

SAFE MESSAGING BEST PRACTICES

A guide for anyone communicating and writing about Veteran suicide

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Mental Health and Suicide Prevention

This content has been adapted from reportingonsuicide.org.

Suicide is a serious national public health problem that affects communities everywhere. At the U.S. Department of Veterans Affairs (VA), preventing suicide among all Veterans is a top priority — including among those who do not, and may never, seek care within our system. We are working to reach Veterans where they live, work, and thrive.

Suicide is preventable, and we all have a role to play.

Just as suicide has no single cause, no one strategy can end Veteran suicide. VA is using a bundled public health approach that involves multiple sectors, including media and entertainment industries. Research has shown that the way media covers suicide can influence behavior — either positively, by encouraging help-seeking, or negatively, by increasing contagion or “copycat” suicide, which occurs when exposure to suicide or suicidal behaviors contributes to another suicide. The Recommendations for Reporting on Suicide (reportingonsuicide.org) offers guidance to members of the media on covering suicide in a safe and ethical manner.

The following are recommendations for developing messages about Veteran suicide. When best practices are applied, messages can correct misconceptions, convey hope, and encourage help-seeking among those at risk for suicide.








Start Here:

1. Find the most recent VA National Suicide Data Report at www.mentalhealth.va.gov/suicide_prevention/data.asp.
2. Find the most recent CDC national suicide statistics at www.cdc.gov/violenceprevention/suicide/statistics.
3. Download the National Strategy for Preventing Veteran Suicide at www.mentalhealth.va.gov/suicide_prevention/strategy.asp.

 Best Practices	 Avoid	 Examples
<p>Be informative without being sensationalistic.</p> <p>Use the terms “died by suicide” or “killed himself/herself.”</p>	<p>Avoid detailing the method of suicide.</p> <p>Avoid terms such as “commit suicide,” “successful/ unsuccessful suicide,” or “failed suicide attempt.”</p>	<p>✓ Say this: <i>John Doe dead at 32.</i></p> <p>✗ Not that: <i>Navy hero John Doe, 32, commits suicide with shotgun in garage.</i></p>
<p>Report on suicide as a public health issue. Suicide does not discriminate; it is a leading cause of death among all Americans, not just Veterans.</p> <p>Use nonsensational, objective terms such as “higher” or “increasing” to refer to differences in suicide rates.</p>	<p>Avoid referring to suicide as an epidemic.</p>	<p>✓ Say this: <i>Suicide is a national public health issue, with more than 45,000 Americans dying by suicide each year and rates increasing among people ages 10–75. New data shows a similar increase in deaths by suicide among Veterans.</i></p> <p>✗ Not that: <i>Suicide among Veterans is an epidemic in the U.S., with mortality rates skyrocketing.</i></p>
<p>Use current Veteran suicide data. When presenting statistics, provide the relevant context, such as information on suicide in the U.S. as a whole.</p>	<p>Avoid presenting the number of Veteran deaths by day as the only statistic, as it does not accurately reflect the full scope of the issue.</p>	<p>✓ Say this: <i>From 2015 to 2016, the overall Veteran suicide count decreased.</i> <i>(Uses current data and indicates the suicide count per year)</i></p> <p>✗ Not that: <i>22 Veterans a day commit suicide.</i> <i>(Uses outdated data and indicates the suicide count per day)</i></p>

 Best Practices	 Avoid	 Examples
<p>Suicide is complex — there is no single cause. There are a number of factors that increase or decrease the risk for suicide. Research has also identified warning signs to help in recognizing someone at risk for suicide.</p> <p>Portray posttraumatic stress disorder (PTSD) as a treatable condition that can affect anyone, at any age. Not all Veterans have PTSD, and PTSD does not always cause suicide or suicidal ideation. Note that many common risk factors for suicide, such as psychiatric disorders, are treatable.</p> <p>More information on PTSD is available at www.ptsd.va.gov. More information on recognizing the warning signs of a Veteran in crisis is available at www.mentalhealth.va.gov/suicide_prevention.</p>	<p>Avoid saying the suicide was random or was caused by a single or specific event.</p> <p>Avoid implying that all Veterans have PTSD, that PTSD is the sole cause of suicide, or that PTSD is untreatable.</p>	<p>✓ Say this: <i>John Doe, Navy hero and father, died by suicide.</i></p> <p>✗ Not that: <i>John Doe, Navy hero and father, committed suicide after a public divorce.</i></p>

 <p>Best Practices</p>	 <p>Avoid</p>	 <p>Examples</p>
<p>Interview a suicide prevention expert, such as a VA Suicide Prevention Coordinator, a researcher, or a mental health professional, who can provide information on causes and treatment of suicidality.</p> <p>Find a local Suicide Prevention Coordinator at VeteransCrisisLine.net/ResourceLocator.</p> <p>Find VA researchers at www.hsrd.research.va.gov or www.research.va.gov.</p>	<p>Avoid interviewing first responders (police, EMT, etc.) about circumstances surrounding the death.</p>	<p>✓ Say this: <i>According to a Suicide Prevention Coordinator, signs of an emerging crisis may include appearing sad or depressed most of the time, feelings of hopelessness, and mood swings.</i></p> <p>✗ Not that: <i>According to the police officer on the scene, John Doe was reportedly in an angry rage over his job loss.</i></p>
<p>Portray or provide stories of hope and recovery. Inform readers of how they can find help and access resources.</p>	<p>Avoid statements that discourage people from seeking help, that romanticize death, or that reinforce the inaccurate belief that nothing can be done about suicidal ideation or behaviors.</p>	<p>✓ Say this: <i>John Doe told his wife about his suicidal thoughts, and she found resources to help him. Confidential support is available 24/7 from the Veterans Crisis Line (call 1-800-273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat).</i></p> <p>✗ Not that: <i>John Doe exhibited some symptoms of PTSD. Diagnosing and recovering from PTSD is often a long and difficult process.</i></p>

 Best Practices	 Avoid	 Examples
<p>Provide readily accessible resources including the Veterans Crisis Line:</p> <p>Veterans Crisis Line Available 24/7/365 Call 1-800-273-8255 and Press 1 Text to 838255 Chat online at VeteransCrisisLine.net/Chat</p> <p>Additional suicide prevention resources can be found at: www.mentalhealth.va.gov/suicide_prevention/resources.asp.</p>		<p>✓ Say this: <i>Veterans who are in crisis or having thoughts of suicide, and those who know a Veteran in crisis, should contact the Veterans Crisis Line for confidential crisis intervention and support available 24 hours a day, 7 days a week, 365 days a year. Call 1-800-273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat.</i></p> <p>✗ Not that: <i>[Leaving the audience without any resources on suicide prevention]</i></p>

Veterans who are in crisis or having thoughts of suicide, and those who know a Veteran in crisis, should call the Veterans Crisis Line for confidential crisis intervention and support 24 hours a day, seven days a week, 365 days a year at **1-800-273-8255** and **Press 1**, chat online at **VeteransCrisisLine.net/Chat**, or send a text message to **838255**.

Additional Safe Messaging Resources

- Safe Reporting on Suicide: reportingonsuicide.org
- Action Alliance Framework for Successful Messaging: suicidepreventionmessaging.org
- Suicide Awareness Voices of Education: save.org/for-the-media

Resources for Family Members, Friends, and the Community

You do not need to be a professional in order to help a Veteran who may be going through a difficult time. There are a number of free, confidential, and vetted resources available 24/7/365:



S.A.V.E. training video:

Watch a free online suicide prevention training video at psycharmor.org/courses/s-a-v-e.



BeThere campaign:

Learn how to help a Veteran in crisis at bethereforveterans.com.



Coaching Into Care:

Access this national hotline (1-888-823-7458) to find care or services for a Veteran. Learn more at www.mirecc.va.gov/coaching.



VA Office of Mental Health and Suicide Prevention:

Find additional suicide prevention resources at www.mentalhealth.va.gov/suicide_prevention/resources.asp.