



# Safely Speaking about Suicide

## Guidelines for Politicians and Media

- Public figures such as politicians are well positioned to increase public awareness of suicide and advocate for suicide prevention.
- It is important to ensure that all public messages and comments are safe and life-affirming, and do not sensationalise suicide.
- Before publicly speaking about suicide, you need to consider whether your comments will increase community understanding of suicide in a safe, positive and non alarmist way.

### The Do's - Practices that may be helpful in speaking about suicide:

- **Do emphasise help-seeking and provide information on finding help.** When making public comments or speaking about suicide, ensure that you emphasise that there is help available for those who may be considering suicide and provide details of 24 hour helpline numbers and information services. You should emphasise that there are many places for people to get help, including going to a GP, seeing a counsellor or psychologist and calling Lifeline. Lifeline is available 24-hours a day, seven days a week, on 13 11 14, to provide emotional and crisis support and link people with care. Lifeline's mental health information service is also available during business hours on 1300 13 11 14 to provide practical information for helping someone at risk of suicide.
- **Do emphasise prevention.** Reinforce the fact that there are preventative actions individuals can take if they are having thoughts of suicide or know others who might be. Emphasise that suicides are preventable and something can be done to help.
- **Do list the warning signs, as well as risk and protective factors of suicide.** Teach people how to tell if they or someone they know may be thinking of harming themselves, examples of these can be found at [www.lifeline.org.au](http://www.lifeline.org.au) or <http://www.suicidology.org/displaycommon.cfm?an=2> Messages should also identify protective factors that reduce the likelihood of suicide.
- **Do highlight effective treatments for underlying mental health problems.** Many of those who die by suicide suffer from a significant mental illness, substance abuse disorder or both at the time of their death. The impact of mental illness and substance abuse as risk factors for suicide can be reduced by access to effective treatments and strengthened social support in an understanding community.

### What is appropriate language for talking about suicide?

It is important to select language that does not sensationalise suicide or suggest it as an option for dealing with problems. Examples of non-emotive, safe language for talking about suicide are:

- 'non-fatal' rather than 'unsuccessful'

- ‘took their own life’ or ‘died by suicide’ rather than ‘successful suicide’ or ‘committed suicide’
- use statements such as ‘cluster of deaths’ rather than ‘suicide epidemic’

### **The Don’ts - Practices that may be problematic in speaking about suicide:**

- **Don’t present overly detailed descriptions of suicide victims or methods of suicide.** Research shows that pictures or detailed descriptions of how or where a person died by suicide can be a factor in vulnerable individuals imitating the act. Clinicians believe the danger is even greater if there is a detailed description of the method.
- **Don’t glorify or romanticise suicide or people who have died by suicide.** Vulnerable people, especially young people, may identify with the attention and sympathy garnered by someone who has died by suicide. They should not be held up as role models.
- **Don’t normalize suicide by presenting it as a common event.** Although significant numbers of people attempt suicide, it is important not to present the data in a way that makes suicide seem common, normal or acceptable. Most people do not seriously consider suicide an option; therefore suicidal ideation is not normal. Most individuals, and most youth, who seriously consider suicide do not overtly act on those thoughts, but find more constructive ways to resolve them. Presenting suicide as common may unintentionally remove a protective bias against suicide in the community.
- **Don’t present suicide as an inexplicable act or explain it as a result of stress only.** Presenting suicide as the inexplicable act of an otherwise healthy or high-achieving person may encourage identification with the victim. Additionally, it misses the opportunity to inform audiences of both the complexity and preventability of suicide. The same applies to any explanation of suicide as the understandable response to an individual’s stressful situation or to an individual’s membership in a group encountering discrimination. Oversimplification of suicide in any of these ways can mislead people to believe that it is a normal response to fairly common life circumstances. Be sure your comments are in context by providing general information about suicide and its relationship to mental illness and other risk factors.
- **Don’t focus on personal details of people who have died by suicide.** Vulnerable individuals may identify with the personal details of someone who died by suicide, leading them to consider ending their lives in the same way.

### **Speaking with people that are bereaved with suicide**

People bereaved by suicide may be at risk of mental health problems or self-harm. Caution should be exercised when speaking with those who have lost someone to suicide.

Adapted from *Mindframe – Reporting Suicide and Mental Illness – A resource for media professionals*<sup>1</sup>

*Safe and Effective Messaging for Suicide Prevention – Suicide Prevention Resource Center*<sup>2</sup>

<sup>1</sup> <http://www.mindframe-media.info/>

<sup>2</sup> <http://www.sprc.org>