2007

Keeping pace with current issues in reporting suicide and mental illness

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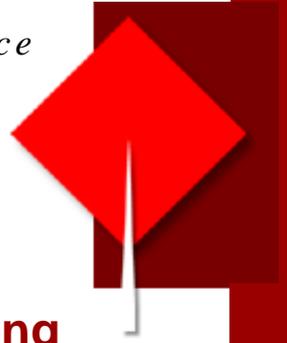
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Keeping Pace with Current Issues in Reporting Suicide and Mental Illness

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Abstract

The Response Ability Project, funded under the Mindframe National Media Initiative in Australia, seeks to influence tertiary curricula so that graduates in journalism will be aware of and able to respond appropriately to issues relating to suicide and mental illness. Whilst the initial multi-media resources developed to support journalism educators have been received well, engagement with media organisations and individual journalists under other Mindframe projects have revealed further complexities associated with the reporting of suicide and mental illness. In particular, journalists have indicated that the issues become more problematic when they are required to report suicides in other contexts, such as murder-suicides, deaths in custody and voluntary euthanasia. Similarly, the reporting of mental illness was more complex in the context of crime and in the reporting of the mental health care system. This paper will highlight some of these new complexities of reporting and discuss how the Response Ability project has responded through the development of supplementary resources to allow educators to raise such issues with students.

Background to *Response Ability*

In recent years there has been international interest in the portrayal of suicide and mental illness in the media. Research shows that certain representations of suicide may increase the risk of copycat behaviour among vulnerable people (Pirkis & Blood 2001). There is also concern that people living with a mental illness are predominantly portrayed in a negative and stereotypical way (Francis, Pirkis, Dunt, & Blood 2001), which may increase stigma and discrimination.

Suicide and mental illness are topics that journalists are often required to cover. Most members of the media report suicide and mental illness responsibly, but research has shown that there is still progress to be made (Pirkis & Blood 2001). One important way to potentially influence the reporting of suicide and mental illness is to expose journalism students to the ethical and professional issues involved as part of their undergraduate studies (Crane, Hawton, Simkin & Coulter 2005). The *Response Ability* project, managed by the Hunter Institute of Mental Health, was funded under the Australian Government's *Mindframe* National Media Initiative for this purpose.

The *Response Ability* Project seeks to influence tertiary curricula so that graduates in journalism will be aware of and able to respond appropriately to issues relating to suicide and mental illness. The project commenced as a pilot in 1997, when the Australian Government launched the National Youth Suicide Prevention Strategy in response to escalating rates of suicide among young people. An identified objective under this strategy was a focus on education and training, specifically through the development of curriculum materials for the pre-professional education of targeted groups. The Hunter Institute of Mental Health surveyed undergraduate courses in nine professional disciplines at all Australian Universities with a view to identifying those disciplines best placed to address the issue of youth suicide (Sheridan Burns & Hazell, 1998). This process, led to the initial selection of four professional groups – journalists, doctors, nurses and secondary teachers. The Response Ability project for journalism education was funded beyond a pilot project in 2000 and was broadened at this time to place the issue of suicide prevention in the wider context of mental health promotion. The resources recognise the important influence the media can have on shaping community attitudes, particularly to sensitive issues such as mental illness and suicide (Sheridan Burns, Reardon, Vincent & Hazell 2001).

The *Response Ability* resources for journalism education were developed by the Hunter Institute of Mental Health in collaboration with the Department of Communication and Media Arts at the University of Newcastle. Based on consultations with journalism educators between February and April 2001, the new resources provided flexible teaching options to expose journalism students to the "conflict between professional, commercial, and ethical obligations" when covering these issues (Sheridan Burns et al. 2001, p109).

This conflict referred to such issues as the need to personalise a story to make it have more impact, the need to report on suicide to raise public awareness, and the fact that what the public may be interested in may not be "in the public interest". Results from these initial consultations also indicated a wide preference for problem-based or experiential learning models that were flexible enough to accommodate changes to delivery and amendments to content.

The *Response Ability* resources allowed for the exploration of these issues through the use of video scenarios, discussion questions, exercises, guidelines for reporting, and examples of news reports provided via lecturer and student CD-ROMs, printed examples and a website at www.responseability.org.   During the development phase, the curriculum authors became aware that the university programs each maintained a point of difference in their approach to journalism education. It was important then, that the curriculum modules were not prescriptive in their content or delivery. Further, participating universities were not given any particular instructions about how the modules should articulate within existing curricula. Instead, the resources were developed in a flexible way so they could be used at various levels in the curriculum and in a range of content areas, including ethics, news writing, feature writing and broadcast journalism. These factors were crucial in ensuring the widespread support of Australian journalism educators.

Despite identified barriers to uptake such as a lack of time, both from an individual and curriculum perspective (Reardon & Vincent 2001), uptake of the resources in Australia has been encouraging. As of 2006, over 95 per cent of campuses offering journalism in Australia currently use the resources in some capacity within their curriculum. Ongoing consultation and partnerships with the sector has been the key to this uptake. In addition, to assist with an already crowded curriculum, the resources were not developed merely as additional material about reporting "sensitive issues", rather they focused on key principles central to the practice of professional journalism: accuracy, credibility of source, ethical considerations and accountability.   In essence, this allows students to learn the practice of good journalism while being exposed to the sensitivities involved in reporting suicide and mental illness.

Feedback from students has also been positive. Building on early intern results (Greenhalgh & Hazell 2005) evaluations between 2004 and 2006 with ten universities indicated that students were very interested in the material, thought it was relevant to their studies and reported that it was likely to improve their confidence to report on the issues in the future. As two students wrote:

> *I felt that the session helped to highlight the fact that we need to move away from traditional news values and consider our role and responsibilities in a social rather than commercial context. I think that sessions like these are one of the ways we can refine and develop journalistic practices for the better. Thank you.*

> *A very useful lecture. As an international postgraduate student I now feel I can more confidently report on issues of suicide and mental health whilst being considerate to society and those directly involved/implicated. Thank you.*

The *Response Ability* Project is guided by an Advisory Panel of journalism educators and industry representatives and continues to support universities and educators by offering consultation services, delivering guest lectures, and supporting academic ownership of the issues. In 2004 the project developed a supplementary CD resource as an addition to the existing multi-media package that drew on learnings from the broader *Mindframe* Initiative regarding the current complexities of reporting the issues. In addition, further lecture outlines and case-studies have been added to the *Response Ability* website to expand the resources available to journalism educators.

Overview of the *Mindframe* National Media Initiative

The *Mindframe* National Media Initiative, under which the *Response Ability* Project is funded, is jointly supported by the National Suicide Prevention Strategy and the National Mental Health Strategy in Australia. It seeks to influence media coverage of issues related to mental illness and suicide, to ensure responsible, accurate and sensitive representation. Importantly, the *Mindframe* Initiative has general media support and is guided by the National Media and Mental Health Group. This group, which meets three times per year, includes representatives from the Australian Press Council, the Australian Media and Communications Authority, FreeTV Australia, Commercial Radio Australia, the Australian Broadcasting Corporation (ABC), Special Broadcasting Services (SBS), the Australian Indigenous Communications Association, the Australian Writers' Guild and peak mental health and consumer bodies. The group provides advice and support to the Department of Health and Ageing on the suite of projects funded under the *Mindframe* Initiative.

To date, the Initiative has funded a *Media Monitoring Project* (Pirkis et al. 2001) to provide a baseline picture of reporting in Australia and two critical reviews providing an update of the world literature on *Suicide and the Media* (Pirkis & Blood 2001) and *Mental Health and Illness and the Media* (Francis et al. 2001). It has also established an online community action site, SANE Australia's *Stigma Watch* program, where cases of stigmatising reporting can be actioned, developed resources for journalists on *Reporting Suicide and Mental Illness* (Commonwealth of Australia 2002) and provided support to the *Media and Mental Health Project* engaging journalists in discussions about the complexities involved in reporting the issues. New work under the strategy has focussed on communicating the principles of *Mindframe* to the mental health sector and expanding the focus of the Initiative to include the portrayal of suicide and mental illness in film and television drama.

These projects funded under the *Mindframe* Initiative reflect the multi-faceted and comprehensive approach to addressing these issues in Australia. The Initiative aims to work with media professionals, journalism students and key sources of stories such as the mental health sector. There have been many natural overlaps between strategies used for media professionals and journalism students. To ensure consistency and adequate preparation of journalists through their undergraduate and post graduate studies, the *Response Ability* Project has responded to current complexities in reporting raised by media professionals and regulatory bodies.

Current Complexities in Reporting Suicide

Most media sectors have codes of practice on reporting and portrayal of suicide, with many of these being reviewed in the past few years to better fit with the available evidence. For example, the Australian Press Council revised reporting guidelines on suicide in July 2001, calling upon the press to continue exercising care and responsibility in reporting matters of suicide and reminding the print media of the desirability of treating suicide with restraint (Australian Press Council 2001). However, as with most media codes, the Australian Press Council notes that there are exceptions where the desirable aims listed may be outweighed by "the pressure of news and public interest" (Australian Press Council 2001).

This exception for stories that are deemed to be in the "public interest" is reflected in codes of practice for both television and radio and has been reiterated in recent literature around journalism ethics. For example, Richards (2005) noted that:

> *While most newsrooms have policies of non-reportage of 'average' suicides,*
> *exceptions are invariably made when the person involved is a prominent 'name' or*
> *has employed more spectacular methods to achieve his or her end (p135).*

In the past two years in Australia, there has been quite extensive reporting of suicide attempts and deaths by people with a prominent 'name', indicating that Richards' (2005) first claim may indeed be true. Encouragingly, anecdotal evidence based on recent reports of suicides may lead us to the conclusion that journalists are mindful of the way these issues are covered, with increased use of the *Mindframe* website for media professionals after two suicide deaths by prominent people in 2005.

The second point raised by Richards (2005) referring to "more spectacular methods" may remain a more problematic issue. It is here that current dilemmas such as the reporting of murder-suicides, deaths in custody or care, and even voluntary euthanasia may fall. What is spectacular in these cases is not always the "method" but rather the method in combination with the context of the story. In fact, the Australian Press Council (2001) clearly outlined in its reporting guidelines that:

> *…mass suicides, suicides by public figures, bizarre cases, the continuing debate
> around voluntary euthanasia, research and statistical analysis, and other aspects
> of suicide… are legitimate matters of public interest and concern* .

What is most troubling about this type of coverage is not that the media choose to cover the issues, but rather that this type of coverage appears to be less sensitive and less likely to align itself with the principles of the *Mindframe* Initiative. In fact, Pirkis and Blood (2001) found that the quality of reporting on suicides was poorer when the reports described murder-suicides or mass suicides and where stories presented legal issues associated with suicide, such as stories about coroners' inquests or euthanasia. This is problematic given that these are the very types of stories that media organisations determine as being "in the public interest" and therefore reportable.

The resources developed under the *Mindframe* Initiative (Commonwealth of Australia 2002) ask journalists to consider a number of issues that appear to be inline with available evidence about reducing the impact on vulnerable people. These include to avoid or minimise the use of the word "suicide", particularly in headlines or leads, to refrain from providing details about the method and location of suicide, to place the story in context by providing information about risk factors, and to promote help-seeking behaviour by identifying support services or by including helpline numbers. As mentioned above, media organisations generally appear to be considering these issues in relation to individual suicides, but more progress may need to be made on more complex cases. This may be due in part to the fact that discussions about suicide reporting to date have tended to focus predominantly on the reporting of average individual suicides and celebrity suicides instead of the full-range of reporting possibilities. This is a challenge for the *Mindframe* Initiative and those working with both journalists and journalism students around these issues. If the potential risk in these reports is minimised, then the media may play an important role in greater understanding and being able to respond to these more complex cases.

Current Complexities in Reporting Mental Illness

Although sectors of the media have developed codes of practice about the reporting of suicide, the reporting of mental illness is generally overlooked as an area of concern. With the exception of the Australian Press Council (2001) which mentions "exercising care and responsibility in reporting…mental illness" under its reporting guidelines for suicide, and Commercial Radio Australia who included explanatory notes on the portrayal of mental illness to its codes in 2004, mental illness is generally not mentioned. Although the Australian Journalism Association (AJA) code of ethics mentions not placing "…unnecessary emphasis on personal characteristics, including race, ethnicity, nationality, gender, age, sexual orientation, family relationships, religious belief, or physical or intellectual disability" (Media

Entertainment and Arts Alliance 1999) it fails to include mental illness as a consideration. Some regulatory bodies go further than the AJA and include "mental disability" as part of a broad statement about discrimination. For example:

> *SBS seeks to counter attitudes of prejudice against any person or group on the basis of their race, ethnicity, nationality, gender, age, sexual preference, religion, physical or mental disability, occupational status, or political beliefs.* (SBS 2002, p7)

One of the key concerns here is that "mental disability" is often taken to mean intellectual disability (as in the AJA code of ethics) and it does not accurately reflect that people in the community are stigmatised and experience discrimination because of their illness, rather than as a result of any disability associated with the illness. In fact, a recent Australian survey (SANE Australia 2004) identified that 80 per cent of people affected by mental illness reported experiencing stigma in the past two years. In addition, many have rated the stigma associated with mental illness as almost as distressing as the symptoms of the illness itself. The media has been identified as one of seven areas of stigma in Australia, with a recent report citing that "despite some improvement, news and entertainment media persist in promoting inaccurate and insulting stereotypes of mentally ill people as violent and unpredictable" (SANE Australia 2004, p4).

It is this portrayal of people with a mental illness as violent and unpredictable that is of major concern to those living with a mental illness and the mental health sector more broadly. This type of coverage reinforces the pervasive and exaggerated belief that people living with a mental illness are violent and dangerous (Paterson, Claughan & McCormish 2004). The facts remain that the majority of people with mental illness, around 90 per cent, have no history of violence and most acts of violence are committed by people who have no history of mental illness (NSW Health 2003). Approximately 20 per cent of Australians experience mental illness but only a small proportion of the violence in society can be attributed to mental illness (Noffsinger & Resnick 1999; Walsh, Buchanan, & Fahy 2002).

Although the research indicates that most people with mental illness will never be violent, community perceptions appear to differ. Literature examining community attitudes to mental illness suggests that the media may have an important influence (Francis et al. 2001). International research has found that those who cited the media as the most important source of their information and beliefs about mental illness tend to have more negative attitudes to mental illness (Philo 1996). This may be due to the very nature of news, where only the most unusual and distressing events involving people with mental illness are reported. It is perhaps not so interesting to run a story about a mother of two, working as a secretary and playing netball on the weekend, but the same woman who commits a violent

crime may reasonably become front page news – and the mental illness will almost always be mentioned. The question remains as to whether this is necessary.

This raises an ethical dilemma about a person's right to privacy and the journalist's right to intrude on that privacy. As Richards (2005) points out, one commonly invoked justification for intrusions into privacy is that the information gleaned is "in the public interest". Of most relevance to the reporting of mental illness and crime is his further argument that:

> *Not only is 'the public interest' notoriously difficult to define but, in those cases where a decision to intrude on someone's privacy appears to be clearly in the best interests of the wider society, this is seldom provable at the time the decision is taken (p124).*

The decision to report a person's mental illness at the time of arrest may be more influenced by a general community misunderstanding about the risks involved rather than expert evidence of its relevance to the case.

In recent years there have been regular examples of informative and useful reporting that may benefit the community. In fact, mental health organisations have established awards that recognise the efforts made by many media organisations and individual journalists in trying to promote understanding within the community and help-seeking behaviour in those who may be experiencing difficulties. However, the media has been cited as the most important source of information about mental illness (Benkert et al. 1997) and the reporting of mental illness in the mass media has been shown to be generally negative (Francis et al. 2001). Perhaps even more important is research that indicates that more positive explanatory information about mental illness may not alter attitudes formed from negative reporting (Wahl & Lefkowits 1989; Domino 1983). As such, it is important to raise these issues related to the reporting of mental illness with journalists and students given that the positive stories being developed by media organisations may not be enough to counter the more negative representations.

How has *Response Ability* Responded?

Between January 2004 and May 2006 the *Mindframe Media and Mental Health Project* conducted over 140 in-house briefings with approximately 800 journalists about the reporting of suicide and mental illness. Discussions with journalists in this context revealed a general understanding of the sensitivities of reporting individual suicides and reporting mental illness in certain ways. However, journalists communicated that the issues became more complex and less clear when they were required to cover suicide in other contexts, such as murder-suicides, deaths in custody and care or euthanasia. Similarly, the reporting of mental illness became more complex when reporting about mental illness in the context of crime and in the reporting of the mental health care system.

As a direct result of early discussions, more complex areas of reporting suicide and mental illness have become the focus of in-house briefings with journalists and formed the basis of a manual for media trainers developed in 2006 (Hunter Institute of Mental Health, 2006). However, there remained a need to provide opportunities at the university level to further explore these dilemmas. As such, a supplementary CD-ROM was developed in 2004 as an addition to the original *Response Ability* package distributed to universities in 2002, and additional case studies have been added to the Project website in 2005, 2006 and 2007. The aim of these supplementary resources was two-fold: firstly, to maintain the currency and value of the existing resources; and secondly, to provide educators with resources they could use to expose journalism students to current contentious issues about the reporting of suicide and mental illness.

 The supplementary CD-ROM provides media examples grouped into a number of topic areas. These are accompanied by background information about the topics along with possible questions that can be used to provoke discussion. In the section on reporting suicide, the fundamental principles of minimising the risk of copycat suicide are reinforced, with a focus on situations such as murder-suicide, euthanasia and suicide in custody or care. The material on the reporting of mental illness examines the perceived link between violence and mental illness, criticism of the mental health care system, feature stories, and the representation of celebrity mental health issues.

The feedback from journalism educators in Australia during 2005 and 2006 about the supplementary resource has been very positive, but only a few lecturers have had an opportunity to incorporate the material into their subjects to date. One possible limitation of the new material is that some educators may choose to include either core material or the newer more complex reporting examples, instead of both.

A consultation conducted with 40 journalism educators around the development of the original resources (Reardon & Vincent 2001) identified a lack of time, from both an individual and curriculum perspective, as barriers to uptake. At that time, several educators felt there was insufficient time in the program to teach specific knowledge on mental health issues. Most universities have since found a place for the issues within their curriculum, but the challenge for the *Response Ability* Project will be to convince educators to find a place in their courses for both the core issues and the more complex issues explored in the supplementary resources.

The collaboration between mental health professionals and journalism educators to improve the reporting of mental health issues in Australia has been as positive as it has been successful. The *Response Ability* project for journalism education, preceded and in many ways set the tone and agenda for a comprehensive national approach to raising awareness of the complexities of reporting both suicide and mental illness in Australia. It has also provided the model for other Federally-funded projects aimed at influencing the pre-professional education of journalists, including the *Journalism in Multicultural Australia* and *Reporting Diversity & Integration* project. Through modelling, active dissemination, and support for curriculum redevelopment, it is hoped that the uptake of the supplementary materials will be as impressive as the uptake of the original resources.

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Please cite as: