

## Final Consultation Outcomes: Suicide Bereavement and the Media

November 2011

---

### Introduction

The National Suicide Prevention Strategy has provided funding for services and initiatives to support people bereaved by suicide and funding for the *Mindframe* National Media Initiative to promote sensitive portrayals of suicide in the media. Public discussion of suicide and media coverage focusing on people impacted by suicide has raised numerous challenges and highlighted significant differences in how those affected by suicide and mental illness are supported to tell personal stories in the public domain.

Personal stories about suicide bereavement may potentially provide opportunities for public discussion that focuses on the impact of suicide. People bereaved by suicide, however, may also be vulnerable and at risk themselves.

The Hunter Institute of Mental Health has worked with an expert reference group to conduct a scoping study under the *Mindframe* National Media Initiative to explore the needs of people bereaved by suicide with regards to managing media interactions.

The objectives of the study were to explore:

- The views and opinions of people who have been bereaved by suicide about the media coverage of suicide;
- The views and opinions of people who work with or are in contact with those bereaved by suicide;
- The needs of people who have been bereaved by suicide in relation to media engagement;
- Options for providing information and support to those bereaved by suicide.

The project team engaged in a scoping exercise to investigate the status of the evidence around bereavement and suicide, current suicide bereavement support in Australia and existing support structures for people bereaved by suicide engaged in telling personal stories in the public domain. Additionally, the project team engaged a small reference group of bereavement support experts to assist with the design and implementation of the consultation. This reference group included Susan Beaton (formerly of Lifeline Australia), Jill Fisher (*StandBy* Response Service); Myfanwy Maple (University of New England); Sarah Coker (SANE Australia); Laurencia Grant (Mental Health Association of Central Australia) and staff at the Hunter Institute of Mental Health.

Ethics approval through the Human Research Ethics Committee (HREC) within the Hunter New England Local Health District was granted in April 2011.

This study involved two key methods of inquiry, described and analysed separately below:

Part 1: Key informant interviews

Part 2: Focus groups



Key outcomes of the consultations are summarised in this report. Full analysis of the data will be used to publish a peer reviewed paper based on the outcomes.

## **Part 1: Key Informant Interviews**

### **1.1 Method**

#### **Target group**

Participants reported in this analysis include: six key informants who have been bereaved by suicide (F5; M1); four key informants from postvention services (F3; M1); five key informants from police and coronial services (F2; M3) and four journalists (F3; M1). All participants were over 18 years of age, and if bereaved by suicide, the bereavement occurred more than six months prior.

#### **Data Collection Measure**

Separate semi structured interview proformas were developed for key informant interviews with: (a) people bereaved by suicide, (b) postvention workers, (c) police and coronial workers, and (d) journalists. All respondents were asked questions about: their personal experience relating to media (or views of how people bereaved by suicide relate to the media); their needs in relation to the media (or perceived needs of those who are bereaved); and support options that would assist people bereaved in dealing with the media. A copy of the proformas is available on request.

#### **Procedure**

Participants who were bereaved by suicide were recruited via postvention support services. Other key informants were recruited directly by the project team at the Hunter Institute of Mental Health. Participants were provided with information about the study and signed consent was obtained. Key informant interviews were conducted via telephone and recorded for analysis. Key informant interviews were transcribed and analysed using thematic analysis techniques.

### **1.2 Results**

#### **Views about media involvement and coverage**

The consultations indicated that there is a clear awareness of suicide bereavement stories in the media across all key informant groups. Most participants felt that it could be helpful for people bereaved by suicide to talk to the media, under certain conditions. Informants noted that it could be either a positive or negative experience for people bereaved to engage with the media, depending on the context of the article and the type of media covering the story.

Fostering awareness of the social issue of suicide and contributing towards active suicide prevention through the media was considered a motivating factor for people bereaved by suicide to be involved in stories as well as for media wanting to involve them in stories. Many key informants noted that this could have some benefits for the community and was a strong feature of interviews with media professionals.

*If the story is about suicide and prevention and about illustrating certain aspects of a story it's really important (media professional).*

*...good information to get out with the media to the general population...it is good information to increase awareness (postvention worker).*

*I think very often they see it as a way of educating others, because there has been an increase of suicide being talked about in the media (police officer).*

*More media reporting of suicide and support that could be obtained information and emphasis on the health system so that there are better outcomes... (person bereaved).*

The timing of an interview, however, was identified as a critical issue. The majority of respondents stated that it would be unhelpful for media contact to occur around the time of the initial trauma.

*I don't think it would be helpful when you are going through the initial bereavement and trauma (postvention worker).*

*The families or next of kin either of the two are too vulnerable to say no... (coroner).*

*You do not have to say yes, especially if it is too soon... (person bereaved).*

*...some aren't ready to talk to you. It's too new, it's too fresh, it's too shocking (media professional).*

*I think for myself and others I have spoken to the amount of time passed helps (postvention worker).*

One postvention respondent noted that media communication around personal stories did have a negative impact on their professional role as a service provider.

*It's not helpful from a service provision point of view...[people are]very much impacted and I guess, re-traumatised over what has gone on in the paper (postvention worker).*

Respondents generally felt that it was a sense of altruism that compelled people bereaved by suicide to engage with the media. In a sense, taking on an educative or advocacy role, using the media as a vehicle to raise awareness about suicide.

*There is a drive that makes you want to talk (person bereaved).*

*People want to do it to...most of them say that like, if it helps one person, if it stops one person, prompts one person to seek help or prompts one person to ask someone else who they might think is in trouble that sort of is a big motivator for people, they really want to make a difference and see sharing stories as a way of doing that (media professional).*

*Down the track they sometimes want their particular experience to have value/meaning – telling my story to help other people (police officer).*

*... they suddenly realize this would be a good way of getting whatever message across that we want to get (coroner).*

*...hopefully making a difference in breaking down stigma, talking about suicide that 's' word which so often has drawn the awkward silence (person bereaved).*



*My experience would be that it is... very affirming for them. They can express, they can sort of validate the person was there, was such a big part of their lives ... they can illustrate the void left behind, the pain left behind (media professional).*

Some respondents from services, however, felt that people bereaved may also use the media as a platform to process personal issues or gain validation from telling their story. Indigenous respondents indicated that within Indigenous communities the media was utilised extensively in this manner.

*It can be cathartic which may not necessarily be a good thing for either party (media professional).*

*Some people try to use media to air out laundry and deal with the bereavement and will use media if the media let themselves become a vehicle for airing out factors, innuendos etc...People using media to process personal issues, hopelessness, despair (postvention worker).*

*Using the media is the vehicle to sort of address their own personal internal anguish and pain, I have seen that happen (coroner).*

### **Impact of media stories**

When considering the potential impact of reading, hearing or seeing suicide stories on those bereaved, the majority of respondents reported that there could be positive impacts if the story focused on suicide prevention. Negative impacts were considered likely if the article did not have a significant suicide prevention focus or if it focused on the deaths rather than impacts on friends, family and community members.

*It could be that they read the stories or they think at least somebody recognizes the pain and the anguish of it all (coroner).*

*If they are focused on good media or awareness, which are different things. Providing hope, never around the incident or the issue itself and it is done in staggered stages to keep peoples hope up (postvention worker).*

*Some of the things you can learn from past incidents may inform others and give them handy hints in looking at symptoms in other people (media professional).*

*Suicide is probably a taboo subject so people might feel that their situations being publicised and they didn't want that (coroner).*

Time was mentioned as an influential factor in regards to potential negative impacts. Across all groups responses indicated that there was significant potential for re-traumatisation for both people bereaved and others affected by suicide reading the stories.

*I think...the amount of time passed helps. You can talk about suicide, the situation and discuss that and think about, accept it (postvention worker).*

*Obviously if they are in a space where they are comfortable it can be a positive, or at least not a negative experience but I think other times and it can be completely inappropriate (media professional).*

*It can be very difficult. If it is a general information story about what happened to a person I think the impact would hook me back into my situation, and grief, I would feel empathy (person bereaved).*

### **Media involvement of people bereaved by suicide**

Journalists reported that media were likely to cover a story with a suicide focus if it was in the public interest, although it was not an issue they covered on a regular basis.

*An identity that is relevant to the public, it could be a reason to talk about the situation or there is something extraordinary about the circumstances. As a general rule you wouldn't necessarily want to talk about that at all...(media professional).*

*Hopefully making a difference in breaking down stigma, talking about suicide that 's' word which so often has drawn the awkward silence (media professional).*

They also reported that contact and interview requests, especially requests to those bereaved by suicide, were generally made via a formal request, in some cases information was received in the form of a 'tip off'.

*The media can play such a powerful role in that by telling the stories of people who've been there in that very particular, experiencing that very particular pain which has so often not been talked about (media professional).*

*When families and communities are put in the position to constantly deal with suicide there is a desire to want the story and the truth to be told about what we face as indigenous people in this country. Why our community members, our family members choose to commit suicide (media professional).*

Other key informants were more concerned about the motivations of journalists contacting those bereaved by suicide. In particular, whether they were being 'used' for a headline or a story, rather than for community education.

*Sadly, I think it is just a headline (coroner)*

*They are looking for a human interest story. Good headlines individual reporters who want to get their point from people bereaved (police officer).*

*They are doing their job, gaining your trust is part of their job and they have their own agenda. You have to remember that they will do anything to get their story (person bereaved).*

*It is often a dramatic news story, sudden and violent death which people are fascinated by (coroner).*

*I am more skeptical about journalists and the media in general (person bereaved).*

Most commonly, people bereaved (and other key informants) reported they became involved with the media in the months and/or years following their loss and in general did not actively seek out the media to tell their story. An exception to this was when people bereaved made contact with the media at an early stage (within weeks) in an attempt to process their grief and loss or explain the event publicly.



*Using the media is the vehicle to sort of address their own personal internal anguish and pain, I have seen that happen (postvention worker).*

*Minority of people may seek out media to deflect blame (coroner).*

When asked about the impacts on people bereaved participating in media interviews respondents observed both negative impacts and positive impacts. Positive impacts were more likely if they feel they were well represented or the story was seen as important.

*If the report has been accurate then they feel like they have made a contribution (postvention worker).*

*Knowledge of the purpose and intended audience of the article gives you more control (person bereaved).*

Many respondents felt that if the person did not actively engage with or consent to media stories then the impacts could be negative. These negative experiences could include suicidal ideation, grief and re-traumatisation.

*The majority of people ... have been concerned with what they should say and how they should say it, they have been usually totally unaware of their rights (postvention worker).*

*You have to know not to trust them, they are not your friends (person bereaved).*

*Families often feel stigmatised, that it will reflect negatively on them – public conclusion that parenting was deficient (coroner).*

Journalists themselves also reflected on the opportunities that personal stories provided as a good story, reporting that often people reported a desire to be involved. They also reflected that some people are 'not ready' to tell their story and this can provide challenges for media that are trying to determine the difference.

*By telling the stories of people who've been there... experiencing that very particular pain which has so often not been talked about (media professional).*

*... some aren't ready to talk to you. It's too new, it's too fresh, it's too shocking. It can be cathartic which may not necessarily be a good thing for either party but it can also be very helpful... (media professional).*

### **Impact on those bereaved participating in media stories**

As with earlier responses concerning the impacts of consuming media stories about suicide, there was also potential for positive impacts, but only if mental health promotion or suicide prevention was a significant feature of the story. Respondents felt that a story with such a focus would enable a sense of altruism within people bereaved, and foster a belief that some good may have come from their situation.

*Positive impacts in good news stories when the person through their bereavement and self healing make a bit of a pitch around awareness (person bereaved).*

*Down the track they sometimes want their particular experience to have value/meaning – telling my story to help other people (police officer).*



*If the report has been accurate then they feel like they have made a contribution (postvention worker).*

Participants felt that rarely, or never did people bereaved ask for or be provided with a professional media support person. However, people believed that it was vital to have the support of an organisation or at least be accompanied by a friend or family member as a support person when they did an interview. This was especially the case in Indigenous communities.

*If possible arrange your interview via a trusted third party who are interested in protecting your interests (person bereaved).*

*Any available support ... people who chose that opportunity should not do it unsupported (police officer).*

*... the majority of people are not probably that media savvy and are not aware about how their information gets utilized (coroner).*

Participants indicated varying levels of confidence if asked to provide support to people bereaved in their interactions with the media. Coronial respondents did not feel equipped in any way, police workers felt confident to provide basic support, postvention workers felt that gaining the skills to support bereaved was a learnt process through direct exposure in their work.

*If anything... really the majority of people are not probably that media savvy and are not aware about how their information gets utilized (coroner).*

*I think I have seen enough to know what might come up for that person (postvention worker).*

Information and resources such as those produced by *Mindframe* aided their confidence when supporting people bereaved in media interactions.

*Mindframe guidelines are really useful...come up with own local guidelines. Development of local on the ground protocols.*

### **Media experiences of interacting with people bereaved by suicide**

The majority of media respondents had numerous experiences interviewing people bereaved by suicide. One respondent had interviewed significantly more people surrounding their bereavement. Interviews were conducted anywhere from the same week as their loss up to years following.

Most respondents indicated they felt reasonably well equipped to interview someone that has been bereaved by suicide. However, the lack of emotional support provided to people bereaved by suicide at interview was identified as a big challenge by one journalist.

*Depends on where you are, if it's recent it can be a real minefield, people are incredibly distressed and probably latching on to anything, they are looking for answers and you don't have them (media professional).*

When asked about any specific resources or skills used when working with bereaved all respondents listed practical skills such as observing their industry guidelines or recommendations such as those made by *Mindframe* as being the only ones available to them.



*Mindframe guidelines. I think is important that you're not necessarily hemmed by them but you certainly have to be so conscious of them... (media professional).*

*Obviously there are the Mindframe guidelines and so the things that I would be aware of in reporting around suicide (media professional).*

Other practical skills employed by journalists included thoroughly understanding the task at hand and ensuring that the interviewee understands the media process and how their story may be represented by the final product.

*Understanding your own value and why you're there, what your likely to get and that they understand, you will get other sources and that the story will be rounded out with their input (media professional).*

Emotional skills were used by some journalists in addition to the practical skills mentioned. Assessing and interpreting the information differently was a key skill employed by one respondent whilst another utilised their cultural heritage and knowledge to empathise with their interviewees.

*Understand the circumstances. You have to step back and wear a different armour than you would in a situation where blame is there (media professional).*

*Being an aboriginal ...and what that brings to the story telling around indigenous content that is almost like a resource and a skill because I have prior knowledge... cultural, community knowledge. It's an understanding what people are going through (media professional).*

*I think you have to treat people with such respect, respect their stories and be sympathetic (media professional).*

### **Resources for people bereaved and the media**

Informants were asked about resources to assist people bereaved to make an informed decision if choosing to, or needing to, engage with the media. The preferred resource identified from a range of options was access to a professional media liaison or support worker to safeguard their privacy and rights throughout the interview process.

*A support person sitting with bereaved when they are being interviewed so that they can take over if possible (person bereaved).*

*I think staffing that have skills ... that are up to speed on how to deal with media (postvention worker).*

*Make sure that there is a support person for them. Depending...if it is the main subject of the story that there is a counsellor or some ability to seek counsel support afterwards (media professional).*

*...arrange your interview via a trusted third party who are interested in protecting your interests (person bereaved).*

Key informants also believed that any resource or support person should ensure that people understood the role of the media and the motivations of the media. People requested more practical advice about



what to expect and also to check their own (people bereaved) motivations for participating and their own personal boundaries.

*They need (to know) the philosophy behind the media which is I suppose, at the end of the day to sell newspapers, to sell TV programs... Simply to know or to be having confirmed what the media basically is about (coroner).*

*You have to know not to trust them, they are not your friends. They are doing their job, gaining your trust is part of their job and they have their own agenda. (person bereaved).*

The notion of boundaries was presented in two ways, as a personal tool for people bereaved to protect private information and also to avoid becoming overwhelmed by other personal stories featured in the media. Other themes consistent across respondents regarded people bereaved becoming aware of how the media may choose to use their personal story once it is in the public domain as well as assessing risks to themselves and others who may read their story.

*The majority of people I think haven't been worried by the media, they have been concerned with what they should say and how they should say it... (coroner).*

*Establishing my own personal boundaries if/when talking to the media about the incident being careful not to give too much or too little as they may just make it up then (person bereaved).*

A resource in the format of an information sheet or brief flyer was most commonly suggested by respondents. It was recommended that this resource would also exist in a web based format maximising exposure and potential usefulness to people bereaved.

*Because we are just so geographically diverse in this country...if it is more readily available in different mediums and outlets and then you can tailor that (postvention worker).*

Responses suggested that information included in a resource should be brief so as not to overwhelm the person at a particularly vulnerable time. This might include brief guidelines around sharing personal stories and accessing help-seeking information. Informants also suggested that the resource should provide general information about the media, supporting families and reflect the notion of boundaries.

*A FAQ sheet that explains they don't have to talk, question how much they will talk, info about what could happen to their story and how long it can be circulated for. How they can take control, it can be helpful or unhelpful – so they can make an informed choice.*

Respondents felt that the ideal way to disseminate the resource was through bereavement support and/or counselling services in conjunction with conversations around the content of the resource. The majority of informants indicated that they would refer to a resource for suicide bereavement and media communication if one existed.

When journalists were asked whether they required additional resources to guide or support interactions with those who were bereaved by suicide, a range of options were presented. These included practical supports like the ability to debrief with other colleagues as well as a better understanding of suicide and skills to deal with the interaction between vulnerable sources and themselves.

*The de-brief, but being able to talk to someone who understands what it's like to be doing this work is a fairly important thing (media professional).*



*A holistic approach to trauma grief, suicide and how that plays out for people. How you deal with the production staff, the subject matter and the people within the story and how you can do that respectfully (media professional).*

*How people deal with suicide, how people deal with the very raw emotions within the industry. How productions staff deal with and how you deal with the subject matter and how you deal with people telling you their story (media professional).*

## **Part 2: Focus groups**

### **2.1 Method**

#### **Target group**

Participants reported in this analysis include twenty people who have been bereaved by suicide (F15; M5) and attend a local support group from three locations nationally (Newcastle NSW, Sunshine Coast QLD, and Battery Point, TAS). All participants were over 18 years, and if bereaved by suicide, the death occurred more than six months prior.

#### **Data Collection Measure**

A semi structured interview proforma was designed to be administered by the focus group facilitators. All respondents were asked questions about: their personal experience relating to media; their needs in relation to the media; and support options that would assist in future engagement with media journalists. A copy of the proforma is available on request.

#### **Procedure**

Participants were recruited via postvention support services and professionals linked to the *Mindframe* program. Participants were provided with information about the study and signed consent was obtained. Focus groups were conducted with an external facilitator known to the group for approximately one and a half hours and recorded for transcription and analysis. Facilitators were briefed before and after the focus groups by an investigator on the suicide bereavement and the media project.

### **2.2 Results**

#### **Views on media coverage**

Participants were asked to think about the media that they watched, read or listened to and asked about their personal responses to media featuring stories about suicide or people that have been bereaved by suicide. Primarily group members felt that stories directly addressing suicide, or bereavement by suicide 'stood out' to them after their own personal experience and reported increased awareness of media reports surrounding suicide and 'non suspicious' deaths.

*You don't think that much about it, you are only shocked that these things happen, but until it happens to yourself suddenly you realize that yes it has a huge impact. And then you notice much more in the newspapers you notice much more on TV.*

Some participants reported that they were compelled to seek out bereavement stories as a way to process their grief. Not only did these stories have increased relevance to participants after their bereavement but it was noted that they felt such stories had increased prominence as media consumers. Group members

across the three locations reported empathising directly with people featured in media stories about suicide, comparing the situation depicted with their own experience.

*I feel for the parents... I feel for the family and what they are going to have to go through... and other people, friends and all that, that they are going to have to deal with it and how their going to deal with it.*

*I know what we have gone through on the journey knowing that they're only just starting theirs and knowing what their going to have to face.*

Participants suggested that it was appropriate to have media pieces featuring stories and impacts of suicide, especially when these focused on people bereaved and the impact of the death. Group members also felt that outlining the emotional impacts in such stories could significantly contribute to greater awareness about suicide prevention and decrease stigma associated with suicide.

*I think people should be made more aware of it, I mean we talk about breast cancer and car accidents and young people driving and getting killed all the time and we don't talk about people passing away from suicide...And we still don't.*

*[I would] like to see more after affects, people that are left in the media.*

Group members noted that journalists and 'features' should be more concerned with the 'everyday' stories and not to focus on the drama or sensationalist aspects of the story. Media stories emphasising the 'truth' about suicide were also valued by focus group participants.

*... not that they need to go into the how and why, but there needs to be a lot more discussion to normalise it, it's the only way... to get it out there and talk about it and there will be grief and pain but how else are we ever going to normalise it?*

*If we never acknowledge the death people will start to wonder what this is all about... it has to be a balanced thing in the media.*

### **Impact of media reports**

Focus group members reported directly empathising, and identifying with people bereaved featured in media stories. Participants felt that negative impacts from reading media stories varied over time but it was not uncommon to experience re-traumatisation and increased grief symptoms after reading about another person's bereavement.

*You're wondering if they are going to feel so alone like many of us have experienced*

Group members reflected that they were drawn to bereavement stories and despite negative personal impacts they could appreciate potential positive outcomes from addressing suicide in the media. In their situation they felt that potential for positives outcomes outweighed their negative emotional response.

*It all makes me think more about the prevention. It's so sad for me I just want to know what has been put in place for that person, where was their support?*

*I would rather see it than not see it. As hard as it was... in the media I really would prefer to see more particularly the prevention side of it. If that's the issue of the week why don't they promote prevention?*



If journalists were not respectful of the privacy and emotional boundaries of interviewees and ensured the stories were accurate, then the potential impacts on family and communities significantly increased.

When asked to consider the impacts that the stories might have on the community as a whole common responses suggested the community might have an emotional response, despite potentially not having their own personal experience with a bereavement from suicide.

*For our community because it's only small, it affected, I don't know anyone in the community that it did not affect.*

*I know in our community is affected a lot of people.*

One positive outcome identified by participants was the capacity to elicit community responses to significant issues if the media chose to feature a personal story focusing on the social issues such as suicide prevention.

*We had different groups in the community do different things.*

### **Experiences with media**

A number of focus group participants had direct communication with the media following their bereavement by suicide. Two respondents reported positive experiences, finding the media both accommodating and respectful while conducting interviews and sought approval for the story in the final editing stages.

*My experience in general is not too bad, they were very accommodating. It was very similar to any of the Standby people and how they treat you... very caring.*

*They were pretty truthful to what we wanted to say, and they gave it to us to check out. We have had a pretty good result.*

Another two participants reported negative experiences communicating with the media. One participant received unsolicited requests for comments and interviews from a print media journalist immediately following her bereavement.

*They were playing on my obviously deep love for my son, saying that if I didn't cooperate and give the sort of story and angle of xxx is a wonderful boy that they could print something derogatory about him. They preyed on my vulnerability because you don't know what your rights are, you couldn't even think about that.*

### **Information and resources**

Participants were asked, regardless of their previous involvement with the media, what they would tell the media about reporting suicide bereavement. Participants believed that media could play a role in suicide prevention if they reported suicide well and in context. This could be done by highlighting risk factors and by promotion of help-seeking behaviour. The media could also have a role in promoting services, both those for people who were suicidal and support services for those bereaved.

*It is something that the local community could discuss, because within that three year period we had four young boys that passed away from suicide, there's been ten that I know of in our community. There's been no media...*

*We put stuff out there particularly when it is promoting discussion in some way that isn't personalised and inflammatory is raising awareness is really good.*

Participants also suggested that media should focus on the 'after affects' of suicide. Participants felt that the media had a role to play in educating the public by telling people's stories. This could assist in breaking down the stigma associated with suicide and dispel common myths and misunderstandings.

*Telling our story, how we feel... and how about you do it. Could you just do it a bit more often, survivor stories... How it impacts on everyday life...*

*Get it out there with some sensitivity and not sensationalise it. That's what you are looking for...*

Finally, participants recommended journalists understand that people bereaved by suicide need significant support. This support could be through people who have been through similar circumstances and most importantly somebody who understands how they are feeling at that particular time.

Some group members reported difficulty in knowing where to access support due to the stigma surrounding suicide. The media could play an important role in allowing people bereaved to understand why it is crucial to access these services and directing them to appropriate support services.

*There needs to be prevention on one side, and there needs to be places like United Synergies, like Standby need to be promoted.*

## Recommendations

This study provides some important reflections about the views of people bereaved by suicide and other stakeholders about media coverage of suicide and the interaction between journalists and people bereaved. Based on the outcomes of this consultation the following recommendations can be made:

1. There is a need to consider the development of resources for people bereaved by suicide as well as a range of sectors that could support people bereaved by suicide in their interactions with the media. This may include:
  - Advice and information for people bereaved by suicide on how to interact with journalists, safely tell their story and to manage their involvement with the media;
  - Advice and information for people in contact with those bereaved by suicide that may assist their support role (i.e. postvention support workers, the mental health service, police and coroners);
2. Any resource for people bereaved by suicide would need to be brief and respectful of their bereavement. It might include:
  - Information pertaining to the rights of the interviewee and recommendations on how to maintain personal boundaries when communicating to the media;
  - Information on how personal information released to the media may be used subsequently;
  - Information on the potential risks to people bereaved and also others who may be reading their story in the media.;
  - Tips on language and other details to avoid.
3. The opportunities for providing professional media liaison support for people bereaved by suicide should be considered and potential avenues identified;



4. There is a need to consider the expansion of the *Mindframe* resources for media professionals to provide specific advice about reporting on and interacting with people directly affected by suicide. These could be integrated into print resources for media, into professional development activities and curriculum resources for journalism students;
5. There is a need to conduct further research in the area of suicide bereavement and the media. The results may be enhanced by analysing case-studies of stories involving people bereaved by suicide and further investigation with journalists and people bereaved by suicide who have been the subject of media they did not consent to.