SANE AUSTRALIA



Mindframe & StigmaWatch joint statement

22 March 2019

The risks of linking extremist behaviour and mental illness

Please cascade to all appropriate staff

Mindframe and SANE StigmaWatch would like to remind media of the impact of linking mental ill-health with extremist behaviour.

SANE StigmaWatch, along with *Mindframe* promote the responsible and safe reporting of mental ill-health and suicide. Mental ill-health and suicide are important issues for media to cover and when these are reported responsibly, the media can help reduce stigma. However, research shows when mental ill-health and suicide are reported irresponsibly, media stories can do harm.

National and international media stories speculating on a link between mental ill-health and extremist behaviour, can contribute to stigma. StigmaWatch commonly receives feedback from people living with mental illness that such reporting affects their interaction with community members as well as public perceptions.

Dr Michelle Blanchard, Acting CEO of SANE Australia would like to remind Australian media of the dangers of stigmatising language.

"Linking extremist or terrorist behaviour to mental illness has a very real impact on people affected by mental illness who report feeling stigmatised,"

"People with a mental illness are an important part of our community and it's important that we ensure that they are not further isolated or discriminated against," said Michelle.

Everymind Acting Director, Marc Bryant encourages the Australian media to remember that *Mindframe* has a <u>library of resources</u> to refer to when developing news media to avoid perpetuating stigma.

"Many violent people have no history of mental illness and most people with a mental illness have no history of violence,"

"Certain language and stereotypes can lead to negative community attitudes and stigmatise people living with a mental illness, as well as present inaccuracies about mental illness or mental health care," said Marc.

Journalist and editors are strongly encouraged to refrain from linking the motivations of perpetrators of violent acts, to mental illness until motives have been established. Research shows us that less than 4% of criminal behaviour has any link to mental illness.



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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. People with a mental illness are more likely to be the victims of violence and crime than the perpetrators.	
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.	
Mental illnesses are all the same.	There are many types of mental illnesses and many kinds of symptoms or effects.	
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.	
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. Cultural background may affect how people experience mental illness and how they understand and interpret the symptoms of mental illness.	
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.	

EVERYMIND	Mindframe	mindframe.org.au
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Reminder: safe use of language

Language used in media reports can have an impact on interview participants directly, and indirectly on vulnerable audiences. This is specifically in relation to reporting on mental health issues, suicide and self-harm.

It is also important to remember that suicide, self-harm and mental ill-health are complex issues and certain ways of reporting these issues can adversely impact on vulnerable members of the community. To help provide context, refer to the following quick tips for safely reporting on <u>suicide</u>, mental ill-health and self-harm.

Taking care of your audience

It is important going forward that stories that are of public interest which are receiving ongoing coverage, continue to be reported responsibly. *Mindframe* urges caution that details of graphic and distressing information can increase the risk to those who are vulnerable or distressed.

Help advocate for appropriate help-seeking information in all media stories. Individuals are more likely to seek help and support when appropriate services are included in stories. *Mindframe* recommends media add help-seeking information to stories (online, print and broadcast) which can provide somewhere for people who may be adversely impacted by the coverage, to seek professional support.



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Tips to help support your staff

Mindframe acknowledges the potential impact on journalists and news room staff following exposure to distressing content when reporting on recent local and international incidents. We encourage Editors, Chief of Staff and Heads of News to look out for staff welfare, in particular cadets or new recruits. To support media professionals Mindframe, in consultation with the DART Centre Asia Pacific, has developed journalism self-care resources which include helpful tips for journalists as well as advice for editors and line managers. These resources can be found here.

National 24/7 Services

Lifeline: 13 11 14 www.lifeline.org.au

Suicide Call Back Service: 1300 659 467 www.suicidecallbackservice.org.au

MensLine Australia: 1300 78 99 79 www.mensline.org.au Beyond Blue: 1300 22 4636 www.beyondblue.org.au



Adult

Lifeline: 13 11 14 lifeline.org.au

Suicide Call Back Service: 1300 659 467

suicidecallbackservice.org.au Beyond Blue: 1300 24 636 beyondblue.org.au

MensLine Australia: 1300 789 978

Youth

Kids Helpline: 1800 551 800

headspace: 1800 650 890

ReachOut: au.reachout.com

Other resources

Head to Health: mental health portal

headtohealth.gov.au

Life in Mind: suicide prevention portal

SANE: online forums saneforums.org

healthinfonet.ecu.edu.au - Aboriginal and Torres Strait Islander 1800 184 527 qlife.org.au - Lesbian, gay, bisexual, trans, and/or intersex

mhima.org.au - Culturally and linguistically diverse



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Contact information

Please contact *Mindframe* for further information or advice:

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