



Suggested Guidelines for Media Reporting on Mental Health



Canadian Mental
Health Association
Manitoba and Winnipeg
Mental health for all



A Reason to Hope. The Means to Cure.
MANITOBA SCHIZOPHRENIA SOCIETY
SOCIÉTÉ MANITOBAINE DE LA SCHIZOPHÉNIE
UNE RAISON D'ESPÉRANCE. LE MOYEN DE GUÉRISON.

Suggested Guidelines for Media Reporting on Mental Health

The following Manitoba agencies are collaborating to improve mental health literacy:

The Canadian Mental Health Association, Winnipeg Region
The Canadian Mental Health Association, Manitoba Division
The Manitoba Psychological Society
The Manitoba Schizophrenia Society

Mental health literacy refers to the skills that enable people to access, understand and use information for mental health. These agencies are working towards challenging stigma and discrimination by providing accurate information on mental health related issues.

We believe the media has a critical role in helping greater public understanding of mental health issues. Using these media guidelines, we hope to advance a balanced and accurate reporting of mental health issues.

The agencies request that journalists be mindful of language that may unintentionally hurt people. We encourage the use of accurate and sensitive words when talking about mental health problems. Please report on mental health with respect.

We invite the media to use these guidelines to help stop stigma and discrimination and to influence change in attitudes about mental health in our society.

We would like to acknowledge the Mental Health Literacy Network, on which this document is based, and the Canadian Association of Suicide Prevention (CASP) for the creation of their guidelines on suicide reporting (available at www.casp-acps.ca).

Key Contacts

The following are mental health agencies that can provide you with information about mental health issues. They are also able to provide contact information for industry experts and people who have experienced mental health problems.

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Quick Facts

- 1 in 3 Canadians will have mental health problems at some point in their life.
- 1 in 5 Canadians will have mental health problems in a given year.
- 50% of people who develop mental health problems begin experiencing difficulties by the age of 14.
- Mental health problems can affect anyone at any age, regardless of education, income, religion or culture.
- Of those experiencing mental illness, 70-80% will go on to make a full recovery.
- Some people will believe that a person experiencing mental distress is more likely to be violent and dangerous. It is more likely that they will be a victim of violence. In fact, you are thirteen times more likely to be killed by a stranger *without* a mental health problem than by someone who has a mental health problem.
- Stigma sets mental health conditions apart from other diseases and results in part from the public's lack of understanding that mental health conditions are in fact illnesses. Illnesses such as cancer, for example, don't carry the same stigma they once had, largely because of an informed public. Regardless of why and how they develop, mental health problems are health problems — just like arthritis, diabetes and heart attacks.
- The Business and Economic Roundtable on Mental Health has estimated that the economic costs of mental health conditions are the equivalent of 14% of corporate Canada's net operating profits.

Getting It Right

Words matter. The following sets out some of the preferred language to use when reporting on mental health.

POSITIVE LANGUAGE

<p>Person with a mental health problem Person with a mental illness</p>	<p>Generally used to refer to a person with a diagnosed condition, or for whom problems with their mental health has a significant impact on their lives. This is preferred to such phrases as “patient,” “sufferer,” or “victim.”</p>
<p>A person living with schizophrenia, depression or any other diagnosed condition</p>	<p>Avoid language that implies that people ARE their mental illness. A person is not “a schizophrenic.” Instead say a person has a diagnosis of, or is currently experiencing, or is being treated for schizophrenia. This terminology will help the public see the person, not the label.</p>
<p>Suicide, death by suicide and died by suicide</p>	<p>Terms such as “committed suicide” or “successful suicide” are outdated and inaccurate. “Committing” suicide associates the act with illegal activity, and “successful” suicide implies that the death is a positive outcome.</p>
<p>Be informed. Report accurately and with respect.</p>	<p>Never sensationalize an illness.</p>

STOP USING

“Demented,” “loony,” “crazy,” “wacko,” “schizo”

Harmful, outdated and offensive terms. Not to be used in any context as they perpetuate ignorance and lead to stigma.

Psychotic

It should never be used as a general description of someone with mental health problems. Its correct use is to describe the symptom of psychosis.

Split personality

This is a common myth associated with the symptoms of schizophrenia and that people swing between being “normal” and “dangerous.” This is rarely the case, although an individual may be experiencing very unpleasant and frightening thoughts.

Released from hospital

People are discharged from hospital not released as if they were in jail.

Stop the use of a psychiatric diagnoses as metaphors for other situations

Terms like “a schizophrenic situation” are not only stigmatizing but also inaccurate.

What's the Difference?

Mental Health refers to emotional and social wellbeing in which the individual realizes his/her own abilities, can cope with the normal stresses of life, can work productively and is able to make contributions to his/her community.

Mental Health Problems and Mental Disorders refer to the spectrum of cognitive, emotional and social disorders that interfere with the daily lives and productivity of people.

A Mental Health Problem interferes with a person's cognitive, emotional or social abilities, but to a lesser extent than a mental disorder. Mental health problems are more common than mental disorders, and are often experienced temporarily as a reaction to a life stressor. Mental health problems can be differentiated from mental disorders in that their symptoms are less severe and of shorter duration.

A Mental Disorder (Illness) is a diagnosable illness that *significantly* interferes with an individual's cognitive, emotional or social abilities. Mental disorders can have different degrees of severity. Some of the major mental disorders perceived to be public health issues are depression, anxiety, substance use disorders and psychotic disorders, such as schizophrenia. The term mental illness is often used interchangeably with mental disorder.

AP Stylebook

Mental Illness

The following is excerpted from the Associated Press Stylebook. The mental illness entry was added March 13, 2013.

“It is the right time to address how journalists handle questions of mental illness in coverage,” said AP Senior Vice President and Executive Editor Kathleen Carroll. “This isn’t only a question of which words one uses to describe a person’s illness. There are important journalistic questions, too.

“When is such information relevant to a story? Who is an authoritative source for a person’s illness, diagnosis and treatment? These are very delicate issues and this Stylebook entry is intended to help journalists work through them thoughtfully, accurately and fairly.”

Mental illness

Do not describe an individual as mentally ill unless it is clearly pertinent to a story and the diagnosis is properly sourced.

When used, identify the source for the diagnosis. Seek firsthand knowledge; ask how the source knows. Don’t rely on hearsay or speculate on a diagnosis. Specify the time frame for the diagnosis and ask about treatment. A person’s condition can change over time, so a diagnosis of mental illness might not apply anymore. Avoid anonymous sources. On-the-record sources can be family members, mental health professionals, medical authorities, law enforcement officials and court records. Be sure they have accurate information to make the diagnosis. Provide examples of symptoms.

Mental illness is a general condition. Specific disorders are types of mental illness and should be used whenever possible: He was diagnosed with schizophrenia, according to court documents. She was diagnosed with anorexia, according to her parents. He was treated for depression.

Some common mental disorders, according to the National Institute of Mental Health (mental illnesses or disorders are lowercase, except when known by the name of a person, such as Asperger’s syndrome):

- Autism spectrum disorders. These include Asperger’s syndrome, a mild form of autism. Many experts consider autism a developmental disorder, not a mental illness.
- Bipolar disorder (manic-depressive illness)
- Depression
- Obsessive-compulsive disorder (OCD)
- Post-traumatic stress disorder (PTSD)
- Schizophrenia

Here is a link from the National Institute of Mental Health that can be used as a reference:
<http://www.nimh.nih.gov/index.shtml>

Do not use derogatory terms, such as insane, crazy/crazed, nuts or deranged, unless they are part of a quotation that is essential to the story.

Do not assume that mental illness is a factor in a violent crime, and verify statements to that effect. A past history of mental illness is not necessarily a reliable indicator. Studies have shown that the vast majority of people with mental illness are not violent, and experts say most people who are violent do not suffer from mental illness.

Avoid unsubstantiated statements by witnesses or first responders attributing violence to mental illness. A first responder often is quoted as saying, without direct knowledge, that a crime was committed by a person with a "history of mental illness." Such comments should always be attributed to someone who has knowledge of the person's history and can authoritatively speak to its relevance to the incident.

Avoid descriptions that connote pity, such as afflicted with, suffers from or victim of. Rather, he has obsessive-compulsive disorder.

Double-check specific symptoms and diagnoses. Avoid interpreting behavior common to many people as symptoms of mental illness. Sadness, anger, exuberance and the occasional desire to be alone are normal emotions experienced by people who have mental illness as well as those who don't.

Wherever possible, rely on people with mental illness to talk about their own diagnoses.

Avoid using mental health terms to describe non-health issues. Don't say that an awards show, for example, was schizophrenic.

Use the term mental or psychiatric hospital, not asylum.