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.

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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

Stage 1: **Project establishment** and planning

Develop project plan and metholodogy; establish advisory groups; identify work streams and key milestones.

Stage 2: Scoping phase

Review of the evidence, review of existing guidelines, and initial stakeholder views (consultations and surveys).

Stage 3: **Develop overarching** principles

Undertake a consensus process (Delphi study) to develope an overarching set of principles for the use of images, words and language.

This includes guidelines and resources for: (a) images, (b) language.

Stage 5: Develop online portal to host guidelines and resources

Accessible online space for guidelines, supporting materials and image database developed.

Stage 6a: Launch of image guidelines Dissemination of image guidelines

Stage 6b: Launch of language guidelines Dissemination of language guidelines

Stage 4: Guideline development

Develop guidelines and supporting materials, using a consultation approach and user testing across stakeholder groups.

Stage 7: **Evaluation and reporting**

Report on project and evaluation outcomes, disseminate resources and project reports.

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:



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.

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



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

Preferred	Problematic
A person 'living with' or 'has a diagnosis of' a mental illness	Mental patient; nutter; 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'	
'Antidepressants', 'psychiatrists', 'psychologists', 'support services'	Happy pills; shrinks; nuthouse
Discharged from hospital	Released from hospital
Psychiatric or medical terms used within the correct context	Psychotic dog; schizophrenic economy; bipolar weather
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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.

Guidelines:



Use language that empowers and reflects people's lived and living experiences



Adapt language to suit preferences or audience



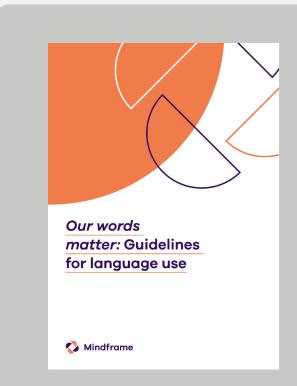
Use language that is understandable



Avoid language that is sensationalised, including in headlines and titles



Consider the langauge you use as it can be helpful or harmful depending on the context.



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