

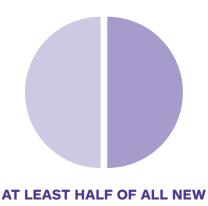
#### Reporting and portrayal of mental health issues

Mental illness and mental health issues are of increasing public interest. At least half of all New Zealanders will experience depression, anxiety or another mental health problem in their lifetime. There were more than 10,000 mental health stories in the media last year, and in the period between 2014-2017, there was a 20 percent increase in the number of mental health stories.

The media has an important and powerful role to play in communicating information about mental health policy, services and support, and sharing stories of people's real experiences of distress. Good journalism can change public misconceptions, challenge myths, change attitudes that lead to stigma and discrimination, encourage people in distress to seek help, and promote hope. Unhelpful reporting can increase stigma and discrimination, and make it less likely that those experiencing mental distress will ask for help.

The Mental Health Foundation (MHF) acknowledges that reporting on mental illness and mental health issues can be difficult; there are conflicting messages about best practice and no clear, detailed guidelines. The MHF is committed to working with journalists to develop a resource that offers practical advice and information. This report includes key insights from the views of nearly 400 mental health consumers and 77 journalists, along with recommendations based on best practice and consultation from similar organisations around the world.

This is a background document for people who are helping us to develop guidelines, to inform conversations and share what we've learned so far. Input from media representatives and mental health consumers at a round table discussion will further inform the development of guidelines. The MHF will prepare guidelines based on insights from discussions, consult with key stakeholders for feedback and make amendments. The MHF expects guidelines to be available on its online media page by June 2018, and a downloadable physical copy will also be produced. See the MHF website for more details: www.mentalhealth.org.nz/media/



AT LEAST HALF OF ALL NEW
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### **Greetings**

My name is Shaun Robinson, I'm the CE of the Mental Health Foundation and I live with bipolar disorder. These days, despite periodic flare ups of symptoms, I live well. I'm a great dad, a good partner, I hold down a stressful job, I play music, I garden, I surf (sometimes); life is full and good.

In my twenties and thirties though, it was very different. Life was bleak and felt out of control with crushing bouts of depression and anxiety punctuated with occasional times of feeling invincible. I did not understand what was happening and felt increasingly suicidal to the point where I attempted to take my own life. It still stirs me up to remember these times.

Looking back, the media influenced my thinking about my mental health problems, for good and bad. This is still true today.

For a start, I knew nothing about the reality of mental health or mental illness. The pervasive portrayal was that mental illness was something scary, dangerous and extreme. For many years I thought "that's not me so I can't be mentally ill". Factual and informative stories that didn't sensationalise would have really helped me to see "oh yeah, I can relate to that, maybe I should seek some help".

There were no positive stories of people overcoming the sorts of issues I faced, there was no story of hope.

When I was suicidal, I had a constant irrational thought stream of "end it all, just kill yourself". But it's scary and hard to end your life; thankfully there were not many stories about specific people suiciding to fuel my irrational inner voice and give me ideas about how to do it. I didn't know what I was doing when I tried to die, so I survived, for which I am deeply grateful.

In recent years I've sometimes had interviewers say "gee, how painful it must be to have bi-polar" – I appreciate the empathy but it often veers into sickly, demeaning, pity. Then there are the "what meds do you take?" questions. I'm not my meds, I'm not someone to be pitied and those questions don't help anyone.

What I am, and what many thousands of people are, is someone who has learned to overcome adversity through major lifestyle change, creating and insisting on a supportive community and yes, also medical support. These things restored and maintained my wellbeing, and I want all of that for every New Zealander. I hope you will help me to promote these things. We all need to have good mental health.

Tell the whole, accurate, safe and empowering story of what mental health and wellbeing is about. Cover stories about mental health issues thoughtfully, with compassion and hope. It will help you, me, and millions of other New Zealanders.





### **Journalists**

In early 2018, 77 journalists across a range of media responded to a MHF survey about reporting mental illness and mental health issues.

Mental illness and mental health issues are topics frequently reported in the news and discussed widely across the media. Respondents reported that it is a topic that they often (33.8%) or sometimes (45.5%) report on, highlighting that it is a subject that frequently crosses their radar. In addition, 59% of respondents agree or strongly agree that mental illness and mental health issues are handled well in the media.

At a personal level, mental illness and mental health issues touch the lives of journalists who responded to the survey. Eighty seven percent (87%) of respondents noted they had their own lived experience of mental illness distress or had close friends or family with lived experience.

## 77 JOURNALISTS SURVEYED ON MENTAL HEALTH REPORTING



33.8%

Often report on mental health issues



45.5%

Sometimes report on mental health issues



**59%** 

Feel confident reporting on mental health issues

# Sources of information journalists use to inform their reporting of mental illness and mental health issues

Respondents accessed a range of different sources to inform their reporting on mental illness and mental health issues. Sources include:

- Medical professionals and experts.
- Advocacy groups which represent the voices of people who experience mental distress and mental illness.
- Ministry of Health and DHB websites, including the coroner's guidelines on suicide reporting.
- Other online sites. Both depression.org.nz and nami.org were mentioned.
- Colleagues, "If I have questions I'll talk with those more senior at work".
- Research, including journals, books and reports by academics and Government.

"First and foremost, to make sure I'm correct on what I am reporting – I triple check everything with the person/people I'm interviewing. If there is anything I'm unsure about I will check in with a medical expert and then re-check with the source. I also used online resources – primarily NZ-based resources (such as the Mental Health Foundation). We also have resources we use in our newsroom that we rely on for updated numbers and links that is updated annually. An example of this is helpline numbers, which are used when reporting on suicide or attempted suicide." – Journalist

Respondents mostly accessed the above information online (65.3%), followed by conversations and interviews with the range of informants identified above (30.6%).

### HOW JOURNALISTS SURVEYED ACCESS INFORMATION SOURCES



## What makes information 'useful' to journalists?

When asked if the information they've accessed was useful, 96% of respondents agreed. Most importantly, respondents wanted to know their source of information was reliable. In addition, for information to be 'useful' it needs to:

- Be up to date and relevant.
- Clarify misconceptions.
- Present and summarise a range of relevant research, and include statistics, data and examples.
- Enable the framing of appropriate questions.

Respondents wanted a trusted source of information for them to have confidence in what they report.

"This is always a difficult area to cover, but like any story requires a degree of compassion and sensitivity."

## What would support journalists in their reporting of mental illness and mental health issues?

 Interviews and conversations with people with lived experience, experts and other professionals for input and feedback.

#### "Access to people to discuss it with."

- A place where information can be accessed quickly.
- Guidelines that include:
  - What to do or not to do when interviewing and writing a story about mental illness.

"How to tackle it, what to call it, how not to stereotype, what to look for, understand the issues."

"How to not upset people - what to say/not to say."

- Who to contact to discuss what can or can't be reported, and how to report it, e.g "an oncall expert via phone."
- Examples of how to write about specific circumstances, for example, writing about a mental health diagnosis, examples of published stories that 'get it right'.

 Ethics about interviewing people living with mental health issues. When are they too vulnerable to interview? "What if when they recover they regret speaking out?"

"Guides and discussion on appropriate terminology, context, authoritative opinion on relative weight to apply to differing elements dependent upon story subject, regularly updated repository of latest global research and figures with explanatory forewords/exec summaries particularly on suicide, mood disorders, anxiety etc."

"Clear guidelines that are all in one place and cover everything from suicide reporting to anxiety including lesser known conditions such as schizophrenia. It would be good if those were driven by people with lived experience of those condition and or their family."

- Up to date information
  - Contacts for support services, plus lists of resources.
  - Facts about mental health conditions that are reputable and succinct.
  - Case studies and personal stories.
  - Statistics and data.
  - Expert contact lists. "Who can I speak to to discuss a story?"
- Context about why this is an important topic. "Big picture look at how media portrayal of mental illness can be harmful."

Ninety-five percent (95%) of respondents said they would go to a website to find information about how to report on mental illness and mental health issues, highlighting that a central repository for the above information would be beneficial to journalists.



95%

Respondents would go to a website to find out how to report on mental illness and mental health issues

### **Mental Health Consumers**

A survey of mental health consumers and support people was undertaken as part of the media project. Of the 392 people that responded to the survey, 89.3% live with or have their own experience of mental illness or distress. In addition, 91.8% of respondents have close friends or whānau members who live with mental illness or distress.

Despite the prevalence of mental illness and distress only 14.3% of respondents had spoken to the media and shared their experience of living with mental illness.

#### 392 MENTAL HEALTH CONSUMERS AND SUPPORT PEOPLE SURVEYED ON MENTAL ILLNESS OR DISTRESS



**89.3%**Live with or have experience of mental health issues



**91.8%**Have close friends or whānau who live with mental health issues



14.3%

Have spoken to the media and shared their experience of mental health issues

# What do mental health consumers think about how mental health issues are reported?

Over half of the respondents (61.2%) thought the media's reporting of mental health issues is **not** balanced and fair, and 30.1% of respondents were unsure. When asked if the media's reporting of mental health issues affected the way people view them, 52.8% of respondents felt it did and 26.4% of respondents felt it did not.

Opinions expressed about the media's portrayal of mental illness and mental health issues were mostly negative. Many commented that while reporting is improving, there is still a long way to go, with a lot of negative perception about how mental health issues are portrayed in the media.

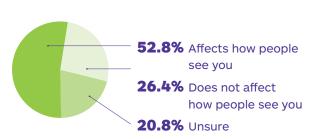
Ways in which reporting of mental health issues could be improved included:

- Attention to wording and language use, for example, awareness of stigmatising language and finding other ways to express mental illness.
   For example, "separate the illness from the person – not 'depressed mother', but 'mother who is experiencing depression."
- More positive stories, for example about those who manage their conditions and are leading functional lives, and recovery is possible.
- Talk to people with lived experience of the specific issue being reported on.
- In-depth stories, not just crises. Features with multiple points of view.
- Make the subject less taboo, with honest portrayal of experiences.
- Honest and fair reporting that is respectful and balanced.
- More information about different types of mental illness.

"Provide us with a platform to let us speak and share experiences – especially our methods for coping and getting through."

# MENTAL HEALTH CONSUMER VIEW ON MEDIA'S REPORTING OF MENTAL HEALTH ISSUES





## Opportunities and barriers to mental health consumers sharing their story

Fourteen percent of respondents had spoken to the media and shared their experience of living with mental illness. The most common reason for not sharing with media was respondents hadn't had the opportunity. Some noted they would share if the opportunity arose, however they face barriers such as loss of privacy, fear of misreporting and judgement, and a sense that people won't understand.

Some respondents reported a positive effect of sharing their story which included:

- Felt more confident and empowered.
- Contributed to raising awareness and understanding about mental illness.
- Feedback that it's appreciated and opens doors for others to share their experience.

"A shoe box of letters cards etc thanking me and telling me how helpful it was. Made me feel that I could really make a difference in mental health after the rollercoaster of a journey for last 20 years same with feedback from the press article with all the comments about it/me on stuff really made me feel good and want to really help where I can in mental health."

It should be noted that while most people don't share their stories with the media, they are sharing in other environments. These included community groups, peer support groups, via Facebook (i.e. on their own terms), and with friends. Sharing stories is helpful personally, and can reduce stigma at a community and societal level.

Respondents noted that it would be helpful if journalists provided copy back to the interviewee before an article was published, or to be interviewed by a journalist who has their own lived experience of distress.

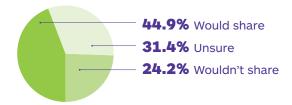
"It would have been good to have the journalist run copy by me, so I could check it for how it rang true to my experience and what I was trying to say. A couple of times it's like they got what I said, but then in what they had written it was like the 'key' was very slightly off..."

## The effect of media reporting on consumers

At a personal level, respondents noted both positive and negative effects from media reporting about mental health issues. On a positive note, respondents noted more people are talking about mental health which is opening conversations, creating more empathy, reducing stigma, and increasing awareness within the wider population. On the other hand, respondents reported a range of negative effects. One of the effects reported was frustration that:

- Reporting may negate a lot of the work being done to reduce stigma.
- Positive work being done by the mental health sector is not portrayed.
- Public confidence in the mental health workforce is undermined.
- Lowers morale of the workforce.
- Despite the reporting about mental health issues, the mental health system is not changing. Awareness is not enough.

# MENTAL HEALTH CONSUMERS ON SHARING STORIES OF THEIR EXPERIENCE WITH MEDIA



## Are mental health consumers willing to share their story with journalists?

Overall, the results indicate a willingness amongst respondents to share their story, with 44.9% of respondents noting that if a journalist came to them today and asked them to share their experience of mental illness, they would accept this offer (31.4% didn't know, and 24.2% wouldn't). For some respondents, saying yes would depend on the purpose of the story, the journalist's experience and reputation, and on how the journalist has written previously about mental health issues.

"I'd say yes because the more variety of different stories of mental health are reported on, the better the media can represent the true scope of mental health in NZ. I'd hope my story would increase understanding of mental health and maybe inspire other people with similar problems to me."

Other issues respondents would consider before saying yes include:

- Will my privacy and anonymity be maintained?
- What's the purpose of the article/story?
- Will the reporting be accurate, trustworthy and balanced?
- Do I know, trust or have rapport with the journalist? What is their experience and attitudes towards mental health issues?
- How will I stay safe during the interview?
- Will I have control over the story?

"Do they have other stories they have written about mental health issues? - Is it a time and place that suits me. - Can I bring a support person if I want? - Will I be allowed to see the copy before it goes to print and make any suggestions? - How might the story contribute to society or what is already out there? - Are they respectful? Have they done their research? Do they understand the impact of not reporting in a balanced and fair way on this topic?"

## **Summary Table:** What are the similarities and differences between journalists and mental health consumers?

Themes	Journalists	Mental Health Consumers						
Commonalities between journalists and mental health consumers								
Have someone close to them with mental illness and mental health issues	✓	~						
Want the voices of those with lived experience to be incorporated into media reporting.	<b>✓</b>	~						
Stories are accurate and relevant	<b>✓</b>	~						
Differences between journalists and me	ntal health consumers							
Perception of reporting	Feel mental health issues are handled well	Don't think reporting is fair, accurate or balanced						
Use of language	Want to use concise wording	Use more words to avoid labelling						
Whose voice is heard	Using experts and medical professionals to gather	Ensure the voice of people with lived experience is included						

### **Next steps**

The Mental Health Foundation is committed to working with journalists to ensure the accurate portrayals of people living with mental illness and those experiencing mental distress, and the responsible depictions of mental health issues in the media.

As journalists, you have the potential to change public misconceptions, challenge myths, reduce stigma and discrimination, encourage people in distress to seek help, and promote hope.

information

Based on consultation with media representatives and mental health consumers at the round table, the MHF will develop a set of guidelines to support and guide mental health reporting. The MHF's suggested guidelines will be presented for user testing and amended where necessary, with the final resource to be available by June 2018.

Updated facts, statistics and research will also be made available at **www.mentalhealth.org.nz/get-help/media/**. Please don't hesitate to contact the MHF media team for guidance, support and ideas about stories, and opportunities to work with the MHF through its media grants programme. Thank you for your role in helping to reduce mental illness stigma and discrimination in Aotearoa.

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