

Standards Relating to Suicide

GENERAL PRINCIPLES

The Statements of Principles which the Council applies to all types of reporting include the following principles which are especially relevant in this context.

1. News and comment should be presented honestly and fairly, and with respect for the privacy and sensibilities of individuals. However, the right to privacy is not to be interpreted as preventing publication of matters of public record or obvious or significant public interest. Rumour and unconfirmed reports should be identified as such. (General Principle 4)
2. Publications have a wide discretion in publishing material, but they should balance the public interest with the sensibilities of their readers, particularly when the material, such as photographs, could reasonably be expected to cause offence. (General Principle 7)
3. In gathering news, journalists should seek personal information only in the public interest. In doing so, journalists should not unduly intrude on the privacy of individuals and should show respect for the dignity and sensitivity of people encountered in the course of gathering news. Intrusions may be more readily justifiable if related to a person's public duties or activities. (Privacy Principle 1)
4. Members of the public caught up in newsworthy events should not be exploited. A victim or bereaved person has the right to decline or discontinue an interview or photographic session at any time. (Privacy Principle 7)

SPECIFIC STANDARDS

General reporting and discussion

1. General reporting and comment on issues relating to suicide can be of substantial public benefit. For example, it may help to improve public understanding of causes and warning signs, have a deterrent effect on people contemplating suicide, bring comfort to affected relatives or friends, or promote further public or private action to prevent suicide.
2. Subject to careful compliance with the following standards, the Council does not wish to discourage material of this nature. Extra caution is required when the material is likely to be read or seen by people who may be especially vulnerable (eg, because of their age or mental health) and relates to suicides by their peers or by celebrities.

Whether to report an individual instance

3. In deciding whether to report an individual instance of suicide, consideration should be given to whether at least one of the following criteria is satisfied:
 - (a) reporting the death as suicide is clearly in the public interest (see note 2); or
 - (b) clear and informed consent has been provided by appropriate relatives or close friends (see note 3); or
 - (c) no appropriate authority (such as the police, a school principal or public health authority) has requested that the report be withheld or delayed to avoid a high risk of inducing further suicides.
4. In deciding whether also to report the identity of the person who has died by suicide, account should be taken of whether at least one of the following criteria is satisfied:
 - (a) identification is clearly in the public interest (see note 2); or
 - (b) clear and informed consent has been provided by appropriate relatives or close friends (see note 3).

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Reporting the method and location

5. The method and location of a suicide should not be described in detail (eg, a particular drug or cliff) unless the public interest in doing so clearly outweighs the risk, if any, of causing further suicides. This applies especially to methods or locations which may not be well known by people contemplating suicide.

Reporting with responsibility and balance

6. Reports should not sensationalise, glamorise or trivialise suicides. They should not inappropriately stigmatise suicides or people involved in them but this does not preclude responsible description or discussion of the impacts, even if they are severely adverse, on people, organisations or communities. Where appropriate, underlying causes such as mental illness should be mentioned.

Reporting with sensitivity and moderation

7. Reports should not be given undue prominence, especially by unnecessarily explicit headlines or images. Great care should be taken to avoid causing unnecessary harm or hurt to people who have attempted suicide or to relatives and other people who have been affected by a suicide or attempted suicide. This requires special sensitivity and moderation in both gathering and reporting news (see note 4).

Sources of assistance

8. Published material relating to suicide should be accompanied by information about appropriate 24-hour crisis support services or other sources of assistance with these problems (see note 6). The degree of specificity may vary according to the nature of the report and the surrounding circumstances.

NOTES

1. References above to suicide apply also to attempted suicide. References to reports include all types of report (including reports of court proceedings or inquests) and include headlines, text, images and sounds.
2. A matter is in the public interest if it is of substantial and widespread significance, not merely something in which many people may be interested. In the current context, it may often be helpful for the assessment to be made at editorial level after seeking advice from an appropriate mental health expert. It may also be necessary to consult public officials or other people with special knowledge of the likely impacts of publication in the particular case.
3. A person can give informed consent to a report if they are reasonably aware of the circumstances to which it relates and the likely consequences for them of it being published. This may be difficult or impossible to obtain in the immediate aftermath of a suicide.
4. Often it will be important to request and conduct interviews with closely affected people by going through an intermediary such as a relative, professional counsellor or appropriate support organisation.
5. It may be preferable to use words such as “died by suicide” or “took his life” rather than a term such as “committed suicide” which can imply commission of a crime.
6. Mindframe publishes a range of resources for media professionals on the reporting of suicide. The SANE Media Centre provides media with guidance about reporting mental illness and suicide. When deciding what sources of assistance should be mentioned in a report, advice could also be sought directly from organisations providing services to people with problems relating to suicide or mental illness, such as Suicide Call Back Service, SANE Australia, Lifeline, or beyondblue. Services providing assistance to young people include Kids Helpline, ReachOut.com, and headspace.

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