Mindframe: Quick reference guide for safe and sensitive communication at conferences and events

Use this document with the *Mindframe* guidelines to safely and sensitively communicate about suicide and mental health concerns at conferences and in conference material.

This quick reference guide has been created to assist conference organisers, speakers, and participants in safely and sensitively communicating about suicide and mental health concerns during conferences and in conference materials.

By following this guidance, we can create an environment that promotes support and respect, and encourages people to seek help, while preventing harm.

When planning conference sessions, developing content, and engaging in discussions related to suicide and mental health concerns, refer to this guide for advice on choosing language and images that present experiences, data, and research in an inclusive, safe, and sensitive way.

For more detail and context, access the full suite of *Mindframe* guidelines and other supporting resources here.

When communicating about suicide and mental health concerns, *Mindframe* recommends to consider:

Language use

- Avoid language that is judgmental or dismissive, and instead use language that promotes understanding and empathy.

- To improve inclusivity, translate academic, coding or data related terms or acronyms as these may not be understandable to those reading or listening to your presentation.

- Avoid detailed descriptions of suicide methods or specific locations where possible. If pertinent to include, such as means restriction research, try to avoid explicit details and focus on broader findings and implications. Consider providing a content warning that method or location will be covered in your presentation.

- Understand that some people may prefer different terms or labels to describe their experiences. Consider their preferences when presenting, unless it is harmful or stigmatising

- Be aware that people with a lived and living experience may not agree with the use of diagnostic language as they may not feel that it reflects their unique and personal experience.

- Reframe terms historically used in health services (e.g. 'treatment resistant' or 'non-compliant') as they are potentially disempowering or may imply judgements about the person accessing the service.

- Keep updating the language you use in line with current evidence and preferences. Visit the *Our words matter: glossary of terms* for the most updated list of definitions and preferred terms.

- Refer to the *Our words matter* guidelines.

- Encourage help-seeking and help-offering by providing the details of at least two 24/7 appropriate sources of support.

Image choice

- Consider the images you use as they can be helpful or harmful depending on the context. Specific guidance is available on images relating to mental health concerns, suicide and self-harm, alcohol and other drugs (AOD), and body image and disordered eating.

- Avoid images that include suicide methods or public locations. If important to the presentation, preference images that focus on prevention. Avoid images that include actual or dramatized suicidal behaviour.

- Use images that model hope or support. Including images that focus on offering or seeking help can reduce stigma, offer hope and increase protective factors.

- Use a diverse range of images.

- Use images of people who have personal or lived experience only with their knowledge and permission.

- Consider practical elements such as accessibility or style. Images, artwork and symbols should be accessible and clear to limit any miscommunication.

- Ensure your images align with current evidence and preferences. Visit the Mindframe online image collection where you can access high-resolution, royalty-free images to use in public communications about mental ill-health, suicide and AOD.

Sharing lived experience

- Share experiences that increase understanding of risk factors and warning signs of suicide and mental health concerns, and that promote ways people can find support can help others.

- Avoid detailed descriptions of methods of self-harm or suicidal behaviour as this can be harmful to your audience.

- Sharing your story may bring up uncomfortable or distressing feelings. This can occur immediately or in the following days, weeks or months. Prior to the conference, prioritise your wellbeing by preparing self-care activities, identifying your support system and make a safety plan. For further support consider engaging organisation such as Roses in the Ocean or SANE Australia.