

## Mindframe media alert

### Media reminder – responsible reporting on the Florida school shooting

15 February 2018

Please cascade to all staff

*Mindframe* reminds media of responsible reporting on the recent school shooting in the USA and urges promotion of help-seeking information for distressed viewers.

We ask media to refrain from linking the motivations of the perpetrator to mental illness until motives have been established. Research shows us that less than 4% of mass shootings have any links to mental illness. Many violent people have no history of mental illness and most people with a mental illness have no history of violence.

One in four people in Australia will also experience a mental illness in a 12 month period, and stigma can lead to some not seeking help through shame or fear that stigmatising reporting can amplify. Phrases such as ‘crazed gunman’ and ‘psychopath’ can contribute to this.

Finally, always include [help-seeking](#) information for people who may be vulnerable, including youth support services such as [Kids Helpline](#) and [headspace](#), as young people may be impacted and are known to seek help online.

More information about safe reporting of mental illness and suicide can be found on the [Mindframe website](#).



### Contact information

*Mindframe* can provide media comment or expert advice on media reporting of suicide and/or mental illness. Contact details below:

- **The *Mindframe* project team**  
Tel: 02 4924 6900 (0427 227 503)  
[mindframe@hnehealth.nsw.gov.au](mailto:mindframe@hnehealth.nsw.gov.au)  
Twitter: @MindframeMedia
- **The SANE Media Centre**  
Tel: 03 9682 5933 Mob: 0407 367 215  
Email: [media@sane.org](mailto:media@sane.org)


## Be mindful of reinforcing common stereotypes

Balance and accurate reporting has the potential to increase understanding of mental illness. However, stereotypes can lead to negative community attitudes and stigma. Myths and facts are outlined in the table below:

Myths 	Facts 
People who are mentally ill are violent, dangerous, untrustworthy or unpredictable.	Many violent people have no history of mental illness and most people with a mental illness have no history of violence. <sup>104</sup> People with a mental illness are much more likely to be the victims of violence and crime than the perpetrators. <sup>105</sup>
People are unable to recover from mental illness.	Mental illness is not a life sentence. Most people will recover completely and go on to live full and productive lives. There are various treatments available to enable people to manage their symptoms/illness. <sup>106</sup>
Mental illnesses are all the same.	There are many types of mental illnesses and many kinds of symptoms or effects. <sup>107</sup>
People who share the same diagnosis will have the same experience of mental illness.	Even though a particular mental illness will tend to show a certain range of symptoms, not everyone will experience the same symptoms. A diagnosis will tell you little about a person's ability and personal characteristics. <sup>108</sup>
Some cultural groups are more likely than others to experience mental illness.	Anyone can develop a mental illness and no one is immune to mental health problems. <sup>109</sup> Cultural background may affect how people experience mental illness and how they understand and interpret the symptoms of mental illness. <sup>110</sup>
People with a mental illness differ in appearance to others in the community.	People with mental illness do not look any different from others in the community. <sup>111</sup>

## Consider the language you use

Certain ways of describing suicide can alienate members of the community or inadvertently contribute to suicide being presented as glamorous or an option for dealing with problems. Some suggestions are provided below.

Issue 	Problematic 	Preferred 
Language that presents suicide as a desired outcome <sup>21</sup>	'successful suicide', 'unsuccessful suicide'	'took their own life', 'ended their own life', 'died by suicide'
Phrases that associate suicide with 'crime' or 'sin' <sup>22</sup>	'committed suicide', 'commit suicide'	'died by suicide', 'took their own life'
Language that glamorises a suicide attempt <sup>23</sup>	'failed suicide', 'suicide bid'	'made an attempt on his life', 'suicide attempt', 'non-fatal attempt'
Phrases that sensationalise suicide <sup>24</sup>	'suicide epidemic'	'higher rates', 'increasing rates', 'concerning rates'
Gratuitous use of the term 'suicide' out of context	'suicide mission', 'political suicide', 'suicide pass' (in sport)	refrain from using the term suicide out of context

### HELPFUL WAYS TO PRESENT INFORMATION

Australian research shows that mental illness is reported frequently and is generally covered responsibly by the Australian media.<sup>82</sup> There are a range of helpful ways to present or explore mental illness, such as:

- Covering mental illness sensitively and accurately can change public misconceptions, challenge myths and encourage community discussion about the issue<sup>83</sup>
- Sharing stories of people who live with a mental illness can be powerful and these stories have been shown to reduce stigma<sup>84</sup>
- Emphasising the importance of seeking help can lead to people connecting with support and treatment<sup>85</sup>
- Exploring the impact of mental illness on family and friends, and providing information about specific illnesses, policy implications, and debates about mental health care delivery can increase community understanding.<sup>86</sup>

### Help-seeking Information

People are more likely to seek help and advice when appropriate services are included in stories. We recommend adding the following services to any story about mental illness:

#### National 24/7 Crisis Services

- **Lifeline:** 13 11 14  
[www.lifeline.org.au](http://www.lifeline.org.au)
  - **Suicide Call Back Service:** 1300 659 467  
[www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)
  - **MensLine Australia:** 1300 78 99 78  
[www.mensline.org.au](http://www.mensline.org.au)
  - **beyondblue:** 1300 22 4636  
[www.beyondblue.org.au](http://www.beyondblue.org.au)
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Youth Support Services

**Youth Support Services** 



kidshelpline  
Anytime Any Reason

**24/7 Crisis Support**  
[www.kidshelpline.com.au](http://www.kidshelpline.com.au)  
1800 55 1800



**Direct Clinical Services**  
[www.headspace.org.au](http://www.headspace.org.au)  
1800 650 890