

Frequently asked questions for suicide prevention coordinators

1. What communication should we put out when someone dies by suicide in our community?

We recommend acknowledging the grief and loss that your community is experiencing, and providing information on what support is available. However, it is important to tailor your communication to the needs of your community. This includes considering:

- Confirmed details
- Family's wishes
- Likely media interest
- Community conversation or memorialisation
- Cultural considerations
- Ensuring the timing of your communication is appropriate.

[Mindframe Plus training](#) can help equip suicide prevention coordinators, Primary Health Network (PHN) staff and the local sector with the tools to make decisions about how to communicate publicly when someone has died by suicide, including social media posts or speaking to the media.

2. Do you have additional resources for when there is community distress?

Mindframe partnered with the Black Dog Institute to develop several resources for PHNs to use to guide public communications. [These resources](#) cover issues or events that may result in people experiencing distress such as natural disasters, financial hardship, housing insecurity or homelessness, or high rates of alcohol and other drug (AOD) use.

3. Who would benefit most from Mindframe Plus workshop?

PHNs, PHN-commissioned services and stakeholders would all benefit from [Mindframe Plus training](#). Stakeholders can include other organisations working in the mental health and suicide prevention sector, local emergency services and other community organisations. The structure of each *Mindframe Plus* workshop is guided by the needs identified by PHNs. The workshops are an opportunity to brainstorm communication strategies across multiple sectors and organisations. The inclusion of diverse perspectives ensures a comprehensive understanding of the challenges and opportunities to support the community through an integrated communication response.

4. Why do I need training?

There is a strong evidence base demonstrating that problematic public communication about suicide, particularly through the media, can result in further suicidal behaviour. It is important that community members feel informed, supported and can access help when they need it the most.

[Mindframe Plus training](#) supports a regional suicide prevention approach but also helps to empower individuals to communicate publicly in a positive way about these issues to support their community. It also seeks to connect regional media with trusted sources of information or interviews.

We recommend all staff and key stakeholders within the PHN undertake training to support the delivery of safe and sensitive messaging.

5. What other best practice communication resources are there?

Our Words Matter: Guidelines for language use. A practical, research-informed, and [user-friendly resource](#) suite designed for media, researchers, service providers and other communicators.

Images Matter: Mindframe guidelines for image use. This [suite of resources](#) seeks to inform, support and empower people to select and use images in ways that minimise stigma and harm and maximise diversity of representation.

National Communications Charter (The Charter). A uniting document supporting coordinated and consistent messaging around mental health and suicide prevention. By signing [The Charter](#), individuals and organisations make a formal commitment to implementing its eight principles.

Conversations Matter. A practical [online resource](#) supporting safe and effective community discussions about suicide, including one-on-one discussions.

6. Do you have resources we can share when a young person dies by suicide?

#chatsafe guidelines. Orygen's [#chatsafe resources](#) include advice for young people about how to talk about self-harm and suicide safely on social media and other digital platforms. These resources are evidence based and created with young people, for young people.

Conversations matter. A set of practical [online resources](#) to support safe and effective community discussions about suicide such as how to talk to someone who has been bereaved by suicide or telling a child about a suicide.

7. What do I do if media contacts the PHN or one of our stakeholders about a death or issue relating to suicide?

Check if your communications or media department has an existing protocol for media enquiries and if it has advice related specifically to suicide.

If unsure, we encourage you to [reach out to Mindframe](#) for free, real-time support in helping review responses or engaging with media. Our staff can also work with journalists directly.

[Mindframe Plus training](#) can assist PHNs in the development of suicide-specific media protocols.

The [Mindframe guidelines](#) provide information on what may be helpful or harmful ways to communicate about suicide in the media. This includes guidance on specific language, what details should not be shared publically, and how to encourage hope and support.

8. How does media training work?

After the [Mindframe Plus](#) workshop, we offer one-hour [Mindframe training sessions](#) to your local media organisations to support a regional response to suicide prevention. We recommend that we train media organisations individually as they are more likely to feel comfortable to ask questions and discuss issues if it is just fellow colleagues in the session.

The PHN can provide a list of local media they would like to have trained in the [Mindframe guidelines](#). This may be media organisations that have produced problematic content previously, that have a large influence within the community, or that have staff who may already champion suicide prevention.

In these sessions, we can connect journalists with key spokespeople identified by the PHN as trusted sources.