Communicating mental illness and suicide: Public relations students’ perceptions of ethical practice

Mental illness and suicide are complex issues which have significant social and economic implications. This study investigates the perceptions of public relations students in Australia towards ethics, following exposure to resources developed to educate students about the ethical challenges in communicating mental health issues. The findings suggest students recognise ambiguity around ‘professional’ ethics in relation to these issues; the need for personal responsibility in ethical public relations practice; that ethical development is incremental; and that they learn most effectively through major assignments. The study includes recommendations for the teaching of ethics in relation to complex issues such as mental health.

Keywords: Public relations, ethics, education, mental illness, suicide

Introduction
Mental illness and suicide are significant social issues. For example, in Australia mental illness is estimated to cost the economy A$20 billion each year (Council of Australian Governments 2006). More people die from suicide than from the combined total of motor vehicle accidents and homicide in Australia, where it is the leading cause of death for men aged under 44 and women aged under 34, and suicides cost the economy an estimated A$17.5 billion annually (ConNetica Consulting 2009, 2010). These figures do not address the social and emotional impact on family, friends and work colleagues. Challenges in addressing mental health issues include considerable stigma and misconceptions about these issues in the community (Herman, Saxena and Moodie 2004, ConNetica Consulting 2010).

The Response Ability Project for Public Relations Education is managed by the Hunter Institute for Mental Health, a not-for-profit organisation funded by the Australian government as part of the Mindframe National Media Initiative. The project develops teaching resources for higher education so that public relations graduates, as future communication practitioners, will be more aware of, and able to respond sensitively and appropriately to, issues relating to mental illness and suicide in professional contexts. A pilot study was run in several universities in 2009 (Mason and Skehan 2009), and the resources made widely available to Australian public relations educators in 2010.

This study investigates the recognition by final-year public relations students of professional ethics, and of the communication challenges around mental illness and suicide, following the use of Response Ability resources. The aim of this research is to investigate how public relations students respond to the introduction of complex social issues such as suicide and mental illness in their curricula in order to understand the pedagogical and curricular implications. The broader issue is the need to understand how students recognise professional responsibility and, indeed, the ethical challenges which they may need to engage with in their future careers.

The study makes specific recommendations regarding the teaching of ethics and ethical practice, particularly in relation to social issues around mental health, to public relations students. The research design uses surveys and a focus group to investigate students’ knowledge after exposure to Response Ability resources in at least two units (i.e. the discrete subjects which make up the public relations major). The findings allow the development of recommendations for teaching public relations ethics in higher education, particularly in relation to complex and sensitive social issues such as mental illness and suicide.

Background
Public relations and ethics
Public relations educators and professional associations differ in their perceptions of public relations ethics (Breit and Demetrious 2010). For example, ethical practice in the industry is orientated towards the client, profit and com-
petitive advantage; however in public relations education, where public relations is perceived as a communication (rather than a management) discipline, there is more focus on the broader social role of public relations (Breit and Demetrious 2010). One issue is that public relations is potentially very powerful in terms of shaping public opinion, and can have a significant impact on community attitudes and behaviour (Bowen 2005), meaning ‘practitioners have the obligation to act...in a socially responsible way’ (Starck and Kruckeberg 2003: 37). Fitzpatrick and Gauthier argue ‘ethical standards [should] include considerations such as the welfare of others, the avoidance of injustice, respect for self and others, and the common good’ (2001: 198). Public relations education must therefore consider the practitioner’s ethical responsibilities ‘to yourself as a person, your profession and the wider community’ (Breit 2007: 308).

Public relations, education and mental health
Mental illness and suicide are complex issues which have significant economic and social implications. In 2007 in Australia, one in five people suffered a mental disorder, where a mental disorder refers to an anxiety, mood or substance abuse disorder (Australian Bureau of Statistics [ABS] 2009). Suicide is the leading cause of death in men aged under 44 and women aged under 34 in Australia (ConNetica Consulting 2010). Challenges in addressing mental health issues include the considerable stigma associated with mental illness and suicide and a lack of accurate information about mental health in the community.

Public relations practitioners may play a role, by recognising the need to develop socially responsible and ethical communication practices to reduce stigma and discrimination around mental health issues in the community; to be mindful of the link between communicating specific information around suicide and the potential for copycat behaviour; and to recognise that public relations practitioners may have to make choices regarding ‘the use of appropriate language, branding and promotions, communication materials, managing media relations and managing your clients, colleagues and partners,’ where a knowledge of these complex social issues can influence socially responsible practice (Hunter Institute of Mental Health 2010a: 1).

Mental health issues, therefore, raise ethical challenges for public relations practitioners who must consider the social impact of their communication activity. These issues also challenge public relations educators as research suggests many students fail to make the connection between practical tasks and academic learning, or to demonstrate reflexivity around their role and responsibilities as future professionals (Fitch 2011). In addition, ‘students learn when they build on their previous experiences, have authentic learning tasks and engage in meaningful activity, and have social interaction and critical dialogue around social issues’ (Cooper, Orrell and Bowden 2010: 49). The challenge for educators is to design a curriculum which encourages a ‘critical dialogue around social issues’ such as mental illness and suicide.

The Response Ability for Public Relations Education project
The Mindframe National Media Initiative was developed in response to a growing body of research, which demonstrated certain representations of suicide in the media could influence the risk of copycat behaviour in vulnerable people (Pirkis and Blood 2001, 2010) and that media representations tended to portray mental illness in negative and stereotypical ways (Pirkis et al 2001, Pirkis et al 2008), which can influence community attitudes and lead to stigma and discrimination. The Response Ability project began in 1998 and aimed to influence journalism education to promote the responsible and accurate representation of suicide and mental illness in the media; it developed a range of multimedia resources for use in teaching (Sheridan Burns and Hazell 1998, Greenhalgh and Hazell 2005, Skehan, Sheridan Burns and Hazell 2009).

In 2009, six Australian universities participated in a pilot project, Response Ability for Public Relations Education, and the resources were made more widely available in 2010 (see www.responseability.org). The website provides curriculum resources, including case studies, fact sheets, and discussion questions for both lecturers and students, and is designed to introduce students to the ethical issues involved in communicating about mental illness and suicide. According to the Hunter Institute of Mental Health, ‘the aim of the resources is to enhance the knowledge and skills of students so they are prepared to respond appropriately to communication issues surrounding suicide and mental illness’ (2010b).

Public relations educators found the Response Ability resources ‘useful, easy to use, of high quality and well presented’ (Mason and Skehan 2009: 19). Students found the resources interesting and relevant, but few accessed the web-
Methodology
This study investigates how students perceive ethics in public relations in relation to mental illness and suicide. The investigation provides useful insights for incorporating ethics into public relations curricula, particularly in relation to communicating complex social issues such as mental health. The research design employs a survey and a small focus group, which allows a complex and potentially controversial topic to be managed with sensitivity (Daymon and Holloway 2011). The researcher’s university granted ethics approval (ethics permit 2011/009). In order to maintain a distinction between students’ unit assessment and their participation in this research, students were recruited from a final-year unit where the researcher had no teaching role.

Participation in the research was voluntary. Forty-five students completed a survey regarding their attitudes towards, and their awareness of, mental health issues in relation to public relations practice. Students responded to open-ended questions designed to assess knowledge of the Response Ability principles, understanding of ethics, and how their studies contributed to that understanding. A thematic analysis was conducted to identify dominant and sub-dominant themes. In addition, units identified by students as useful in developing their understanding of ethical practice in relation to mental illness and suicide were ranked in terms of frequency. Students also rated their level of agreement with a number of statements about public relations practice. The researcher recorded responses into a nominal scale of disagree/agree and used chi-square to investigate demographic differences.

Following initial coding of the surveys, eight undergraduate students were invited to participate in a focus group; four students (two female, two male) accepted. A focus group offers ‘rich data that is cumulative and elaborative’ (Fontana and Frey 2000: 652) to emerge from the interaction between participants (Krueger and Casey 2000), allowing the researcher to investigate in more depth the themes which emerged from the surveys. An independent facilitator led the focus group discussion regarding professional and personal understandings of ethics in relation to communication and mental health, using stimulus material (a hypothetical scenario involving the suicide of a colleague and the Public Relations Institute of Australia’s [PRIA] Individual Code of Ethics) to encourage students to discuss the ethical issues and responsibilities from a public relations perspective. The discussion was recorded using a digital voice recorder and transcribed. The transcription was analysed in terms of the dominant and sub-dominant themes. As a form of member-checking, a two-page summary of the analysis was offered to focus group participants (Lincoln and Guba 1985). Participants agreed that the summary accurately represented the focus group discussion.

Scope and limitations of the study
This study reports public relations student perceptions of ethical challenges in relation to mental illness and suicide. Participants are enrolled in a public relations degree located in a communication school at an Australian university; their responses may not be generalisable.

The research project investigated more broadly student understandings of professional ethics. However, the focus of this paper is the student response to the introduction of mental health topics, and their perceptions of the ethical implications for public relations practice. Although focus groups are not usually considered appropriate for sensitive topics (Fontana and Frey 2000), a small focus group is suitable for complex, potentially contentious topics (Daymon and Holloway 2011) and may be more comfortable for the participants (Krueger and Casey 2000). Focus groups ‘take various forms depending on their purposes’ (Fontana and Frey 2000: 651) and can be as small as two or three people (Wilkinson 2004, Daymon and Holloway 2011).

Knowledge of mental health issues in relation to professional communication
Knowledge of Response Ability principles
Following exposure to Response Ability resources, many students articulated the need to be ‘sensitive’ when communicating about mental illness and suicide. However, the survey results suggested they could not demonstrate knowledge of the specific guidelines in the resources. For example, participants were asked to: ‘name three things that are important to consider when communicating about suicide’. Despite
exposure to the resources in at least two units, 89 per cent of participants could not give three answers consistent with Response Ability principles. Eleven per cent of students could give three answers, and a further 53 per cent could give some (i.e. one or two) responses consistent with the principles. Similarly, participants were asked to: ‘name three things that are important to consider when communicating about mental illness’. Ninety-three per cent gave answers not consistent with Response Ability principles. Seven per cent of students could give three answers consistent with Response Ability principles, and a further 56 per cent could give some (i.e. one or two) responses consistent with Response Ability principles.

As in the evaluation of the pilot study, a significant number of students understood the question in terms of interpersonal communication rather than the professional implications for public relations, suggesting the need for educators to emphasise professional obligations. The problem may relate to the way the question was worded as ‘the answers provided seemed to reflect that students believed the question was about talking directly to a person who is thinking about ending their life/has a mental illness, rather than about communicating about these issues from a public relations perspective’ (Mason and Skehan 2009: 19).

Communicating mental health issues
Focus group participants demonstrated familiarity with the Response Ability principles, in that they recognised the ethical implications for the practitioners and knew to avoid conveying specific information regarding the location and method of suicides and to encourage help-seeking behaviour: ‘You’re not allowed to put any details of how they did it, and you have to provide contact numbers...for Lifeline and things like that.’ The students were asked if they found discussing complex scenarios such as this useful in terms of their own learning and responded positively: ‘Suicide, I think, is one of the hardest issues to communicate about because it’s so sensitive’; and ‘Because these are things that you may have to deal with when you get out into the world.’

Students also stated that they thought working through such scenarios ‘reinforc[ed] really how important it is to have certain ethical guidelines’. Ultimately, students recognised the responsibility for making socially responsible decisions rests with the individual practitioner: ‘The responsibility I think still stays with you – you have a responsibility to the [organisation] and that person, especially in this situation to that person. And then there’s the responsibility to yourself to act ethically too.’

Professional ethics and mental health issues
The students were critical of the Code of Ethics produced by the PRIA, primarily because it emphasised reputational issues for the industry rather than considered the social impact of public relations activity: ‘It is mostly financial ethics rather than...I don’t even know what the word would be...but I guess emotional ethics.’ Focus group participants did not find the code useful as an articulation of professional ethics, particularly following the discussion of suicide in the stimulus scenario: ‘I don’t find any of this relevant at all.’ At the same time, students acknowledged the difficulty in developing a code which would address the diversity of public relations practice. However, the need to consider the impact of public relations activity on others i.e. the social dimension of public relations was a strong topic of discussion. Students perceived an over-emphasis in the Code of Ethics on risk and reputation management at the expense of social responsibility.

Students’ perceptions of ethics and education
Developing understandings of ethical practice
Both survey and focus group participants perceived they learnt most about the communication issues around mental illness and suicide by completing a major assignment on the topic: ‘You actually have to make a decision when you are making the campaign, instead of just talking about it.’ This finding echoes the results of a study which interviewed journalism students who had entered an award designed to encourage responsible reporting of mental health: ‘The majority of students indicated that they had learnt more about suicide and mental illness through their personal research in preparing a health or suicide piece,’ despite exposure to Response Ability resources in their studies (Romeo et al 2008: 127). Assessment tasks define learning objectives for students (Biggs 2003); exposure at university to such tasks was considered important by focus group participants: ‘Because you don’t really learn that much until you actually put it into practice.’

Eighty-nine per cent of students surveyed reported at least one unit from the public relations programme as useful in developing their understanding of ethical practice in relation to mental health issues. The most frequently cited unit was one which included a major assignment on mental health the previous semester. The next most cited units were: one which focused on mental health issues. The most frequently cited unit was one which included a major assignment on the topic.

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participated in the Response Ability pilot study in 2009 and continued to use the resources; a real-client unit, where students developed campaigns for not-for-profit organisations; and a research unit, which introduced research ethics and methodology. Neither of these units employed Response Ability resources, although both units encouraged students to consider the social impact and ethical implications of public relations activity.

Focus group participants perceived the emphasis on ethics in their public relations studies, in contrast to other disciplines, as important and valuable. However, units from courses (such as sociology and commerce); journalism (which has used Response Ability journalism resources extensively); and public relations units which had not used Response Ability resources (such as the real-client and research units) were identified by some students as contributing to their understanding of ethics and ethical behaviour in public relations practice in relation to mental health issues. This result is surprising, but confirms that students perceive their development of professional responsibility and understanding of ethical practice builds on their prior learning.

Ethics of using mental health issues in teaching

It is important to acknowledge one survey response, where a student wrote of their experience of completing a major assignment relating to mental health:

I think I had a distasteful assignment lacking ethical consideration based purely and only on choosing an assignment topic of mental health – I learnt PR isn’t about ethics and teachers ‘teaching’ me about considering people – an aim to offend NO-ONE is rubbish. I was disgusted with this assignment.

Although this response was the only negative comment received in the surveys (N = 45), it illustrates that some students find material related to mental health issues confronting, posing a challenge for educators who may consider scaffolding the ethical communication of mental health issues in a degree. The Response Ability project offers advice on teaching sensitive material, and recognises that some people find the topics challenging.

Although this issue may be resolved by offering students a choice of assignments, such an approach means not all graduates will develop knowledge of mental health issues in relation to public relations practice. In the semester prior to this study, one lecturer responded to a similar concern about the use of mental health as an assignment topic, justifying its inclusion because of its significance to, and insufficient awareness in, the community. These student concerns suggest careful planning across a curriculum needs to occur to ensure that potentially challenging content, such as the Response Ability resources, are incorporated appropriately into the structure of a degree, and are not over-used, i.e. a programme-wide approach to the introduction of the resources should be adopted.

Cultural diversity and mental health issues

Survey participants viewed ethics as sensitivity to, or empathy with, others: ‘Ethics, to me, is consideration of other genders, religious beliefs, politics, etcetera and the ability to maintain a compassionate view of the world.’ Other students extrapolated the idea of sensitivity to others, by defining ethics as an awareness of the social impact of one’s actions or behaviour: ‘the consideration of how our actions will affect others.’ Most participants recognised that ethics involved a determination of what was socially acceptable, with a significant cohort recognising that ethics would vary due to culture and context.

Therefore, students perceived ethics as a dynamic process, where ethics varies depending on the particular social context. This finding suggests that educators should be aware of the different cultural experiences students bring to the classroom (Billett 2004) and should highlight the impact of culture and context on ethics in their teaching. However, this paper does not advocate that a cultural relativist approach should be adopted; rather, an understanding of socio-cultural contexts must be considered in relation to ethics and public relations.

Students have diverse experiences, which influence their learning and their understanding of ethics. Although chi-square tests revealed little statistical significance in responses by demographics for most questions, in relation to the statement: ‘public relations practitioners cannot be responsible for the impact that their campaigns may have on members of the community, such as those people living with mental illness’, a higher proportion of Australian students were more likely to disagree with this statement than international students. Such differences need to be addressed in the classroom, particularly given the diversity of students in, and the increasing internationalisation of,
public relations education. Teaching resources should be multicultural, and introduce cultural difference. In particular, understandings of mental health and attitudes towards mental illness and suicide vary across cultural, socio-economic and political contexts (Herrman, Saxena and Moodie 2004: 20-23).

Students in Malaysia, for example, are accustomed to graphic and detailed reporting of suicide in newspapers and may not recognise the impact of such reporting on suicide rates. The culturally diverse understandings of mental illness and suicide need to be taken into account when developing a public relations campaign. Embracing cultural diversity develops in students not only an awareness of difference but also explicitly the ways in which public relations practice can be socially responsible and culturally relevant (Chia 2009).

Implications for public relations education
This study is concerned with the ethical challenges in relation to mental illness and suicide for public relations, and makes some initial recommendations for educators to consider how they teach ethics in relation to these issues.

- Public relations activity needs to be considered in terms of its social impact (Starck and Kruckeberg 2003, Bowen 2005, Breit and Demetrious 2010), both on a community and – in the case of mental health issues – on vulnerable members of society (Fitzpatrick and Gauthier 2001). Some students, and indeed, practitioners, assume that professional responsibility relates to effective business practice, neglecting the social elements implicit in both ‘social responsibility’ and ‘public relations.’
- Practical and contextualised learning tasks allow students to apply their understanding of ethics. If they are encouraged to reflect on and share their responses to the task, students have the opportunity to develop their knowledge of ethical communication.
- Public relations educators should set a major assessment item on mental illness and suicide. In this way, students will research the field and integrate theory with their understanding of professional practice. However, care should be taken in curriculum planning not to introduce multiple major assignments on mental health.
- Public relations educators could develop a real-client project or service learning activity involving mental health. Students may share their experiences and responses to the ethical issues they identify in a structured discussion (Fitch 2011), an approach supported by work-integrated learning scholarship, which advocates students reflect on practical experiences in order to better integrate theory and practice (Billett 2009).
- Public relations classes are diverse; at some Australian universities approximately half are international students (Fitch and Surma 2006). In addition, Australia is considered a multicultural country with one in four Australians born overseas (ABS 2006: 6). Introducing different cultural perspectives of complex social issues offers students an excellent learning opportunity.

Conclusions
One challenge in this study is the difficulty in isolating Response Ability resources as a single variable in terms of the impact on student learning in relation to ethics. Students, through both the survey responses and the focus group discussion, acknowledged the positive impact of a range of units, the diversity of the student body, and other activities such as paid work on their understanding of ethics in relation to public relations practice. This finding confirms that many factors contribute to students’ professional development. From the student perspective, professional and ethical development is incremental and ethics demands a consideration of others, i.e. a recognition of the social impact of public relations, reinforcing other research findings (Bowen 2005, Breit and Demetrious 2010).

Specific knowledge and professional expertise in relation to communicating mental health issues should be scaffolded in a degree. Complex tasks, possibly for assessment, will improve students’ understanding and knowledge of communication management in relation to mental illness and suicide. However, such tasks need to be carefully integrated into the curriculum to ensure that students develop appropriate conceptual knowledge to apply to different scenarios. In addition, educators should develop a context- and culturally-sensitive approach, which addresses the reality of both multiculturalism and internationalisation in contemporary public relations.
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