

Reporting suicide and mental illness for Indigenous Australians

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Abstract

This paper is based on a consultation conducted with Indigenous Australian communities in 2004 as part of the Media and Mental Health project, funded under the National Mindframe Initiative. Although there is a growing body of literature about the potential impact of reporting suicide and mental illness, little is known about the specific impact of reporting suicide and mental illness on Indigenous Australians. The aim of the consultation was to gather information from Aboriginal and Torres Strait Islander peoples across Australia to investigate their opinions and understandings about possible negative and positive effects of media coverage about suicide, mental health and mental illness. The information gathered from this small consultation is the first of its kind. It is hoped the information will better inform strategies undertaken by the National Mindframe Initiative, but it may also encourage dialogue between the media and the broad mental health sector about these issues. This article will summarise the key issues raised in the consultations, reflect on discussions with Indigenous media, comment on how these issues are currently reflected or overlooked in media codes of practice and journalism ethics and recommend some future directions in this area.

Introduction to the issues

The relationship between news media portrayal of suicide and actual suicidal behaviour continues to be debated. However, there are enough examples in the national and international literature to suggest the media need to be cautious when reporting suicide. Pirkis and Blood (2001) conducted a review of studies from a variety of media and found that recent research demonstrates a link between reporting and suicidal behaviour. National and international studies of newspaper and television coverage of suicide have found an increase in rates of

suicide following the coverage and a higher rate of suicide by particular methods as depicted in the reports. What appears to be particularly significant is the way in which suicide is reported, especially given that stories depicting suicide as a tragic waste and an avoidable loss focusing on the devastating impact of the act on others have been linked to a reduced rate of suicide (Pirkis & Blood, 2001).

Research on media coverage of mental health and illness has tended to focus on the nature and extent of media portrayal, with fewer studies investigating the impact of media coverage of mental illness on community attitudes. Francis, Pirkis, Dunt and Blood (2001) investigated literature on the portrayal of mental health and illness in the media. The investigation revealed that mental illness tends to be portrayed negatively in the mass media in both news and entertainment. In addition, studies of community attitudes found that many participants considered the media to have an impact on their attitudes toward mental health and illness (Granello, Pauley & Carmichael, 1999; Lopez, 1991). Those who cited the media as their most important source of information and beliefs tended to have more negative attitudes toward mental illness (Granello et al, 1999; Granello & Pauley, 2000; Philo, 1996). However, the presentation of positive images does not appear to balance negative media portrayals even though there is some evidence that mental health promotion campaigns impact positively on community attitudes (Francis et al, 2001; Thornton & Wahl, 1996).

On the basis of the current evidence about the impact of reporting suicide and mental illness, a number of countries have developed guidelines and resources for media reporting designed to encourage responsible and sensitive reporting among news journalists and other editorial staff. In Australia, resources for media professionals (Commonwealth of Australia, 2002) and curriculum resources for educating journalism students (Commonwealth of Australia, 2001) have been developed under the National Mindframe Initiative, funded by the Australian Government's Department of Health and Ageing. The broad aim of the initiative is to encourage responsible, accurate and sensitive reporting of suicide and portrayal of mental illness and mental health. Engaging with media professionals, media organisations, regulatory bodies, journalism educators and journalism students has been integral to the strategy. However, until recently, the projects had not actively engaged the Indigenous media sector, nor considered the specific concerns for Indigenous Australians (where Indigenous refers to both Aboriginal and Torres Strait Islander peoples).

National and international research has investigated the impact of reporting suicide and mental illness for general populations and specific age groups (particularly young people), but little is understood about the impact of reporting suicide and mental illness on Indigenous Australians. It is documented that suicide in some Indigenous communities is significantly beyond the national aver-

age (Hunter, Reser, Baird & Reser, 2001), with a suggestion that the actual rate of suicide may be two or three times higher than figures indicate (Elliot-Farrelly, 2004).

The Royal Commission into Aboriginal Deaths in Custody (1991a) was convened to investigate Indigenous deaths in police and prison custody. The commission emphasised the power of the media in informing or influencing public consciousness and opinion about Aboriginal and Torres Strait Islander issues. In response to this, peak media bodies developed codes of practice and editorial policies devoted to the portrayal and coverage of Indigenous Australians in the media. Neill (2002, p. 13) has argued that since the commission “the words ‘Aboriginal’ and ‘suicide’ are inextricably linked in the public mind with jail”. Queensland academic Ernest Hunter, who has conducted analysis and research of Indigenous suicide, was so wary of the propensity of media sensationalism in reporting Indigenous suicide that he and his colleagues were reluctant to release their studies. Hunter and fellow researchers (2001) relented because they believed non-discussion of Indigenous suicide was contributing to a lack of understanding of how serious the matter was and resulted in a lack of preparedness to tackle what they considered should be a national priority.

The conflict between raising the issue of suicide among Indigenous Australians and being mindful of the potential impact of that coverage is highlighted in relation to reports about Aboriginal deaths in custody and ongoing debates. There have been some theories proposed that a proportion of suicides in custody by Aboriginal people can be associated with media reporting of other such deaths and can occur in clusters (Royal Commission into Aboriginal Deaths in Custody, 1991b). Pirkis and Blood (2001) explored one example from *The Sydney Morning Herald* to highlight the complex nature of such reporting, illustrating the way in which a suicide story can become more about social and political responsibility than the death per se. Many would accept that these issues, related to appropriate duty of care and political responsibility, should be investigated by the media. However, the issues remain challenging for journalists to cover without guidance, given that certain details about particular cases, and indeed the broader issue of Aboriginal suicide, may be harmful to vulnerable people in the community.

In recent years a number of resources have been developed to assist journalists with the task of appropriately covering Indigenous issues. These include Bostock's (1997) *The greater perspective*, developed for SBS, the ABC's online *Cultural protocols for Indigenous reporting in the media*, and the *All-media guide to fair and cross-cultural reporting* (Stockwell & Scott, 2000), to name a few. However, these, and general codes of practice on reporting Indigenous issues, do not provide guidance on reporting suicide and mental illness for Indigenous Australians, except that editorial policies have generally adopted protocols regarding the naming and portraying of a deceased person.

Indigenous media organisations differ from mainstream Australian media in that they provide an opportunity to express a different view of Indigenous culture and issues affecting Indigenous Australians. As Forde (1999) argued, alternative media organisations see their role as one of filling the gaps and correcting misconceptions where mainstream media have handled issues inadequately. As such, the Indigenous media sector often attempts to cover issues ignored by other media and predominantly aims to report on positive aspects of Indigenous identity and culture. However, exclusive emphasis on positive aspects of Indigenous life will generally marginalise discussion about issues pertaining to suicide and mental illness.

The aim of this consultation was to gather views from Aboriginal and Torres Strait Islander peoples across Australia about possible negative and positive effects of media coverage about suicide, mental health and mental illness. Given that it is the first time these issues have been explored with Indigenous Australians, a focus group methodology was used to facilitate conversations between participants as a basis for identifying and clarifying key themes and concerns for this population group. It is hoped the themes uncovered in this initial investigation will facilitate national discussion of these issues within the health and media sectors. This article will summarise the key issues raised in the consultations, reflect on discussions with Indigenous media, comment on how these issues are currently reflected or overlooked in media codes of practice and journalism ethics and recommend some future directions in this area.

Consultation method

Following a pilot consultation in New South Wales, 12 consultations were held with Indigenous peoples across eight locations in Australia between June and December 2004. The sample consisted of 104 participants (female = 54, male = 50), aged between 16 and 88 years (mean = 38 years) who identified themselves as being of Aboriginal or Torres Strait Islander descent. Participants came from a range of Indigenous Australian nations and language groups, and education levels varied, with the most common education level attained being high school (n=38), followed by a TAFE course/certificate (n=29) or university degree (n=27).

Given that Indigenous communities throughout Australia have their own distinct history, politics, culture and linguistic experience and engage with different types of media, the consultations were held across eight locations throughout Australia. In addition, the consultations attempted to include opinions from Indigenous Australians living in both metropolitan and rural areas. However, given time and financial constraints, many of the focus group locations were a convenient sample, selected because a project team member was already travelling to particular areas. Five focus groups were conducted in Darwin and surrounding areas (Northern Territory), one in Melbourne

(Victoria), one in Adelaide (South Australia), two in Tamworth and two in Maitland (New South Wales). In the Torres Strait area, a local facilitator assisted four participants to complete a survey version of the focus group questions, which was sent to the project team for analysis.

Participants were recruited via a local Indigenous community organisation or an Indigenous contact known to the project team. Focus group participants were mostly grouped for similarity, with focus groups conducted for men, women, elders, health workers and university students, as well as mixed groups. Information sheets for participants (and promotional flyers) were developed and sent to the Indigenous contact in each location, who distributed these to potential participants. Each focus group was facilitated by a trained facilitator and used a proforma of questions around four key areas:

- ♦ What types of media do Indigenous Australians use and how often?
- ♦ How do these media report on suicide and mental health issues?
- ♦ What is the impact of positive and negative reporting of suicide, mental illness and mental health issues on Indigenous communities?
- ♦ What are some suggestions for improved or continued quality reporting of Indigenous suicide and mental health issues?

At the beginning of each focus group, participants were verbally briefed on the information sheet and the format of the focus group. Focus group discussions were tape recorded, with permission, for later analysis. They varied in length from 45 minutes to almost two hours. Participants were debriefed at the conclusion of each focus group by the facilitator, and counselling was made available to anyone who required follow-up. Light refreshments were provided and participants were paid a gratuity of \$20 for their involvement.

As previously mentioned, the procedure was varied in the Torres Strait to better accommodate language and cultural variations. The focus group proforma was redeveloped into a survey on advice from consultants in the Torres Strait. A local Indigenous facilitator was engaged to assist participants to complete the survey individually. These surveys were collected by the facilitator and sent to the project team for analysis.

Key issues raised in consultations

Discussions from the focus groups were transcribed and qualitative analysis was performed to identify key themes. Six key themes emerged from the focus groups, and a summary of the relevant discussions and opinions is outlined in the following discussion.

1. Indigenous Australians are influenced by both mainstream and Indigenous media and are regular consumers of both.

A range of mainstream and Indigenous media are accessed by Indigenous Australians. Participants cited using all modalities of media including newspapers, magazines, radio, television and electronic sources. Most participants mentioned daily use of local mainstream newspapers, radio and television news and use of Indigenous-specific newspapers and/or radio when available.

I read the local newspaper and watch the local news on two stations every day. Will read the *Koori Mail* and *Land Rights* when it comes in, but this is once a month.

Accessibility and content which covered issues relevant to their region or community were cited as the most important reasons for choosing particular media sources.

More likely to get Indigenous coverage on the ABC – for example, *Message Stick*, which covers what everyday average people are doing – not the sensational stories about someone doing something wrong.

While many media sources were mentioned, a number of participants also indicated that “word of mouth” remained an important way of hearing the news within Indigenous communities and the media did not replace this common practice.

2. Mental health issues affecting Indigenous Australians are rarely covered by either mainstream or Indigenous media.

Participants reported that the media either never or rarely reported on Indigenous mental health and mental illness. This absence of reporting was considered by many participants to indicate a lack of media interest in the issues or an indication that the media was ignoring important issues for Indigenous Australians.

You never hear the negative impact upon the community. The attitude is to “kick it under the table” when it happens.

Indigenous-specific media were described as having a focus on positive stories about Aboriginal culture as opposed to other more challenging issues such as mental health issues.

Aboriginal media hardly report it (mental health issues) and when they do it is only good news stories, never the hard issues.

Indigenous media were mentioned “[as] sometimes covering stories on the stolen generation and other stuff like that” related to mental health. However, it was felt that reporting “is just really general and [the focus] is mainly on people working and achieving in these areas”. Stories and programs rarely focused on the difficulties experienced by Indigenous peoples with regard to their mental health.

It was agreed that cultural sensitivities may mean it is more difficult to cover these issues with Indigenous populations. In general, articles and programs were criticised for failing to identify where people could seek help for mental health issues.

Where to go for help is never reported. We are a fairly small community and when it happens, no one knows where to go for help.

There were mixed responses from participants regarding media reporting of Indigenous suicide. Some felt there was little or no reporting or that the level of reporting had decreased in recent years.

... suicide has been reported on a lot in the media in the past.
Not so much now though.

Others commented that the media sometimes reported suicide but they were more likely to talk about suicide in conjunction with related topics such as deaths in custody.

It [suicide] is more likely to be covered in the mainstream media. And they usually want to do a story about a death in custody or something like that.

There was a time there where deaths in custody was reported a lot in *Land Rights* and the *Koori Mail*, but not so much now ... which I think is a good thing.

Generally, participants stated that Indigenous people usually like to keep issues about suicide to themselves and do not think they should be reported in the media.

3. Negative portrayals of mental health issues may have an effect on how the mainstream public views Indigenous people and how they view themselves.

The majority of participants felt the media did a poor job of portraying Indigenous mental health issues.

A person with mental illness always seems to be portrayed poorly in the media – and if they are Aboriginal it can be worse ... it shouldn't matter if you are Aboriginal or not, you are still a human being.

Negative stereotyping of Indigenous people and communities, narrow or superficial reporting of the issues and focusing on only negative stories were the reasons given for this assessment. Participants stated that the constant negative portrayal of Indigenous people as “drunk and mad” has an impact on the way the general public view them and the way they view themselves and their communities.

It affects the individual they are reporting on. It also affects the whole community too.

There are many complexities in reporting suicide and mental illness in Indigenous communities, and balance needs to be found between reporting factually and being informative without being too specific or too negative. Participants generally perceived that there is a lack of balance between negative and positive stories, which can have an effect on Indigenous Australians.

There are many Indigenous people who have low self worth and have been put down a lot. When they see the negative images and words that the media portray, then these ideas get reinforced. The media need to be careful about not always reporting the negative, as it can have consequences.

This is about everything, not just the mental illness and suicide stuff.

Participants across focus group locations believed that coverage of issues about Indigenous mental health and mental illness was mostly superficial in nature. Participants commented that the media fails to investigate wider issues about factors that have led to events occurring and rarely devote time to presenting the story in a more positive light or merely a more realistic light. For example, participants in a number of locations commented that the reporting of Indigenous mental health and mental illness was commonly linked to stories about crime.

Reporting usually occurs when someone has committed a crime and they also have a mental illness.

Aboriginal people usually keep to themselves on issues like this ... but when they have done something wrong and it is covered by the media ... you can't hide from it. They don't like it to be put across the papers and TV. Why do people need to know that stuff?

A general lack of understanding by the media about mental illness was also reported as harmful to Indigenous communities. Participants stated that the media do not provide accurate information on mental illness and seem to have little understanding about the effects of the illness on both the people experiencing it and their family members.

Indigenous communities have always been confronted with mental illness, but they had their own ways of dealing with it. Now, because of outside influences, like the media, they had to change the way they deal with mental illness. And sometimes the media gets it wrong.

Aboriginal people have their own views about mental illness, but these are never reported in the media. We use different words and think about it all different to other people.

In particular, labelling of people by their mental illness and relating this illness to violence was considered harmful to the wider Indigenous community. It reinforces the stereotype that Indigenous people are “trouble” in the community.

4. The reporting of suicide should be handled cautiously and sensitively.

Most participants were concerned about the potential harm stories about suicide could do to individuals and communities. In particular, it was suggested that some reporting may place a vulnerable person at greater risk of suicide. As one participant commented:

... we don't want our young people and our men going to do the same thing ... but sometimes they do and it is real bad for us. The media really shouldn't tell us about how they did it ... the method I mean.

News of the suicide would also spread rapidly via word of mouth, and participants agreed that it could and has resulted in others (boys predominantly) copying this method.

Participants commented that if the report involved someone they could relate to it would definitely result in feelings of “... hurt, sorrow and sadness ... just real bad feelings”. If the story involved someone who was known in their community or someone who was close to them, the impact would be greater still. Interestingly, participants said they were able to identify with reports of suicide for both Indigenous and non-Indigenous individuals.

To just broadly identify with someone would put you at an increased risk of suicide, for example being young and male. It would not matter if the person were Aboriginal or not.

Especially the young kids ... any suicide that is reported could affect one of our community.

As previously mentioned, Indigenous deaths in custody were identified by participants as the main topic where the media might report about an Indigenous suicide. This reporting was thought to increase stereotyping by the wider Australian community about Indigenous people. It was stated that when the mainstream media do report suicide they usually report too many details about the death and they rarely or never include sufficient background about the person and why the suicide may have happened.

Suicide has only emerged in the past 20 years and the media has shown that suicide is a method of solving problems.

Recently the communities on the islands had big troubles with young men dying by suicide on power poles. This was reported and also talked about a lot among all of us. Many boys have copied this method and it is real sad.

Focus group members believed there was sometimes a lack of culturally appropriate reporting in relation to a death by suicide. In particular, a number of participants highlighted that reporting should not name the person who had died as this may be distressing for relatives who were not yet aware of the death. This approach was seen as disrespectful of families and may result in harm to individuals and communities. They also felt that ignoring the wider context of issues affecting Indigenous peoples and reporting just on the fact that a suicide had occurred was culturally inappropriate.

When families are not prepared for it (suicide) to be in the media, then it could be harmful. If no-one has given warning that it will be on the media, it may be a big shock. Also if extended family find out through the media, that could be harmful. It would be nice if they gave the family warning, or asked permission. That would be out of respect to the family.

Some felt that reports should highlight lesser-known facts about suicide and particular groups of the community who may be at greater risk. For example, they felt that reports should highlight that "... older people as well as young people can be at risk ... and people don't know that". Consideration should also be given to the context in which reports are presented:

One of the worrying things about media covering Indigenous issues is their use of statistics – almost throwing it back in their faces. That is, black people have the highest rate of suicide, the highest incidence of alcohol abuse, the highest crime rate, the most domestic violence, etc. This can be very demoralising.

Participants did feel that some reporting in regards to Indigenous suicide could be done in a manner that had some positive effects for Indigenous people and communities. Factual, well-balanced reports that highlighted help-seeking behaviours and responses to suicide were identified as being positive and desirable.

Things that would make the story more positive: writing in the story the places to go for help if you know someone who is at risk or if you are at risk.

5. Providing useful and accurate information through the media may be a positive way of engaging Indigenous Australians in a discussion of the issues.

Some respondents believed that community awareness about mental illness was probably poor in Indigenous communities and that there was a need for

greater mental health promotion. Informing the community that mental illness is something that can affect anyone at any time was seen as important.

There needs to be more information reported about mental illness, about the signs and symptoms. Like me, I only knew I had postnatal depression when I saw an advertisement about it. Nobody around me knew it and if I hadn't seen it I don't know what might have happened.

People with mental health problems and families of those who have died by suicide can be shunned by the community. Stigma or "shame" can be prevalent in many Indigenous communities, perhaps because of the lack of appropriate information and availability of services.

We just don't really talk about it. What can happen in the Aboriginal communities is that if a person ... went "bunta" [crazy] everyone would ignore it and not express their feelings. It was like a shame thing.

Stories that both motivate the community to be more aware of mental illness and encourage the community to take a more active role were seen as something that would benefit the whole community. Some participants thought strategies that "... get our men to start talking about mental illness and stuff ..." would be particularly useful.

Participants mentioned that they had seen prevention stories on occasion about substance misuse and its potential to increase the risk of suicide, but were unable to recall anything else written about suicide prevention.

Some use alcohol to self-medicate ... take drugs to help with the powerful headaches ... and the voices. I think people just don't understand what this can lead to ... We should be fixing the first problem I think.

Most participants believed that accurate information about warning signs and risk factors for suicide would be helpful if done well. This information could help people understand when professional help is required:

How do you tell the difference between a mate who is having a bad day and a mate who really needs help?

6. There is a need for greater cultural sensitivity in what is reported and how it is reported.

Participants recognised that there were media organisations that are mindful of particular cultural sensitivities, "... like in the Northern Territory they are not too bad because they have to live with so many of us and I think they learn a bit more about our culture". However, there appears to be a general lack of

cultural sensitivity when mainstream media report Indigenous issues that may involve matters pertaining to mental health and suicide. This was seen as problematic, given that it is important to increase Indigenous perspectives and experiences in the mainstream media “especially in the states where there are big newspapers and not as many Aboriginal people”.

One of the key concerns about reporting was that the diversity of Indigenous communities was often lost or ignored in reporting, with homogeneous assumptions and generalisations made across communities and comments sought about all Indigenous people.

When talking about reporting in general, Indigenous people are always lumped together as one community. There are big differences between a community in Melbourne and one up north, and therefore, the media need to recognise this. The media can’t ask a person from a different community to speak on behalf of someone from another community.

In addition, rarely did journalists take the time to build rapport with members of the community and show a willingness to collaborate with them on the stories they were developing.

The most important thing with Indigenous people is to take time and build rapport and trust within a community – if there were a person to talk to in person and they had built up the trust of the people, it would be useful.

In relation to stories about suicide, participants were concerned that journalists did not understand certain cultural sensitivities around grieving periods. In particular, reporting of suicide should respect the community’s right to grieve and cultural protocols about not naming or showing footage of a deceased person. This also meant ensuring the background and context of the suicide were mentioned and that there was no reliance on the event being isolated from the background and context.

Participants almost unanimously agreed that journalists wanting to report on Indigenous mental health issues should be Indigenous themselves.

Indigenous people are more likely to talk to the media if they had a reporter they trusted, most likely Indigenous.

The best thing would be for the reporters to be Indigenous themselves if they want to write about our stuff.

As this is unlikely, participants were of the opinion that journalists should be appropriately trained so as to have developed an understanding and appreciation of Aboriginal and Torres Strait Islander cultures before they report on the issues. It was suggested that media organisations should provide journalists and

media workers with Indigenous cultural awareness training, engage Indigenous consultants, and investigate and utilise more culturally appropriate reporting. This may address the lack of understanding about community protocols and concerns of people involved in the story.

There are hardly any Indigenous journalists at the moment, so the mainstream ones need to be educated in Indigenous issues until the day when there are some more Aboriginal people in the field.

Reflections from Indigenous media

As part of the National Mindframe Media and Mental Health Project, Indigenous media organisations across Australia were provided with an opportunity to discuss issues related to covering mental illness and suicide, and to reflect on some of the outcomes from the consultations mentioned above. In late 2004, the project team engaged 12 Indigenous media organisations in face-to-face discussions about the complexities of covering suicide and mental illness for an Indigenous audience. From discussions with these organisations, it was clear that some of the concerns expressed by Indigenous Australians were reflected and supported by Indigenous media.

In terms of reporting both mental illness and suicide, many of the discussions centred on how to approach the issues in a proactive, informative and useful way to assist communities to understand and respond to family and friends who may be experiencing difficulties or at risk of self-harm. Mental health issues have not historically been discussed in Indigenous communities. Indigenous media have reflected this trend by predominantly refraining from covering the issues. More discussion of mental health topics in the media may facilitate more discussion about the issues, particularly in rural and remote communities where access to health services and resources can be limited.

Indigenous media organisations were particularly concerned about covering suicide, especially given that covering any kind of death in Indigenous communities must consider the particular sensitivities involved. As such, suicides are generally not covered. However, the “issue” of suicide, particularly suicide prevention, has also rarely been covered. This may be problematic given that suicide among Indigenous Australians appears to be increasing, even though suicide rates are decreasing in the wider Australian community. In essence, media professionals believe that “not talking about it” has done little to help the situation. But the question remains – how do Indigenous media raise awareness of suicidal behaviour without further placing the community at risk?

Indigenous media professionals believe that covering these issues appropriately will be challenging. Despite best intentions, a lack of resources and a general lack of good working relationships with the health sector mean that it is

difficult to know how to most appropriately approach these topics. It is also difficult for Indigenous media to access appropriate statistics and useful information, particularly information presented in a language style that will not alienate or disenfranchise Indigenous communities. Taking these matters into consideration somewhat predictably results in Indigenous media avoiding stories about suicide prevention and mental health awareness because of the belief that it is better not to create further harm or be accused of stimulating a copycat effect.

It appears there is a need for Indigenous Australians to access more information about mental health issues and suicidal behaviour in a manner that is culturally appropriate. One way this might happen is through utilisation of the Indigenous media sector. There is also a willingness on the part of Indigenous media professionals to provide these types of stories and programs. But appropriate support for the sector is required for such a goal to be successful. The Media and Mental Health project has started this process by including a summary of available facts and statistics related to mental illness and suicide for Indigenous Australians on the Mindframe website (<http://www.mindframe-media.info>), along with contact details for Indigenous health and mental health organisations which may be well placed to provide information to the media. This information has also been adapted for journalism students and added to the Response Ability website (<http://www.responseability.org>). But this is only one small step forward and currently only provides the sector with information. The broader dilemma may be a task that the mental health sector, the media and those who educate our journalists may need to consider in the near future.

Implications for ethics, codes of practice and future research

It is clear that reporting on suicide, mental illness and mental health are often challenging tasks for journalists. When these issues relate to an Indigenous person or community, the challenge may be even greater. In essence, any coverage should consider principles for sensitive reporting of suicide and mental illness as well as principles for sensitively reporting Indigenous issues.

The Royal Commission into Aboriginal Deaths in Custody (1991) recommended the development of codes of practice and policies relating to the presentation of Indigenous issues. Media organisations have developed codes of practice that relate to the coverage of Indigenous Australians, but these vary in scope. Similarly, media organisations have developed varying codes of practice around the reporting of suicide, with some reference to mental disability, if not mental illness. However, there are no codes of practice, guidelines or explanatory notes about the coverage of suicide and mental illness where Indigenous Australians are involved. It is clear, from statistics and the consultations undertaken as part of the National Mindframe Initiative, that there needs to be a

framework developed for the reporting of such issues and to ensure this matter is not discarded into the “too hard” basket.

Although many of the principles discussed in codes and other guidelines can translate to the reporting of suicide and mental illness for Indigenous Australians, the question remains as to whether journalists readily make those links. As a starting point, the Media and Mental Health project developed a short video resource on *Reporting suicide in Indigenous communities*, based on the community of Yarrabah in Far North Queensland. This video highlights some of the key concerns about media reporting of suicide from the community’s perspective and can be used with journalists or journalism students to promote meaningful discussion. However, this resource on its own may be less effective than it might otherwise be without accompanying “best practice” guidelines.

Given that the consultations with Indigenous Australians uncovered concerns about the way that suicide and mental illness both are and are not covered in mainstream and Indigenous media, it begs the question of how these concerns might best be addressed. In particular, do existing codes and resources really identify the key concerns, and do they go any way to supporting journalists, mainstream or Indigenous, who want to cover the issues in appropriate ways?

Clearly, further research and discussion with both Indigenous Australians and media practitioners is required to find ways of appropriately reporting Indigenous mental health issues, including suicide and self-harm. It would be beneficial to conduct in-depth qualitative interviews with mainstream and Indigenous media professionals to identify the key concerns for each sector and the types of support that would be useful in terms of journalism education, professional development and production and allocation of appropriate resources. In addition, a comparative analysis of media reports concerning mental illness and suicide among non-Indigenous Australians and media reports concerning Indigenous Australians would identify any similarity and/or divergence in the thematic approaches adopted in these types of reports.

On a more practical level, as outlined by both Indigenous Australians and Indigenous media professionals, it is necessary to build the capacity of Indigenous media organisations to deliver appropriate mental health messages to Indigenous communities. It is recommended that consideration be given to piloting and evaluating a number of programs where Indigenous media and Indigenous health are supported to jointly develop programs and articles which have a specific mental health and suicide prevention focus.

It is not sufficient to take an attitude that coverage of such issues is too hard and that journalists are “damned if they do and damned if they don’t”. As Hunter and his colleagues have found, to ignore the matter – to not report it because of fear of offending sensitivities and further contributing to sensation-

alist approaches – does not address what should be a national priority for communities, health workers and journalists.

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