

A guide for speaking publicly about suicide

Public figures such as politicians sometimes have to talk about suicide, whether in the media, when speaking in Parliament or in the community.

This guide aims to provide some practical tips on safe ways to discuss this challenging area, to ensure any risks are managed whilst increasing the community understanding of suicide. It is important to talk about suicide. It is an important issue of community concern and in general, having a conversation with someone does not increase suicidal behaviour. However, this is not the same with one-way mass communication through either public speaking or the media. Evidence clearly tells us that we need to proceed with caution due to the potential risk of causing unintended harm to those in the community who are vulnerable to suicide.

What language should I use?

Certain ways of talking about suicide can alienate members of the community, sensationalise the issue or inadvertently contribute to suicide being presented as glamorous or an option for dealing with problems.

People who are vulnerable to suicide, or bereaved by suicide, can be particularly impacted by language. References to suicide should not be used out of context (such as “career suicide”) as it may cause offence. It is important to use language that is in line with suggestions for the media (outlined below).

Do say ✓	Don't say X	Why?
'non-fatal' or 'made an attempt on his/her life'	'unsuccessful suicide'	to avoid presenting suicide as a desired outcome or glamorising a suicide attempt.
'took their own life', 'died by suicide' or 'ended their own life'	'successful suicide'	to avoid presenting suicide as a desired outcome.
'died by suicide' or 'deaths by suicide'	'committed' or 'commit suicide'	to avoid association between suicide and 'crime' or 'sin' that may alienate some people.
'concerning rates of suicide' or 'cluster of deaths'	'suicide epidemic'	to avoid sensationalism and inaccuracy.

What details should I avoid?

- Detailed descriptions of **method** or **location** of suicide have been linked in media studies to increased rates of suicide by that method or at the location mentioned.
- Avoid discussing specific details and, at the very least, only mention them in general terms (for example: “local lookout” rather than the specific site or “medications” instead of detailing the exact brand or quantities).
- If your focus is on advocacy, such as reduction or highlighting ‘hotspot’ locations, it can be challenging to manage in your communications. The same level of caution should still be considered.
- Consider any cultural protocols regarding naming of an Aboriginal or Torres Strait Islander person who has died.

How should I frame my discussion?

Suicide is a sensitive and emotional topic for many people. Ensure that your discussions “**alert**” rather than “**alarm**” the community.

- Check the accuracy of your information and use only reputable sources. Communicating unsubstantiated, sensational or inaccurate information is unhelpful to the community.
- Ensure your language does not sensationalise suicide or suggest there is nothing that can be done.
- Avoid simplistic explanations that suggest suicide might be the result of a single factor or event. Instead, placing discussions about suicide in the context of risk factors and other mental health issues can assist in breaking down myths about suicide.

When does suicide happen?²

Sometimes people may take their own life after signalling their suicidal intentions to others, including loved ones and/or strangers. In other cases, there may be no warning.

People experiencing a mental disorder, such as major depression, or a psychotic disorder, are at an increased risk of suicide. Psychological autopsy studies show consistently that up to 90% of people who suicide may have been experiencing a mental disorder at the time of their death.

People are at higher risk of suicide while in hospital for treatment of a mental disorder and in the weeks following discharge from mental health in-patient hospital care.

Incarceration is a risk factor for suicide. People in any form of custody have a suicide rate three times higher than the general population.

Key facts related to suicide deaths in Australia¹

- Suicide is a prominent public health concern. Over a five year period from 2011 to 2015, the average number of suicide deaths per year was 2,687.
- In 2015, preliminary data showed a total of 3,027 deaths by suicide (12.7 per 100,000).
- Rates of suicide are generally three to four times higher among males than females.
- Middle-aged men have the highest standardised suicide rate (19.4 per 100,000).
- Suicide rates for Aboriginal and Torres Strait Islander peoples are higher (at least 2.5 times) than the national average.
- The standardised suicide rate for young males[#] in 2015 was almost half the rate in 1997 (17.5 from 31.0 per 100,000).

[#] Youth rates refer to the ten year period from 15 to 24 years of age

What else can I do?

- When discussing suicide in the media, always refer journalists to the **Mindframe** guidelines at www.mindframe-media.info/for-media
- When speaking publicly or doing a media interview, ask that a 24-hour crisis support service is added to ensure anyone potentially distressed can seek immediate help.

National 24/7 Crisis Services

- **Lifeline:** 13 11 14 www.lifeline.org.au
- **Suicide Call Back Service:** 1300 659 467
www.suicidecallbackservice.org.au
- **MensLine Australia:** 1300 78 99 78
www.mensline.org.au
- **beyondblue:** 1300 22 4636
www.beyondblue.org.au

Youth Support Services



24/7 Crisis Support
www.kidshelpline.com.au
1800 55 1800



Direct Clinical Services
www.headspace.org.au
1800 650 890

Further information can be obtained from the project team at the Hunter Institute of Mental Health on (02) 4924 6900 or mindframe@hnehealth.nsw.gov.au or from www.mindframe-media.info/for-media

References

- [1] Australian Bureau of Statistics. (2016). *Causes of Death, Australia, 2015. Catalogue No. 3303.0*. Belconnen, ACT: Commonwealth of Australia. Accessed September 28, 2016 from: <http://bit.ly/2cBi1E3>
- [2] Australian Bureau of Statistics. (2011). *Causes of Death Australia, 2009. Catalogue No. 3303.0*. Belconnen, ACT: Commonwealth of Australia. Accessed November 22, 2012 from: <http://bit.ly/1TSSvnl>