

# TALKING ABOUT SUICIDE

## A guide to language

It is widely accepted that the inappropriate use of language when describing suicide and discussion of method, can have a significant impact on people who have a lived experience of suicide, and other members of the community. It is often attributed to fueling the stigma, prejudice and fear that we still experience surrounding suicide. This in turn can prevent people from seeking help, and indeed reaching out to help others too.

For this reason, we must ensure that when talking about suicide we do not describe 'how' someone took their life, nor do we discuss specific details about a suicide attempt.

The following guide outlines alternative language:

Don't say...	Do say...	Why?
'committed' or 'commit suicide'	'died by suicide' or 'ended his/her/their own life'	To avoid association between suicide and 'crime' or 'sin' that may alienate some people.
'unsuccessful suicide'	'non-fatal' or 'made an attempt on his/her/their life'	To avoid presenting suicide as a desired outcome or glamourising a suicide attempt.
'successful suicide'	'took their own life', 'died by suicide' or 'ended their own life'	To avoid presenting suicide as a desired outcome.
'suicide epidemic'	'concerning rates of suicide'	To avoid sensationalism and inaccuracy.
'mental patient', 'nutter', 'lunatic', 'psycho', 'schizo', 'deranged', 'mad'	A person is 'living with' or 'has a diagnosis of' mental illness.	Certain language sensationalises mental illness and reinforces stigma.
'victim', 'suffering from' or 'affected with' a mental illness	A person is 'being treated for', or 'someone with a mental illness'.	Terminology that suggests a lack of quality of life for people with mental illness.
A person is 'a schizophrenic', 'an anorexic'	A person 'has a diagnosis of' or 'is being treated for..'	Labelling a person by their mental illness.
'crazed', 'deranged', 'mad', 'psychotic'	The person's behaviour was unusual or erratic.	Descriptions of behaviour that imply existence of mental illness or are inaccurate.
'happy pills', 'shrinks', 'mental institution'	Antidepressants, psychiatrists or psychologists, mental health hospital.	Colloquialisms about treatment can undermine people's willingness to seek help.
'psychotic dog', using 'schizophrenic' to denote duality such as 'schizophrenic economy'.	Reword any sentence that uses psychiatric or media terminology incorrectly or out of context.	Terminology used out of context adds to misunderstanding and trivialises mental illness.

Whilst we understand that no one intentionally uses language, phrases and conversation to bring distress to others, we do need to be very aware of the conversations we have. At every opportunity, it is important that we improve the suicide literacy of the community including the use non-stigmatising and safe language when discussing suicide.



Further guidelines regarding terminology and discussion of mental health in the media can be accessed through the MindFrame website:

<https://mindframe.org.au/suicide/communicating-about-suicide>

ALSO READ: Why we shouldn't use the 'C' word, by Susan Beaton, Dr Peter Forster and Dr Myf Maple. Published in InPsych February 2013. Available online at: <https://www.psychology.org.au/publications/inpsych/2013/february/beaton>



For a more in-depth guide to discussing suicide visit **Conversations Matter**, a practical online resource to support and effective community discussions about suicide at [www.conversationsmatter.com.au](http://www.conversationsmatter.com.au).

Alternative language table - extracts taken from: Everymind <https://everymind.org.au/suicide-prevention/understanding-suicide/role-of-language-and-stigma>



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