Suicide bereavement and the media: A qualitative study

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ABSTRACT: While there has been international interest in the reporting of suicide and the potential impact on community behaviour, research has yet to consider the specific impact of media reporting on those bereaved by suicide. Nor has the research considered the potential impact that reports focused on suicide bereavement may have on community behaviour. The suicide bereavement literature has generally focussed on describing the unique experiences and needs of people bereaved by suicide, but specific considerations, such as interaction with the media, are generally absent from the discussion. In the present study a series of focus groups with people bereaved by suicide and key informant interviews with media professionals, postvention workers, police, coroners and people bereaved by suicide were conducted. Results show that there can be considerable variation in how people bereaved by suicide view media coverage and the reported impacts that exposure to, or involvement in, stories about suicide can have. It highlights a need to consider resources and service models to brief and support those bereaved by suicide when interacting with the media and expansion of current resources and training for journalists that considers the challenges of interacting with people who are bereaved.

KEYWORDS: suicide bereavement, media, postvention, suicide survivors

A National Inquiry into Suicide in Australia during 2010 (Community Affairs Reference Committee, 2010), raised a number of issues around public discussion of suicide and the possible benefits of media coverage. This included an argument for stories about personal experiences of suicide and stories that contribute to community discussion about suicide prevention. Researchers have commented on the rise in personal storytelling by people bereaved by suicide (Gibson, 2007), potentially providing an opportunity to highlight the impact that suicide can have.

In general, most of the international research has investigated the link between media reporting of suicide and its negative influence on suicidal behaviour, with a paucity of research examining the role of the media in playing a positive or preventative role in the suicide arena (Niederkrontenthaler et al., 2010; Pirkis & Blood, 2010). In addition, research has not yet been reported that considers the specific impact of media reporting on those bereaved by suicide, nor has it considered the potential impact of reports focussing on suicide bereavement on community behaviour.

Given the prominence and consumption of all forms of media within the Australian community, it is timely to examine the impact of the media on groups affected by suicide to better understand the roles that the media play. The suicide bereavement literature has generally focussed on describing the unique experience and nature of bereavement by suicide, but broader considerations, such as the needs of people bereaved by suicide in dealing with media, are generally absent from the discussion. This paper explores the views of people bereaved by suicide, and other key informants, with the aim of understanding the impact that media reporting has on those bereaved and the impact that interactions with the media may have on those most intimately affected by suicide.

MEDIA REPORTING AND SUICIDAL BEHAVIOUR

There are now over 100 studies looking at the association between reporting of suicide and community attitudes and behaviours following that reporting. Pirkis and colleagues conducted two systematic reviews of international studies, examining the evidence for a causal relationship between the portrayal of suicide in the news and information media and actual suicidal behaviour (Pirkis & Blood, 2001, 2010). The reviews also observed that the potential for negative outcomes (through imitation effects) was more evident under some
circumstances than others (Pirkis & Blood, 2010). The impact was strongest following repeated coverage, prominent coverage, or where the media consumer identified with the person featured in the report. In addition, evidence suggests that explicit description of a particular method was associated with an increase in suicidal behaviour.

To respond to the potential harm associated with media reporting of suicide, many countries have developed media guidelines that advocate for responsible and sensitive reporting and portrayal of suicide. These include the United States (American Foundation for Suicide Prevention and Centres for Disease Control and Prevention, 2001), Canada (Canadian Association for Suicide Prevention, n.d.), the United Kingdom (MediaWise Trust, n.d.), Australia (Commonwealth of Australia, 2011), New Zealand (Ministry of Health, 1999) and Hong Kong (Hong Kong Jockey Club Centre for Suicide Research and Prevention, n.d.) to name a few. In Australia, a more comprehensive approach has been developed using active dissemination strategies (Skehan, Greenhalgh, Hazell, & Pirkis, 2006) that include resources and capacity building approaches for various groups working with media such as the suicide prevention sector, police and coroners. The Mindframe National Media Initiative advocates not for the avoidance of suicide coverage in the media, but rather attention to ensuring accuracy and examining the framing of such reports (Skehan, Sheridan Burns, & Hazell, 2009). Research indicates that the approach may be having an impact on reporting practices, with a follow-up media monitoring study indicating that despite widespread variability in reporting, there was a significant improvement in the quality of media reports about suicide (Pirkis et al., 2009).

While research has explored the association between media reporting of suicide and suicidal behaviour, a number of gaps remain in research and in programme responses. The evidence can also be complex to interpret and to apply. For example, the only study looking explicitly for positive effects of media reporting (Niederkrotenthaler et al., 2010) found that presentations of an individual’s mastery of suicidal ideation, or recovery from suicidal thoughts, were associated with reductions in suicide rates. On the other hand, media reports about suicide deaths, reports focussing on suicide myths and even expert opinion about suicide were associated with increases in suicidal behaviour. In addition, the research is yet to explore the specific response of different audiences to presentations about suicide. There is rarely any assessment of how various audiences (including those bereaved by suicide) interpret, misinterpret, seek out, ignore or resist media messages (Blood & Pirkis, 2001). This recognised complexity, and current gaps, results in challenges for the media, the suicide prevention sector, and those who monitor and regulate reporting to understand the role that the media plays in suicide risk and suicide prevention.

**SUICIDE BEREAVEMENT**

As the body of research about the experiences of people who have been bereaved by suicide has expanded in recent years, so too have definitional issues. People who have been bereaved by suicide are often called ‘survivors’, particularly in US literature. Jordan and McIntosh (2011) discuss that while ‘survivorship’ (termed ‘bereaved by suicide’ in this paper) was once quite narrowly defined, the definition of a survivor has broadened considerably to include anyone affected by the death, regardless of relationship parameters. In their definition, ‘a suicide survivor is someone who experiences a high level of self-perceived psychological, physical and/or social distress for a considerable length of time after exposure to the suicide of another person’ (Jordan & McIntosh, 2011, p. 7).

Literature reporting the nature of suicide bereavement has suggested that this type of grief is characterised by guilt, shame, difficulty in family relationships, loneliness, isolation and fear of social stigma, and a fixation on making sense of the death (Beautrais, 2004; Cvinar, 2005; Jordan, Feigelman, McMenamy, & Mitchell, 2011; Jordan & McMenamy, 2004; Maple, Plummer, Edwards, & Minichiello, 2007; Sands, 2008). Research has suggested that those bereaved by suicide experience increased levels of psychological distress (Botha, Guilfoyle, & Botha, 2009; Chapple & Ziebland, 2011; De Groot, Keijser, & Neeleman, 2006; Dyregrov, 2002; Jordan et al.,
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2011; Jordan & McMenamy, 2004; Provini, Everett, & Pfeffer, 2000) and have increased vulnerabilities and susceptibility to diagnostic conditions such as anxiety, depression, complicated grief, and increased suicidality (Chapple & Ziebland, 2011; Dyregrov, 2002; Jordan & McMenamy, 2004; Wilson & Clark, 2005), at the same time as being limited in their ability to talk about their experience (Maple, Edwards, Plummer, & Minichiello, 2010). Suicide bereavement has also been associated with a decline in general health and functioning (De Groot et al., 2006; Wilson & Clark, 2005).

Additional factors such as the need to feel the ongoing presence of the person who has died (Maple, Edwards, Plummer, & Minichiello, 2013; Sands, 2008), the way people bereaved engage in meaning-making about the death (Clark, 2001; Lindqvist, Johansson, & Karlsson, 2008; Sands, 2008), and the advocacy role that people sometimes pursue (Begley & Quayle, 2007; Cerel, Padgett, Conwell, & Reed, 2009; Sands, 2008) have been identified as factors that characterise the unique grief experienced through suicide bereavement. Suicide bereavement has also been associated with stigma and fear of perceived judgement (Begley & Quayle, 2007; Cvinar, 2005; Knieper, 1999) with some authors describing the tendency for families or individuals to attempt to prevent the cause of death being known by others (Barraclough & Shepherd, 1977; Beautrais, 2004; Biddle, 2003; Dyregrov, 2011).

Much of the literature dedicated to the needs of people bereaved by suicide has focussed on the provision of professional support (De Groot et al., 2006; Dyregrov, 2002; Jordan et al., 2011; Provini et al., 2000; Wilson & Clark, 2005) and the role of exposure to others with similar experiences via support groups (Cerel et al., 2009; Feigelman, Jordan, & Gorman, 2008; Grad, Clark, Dyregrov, & Andriessen, 2004; Jordan et al., 2011). Broader considerations, such as the needs of people bereaved by suicide in dealing with media, are generally absent from the discussion.

Suicide bereavement and the media

The most explicit references to the experience of people bereaved by suicide dealing with the media can be found within research focussed on experiences with coronial proceedings (Barraclough & Shepherd, 1977; Biddle, 2003; Harwood, Hawton, Hope, & Jacoby, 2001; Wilson & Clark, 2005). Within these works, people bereaved by suicide have described the actions of media as exacerbating their distress throughout the coronial process. Concerns included complaints of inaccuracy, sensationalism, intrusion into private tragedy and bringing the suicide death to the attention of neighbours and the community (Barraclough & Shepherd, 1977; Harwood et al., 2001). Other authors point to the need for caution. For example Beautrais (2004) suggests that outcomes may be better for bereaved families where media coverage is absent or limited. In many cases, literature published does reference existing media guidelines about responsible portrayal, however, there is little further explanation or description of what this means in terms of working with individuals who have been bereaved by suicide (Commonwealth of Australia, 2005; Queensland Department of Communities, 2008).

There is some acknowledgement in selected texts that appropriate responses from community (including media) can help reduce the negative impact of suicide bereavement on individuals and families and thus play a role in postvention activities (Beautrais, 2004; Brock, 2003; Grad et al., 2004; Hawton & Simkin, 2003; Knieper, 1999; Queensland Department of Communities, 2008; Wong, Chan, & Beh, 2007). In such cases, media is often perceived as a tool in stigma reduction or public education (Dyregrov, 2002; Queensland Department of Communities, 2008). Wong et al. (2007), for example, see media as a platform for disseminating practical information such as procedures for dealing with death registration, funerals, and community support resources. Empirical study of the proposed positive role of the media has not been conducted.

While not a central theme of suicide bereavement literature, guidance for people bereaved about how to deal with their grief in public settings is a feature of some postvention resources (Suicide Prevention Resource Center, 2004). These resources, while unvaluated in the peer-reviewed literature, emphasise consideration for
the potential audiences and possible risks that can accompany public communication about suicide. A central challenge appears to be how to balance a need to grieve and remember the person who has died, without unintentionally glorifying the death. Some, including Sands (2008) and Begley and Quayle (2007), have described the way people bereaved by suicide often turn to advocacy or awareness roles as part of the meaning-making process of grieving. As part of this, people bereaved by suicide may be drawn to media coverage that seeks to make the public aware of suicide (Sands, 2008).

Initiatives such as the ‘Media Award for Responsible Portrayal of Suicide and Survivors’ in Belgium attempt to encourage partnerships between the media and people bereaved by suicide (Andriessen, 2011, cited in Jordan & McIntosh, 2011), however little research has been conducted to link the body of evidence around media reporting of suicide and the suicide bereavement literature. Research has generally failed to examine the impact of media reports about suicide on people bereaved by suicide (positive or negative), nor has it examined specific impacts where the story is about the death of the person they knew rather than more generally focussed. The literature also fails to document how media interact with people bereaved by suicide and the impact of that interaction on both the person bereaved and the media professionals involved.

The study
In the present qualitative study a series of focus groups were conducted with people bereaved by suicide and key informant interviews held with media professionals, postvention workers, police, coroners and people bereaved by suicide. The aims of the study were to investigate the views and opinions of people who have been bereaved about the media coverage of suicide and to investigate the impacts that involvement in media stories has on those who have participated. The study was conducted to inform a future research agenda and make suggestions about revisions to existing resources for the media and suicide prevention sectors in Australia. This study obtained ethics approval through the Hunter New England Human Research Ethics Committee (Reference: 11/04/20/5.10).

The study is reported in two parts. Part 1 outlines results of a series of key informant interviews with people bereaved by suicide and other informants (media professionals, police, coroners and postvention workers). Part 2 outlines the results from three focus groups with people bereaved by suicide. Both sets of data were analysed using qualitative methods to draw out key themes.

Part 1: Key informant interviews
Method
Target group
Participants reported in this analysis include: six key informants who have been bereaved by suicide (F5; M1); four key informants from postvention services (F3; M1); five key informants from police and coronial services (F2; M3); and four journalists (F3; M1). All participants were over 18 years of age, and if bereaved by suicide, the bereavement occurred at least 6 months prior to the interview.

Data collection measure
Separate semi-structured interview guides were developed for key informant interviews with: (a) people bereaved by suicide; (b) postvention workers; (c) police and coronial workers; and (d) journalists. All respondents were asked questions about: their personal experience relating to media (or views of how people bereaved by suicide relate to the media); their needs in relation to the media (or perceived needs of those who are bereaved); and support options that would assist people bereaved in dealing with the media.

Procedure
Participants who were bereaved by suicide were recruited via postvention support services. Other key informants were recruited directly by the project team at the Hunter Institute of Mental Health. Participants were provided with information about the study and signed consent was obtained. Key informant interviews were conducted via telephone and recorded for analysis. These interviews were transcribed and analysed using thematic analysis techniques.
RESULTS
Views about media involvement and coverage
Results indicated that there is a clear awareness of suicide bereavement stories in the media across all key informant groups. Informants noted that it could be a positive or negative experience for people bereaved to engage with the media, depending on the context of the article and the type of media covering the story.

Contributing to increased awareness about suicide and being involved in disseminating suicide prevention messages were considered motivating factors for people bereaved by suicide when considering involvement in stories, as well as a motivation for media in wanting to involve them. Many key informants noted that this involvement could have benefits for the community, with this potential benefit a strong feature of interviews with media professionals. For example, one media professional said:

If the story is about suicide and prevention and about illustrating certain aspects of a story it’s really important.

Another key informant, a police officer, highlighting the educational aspects said:

I think very often they see it as a way of educating others, because there has been an increase of suicide being talked about in the media.

While the potential for community education was important for those bereaved by suicide, so too was the role the media can play in increasing help seeking within the community. As one bereaved key informant noted:

More media reporting of suicide and support that could be obtained, information and emphasis on the health system so that there are better outcomes....

The timing of an interview with the media, however, was identified as a critical issue. The majority of respondents (from all groups) stated that it would be unhelpful for media contact to occur around the time of the initial trauma. For example, a postvention worker said:

I don’t think it would be helpful when you are going through the initial bereavement and trauma;

while a coroner was concerned about the vulnerability of the individual at the time and their ability to consider involvement with the media:

The families or next of kin either of the two are too vulnerable to say no....

Media professionals acknowledged this as an issue for some interviewees. One journalist stated:

... some aren’t ready to talk to you. It’s too new, it’s too fresh, it’s too shocking.

While timing of an actual interview with the person recently bereaved was seen as central, any reporting of suicide was seen to potentially have an impact on people during their grieving process. One postvention respondent noted that media communication around personal stories can have a negative impact on their professional role as a service provider:

It’s not helpful from a service provision point of view ... [people are] very much impacted and I guess, re-traumatised over what has gone on in the paper.

Respondents generally felt that it was a sense of altruism that compelled people bereaved by suicide to engage with the media; using the media as a vehicle to raise awareness about suicide by assuming an educative or advocacy role. For example, one media professional explained:

People want to do it too ... most of them say that like, if it helps one person, if it stops one person, prompts one person to seek help or prompts one person to ask someone else who they might think is in trouble that sort of is a big motivator for people, they really want to make a difference and see sharing stories as a way of doing that.

One police officer further explained that this is a way people make meaning of the event and the loss:

Down the track they sometimes want their particular experience to have value/meaning – telling my story to help other people.

Some respondents talked about how telling their story to the media provided an opportunity to validate the existence of the person and keep them in their lives. While this could be perceived as a positive contribution, others however, felt that people bereaved may also use the media as a platform to process personal issues, as this media professional explained:
My experience would be that it is ... very affirming for them. They can express, they can sort of validate the person was there, was such a big part of their lives ... they can illustrate the void left behind, the pain left behind.

Indigenous respondents indicated that within Indigenous communities the media was utilised extensively to explain and/or explore the factors that may have contributed to the person’s death. As one postvention worker explained:

Some people try to use media to air out laundry and deal with the bereavement and will use media if the media let themselves become a vehicle for airing out factors, innuendos etc ... People using media to process personal issues, hopelessness, despair.

**Impact of media stories**

When considering the potential impact of reading, hearing or seeing suicide stories in the media on those bereaved, the majority of respondents reported that there could be positive impacts if the story focussed on suicide prevention, as this coroner indicates:

It could be that they read the stories or they think at least somebody recognizes the pain and the anguish of it all.

Negative impacts were considered likely if the article did not have a significant suicide prevention focus or if it focussed on the death rather than impacts on friends, family and community members, as reported by this postvention worker:

If they are focused on good media or awareness, which are different things. Providing hope, never around the incident or the issue itself and it is done in staggered stages to keep peoples' hopes up.

Central too, was the learning that can be expressed from past experiences in the hope of influencing the future, as this media professional reports:

Some of the things you can learn from past incidents may inform others and give them handy hints in looking at symptoms in other people.

Time was mentioned as an influential factor in regards to potential negative impacts. Across all groups responses indicated that there was significant potential for re-traumatisation for both people bereaved and others affected by suicide reading the stories. This was reported by both media professionals, for example:

Obviously if they are in a space where they are comfortable it can be a positive, or at least not a negative experience but I think other times and it can be completely inappropriate.

and those bereaved by suicide, for example:

It can be very difficult. If it is a general information story about what happened to a person I think the impact would hook me back into my situation, and grief, I would feel empathy.

**Media involvement of people bereaved by suicide**

Journalists reported that media were likely to cover a story with a suicide focus if it was in the public interest. They also recognised that suicide is not an issue they covered on a regular basis, as this media professional reported:

An identity that is relevant to the public, it could be a reason to talk about the situation or there is something extraordinary about the circumstances. As a general rule you wouldn't necessarily want to talk about that at all....

One media professional viewed the influence of the media in a positive light, to specifically help address the stigma of suicide in the community:

Hopefully making a difference in breaking down stigma, talking about suicide that 's word which so often has drawn the awkward silence.

Journalists also reported a role in telling stories that focussed on the impact of suicide, including the personal pain of those directly affected. As one journalist commented:

The media can play such a powerful role in that by telling the stories of people who’ve been there in that very particular, experiencing that very particular pain which has so often not been talked about.

Other key informants were concerned about the motivations of journalists contacting those bereaved by suicide. In particular, whether they were being 'used' for a headline or a story, rather than participating in the story to increase
community awareness. For example, one coroner reported that the motivation to report suicide may be *it is just a headline*, stating that:

> It is often a dramatic news story, sudden and violent death which people are fascinated by.

Other participants, including this bereaved participant, felt that the reporting of suicide was more globally part of the media’s role:

> They are doing their job, gaining your trust is part of their job and they have their own agenda. You have to remember that they will do anything to get their story.

Most commonly, people bereaved (and other key informants) reported they became involved with the media in the months or years following their loss and in general did not actively seek out the media to tell their story. This indicates that the media initiates contact with bereaved people. An exception to this may be when people bereaved made contact with the media at an early stage (generally within weeks) in an attempt to process their grief and loss or explain the event publicly, as noted by this postvention worker:

> Using the media is the vehicle to sort of address their own personal internal anguish and pain. I have seen that happen.

When asked about the impacts on people bereaved participating in media interviews respondents observed both negative impacts and positive impacts. Positive impacts were more likely to emerge if the person felt the purpose of the story was clear, as this bereaved person reports:

> Knowledge of the purpose and intended audience of the article gives you more control.

It was also important that the representation of those involved was accurate, as one postvention worker reports:

> If the report has been accurate then they feel like they have made a contribution.

Many respondents felt that if the person did not actively engage with or consent to media stories then the impacts could be negative. These negative experiences could include suicidal ideation, grief and re-traumatisation of those involved. Such reporting does not empower those involved, and as this postvention worker states, many people may be unaware of the rights they have:

> The majority of people … have been concerned with what they should say and how they should say it, they have been usually totally unaware of their rights.

Media reporting about an individual or family that did not involve or have the support of the family, was viewed as potentially damaging, as this coroner explains:

> Families often feel stigmatised, that it will reflect negatively on them – public conclusion that parenting was deficient.

Journalists reflected on the opportunities that personal experiences provided as a good story, reporting that often people showed a desire to be involved. The following two media professionals also acknowledged that some people are ‘not ready’ to tell their story and this can provide challenges for journalists that are trying to determine the difference:

> By telling the stories of people who’ve been there … experiencing that very particular pain which has so often not been talked about;

and

> … some aren’t ready to talk to you. It’s too new, it’s too fresh, it’s too shocking. It can be cathartic which may not necessarily be a good thing for either party but it can also be very helpful.

**Impact on those bereaved participating in media stories**

As with earlier responses concerning the impacts of consuming media stories about suicide, there was also potential for positive impacts, but only if mental health promotion or suicide prevention was a significant feature of the story. Respondents felt that a story with such a focus would enable a sense of altruism within people bereaved, and foster a belief that some good may have come from their situation, as explained by the following bereaved person:

> Positive impacts in good news stories when the person through their bereavement and self-healing make a bit of a pitch around awareness.

When asked about available support, participants felt that rarely, if ever, did people bereaved
ask for or were provided with a support person to assist with the interaction. However, respondents believed that it was vital to have the support of an organisation or at least be accompanied by a friend or family member when they did an interview, as this police officer advocates:

Any available support … people who chose that opportunity should not do it unsupported.

A suggestion on how to manage this was provided by this bereaved person:

If possible arrange your interview via a trusted third party who are interested in protecting your interests.

Participants indicated varying levels of confidence if they were to be asked to provide support to people bereaved in their interactions with the media. Overall, coronial respondents did not feel equipped in any way; police workers felt confident to provide basic support; while postvention workers felt that gaining the skills to support bereaved was a learnt process through direct exposure in their work:

If anything … really the majority of people are not probably that media savvy and are not aware about how their information gets utilised.

**Media experiences of interacting with people bereaved by suicide**

Media respondents had numerous experiences interviewing people bereaved by suicide. Interviews that these media professionals conducted occurred anywhere from the same week as the loss up to years following. Most media respondents indicated they felt reasonably well equipped to interview someone who has been bereaved by suicide. However, the lack of emotional support provided to people bereaved by suicide at interview was identified as a significant challenge, for example this media professional highlights how difficult this can be:

Depends on where you are, if it’s recent it can be a real minefield, people are incredibly distressed and probably latching on to anything, they are looking for answers and you don’t have them.

When asked about specific resources or skills used when working with bereaved individuals, all respondents listed practical skills such as observing industry guidelines or recommendations such as those made by Mindframe. Interestingly, in both the following quotes from media professionals there is a sense of ambivalence about such guidelines – one has to be aware of, but not constrained by them:

Mindframe guidelines. I think is important that you’re not necessarily hemmed by them but you certainly have to be so conscious of them…;

and

Obviously there are the Mindframe guidelines and so the things that I would be aware of in reporting around suicide.

Other practical skills employed by journalists included thoroughly understanding the task at hand and ensuring that the interviewee understood the media process and how their story may be represented by the final product, as this participant describes:

Understanding your own value and why you’re there, what you’re likely to get and that they understand, you will get other sources and that the story will be rounded out with their input.

Emotional skills were used by some journalists in addition to the practical skills mentioned. Assessing and interpreting the information differently was a key skill employed by one respondent whilst another utilised their cultural heritage and knowledge to empathise with their interviewees.

I think you have to treat people with such respect, respect their stories and be sympathetic.

**Future needs**

Given the differences in motivation for involvement between media and people bereaved (one party is doing their job, the other is altruistically hoping to help others by sharing their experience), personal and emotional boundaries were important themes. The notion of boundaries for people bereaved by suicide was presented in two ways. Firstly as a personal tool to protect private information, and secondly, as a way to avoid becoming overwhelmed by other personal stories featured in the media. A
general note of caution was common among people who were bereaved, as described by this participant:

Establishing my own personal boundaries if/when talking to the media about the incident being careful not to give too much or too little as they may just make it up then.

Informants were asked about resources to assist people bereaved to make an informed decision if choosing to, or needing to, engage with the media. The most common suggestion was access to a professional media liaison or support worker to safeguard their privacy and rights throughout the interview process, as this person bereaved explained:

A support person sitting with bereaved when they are being interviewed so that they can take over if possible.

Media professionals also saw value in the provision of a support person:

Make sure that there is a support person for them. Depending … if it is the main subject of the story that there is a counsellor or some ability to seek counselling support afterwards.

Police, coronial and postvention informants believed that any resource or support person should ensure that people bereaved understood the role of the media and the motivations of the media. People bereaved requested practical advice about what to expect and how to assess (or evaluate) their motivations for participating and their personal boundaries.

You have to know not to trust them, they are not your friends. They are doing their job, gaining your trust is part of their job and they have their own agenda.

When asked about resources for people bereaved by suicide interacting with the media, responses suggested that any information should be brief so as not to overwhelm the person at a particularly vulnerable time. This might include brief guidelines around sharing personal stories and accessing help-seeking information. Informants also suggested that the resource should provide general information about the media, supporting families and reflect the notion of boundaries.

When journalists were asked whether they required additional resources to guide or support interactions with those who were bereaved by suicide, a range of options were suggested. These included practical supports like the ability to debrief with other colleagues as well as a better understanding of suicide and skills to deal with the interaction between vulnerable sources and themselves. Media professionals participating in this research indicated that understanding grief and loss more broadly would be useful:

A holistic approach to trauma, grief, suicide and how that plays out for people…;

and being supported in their role:

… being able to talk to someone who understands what it’s like to be doing this work is a fairly important thing.

Moreover, being provided with direction on how to manage this was also important:

How people deal with suicide, how people deal with the very raw emotions within the industry. How productions staff deal with and how you deal with the subject matter and how you deal with people telling you their story.

In summary, contact between the media and people bereaved by suicide was a common experience among the key informants. The insights provided by these individuals indicate a number of useful factors to consider when contact is made, including the different reasons the two parties have for being involved, the timing of the request, the manner in which an approach is made, as well as support for both the person bereaved and the journalist in dealing with the content matter. The aim of this component of the study was to become informed about the experiences of those known to have contact with the media (as a person bereaved by suicide), those working with people bereaved by suicide (as a police officer, coroner or postvention worker) as well as media professionals themselves. The focus of these interviews was to gain an understanding of the issues related to interaction between these parties. The second part of this study aimed to understand the
experience of people bereaved by suicide in being exposed to reports about suicide, regardless of whether they had been involved in media stories or not.

**PART 2: FOCUS GROUPS WITH PEOPLE BEREAVED**

**Method**

**Target group**

Participants reported in this section include 20 people who have previously been bereaved by suicide (F15; M5) and attend a local support group from three locations nationally (Newcastle, NSW, Sunshine Coast, QLD, and Battery Point, TAS). All participants were over 18 years, and if bereaved by suicide, the death occurred at least 6 months prior to the focus group session.

**Data collection measure**

A semi-structured interview guide was designed by the project team to be administered by the focus group facilitators. All respondents were asked questions about: their personal experience relating to media; their needs in relation to the media; and support options that they would recommend to assist in future engagement with media journalists.

**Procedure**

Participants were recruited via postvention support services and professionals known to the Mindframe program. Participants were recruited in this manner to ensure comprehensive support was available to those involved should they become distressed at any time during the focus group or after. Participants were provided with information about the study and signed consent was obtained. Focus groups were conducted for approximately 90 minutes and facilitated by someone known to the group. Discussions were recorded for transcription and analysis. Facilitators were briefed before and after the focus groups by an investigator from the project team.

**RESULTS**

**Views on media coverage**

Participants were asked to think about the media that they watched, read or listened to and asked about their personal responses to media featuring stories about suicide or people that have been bereaved by suicide. Primarily group members felt that stories directly addressing suicide, or bereavement by suicide, ‘stood out’ to them and reported increased awareness of media reports surrounding suicide and ‘non suspicious’ deaths, as this person described:

You don’t think that much about it, you are only shocked that these things happen, but until it happens to yourself suddenly you realise that yes it has a huge impact. And then you notice much more in the newspapers you notice much more on TV.

Some participants reported that they felt compelled to seek out bereavement stories as a way to process their grief. Not only did these stories have increased relevance to participants after their bereavement, it was also noted that they felt such stories had increased prominence as media consumers. Group members across the three locations reported empathising directly with people featured in media stories, comparing the situation depicted with their own experience, as this participant clearly described:

I feel for the parents … I feel for the family and what they are going to have to go through … and other people, friends and all that, that they are going to have to deal with it and how they’re going to deal with it.

and

I know what we have gone through on the journey knowing that they’re only just starting theirs and knowing what they’re going to have to face.

Participants suggested that it was appropriate to have media pieces featuring stories and impacts of suicide, especially when these focussed on people bereaved and the impact the death had. Group members felt that outlining the emotional impacts in such stories could contribute to greater awareness about suicide prevention and decrease the stigma associated with suicide. One participant described this as:

I think people should be made more aware of it, I mean we talk about breast cancer and car accidents and young people driving and getting killed all the time and we don’t talk about people passing away from suicide … And we still don’t.
Group members noted that journalists should be more concerned with the ‘everyday’ stories and not focussed on the drama or sensationalist aspects of the story. Furthermore, media stories emphasising the perceived ‘truth’ about suicide were valued by focus group participants.

… not that they need to go into the how and why, but there needs to be a lot more discussion to normalise it, it’s the only way … to get it out there and talk about it and there will be grief and pain but how else are we ever going to normalise it?

**Impact of media reports**

Participants felt that negative impacts from reading media stories varied over time but it was not uncommon to experience re-traumatisation and increased grief symptoms after reading about another person’s bereavement. Often they would directly relate to the person they were reading about or watching:

You’re wondering if they are going to feel so alone like many of us have experienced.

Group members reflected that they were drawn to bereavement stories and despite negative personal impacts they could appreciate potential positive outcomes from addressing the issue of suicide in the media. In reflecting on their situation they reported that the potential for positive outcomes outweighed their negative emotional response. For example, one participant said:

I would rather see it than not see it. As hard as it was … in the media I really would prefer to see more particularly the prevention side of it. If that’s the issue of the week why don’t they promote prevention?

Another participant extended this, considering the broader context and what the person being reported about was experiencing:

It all makes me think more about the prevention. It’s so sad for me I just want to know what has been put in place for that person, where was their support?

Responses also suggested members of the community might have an emotional response to media reporting of a suicide, especially when it was within their community, for example:

For our community because it’s only small, it affected everyone. I don’t know anyone in the community that it did not affect.

**Experiences with media**

Several of the focus group participants had direct communication with the media following their bereavement by suicide. Some respondents reported positive experiences, finding the media both accommodating and respectful while conducting interviews and in seeking approval for the story in the final editing stages.

They were pretty truthful to what we wanted to say, and they gave it to us to check out. We have had a pretty good result.

However, others had negative experiences interacting with the media. One participant received unsolicited requests for comments and interviews from a print media journalist immediately following her bereavement, as she describes here:

They were playing on my obviously deep love for my son, saying that if I didn’t cooperate and give the sort of story and angle of [my son] is a wonderful boy that they could print something derogatory about him. They preyed on my vulnerability because you don’t know what your rights are, you couldn’t even think about that.

A positive outcome identified by participants was the capacity of the media to elicit community responses to significant issues. They explained that if the media chose to feature a personal story focussing on the impact of suicide or if the story focussed specifically on suicide prevention, then the outcomes might be positive, and the value of their input recognised.

**Information and resources**

Participants were asked, regardless of their previous involvement with the media, what suggestions they would give to media about reporting suicide bereavement. Participants believed that media could play a role in suicide prevention if they reported suicide well and in context. This could be done by highlighting risk factors and by the promotion of help-seeking behaviour. The media could play a role in promoting services for people who were suicidal and support services
for those bereaved. Participants believed media could highlight the importance of the issue, as this participant describes from experience in her community:

It is something that the local community could discuss, because within that three year period we had four young boys that passed away from suicide, there’s been ten that I know of in our community. There’s been no media …

Participants suggested that media should focus on the ‘after effects’ of suicide to increase understanding about issues affecting those bereaved. Participants felt that the media had a role to play in educating the public by telling peoples’ stories and that this could assist in breaking down the stigma associated with suicide and dispel common myths and misunderstandings. There was also a feeling that this should happen more regularly, as indicated by this participant:

Telling our story, how we feel … and how about you do it. Could you just do it a bit more often, survivor stories … How it impacts on everyday life … Get it out there with some sensitivity and not sensationalise it. That’s what you are looking for …

Finally, focus group participants recommended journalists understand that people bereaved by suicide need significant support. This support could be through people who have been through similar circumstances and who understand how they are feeling at that particular time. Some group members reported difficulty in knowing where to access support, commenting that this was due to the stigma surrounding suicide. The participants suggested that the media could play an important role in allowing people bereaved to understand what it is like to access postvention support and services and directing them to appropriate support services. This was contextualised by one participant who described the need to focus on both prevention as well as postvention:

There needs to be prevention on one side, and there needs to be places like [postvention service] need to be promoted.

**Discussion**

Suicide is an emotive and personal issue for many people, particularly people who have been bereaved by suicide. The role and impact of the media also draws an emotive and personal response, which is not always captured in large-scale quantitative studies looking at the impact of media reporting on suicidal behaviour. Despite the small sample size, the current qualitative study shows that there can be considerable variation in how people bereaved by suicide view media coverage and the reported impacts that being exposed to reports about suicide can have. The study also reports variation in how people bereaved by suicide and other key informants view the interaction between journalists and people bereaved.

In general, participants bereaved by suicide were supportive of more media stories about suicide. However, this support came with caveats, including suggestions that the report should focus on the impact that suicide has or focus on the promotion of help-seeking behaviour. While generally supportive of media coverage about suicide, people bereaved by suicide also reported that stories about suicide ‘stood out’ to them and that impacts could include ‘re-traumatisation and increased grief symptoms after reading about another person’s bereavement’. While it is known that people bereaved by suicide experience increased levels of psychological distress (e.g., Botha et al., 2009; Chapple & Ziebland, 2011; Jordan et al., 2011), more research is needed to determine whether exposure to media stories about suicide increases this distress, and whether the time of exposure or the type of story vary that experience. Further research should also consider aligning with a more inclusive definition of bereavement, moving beyond familial connection to consider impacts on friends and colleagues who have also been ‘affected by’ a suicide death (Jordan & McIntosh, 2011).

Consistent with the literature, people bereaved by suicide reported being motivated to participate in a media story because of a desire to take on an educative or advocacy role (Begley & Quayle, 2007; Biddle, 2003; Dyregrov, 2011). In this respect, media may be used as a vehicle to raise awareness about suicide and the experience of bereavement. What is unknown currently,
however, is whether stories that involve people bereaved by suicide can positively influence community literacy or suicidal behaviour. There have been very few studies designed to specifically test for potential positive outcomes of media coverage, and these have not explored presentations of bereavement (Niderkrotenhaler et al., 2010).

Participants bereaved by suicide reported that the experience of being involved in a media story could be either positive or negative depending on how the journalist treated them and how the story was framed. This study, however, was unable to explore whether there are differences between those who willingly participate in media stories and those who are the focus of media stories but do not consent to participate as a source. Given that some people bereaved by suicide may attempt to keep the cause of death private (Beautrais, 2004; Biddle, 2003; Dyregrov, 2011), it leads to questions about the factors that might influence a person’s decision to be involved with, or avoid, the media.

All informants in this study, including journalists, believed it was unhelpful to participate in a media story at the time of the initial trauma. Given that media will often report on ‘newsworthy’ suicide deaths within a short timeframe following the death, future research should consider the differential impacts of media involvement close after a death and at later time intervals. Future research should also consider whether views about participation change over time and the factors that contribute to any reported change. Future research should also consider the sampling of participants, given that this study only used participants bereaved by suicide that were known to one of the researchers or reference group members (for key informants) or recruited through connections to a support service or support group (for focus groups). Larger sample sizes and additional quantitative measures to complement qualitative data would be beneficial.

While focussing predominantly on the experience of the person bereaved, this study also contributes to knowledge about the views and experience of journalists, a perspective that is under researched. Journalists in this study reported interactions with people bereaved as challenging, often leading them to feel conflicted about how and when it was best to involve someone in a story. While resources or guidelines for media on the reporting of suicide have been developed internationally (Pirkis, Blood, Beautrais, Burgess, & Skehan, 2006), and are disseminated in Australia through the Mindframe National Media Initiative (Skehan et al., 2006), there has been little attention given to the specific skills that journalists may need when interacting with vulnerable sources. The research has also failed to examine the psychological impacts that journalists may experience through exposure to the often detailed stories of those bereaved by suicide.

This study adds to the current literature and highlights service and programme gaps to be addressed. It highlights a need to consider resource and service models to brief and support those bereaved by suicide when interacting with the media. It also suggests expansion of current resources and training for journalists that considers the challenges of interacting with people who are bereaved by suicide. The study also highlights a number of areas for future research.

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