



How to develop a suicide-specific communications strategy

This guide is designed to assist in the development of a suicide-specific communication response and media protocol strategy. It can be used by Primary Health Networks (PHN) to create their own protocols or make updates to current communication protocols. Communication and media protocols are covered in the [Mindframe Plus](#) workshop. This suite of templates has been created to supplement the workshop and provide some examples of things to consider when communicating about suicide.

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1. Purpose and aim

It is important to define the aim of your communications strategy. In general, *Mindframe* recommends the broad aim of any response be: *PHNs collaborate with internal and external stakeholders to ensure communication is safe, timely and effective in preventing harm to the community*. Each incident may have more specific objectives that will inform the type and content of PHN messaging and responses.

2. Roles

- Define the role of the PHN and stakeholders in critical incident responses. This could also be in the form of a local response group. One way of doing this is defining key stakeholders that are consulted on each type of response and having additional stakeholders that can be called upon on depending on the incident. This is outlined in the table below.
- Include contingency plans for leave management in roles and approval processes. This includes decisions about whether an approval step can be skipped/moved, or if a substitute approver should be designated. It is important to plan for contingencies as postvention responses often require timely action to support the community.
- Ensure all new staff attend a *Mindframe training* session so that they have a strong foundational understanding about how to safely communicate about suicide.

Key stakeholders

Organisation	Contact details	Role
Primary Health Network		Co-ordinate suicide prevention activities
Police		
Local Health District		
Aboriginal and Torres Strait Islander elders, community spokespeople or relevant groups		

Supplementary stakeholders

Organisation	Contact details	Role
Department of Education representative		Co-ordinate suicide prevention activities
Everymind (<i>Mindframe</i>)	mindframe@health.nsw.gov.au PH 02 4924 6900	Public communication support
Headspace		
Standby		
Relevant community groups		

3. Prevention planning and communication

Most communication protocols about suicide will focus on what to do in a postvention response, but we also encourage PHNs to incorporate prevention focused planning into their communications protocol.

Ways to do this include:

- Preparing communications and social media posts for awareness days throughout the year.
- Proactively engaging with other organisations in the sector to repost prevention and intervention-focused messaging for the community.
- Encouraging your stakeholders to share what support is available in the community. This can include formal supports such as mental health services or the local Safe Haven. It can also include informal supports such as community groups that have a focus on supporting each other.
- Proactively sharing lived experience stories can help to reduce stigma and increase help-seeking in the community.

4. Postvention response protocol for communicating about suicide.

4.1 Making choices about your communications strategy

Whether or not a public response is required after someone has died by suicide in the community will depend on several factors including whether there is a risk of further suicidal behaviour. If the PHN decides to put out a response, it is important to communicate safely. We encourage all PHNs to refer to the *Mindframe* guidelines when drafting a response. All responses and messaging to the community should consider whether the timing is appropriate, and include relevant help-seeking information.

The table on the following page is an example of a checklist to help PHN staff determine what kind of response is required and which stakeholders to engage. For example, if there is a young person who dies by suicide, supplementary stakeholders such as Headspace or the Department of Education are likely to be involved. If the death is being publicly reported on by media, including social media, *Mindframe* should be involved to help prevent and address any problematic content.

Actions taken may depend on which points, and how many, are marked as 'Yes'. If a certain criteria is met, the PHN will enact the response protocol. For example, if there is a risk of further suicidal behaviour and problematic communication about the death, the PHN can instigate a meeting with stakeholders to discuss next steps. We have listed a few actions in the template section at the bottom of this document, however, PHNs can include additional actions relevant to their circumstances, internal processes and specific community and sector stakeholder needs.

Example checklist for determining required responses in a postvention communication strategy

1	Potential for community distress?	Yes	No	Notes:	Action:
2	Risk of further suicidal behaviour (imitative behaviour)?	Yes	No	Notes:	Action:
3	Potential for media interest? *If yes, also refer to media protocol.	Yes	No	Notes:	Action: Refer to media protocol and engage <i>Mindframe</i> to support media monitoring
4	Has the death been confirmed as death by suicide?	Yes	No	Notes:	Action:
5	Is the community or family speaking publicly about the death?	Yes	No	Notes:	Action:
6	Has there been identified problematic content on social media?	Yes	No	Notes:	Action: Alert stakeholders and other organisations in the sector to monitor their social media and mitigate any risk.
7	Will there be schools impacted by the death?	Yes	No	Notes:	Action: Engage local or regional department of education representative. Consider sharing Orygen #chatsafe resources to support young people, teachers and parents.
8	Has the death occurred in a public location?	Yes	No	Notes:	Action: Alert <i>Mindframe</i> to the incident to monitor the media.

4.2 Communication channels

Stakeholders and Primary Health Networks should consider what the most effective communication channels may be for internal and external messaging. For example, if the person who has died is from a specific cultural community, it may be more appropriate to involve elders or cultural or religious leaders in the delivery of these messages to ensure the community impacted feels supported and is hearing key messages from a trusted source.

Sample communications channels

Communication channel	Demographic
External stakeholder mailing list	Stakeholders, suicide prevention networks, community organisations, service providers
PHN internal mailing list	PHN staff
PHN Facebook	Community, working professionals, older people
PHN Instagram/TikTok/Snapchat	Younger people
Local newspaper	Community, older people
Other organisations' social media and/or newsletters	Culturally and linguistically diverse communities, Aboriginal and Torres Strait Islander people

5. Key messages

Developing a bank of key messages or standard responses can be helpful to support staff and stakeholders when communicating publicly, either directly to the community, via the media or through social media channels. It is important to consider who will develop and deliver key messages to ensure that the community receives clear and supportive information. Undertaking the *Mindframe Plus* training includes workshopping the development and distribution of key messages tailored specifically to your PHN. [Mindframe also has resources](#) designed to assist the safe communication of key messages via social media channels and the monitoring of social media posts.

Some examples of key points in messaging are:

- Prevention communication on World Suicide Prevention Day
- Sharing stories of lived experience that support hope and recovery
- Sharing information about risk factors and protective factors
- Reiterating that suicide is complex and not caused by one factor
- Sharing local support services on your social media channels
- Signing [The Charter](#) to show the PHN's commitment to being a leader in the suicide prevention space.

Intervention response after there has been a natural disaster in the community

- Focus on what the community is doing to get through and supporting each other in public messaging
- Link to both formal and informal mental health and financial support services including local organisations
- Alert other organisations to the possibility of increased distress in the community so they can prepare their supports

Postvention response after someone has died by suicide

- Acknowledge grief, loss and distress
- Focus on formal and informal support services with help-seeking information
- Planning for messaging in the weeks/months following the death to continue to support the community.

6. Evaluation

Evaluation is important to improve internal and external processes in the PHN's suicide prevention and postvention activities.

Things to consider in an evaluation plan include:

- Integrating a post-response debrief (internal or external) to find out how staff and stakeholders found the process. Are there ways processes could be streamlined? Were staff well supported and did they have the tools required to perform their duties?
- What was the reach and feedback from your communication? Are there additional resources that could be included? How did people respond to the spokesperson chosen to deliver your messaging?
- Are there emerging communication channels that the PHN should engage in?
- In prevention communication, how often have lived experience stories been amplified?

7. Templates

The following templates can be used as a starting point for you to identify key stakeholders, compile relevant contact details, assess the factors that will need to be considered, and map out your strategy. This includes identifying which channels you will use to share your messages with the most important audiences.

These templates are included in the following pages:

- Postvention communications strategy: Stakeholder lists
- Postvention communications strategy: Response checklist
- Postvention communications strategy: Communications procedures and details

Postvention communications strategy: Stakeholder lists

Key Stakeholders		
Organisation	Contact details	Role
[PHN or suicide prevention coordinator]		Coordinate suicide prevention activities
Supplementary stakeholders		
Organisation	Contact details	Role
Everymind (Mindframe)	E: mindframe@health.nsw.gov.au P: (02) 4924 6900	Public communication support

Postvention communications strategy: Response checklist

Checklist for determining required response in postvention communication strategy

	Issue to consider	Yes	No	Notes	Action
1	Potential for community distress	Yes	No		
2	Risk of further suicidal behaviour (imitative behaviour)	Yes	No		
3	Potential for media interest. <i>*If yes, also refer to media protocol.</i>	Yes	No		
4	Has the death been confirmed as death by suicide	Yes	No		
5	Is the community or family speaking publicly about the death?	Yes	No		
6	Has there been identified problematic content on social media?	Yes	No		
7	Will there be schools impacted by the death?	Yes	No		
8	Has the death occurred in a public location?	Yes	No		
9		Yes	No		
10		Yes	No		
11		Yes	No		
12		Yes	No		

Postvention communications strategy: Communications procedures and details

Communication channels			
Communication channel List each channel to be used	Demographic Who is the target audience?	Approvals Who needs to sign off?	Spokespeople Who has been approved?