were produced. These sketches mapped the victim's posture, the spatial relationship to a simulated building, and the specific injuries (cranial fracture, compound fractures, visceral protrusion), establishing a crucial blueprint for the subsequent research and implementation phases.

Figure 2*: Preliminary sketch mapping the victim's posture and key injury sites.*
Source: Fieldwork, 2022

Research

This phase transitioned from internal ideation to external investigation, gathering practical knowledge to inform the design. Research was conducted across multiple fronts: Technical Research: Extensive use of online platforms (YouTube, specialised forums) to study techniques for simulating trauma, compound fractures, lacerations, and blood effects. Contextual Research: Analysis of photographic and forensic references of high-impact injuries to understand pathology, colour palettes (bruising, pallor), and texture. Conceptual Validation: Scrutiny of alternative concepts (accident scene, full production) revealed prohibitive logistical demands (e.g., procuring vehicles, managing a full cast). By contrast, the suicide simulation was a self-contained, powerful visual statement achievable within the project's constraints. Resource and Self-Assessment: A candid evaluation of personal capacity, available budget, material accessibility, and timeframe was conducted. This critical self-research affirmed readiness and helped preempt potential obstacles.

Figures 3 & 4: Collage of reference images for accident trauma (left) and fall-impact injuries (right) gathered during the research phase. (Source: Fieldwork, 2022)

Incubation

Recognising the cognitive load of intensive analysis and research, the incubation stage provided a necessary period of intellectual disengagement. As emphasised in creative theory, stepping away from active problem-solving allows the subconscious to process information and forge novel connections (Gyakye, 2003). This period was spent on unrelated social and leisure activities. This deliberate pause proved invaluable, enabling a return to the project with renewed perspective, reduced fatigue, and enhanced creative clarity, which directly benefited the subsequent selection and implementation stages.

Selection

The selection phase brought together analysis, research, and incubated reflection to finalise the design approach. The suicide simulation was chosen. A detailed plan was then formulated, including: the final injury list (head trauma, limb fractures, ribcage damage); a material list, prioritising affordable and available substitutes for professional materials (e.g., using foam and latex to simulate bone and tissue); a publicity strategy using flyers and banners to frame the event as an awareness campaign; and a logistical plan for the on-site installation and performance day. This stage moved the project from concept to an actionable, scheduled production plan.

Implementation

Implementation marked the transition from theory to physical execution. The process was methodical: Prototyping: Initial trials were conducted on a mannequin (see Figures 5-8). This allowed for technique refinement, material testing, and colour matching for bruises and blood without time pressure. Site Preparation: The setting (a fenced area suggesting a building's base) was constructed a day before establishing the scene's context.

CAUTION: Readers may find some of the images distressing. Viewer discretion is advised

Figure 5: Synthesised stage blood sample (flowing and clotted) for the project
Source: Fieldwork

Figure 6: A dummy head used for the project being prepared
Source: Fieldwork

Figure 7: Prepping the dummy head.
Source: Fieldwork

Figure 8: The dummy head after the first trial was subjected to several analyses
Source: Fieldwork

Final Application: On the project day, the finalised techniques were applied to the performer. The process was documented step by step, showing the construction of a cracked skull using layered latex and foam, the creation of broken limbs using strategic padding and contouring, and the application of blood and tissue effects (see Figures 9-13). The live application involved constant self-evaluation and minor on-site adjustments to heighten realism.
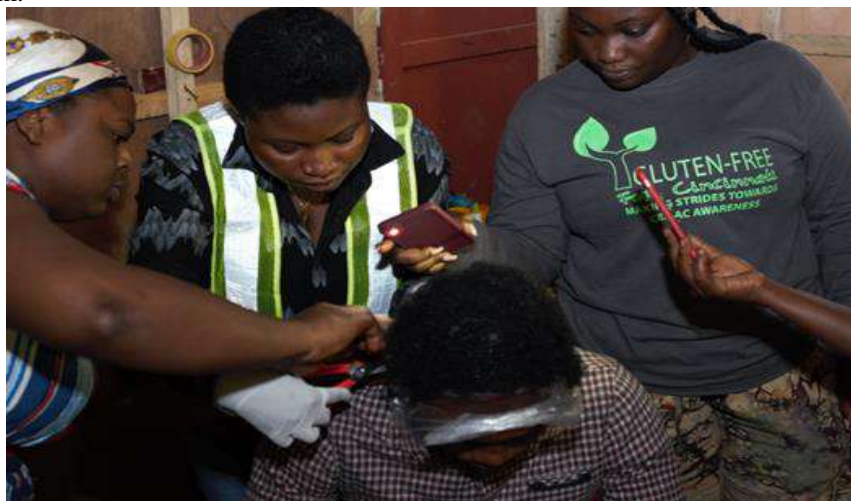

Figure 9: Members of the project team prepping the actor's head to achieve a cracked head
Source: Fieldwork

Figure 10*: A picture of the actor in the flow with the process of creating a cracked head*
Source: *Fieldwork*

Figure 11: A picture of how the broken limbs of the dummy were achieved
Source: Fieldwork

Figure 12: *A member of the project team working on the dummy*
Source: *Fieldwork*

Figure 13: A complete image of the human dummy after going through special effect makeup
Source: Fieldwork

Evaluation

Consistent with Gillette's model, the final stage focused on evaluation, operating on two levels. The outcome was measured against the initial sketches, research references, and project objectives. While key goals of believability and impact were met, a critical self-assessment noted that the blood volume could have been more extensive to match the trauma's severity. The work was subjected to audience and supervisor critique. Visceral reactions, audible gasps, questions about the "victim's" vitality, and expressions of shock (see Figures 25, 28, 29) served as primary data, confirming the simulation's success in achieving perceptual realism. Formal and informal interviews with viewers provided direct evidence of the work's powerful deterrent and awareness-

raising impact. Supervisor feedback affirmed the project's technical success and conceptual strength. This commitment to evaluation ensured the project was not merely an artistic display but a rigorously conceived and executed piece of applied art, effectively bridging special effects craftsmanship with critical social commentary.

Materials and Tools

The creation of the simulated suicide aftermath required the strategic selection of both conventional and improvised materials, alongside specialised tools. This assemblage was guided by the dual principles of artistic verisimilitude and logistical pragmatism, aiming to achieve maximum perceptual realism within the constraints of a university-based project. The materials were chosen for their textural, colour, and structural properties, enabling the construction of a composite bodily illusion.

Materials

Foam was carved to simulate subcutaneous tissue and the fractured cranial cavity. Cow bones and intestines, ethically sourced, provided authentic organic textures for protruding skeletal fragments and visceral matter. Plaster and bandages were used to create casts for broken limbs and secure prosthetics. White glue and 99 glue were essential for layering and securing materials like cotton and tissue to the dummy's surface, building up wounds and creating skin-like textures. Acrylic paints formed the base palette for bruising (deep purples, yellows, greens), pallor, and dirt. Food colouring, mixed with adhesives, created the varied viscosities and hues of fresh and clotted blood. Foundation and powder were used to blend the prosthetic edges into the dummy's "skin" and set the makeup. Cotton and tissues were layered to mimic torn flesh, absorbency, and the soft tissue around wounds. Afro hair was applied to the dummy head for realism. Artificial nails and nail polish were used to detail the victim's hands, a small but critical detail for overall believability. A worn shirt and pair of trousers were distressed and stained to complete the victim's appearance, grounding the simulation in a relatable social context.

Tools

A hammer, chisel, and handsaw were used to meticulously fracture and shape the cow bones. The binding wire and cutter served to armature the broken limbs, providing internal structural support. A full set of makeup brushes (from fine liners to stippling sponges) and paint brushes of various sizes allowed precise application of colour, texture, and blood effects. Pencils, rulers, and scissors were used during the analytical and prototyping phases for sketching injury maps, measuring proportions, and cutting materials. Gloves were worn throughout for hygiene and safety when handling adhesives, paints, and organic materials. A construction table provided a stable, dedicated workspace for the assembly and detailing of the dummy.

Material Sourcing and Safety

The cow bones and intestines were sourced ethically from a licensed abattoir. All organic materials were thoroughly cleaned, sanitised, and sealed with appropriate media (e.g., liquid latex) prior to use to eliminate biohazards and odour. Their use was disclosed in the ethics application as necessary for achieving critical textural realism.

Ethical Considerations

To address ethical and safety concerns, this process was governed by a comprehensive risk mitigation and trauma-informed protocol. Before commencement, the research proposal underwent a full ethics review. The project sought and received formal ethical approval from the Departmental and Faculty Research Ethics Committees. A detailed risk assessment was conducted, identifying potential challenges such as psychological distress to participants or unintended bystanders, risk of imitation (contagion), confusion leading to unnecessary emergency service calls, and biohazard concerns from organic materials. Mitigation strategies for each risk were implemented. Specifically, the simulation was not staged in an open, public space. It was exhibited in a designated project area within the Department of Theatre Arts, clearly marked as an artistic installation and research project. Multiple, highly visible signs were placed at all approaches to the installation, stating: "CAUTION: ARTISTIC SIMULATION IN PROGRESS. This is a special effects makeup display for a research study on social perceptions. No real injury or emergency has occurred."

The project team members were briefed on trauma-informed approaches and stationed nearby to immediately clarify the nature of the simulation to any concerned individuals. Participants were fully informed and provided written consent. Unplanned bystanders were not included as research participants. Participants also took part in a mandatory, structured debriefing session immediately following their interview. This session included re-stating the simulated nature of the exhibit. Participants whose images or insights appear in this paper have explicitly given written consent for publication. Anonymity was offered and respected where requested. A caution statement was given to participants who may find the scenes disturbing.

Demographics of Participants, Data Collection and Analysis

A purposive sample of 25 students and staff from the University of Education, Winneba, was recruited. Recruitment criteria required participants to be aged 18+ and to have no self-reported history of severe psychological trauma or recent bereavement by suicide (screened via a brief, confidential pre-participation questionnaire). Participants were recruited via departmental notice boards and word-of-mouth, with the study described as exploring "social reactions to health-related visual media." They were fully informed that they would view a potentially distressing, realistic simulation.

Participants provided informed consent in a private setting before exposure, which outlined the study's aims, the nature of the simulation, potential risks, their right to withdraw, and support services. Participants were escorted to the installation in small groups, and the simulated nature of the scene was reiterated immediately before viewing. Immediately after viewing, each participant took part in a private, audio-recorded semi-structured interview (duration: 20-35 minutes). The interview guide was designed to elicit perceptions without leading questions, covering: immediate reactions, interpretations of the scene, perceptions of cause and consequence, and imagined community responses.

Data Analysis

Interview transcripts were analysed using reflexive thematic analysis (Braun & Clarke, 2006, 2019), chosen for its theoretical flexibility and suitability for exploring latent meanings. The first author conducted initial line-by-line coding, generating descriptive codes. A second researcher independently coded a 20% subset of transcripts. The research team then discussed the initial codes, considering the researchers' positionality (e.g., as artists and scholars within the Ghanaian context). Through an iterative process of sorting, comparing, and collapsing codes, candidate themes were developed. Themes were reviewed against the entire dataset to ensure they accurately represented the data. Discrepancies were resolved through consensus discussion. Final themes were defined and named to capture the core narrative of each cluster. The analysis sought to identify both semantic and latent themes, going beyond descriptive reactions to interpret underlying social scripts. Credibility was sought through researcher triangulation during analysis. Thick descriptions of participant quotes are provided in the findings to support interpretive claims. The study acknowledges its limitation in generalizability due to its qualitative, context-specific design.

Methodological Limitations and Delimitations

The study acknowledges several limitations. The findings reflect immediate perceptions; no longitudinal follow-up or validated psychological scales were used to assess lasting deterrent effects or attitude change. The sample, while adequate for in-depth qualitative inquiry, is not representative of the broader Ghanaian population. The study did not employ a control group (e.g., a non-graphic description of suicide) to isolate the specific impact of the visual simulation. These limitations define the scope of the claims, which focus on elucidating the process of meaning-making and the nature of elicited perceptions, rather than measuring the simulation's quantitative efficacy as an intervention. Future study is needed to address these experimental gaps.

Discussions

This section addresses the core research question by examining how the audience perceived, interpreted, and derived meaning from the realistic simulation. In artistic and theatrical design, the ultimate validation of a work often lies in its reception and the critical analysis it provokes from its audience (Lee, 2012). The simulation was therefore subjected to this evaluative process. The data reveal that participant perceptions coalesced around four interconnected themes: the novelty and educational value of the medium, its achieved verisimilitude, the successful communication of its conceptual message, and its visceral emotional impact as a deterrent. These themes collectively demonstrate how the constructed symbol (the simulated victim) functioned within a social interaction to generate specific, powerful meanings about suicide.

A key theme in the data was participants' ignorance or lack of prior exposure to the practical art of special effects makeup outside of cinematic media. This theme is crucial, as it establishes the simulation not just as a message but as a revelatory medium itself, challenging preconceived notions about local creative capacity.

The findings indicate that, for most participants, special-effect makeup existed solely as a distant, foreign cinematic technique. As Participant 1 stated, "I have never seen anything like this in person; I just see this in foreign movies." This perception aligns with scholarly observations that special-effect makeup is often viewed as a resource-intensive and technically elusive discipline, less common in certain regional artistic practices (Kim, 2006). The simulation disrupted this assumption, serving as a tangible demonstration of local expertise. The participants' shock, such as Participant 7's reflection that it was "the first ever special effect makeup I have ever seen in my life", transcended surprise; it represented a cognitive shift. They were not merely observing a scene but were actively learning about the potential of the medium as a tool for visceral storytelling and social commentary within their own cultural context. This novelty amplified the impact of the simulation, as the audience engaged with both a provocative subject and a newly discovered form of artistic expression.

The most frequently and emphatically discussed theme was the simulation's overpowering realism. Participant responses consistently described a momentary suspension of disbelief, in which the constructed symbol was interpreted as a real traumatic event. This speaks directly to the core goal of special effects makeup: to construct a believable reality that fosters authentic audience engagement (Brooke, 2015; Debreceni, 2013).

The data is rich with descriptions of this achieved verisimilitude. Participant 1 reported, *"I just thought the person was dead... I would have started calling the police."* Participant 5 wrestled with the contradiction: *"I don't know whether to say it's real or it's not... if we hadn't been told... You would have said it is true."* These reactions confirm that the artefact successfully functioned as a convincing cultural text. Participants meticulously catalogued the realistic details, the cracked cranium, protruding rib cage, broken femur, and pooled blood, as evidence validating the scene's authenticity. As Participant 3 noted, the physical presence surpassed mediated representations: *"what we see in those movies is not even as realistic as what I just saw."* This theme is pivotal. From a Symbolic Interactionist perspective, the simulation's realism is what granted the "victim" symbol its potent social weight. Because it was perceived as real, it triggered genuine emotional and moral calculations, moving the interaction from one of artistic appraisal to one of social and ethical engagement with the *idea* of suicide.

Beyond its realism, the simulation was critically assessed for its communicative success. A key finding was that the audience accurately decoded the artist's primary conceptual intent: to raise awareness and act as a deterrent. This indicates that the constructed symbol effectively conveyed its intended social message.

Participants explicitly linked the visceral imagery to a preventive purpose. Participant 1 deduced, "I think the artist is trying to achieve awareness for suicide... it is something that we should all be aware of and speak more of." This alignment between artistic intent and audience interpretation signifies a successful translation of concept into communicated meaning. Participants validated this success, with Participant 1 adding that the goal was "absolutely... achieved and exceeded," while Participant 2 concluded, "looking at what I saw... I think the artist has achieved whatever it is that he or she wants to achieve." This theme shifts the discussion from how the artefact was perceived to what it was perceived to be for. The simulation was not seen as a mere spectacle but as a rhetorical act—a deliberate use of graphic realism to provoke public discourse and personal reflection on suicide as a social issue. The data suggests the artefact operated as an effective catalyst for this intended reflection.

The most potent theme in the simulation's intended social impact was the near-universal characterisation of the scene as an "awful and disgusting sight." This visceral revulsion was consistently channelled into statements of deterrence, fulfilling a key objective of the project.

Participants articulated a clear causal chain linking witnessing the graphic aftermath to rejecting suicide as a personal option. Participant 3 stated, "I don't think anyone would want to be in a situation like this... this is a good initiative... to create awareness about the aftermath." Participant 5 personalised the horror: "I wouldn't want to die in this disgusting manner... I was just imagining if I was the one." This personal projection is crucial; the symbol ceased to be an abstract "victim" and became a potential future self. Participant 7 distilled the deterrent message plainly: "Upon seeing this, I don't think anyone should think of committing suicide." These findings demonstrate that the simulation's power lies in making the consequences of suicide physically and emotionally immediate. By bypassing abstract warnings and embodying the "gory nature" of the act, it leveraged shock and disgust, emotions tied to deep-seated aversions to bodily harm and decay, to reinforce a social and personal taboo.

The emergent themes can be powerfully synthesised through the lens of Social Constructionism and Symbolic Interactionism. The simulation was a deliberately constructed social artefact (a "suicide victim"). The audience's interaction with this artefact became a site of meaning-making, where culturally embedded understandings of death, morality, and the body were activated and negotiated. The special-effect makeup process (Commitment through Implementation) was an act of social construction, building a symbol designed to be read as "real." Its success (Theme 2) meant it was accepted into the interaction as a legitimate object of social and emotional scrutiny. Participants did not interact with foam and paint; they interacted with the meaning of the symbol. Their shock (Theme 1) stemmed from the dissonance between the symbol's assigned meaning ("real death") and its new context ("student project"). Their decoding of awareness and deterrence (Theme 3) was an interpretation of the artist's motive for deploying this symbol. The visceral deterrent response (Theme 4) illustrates the culmination of this symbolic interaction. The "awful and disgusting" judgment is a socially informed feeling rule. By internalising this revulsion and vocalising a commitment to avoid suicide, participants were rehearsing and reinforcing a social script that condemns the act. The simulation, therefore, did not merely elicit opinions; it provided a stage for the performance and reinforcement of a stigmatising narrative, albeit one channelled towards prevention.

Essentially, audience responses indicate that the special-effects makeup simulation functioned with remarkable efficacy across multiple levels: as a demonstration of artistic craft, a catalyst for emotional shock, a clear communicator of a preventive message, and a potent trigger for deterrent reasoning. More than a technical

achievement, it served as a provocative social experiment. It demonstrated that an artistic simulation can access and activate the complex layers of perception, meaning, and social judgement surrounding the taboo subject of suicide in the Ghanaian university context. The findings confirm that such a method can bridge the research gap in understanding immediate social perceptions, making internalised stigma externally visible and discussable.

IV. CONCLUSION

This study has successfully demonstrated the efficacy of special effects makeup as a tool for exploring complex social perceptions of suicide in Ghana. By designing and exhibiting a simulation of suicide, the study created a controlled yet potent visual stimulus that elicited visceral, reflective, and socially embedded responses from a university audience. The findings reveal that the simulation functioned as both an artistic display and a deliberately constructed cultural artefact, capable of accessing and externalising often-unspoken communal attitudes.

In practical terms, this study offers a replicable model for engaging communities in difficult conversations about suicide. It provides critical insights for developing culturally sensitive postvention strategies, destigmatisation campaigns, and educational interventions in Ghana and similar socio-cultural contexts where suicide remains shrouded in silence and shame. The study affirms that creative methodologies can play a vital role in advancing public health discourse, fostering empathy, and ultimately contributing to suicide prevention efforts.

Future studies may extend this approach by testing similar simulations in diverse settings, incorporating longitudinal measures of attitude change, or combining visual elicitation with participatory community dialogues. As Ghana continues to grapple with the silent crisis of suicide, interdisciplinary and ethically grounded methods such as this will be essential to illuminate the social dimensions of suffering and to forge pathways towards healing and understanding.

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