

Guide for other officers of the courts for working with the media about suicide

Courts are a valuable source of information for the media about incidents of suicide that they may deem to be 'newsworthy'. Through court proceedings and inquests, journalists are privy to details about the circumstances surrounding a death. As such, courts may be called upon by the media to make comment about particular cases or issues from time to time. While coroners and other court officials may not talk directly to the media or seek out media coverage, their general dealings with journalists in the courtroom may have an impact on the way a story is developed.

Key Issues for Other Officers of the Court

Consider the potential impact of the story and whether to make official media comment.

- When deciding whether to participate in a story, you may want to consider what type of media is making the approach and whether you are best placed to provide them with information. Do they require general information or information related to a specific case before the courts or coroner?
- Find out what the journalist needs. Is the issue about the inquest or case, or more generally about suicide or suicide prevention? Consider if you are the most appropriate person to be commenting on the issue under question.
- Avoid engaging in repetitive, prominent or excessive reporting of suicide, which may normalise suicide.
 This has been linked to increased rates of actual suicide. This does not, however, mean that all suicide reports should be avoided.
- Think about whether the story is likely to have benefits for the community. That is, does it provide an opportunity to increase community understanding, highlight groups at risk or promote help-seeking behaviour in some way? If this is the case, consider in what ways you may be able to have input.
- While you always have the option of saying 'no' you may want to consider the impact of not participating
 in a story. That is, the story may still be run without expert comment and advice.
- You may want to designate at least one person who can discuss 'ways of reporting suicide' with media professionals who approach your jurisdiction and ensure they are aware of the Mindframe resources for media professionals. This may be a public affairs unit or an identified media liaison representative.

Avoid specific description of the method and location of suicide and instruct media to be cautious with this information.

- Where possible, avoid or minimise any detailed discussion of the method or location of suicide. Reporting that includes a detailed description or images of method and/or location of suicide has been linked in some cases to further suicides using the same method or location.
- Consider whether summary remarks and official statements need to include detailed descriptions of the method and/or location of suicide. Use alternatives that do not provide specific details. For example:







Say	Rather than
the person took a 'cocktail of medications that should not be available over the counter'	outlining the specific medications that were taken and where they were sourced
the person 'fell to their death from a spot close to the CBD that should have been fenced'	they 'jumped from a known suicide spot, the Skyline building on Smith Street, which still only has a three- foot safety fence'
the person 'took their own life in a hospital room because appropriate mechanisms to ensure safety were not in place'	she 'used her bed sheet to hang herself from the ceiling fan because the hospital failed to remove hanging points'.

• For suicide deaths involving an Aboriginal or Torres Strait Islander person, be mindful of releasing the person's name or details to the media. Where the information is made public, request that media professionals respect appropriate cultural protocols.

Consider how to include information that will improve community understanding.

- Avoid simplistic explanations that suggest suicide might be the result of a single factor or event. This may
 be difficult when discussing a specific case, but it's important to ensure comments do not generalise one
 case to all cases.
- Provide suicide prevention information such as risk factors and warning signs and encourage its inclusion in the story. A diagram showing some risk and trigger factors for suicide can be downloaded by clicking here.
- Provide information in simple terms and without jargon.

Consider the impact of a media story on people bereaved by suicide.

• If the media wish to interview those who have been bereaved by suicide, be aware that these people may be quite vulnerable. People bereaved by suicide may be at risk of experiencing mental health issues and possibly taking their own lives. They may be particularly vulnerable in the first year following the death and on anniversaries after that time. Sometimes the media can seek to access the bereaved at court or inquest locations. In these cases, they may need particular support from grief counselling services to deal with the distress of these interviews.

Include information that promotes help-seeking behaviour.

- Vulnerable people may be distressed by reports of suicide and in some cases may be prompted to harm themselves. As such, it is important that helpline numbers are included with all reports about suicide.
- Where possible, provide media professionals with appropriate helpline numbers and information and suggest that this information is included in the report.







Preparing a list of contacts that you or your jurisdiction could use in stories will assist when deciding
which details to give to media professionals. This may be particularly useful when information is required
within a short deadline.

For most reports, a helpline such as Lifeline on 13 11 14 will be appropriate.

It is important, however, to provide support information relevant to the audience for each story.

- Aboriginal and Torres Strait Islander people may prefer to see a health worker at their local Aboriginal Medical Service. Contact details can be found on the VIBE website at www.vibe.com.au
- For Australians from culturally and linguistically diverse backgrounds it would be useful to include contact details for the relevant state transcultural mental health services as well as the national Telephone Interpreter Service (13 14 50). Information is available from Mental Health in Multicultural Australia on 1300 136 289 or at http://www.mhima.org.au
- For young Australians it would be more useful to provide the Kids Helpline 1800 55 1800 or websites such as http://www.reachout.com.au

Refer journalists to Mindframe

- Are journalists covering the inquest or conducting an interview aware of the *Mindframe* guidelines for reporting suicide?
- Is there an opportunity to recommend they access the site for appropriate helpline numbers and contact details for mental health and suicide prevention organisations that may be able to assist with the story? It is recommended that the *Mindframe* website be added to the bottom of all correspondence with media professionals that may involve suicide.

