

Words and images matter

Developing guidelines for language and image use in communication about mental health and wellbeing, mental health concerns, self-harm, suicide, eating disorders and alcohol and other drugs.

Authors: Dr Elizabeth Paton^{1,2}, Dr Jennifer Peprah¹, Emma Pryse Jones¹, Melinda Benson¹

✉ elizabeth.paton@health.nsw.gov.au

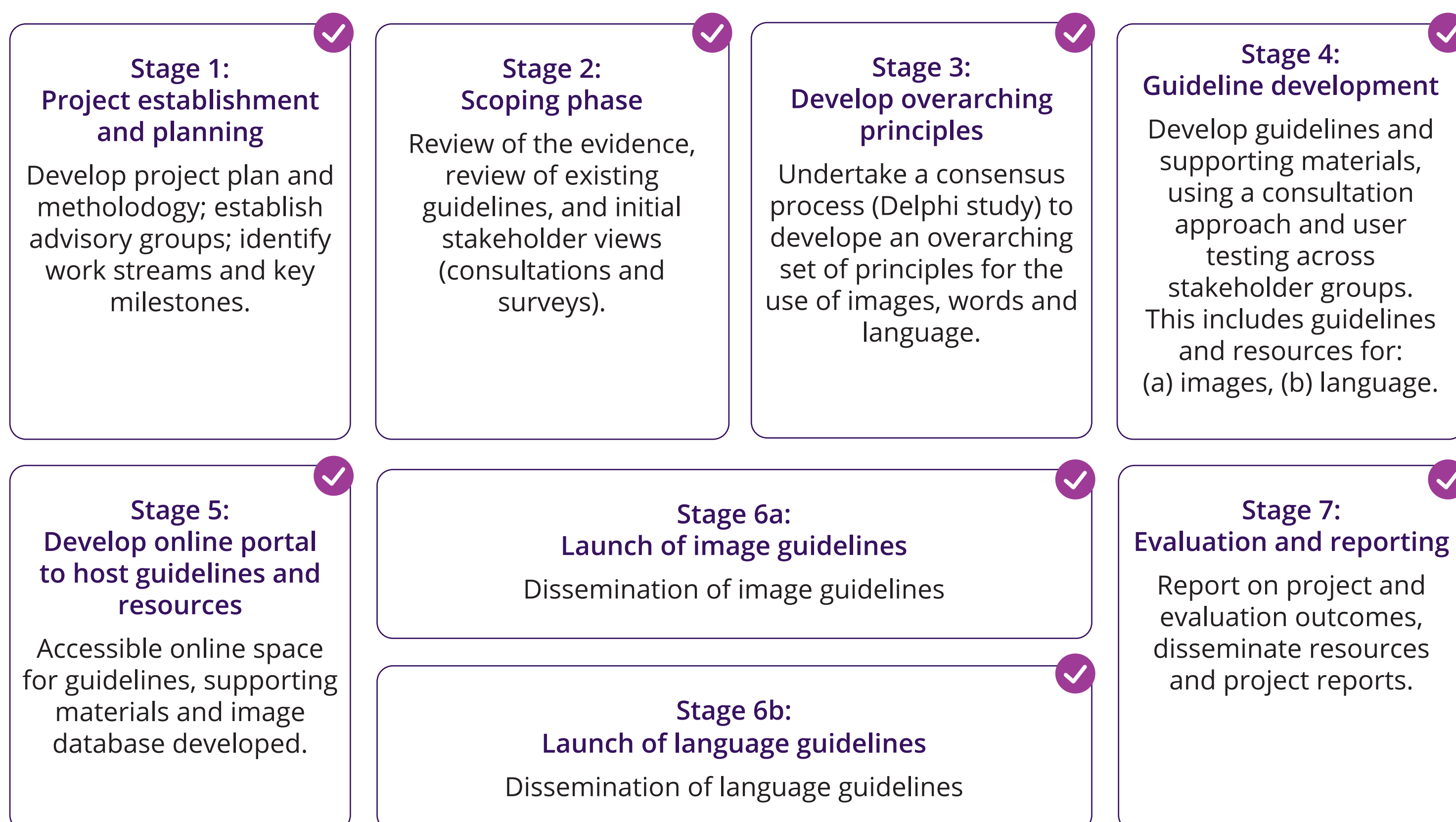
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Public communication about suicide and mental health concerns can be helpful or harmful. It can be stigmatising or provide hope and connection. It can influence help seeking and help offering behaviours. It can save lives.

The *Our words matter* and *Images matter* guidelines assist safe, non-stigmatising use of language and images relating to mental health and wellbeing, mental illness, suicide and self-harm, eating disorders and the use of alcohol and other drugs. The guidelines were designed to inform, support and empower people, communities and organisations to make informed choices about the language and images they use.

To develop these guidelines, Everymind applied a research framework to achieve consensus and to support effective dissemination and uptake. People with lived and living experience were engaged at every stage of the project in a co-design approach, including at an initial roundtable discussion, to determine project need and viability, and to assist in setting foundational directions.

Stream 1: Images



Stream 2: Words and language

Research activity:

1. Scoping

Scoping activity included: a. Systematic review of existing literature on image use; b. Scoping review of existing guidelines and policies used by media, sector organisations and government; c. Scoping review of language used in government policies and strategies related to mental health and suicide prevention, and language used on websites for organisations in the mental health and suicide prevention sector; d. Survey of attitudes on image use and stigma.

2. Focus groups

A total of 49 participants took part across 10 sessions, to identify key themes around image use from the experiences of media, sector and community, including people with lived and living experience and priority populations.

3. Delphi consensus survey

Completed over two rounds of consensus surveys with three expert panels (media and professional communicators, sector professionals and people with lived experience). Panellists provided Likert scale scoring on the level of importance of specific statements for inclusion in guidelines. Consensus was found on 70 of 99 statement (36 of 43 language-related statements; 34 of 56 image-related statements).


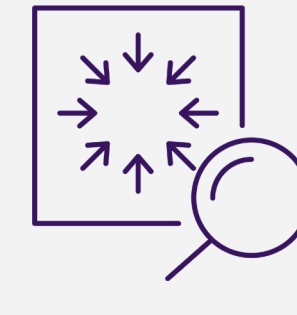
4. Additional large scale research analysis.

Everymind commissioned language specific analysis of research conducted by the University of Melbourne and the University of New England to provide further nuance and clarity to the language guidelines.

Key image outcomes:



Guidelines:

-  Use a diverse range of images
-  Use images of people who have personal or lived experience only with their knowledge and permission
-  Use images that model hope and support
-  Consider the images you use as they can be helpful or harmful depending on the context
-  Consider practical elements such as accessibility or style

Example guidance:

Images should avoid showing methods of suicide in any way, including images of locations where a suicide has occurred or images that infer suicide method.



Scan to access image guidelines





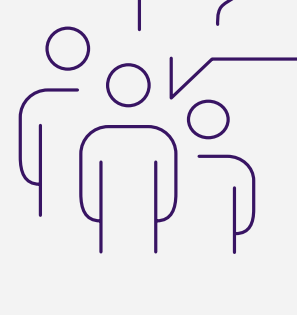
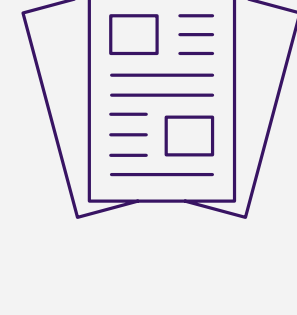
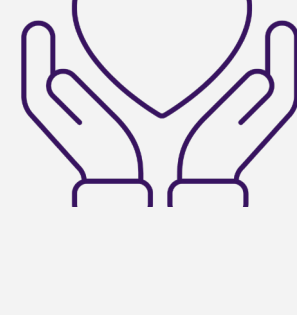
Key language outcomes:

Consider the language you use when referring to mental health concerns

Choosing language that reflects and empowers individual experiences, is not sensationalised, is understandable and is adapted to individual preferences or audience is recommended.

Preferred	Problematic
• A person 'living with' or 'has a diagnosis of' a mental illness	• Mental patient; lunatic; psycho; schizo
• A person being 'supported for', 'treated for' or 'someone experiencing mental health concerns'	• Victim, suffering, afflicted
• Has a 'diagnosis of' schizophrenia; being 'treated for' anorexia	• A schizophrenic; an anorexic
• Their behaviour was 'unusual' or 'erratic'	• Crazy, deranged, mad, psychotic
• 'Anti-depressant', 'psychiatric', 'psychologist', 'support services'	• Happy pills, drink, nuthouse
• Discharged from hospital	• Released from hospital
• Psychiatric or medical terms used within the correct context	• Psychotic dog; schizophrenic economy; bipolar weather

Guidelines:

-  Use language that empowers and reflects people's lived and living experiences
-  Adapt language to suit preferences or audience
-  Use language that is understandable
-  Avoid language that is sensationalised, including in headlines and titles
-  Consider the language you use as it can be helpful or harmful depending on the context.

Example guidance:

- Avoid using language that implies mental health services are similar to prisons (e.g. 'discharged' rather than 'released' from hospitals).
- Ask a person what words they would like used to describe their experience.



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