

Media alert

18 February 2021

Please cascade to all appropriate staff

Reminder on safe reporting of coronial inquest into Perinovic family deaths

The *Mindframe* team reminds media professionals of the importance of avoiding the inclusion of explicit information that may be harmful to vulnerable audiences. This includes detailed descriptions of the method of suicide, as it may lead to imitation and an increased risk of distress to vulnerable community members.

The traumatic nature of an event such as this can have a profound impact on whole communities, which may last for some time. Media is encouraged to support the grief and loss of the family, friends and communities affected by these deaths. It is recommended in this instance that family violence support services be included along with services to support those with a lived experience of mental ill-health or suicide.

More information on reporting guidelines can be found on the [Mindframe](#) website.

The *Mindframe* project team

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National 24/7 crisis services

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

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

Kids Helpline: 1800 551 800 www.kidshelpline.com.au

Beyond Blue: 1300 22 4636 www.beyondblue.org.au

Mensline Australia: 1300 789 978 mensline.org.au

1800Respect: 1800 737 732

Other key national resources

Head to Health: Mental health portal www.headtohealth.gov.au

Life in Mind: Suicide prevention portal www.lifeinmind.org.au

Relationships Australia: 1300 364 277 www.relationships.org.au

Blue Knot Foundation: 1300 657 380 www.blueknot.org.au

If you find any problematic media coverage, please refer directly on to [SANE StigmaWatch](http://www.sane.org/changing-attitudes/report-a-media-item-to-stigmawatch) for urgent follow up:
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Minimise details about method and location

Issue	Options to consider
Reporting explicit detail about method has been linked to increases in use of that method and overall suicide rates.	<ul style="list-style-type: none"> ✓ If it is important to mention method, discuss in general terms e.g. 'mix of drugs' instead of detailing the type and quantity.
Reporting uncommon or new methods of suicide can lead to imitation as well as a lasting impact on rates.	<ul style="list-style-type: none"> ✓ Remove specific details about new or unusual methods of suicide and references to ways further information can be found e.g. online.
Describing locations of suicide may promote these to vulnerable people and increase frequency of attempts at these sites.	<ul style="list-style-type: none"> ✓ If referring to a location, describe this in general terms only e.g. use 'at a nearby park' instead of detailing the exact location.
Images or footage depicting method or location of a suicide can lead to imitation by vulnerable people.	<ul style="list-style-type: none"> ✓ Avoid using detailed or dramatic photographs or footage, e.g. images of people standing on ledges or of implements used in a suicide attempt.

Media self-care

Reporting suicide and mental illness can also impact to the welfare of journalists. To support media professionals *Mindframe*, in consultation with the [DART Centre Asia Pacific](#), has developed journalism self-care resources for media professionals reporting suicide and mental illness. These resources can be found [here](#).

Support services

24/7 support

Lifeline: 13 11 14
lifeline.org.au
Suicide Call Back Service: 1300 659 467
suicidecallbackservice.org.au
Beyond Blue: 1300 224 636
beyondblue.org.au/forums
MensLine Australia: 1300 789 978
mensline.org.au
Kids Helpline: 1800 551 800
kidshelpline.com.au

1800RESPECT: 1800 737 732

Other resources

Relationships Australia: 1300 364 277 relationships.org.au
Head to Health: mental health portal - headtohealth.gov.au
Life in Mind: suicide prevention portal - lifeinmind.org.au
SANE: online forums - sane.org

Aboriginal and Torres Strait Islander: healthinonet.ecu.edu.au
Lesbian, gay, bisexual, trans, and/or intersex: 1800 184 527 qlife.org.au
Culturally and linguistically diverse: embracementalhealth.org.au