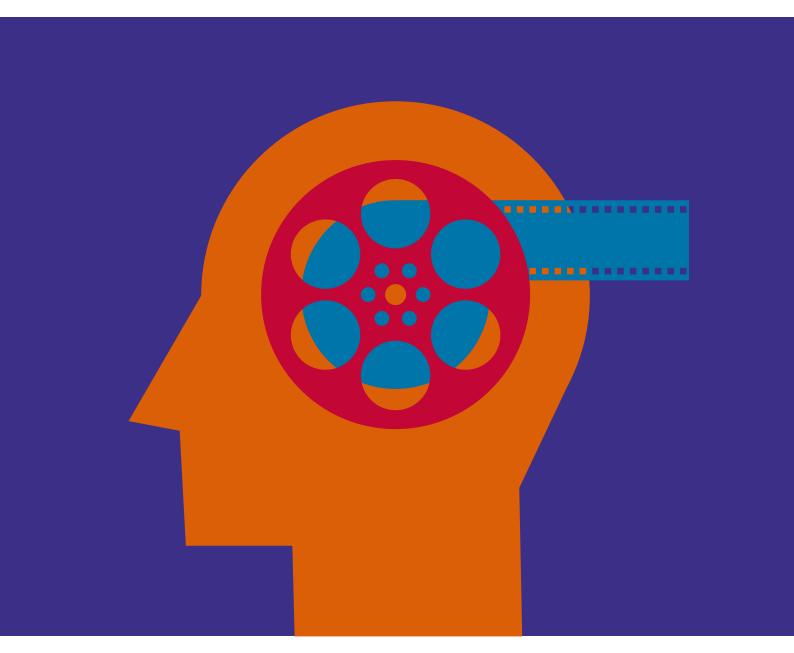


Psychology and Media Productions:Guidance for commissioners and producers



Acknowledgement

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Thanks go to Professor Peter Kinderman for his contribution

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British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library. ISBN 978-1-85433-754-2
Printed and published by
The British Psychological Society
St Andrews House
48 Princess Road East
Leicester LE1 7DR
www.bps.org.uk

If you have problems reading this document and would like it in a different format, please contact us with your specific requirements: Tel: 0116 252 9523 Email: P4P@bps.org.uk

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Introduction

These guidelines will aid productions and those commissioning productions, both fictional and factual, in gaining a clearer view of what psychology as a discipline and profession has to offer, how moral and ethical challenges in making programmes and films can be successfully met and how the British Psychological Society (BPS) can help.

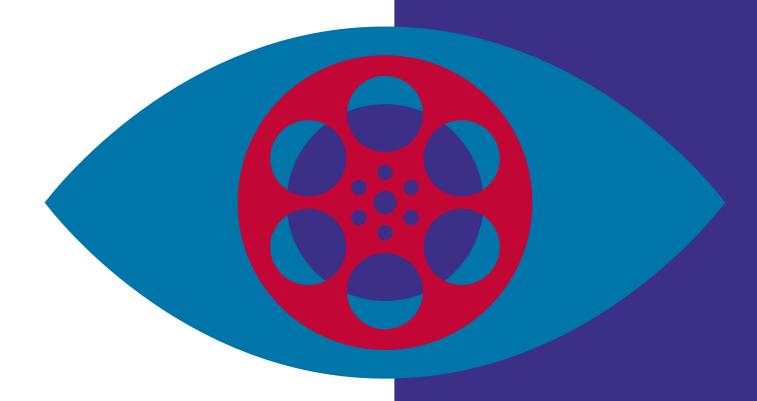
Audiences will always be interested in human stories, in better understanding how people 'tick'. Seeing deeply into other people's lives, as broadcast media can do so powerfully, is a way to reflect on your own life, a way sometimes to explore how other people resolve issues that they face and by which you may yourself be troubled.

There is a not too healthy motivation that can drive some of us to a voyeuristic interest in extreme human conditions such as obesity, bodily deformities or serious illnesses – or even an interest in people's suffering through abuse, violence and war. Broadcast media can bring us emotionally close to such human experiences without the direct contact that would be involved if we were actually present in such situations. Although it is part of modern, superconnected life to be exposed to and learn about the troubled nature of the human condition, the passivity of being exposed through media can lead to desensitisation and a reduction in capacity to respond actively and with empathy.

Given the potential for deep and lasting effects on audiences, a moral and ethical approach to productions that deal with these human issues should be paramount. It is relevant to note Ofcom's role in upholding high standards in broadcasting and that it is a statutory regulator. Broadcasters are required (as a condition of their licences to broadcast their services) to comply with the requirements of the Ofcom Broadcasting Code. The code sets out the standards with which broadcasters must comply in television and radio programmes. Failure to do so could result in Ofcom imposing one of the wide range of statutory sanctions at its disposal.

'Audience viewing figures, while of course important in the industry, are not the only, or necessarily the best, metric of success.'

John Oates, Chair of BPS Media Ethics Advisory Group.

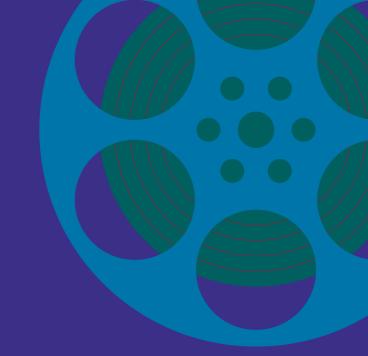


Psychology, the science of human experience and behaviour, has a dual role to play here. It can help in better understanding the processes through which broadcasts engage people and how people react in both the short and longer term, and play a role in safeguarding participants in productions. It is a science which has a lot to offer audiences in gaining insights into their own feelings, thoughts, relationships and lives.

With proper attention to accurate portrayal, psychology's contribution to enhancing wellbeing, through better public knowledge about psychological processes and professional help with people's mental health concerns, can have a major positive effect on society if broadcasters and psychologists work creatively together.

Psychologists have a responsibility to share their knowledge, insights and expertise with the public through the media. Nowadays the media have become an important source of knowledge, opinions and power. By using the media, psychologists aspire to contribute to the welfare of people in our societies.'

(European Federation of Psychological Associations)



Finding the right psychologist

As the representative body for psychology and psychologists in the UK, the BPS is best placed to support you when seeking expert psychological opinion, advice and expertise.

Our members follow a set of professional standards and can be expected to give sound scientific and ethics input when assisting production companies.

See Appendix 1: Psychologists working with the media – standards

Psychology is a broad subject, and psychologists vary widely in their specialisms, experience and the qualifications that they hold. Unfortunately, some people who claim to be 'psychologists' may not have the necessary levels of skills and knowledge, nor have professional recognition or personal liability insurance, putting production companies at risk if they employ them.

If you're in any doubt about a psychologist's credentials, get in touch and we can help to verify them. 'Chartered' psychologists have been verified by the BPS to provide services, and where some form of psychological treatment or clinical assessment is involved, registration with the Health and Care Professions Council is a must.

How can BPS members help?

- Screening participants.
- Designing assessments.
- Giving an overview of current research.
- Designing online materials and interactives to support broadcasts.
- Preparing safeguarding protocols for work that involves vulnerable groups or sensitive material.
- Providing consultation to members of production, safeguarding personnel and parents/carers regarding issues arising before, during and after filming.
- Advising on scientific content.
- Helping with treatments and pitches.
- Supporting participants during recording or providing aftercare services.

Why contact the BPS?

- The BPS holds a large register of qualified members with experience in working with media productions.
- BPS members are bound by a professional *Code of Ethics and Conduct.*
- The BPS offers training and guidance to members on working with media productions.
- The BPS Media Ethics Advisory Group is available to give free advice on the support that may be most appropriate for particular productions.
- The BPS can offer professional advice on working with particular groups and populations.

Contact: BPS Communications Team – communications@bps.org.uk; tel: 0116 252 9500

In the interest of public service it is crucial that broadcasters do not promote a narrow, single view, or a portrayal that might dissuade people -----------from seeking help.'

Media portrayals of mental health

Given the prevalence of mental health problems for a substantial proportion of the UK population (at least one in ten people at any one time^{1,2}), and the consequent concerns of their partners, relatives, friends and colleagues, it is not surprising that there is so much public interest.

A wide range of treatment and support approaches is available for the many and different challenges that face people suffering from mental health problems. Underlying the various approaches is an increasing realisation that a purely medical model inadequately represents the nature of most mental health issues^{3,4} and that the most effective therapeutic approaches take a much broader view of the individual in interaction with their particular context.

Psychologist or psychiatrist – what's the difference?

The psychiatric or 'medical' model tends to see mental health issues as arising from disorders or imbalances within a person and hence primarily treatable by medication (such as sedatives or anti-depressants) or physical treatments. The psychological (or psychosocial) model rather sees these issues as embedded in a context, particularly a social context, and the preferred treatments tend towards various forms of structured, interactive face-to-face sessions exploring the nature of problems and their solutions.

In reality, there is a blurred line between the two, with some clinical psychologists making use of medical treatment as part of their approach, and some psychiatrists using psychological therapies.

This diversity offers an opportunity for broadcast media to play a crucial role in providing accurate and up-to-date information for people who are looking for help from their GP or other health professionals.

Benefits of filming different treatments

Showing people receiving treatments has two main potential benefits:

- 1. Improving general understanding of and sensitivity to the nature and known causes of mental health issues; in other words, demystifying one of the most disturbing aspects of human life, whether as someone experiencing the challenges, or as someone close to another's experience.
- 2. Showing in an unbiased way the range of approaches that are available, their appropriateness for different sorts of problems, and the extent to which relief and improvement can be expected.

Together, these benefits can help people to seek treatment when they have the need and help others to better support people in treatment and recovery. However, broadcasters face issues in achieving these benefits for the viewing public. Ethically, it is risky in several ways to show identifiable individuals at times when they may not have sufficient capacity to fully understand the immediate and longer-term consequences of participating.

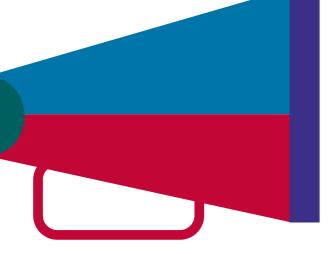
Psychologists can support their colleagues in how best to protect the interests of a person that they are providing therapy to as part of a broadcast production.'

John Oates, Chair of BPS Media Ethics Advisory Group

Participants can regret being seen in a troubled state by millions of viewers. They may be unhappy about repeated screenings and possible international sales of a programme. They can be unhappy about the editing of the material and feel that it does not accurately or sensitively portray the nature of their difficulties. Their partners, children and other relatives may have misgivings or more serious concerns about the broadcast. Their employment possibilities may be compromised and they may feel stigmatised. It is important for production companies to be aware of these risks and realise the burden of duty of care that they should be prepared to take on in such productions. Given the trauma of mental ill-health, it is ironic that the very act of portraying it may itself cause further trauma.

The British Psychological Society maintains a database of appropriately experienced, qualified and registered psychologists who are able to help with productions that feature all aspects of mental health, and the Society's Media Ethics Advisory Group is available to support productions in the ethics of working and supporting with participants.

T: 0116 2529500 E: communications@bps.org.uk



Mind your language

Lots of people do irrational, bizarre and self-destructive things. In the UK, satire and robust political journalism depends on us being able to describe what we see. However, it is important to avoid giving unnecessary offence and there are other reasons to be careful with such language.

Many people struggle with mental health problems and it's easy for the language of 'crazies' and 'nutters' to drift towards insults. It is rightly unacceptable to make fun of someone due to their sexuality, gender, appearance or ethnicity. The same standards that apply to sexism, racism and homophobia should also apply to insulting someone because of something to do with their mental health.

Telling someone to 'keep taking the medication' is offensive. This doesn't refer to an individual's behaviour but instead insults and implicates the millions of people who have sought professional help.

'Psycho-killer on the loose'

Even when a criminal has a history of mental health problems there are nearly always other issues that are more relevant in explaining their crimes. People with serious mental health problems are particularly vulnerable and are more likely to be victims of crime. But the idea of the 'psycho-killer' or 'mad axeman' is attractive in some parts of the media.

This kind of language doesn't help because it fails to offer any useful information. It's also misleading; individuals with specific diagnoses like schizophrenia are not necessarily dangerous.

Homicide and crime are the most frequent themes in media coverage of mental health, and films and television dramas tend to depict people with mental health problems as violent and unpredictable.

Negative media reporting has an impact on people who use mental health services, exposing them to greater suspicion, prejudice and discrimination. It can also deter those who need help from accessing it.

Labels are for things not people

Psychiatric diagnoses should never be used to label people. Technically speaking they are labels for the person's problems, not the person themselves. They also don't represent a life sentence so it's important that journalists and programme makers try to avoid language that implies either.

It's preferable to use everyday ordinary language equivalents. We should never say that someone is a 'schizophrenic' or 'bipolar'. Rather than labelling the person it would be more accurate to say that she/he 'has received a diagnosis of X'. Or, instead of referring to schizophrenia, it would be more informative and less misleading to talk about a person 'hearing voices', for example.

Instead of using medical terminology it is more helpful to use language that straightforwardly describes a person's experiences, without assuming the presence of an illness.

Terms like schizophrenia are labels, shorthand descriptions for complex patterns of thoughts, emotions and behaviours. The problems themselves, such as hearing voices, develop due to particular reasons. But the explanation for the development of those problems is not the label used to describe them.

'Don't ask what's wrong with me, ask what happened to me'

We all face distressing events in our lives: divorce, bereavement, redundancy and various kinds of failure. Even positive events like winning the lottery can be stressful. Some of us have more to deal with in the form of poverty, domestic violence, racism, bullying, family problems, abuse or trauma.

There is an ongoing debate about diagnosis – some people find that being given a diagnosis is really helpful and others do not. It is often useful to represent more than one point of view on this in programmes about mental health problems. It's good practice to talk to people who you are interviewing or filming so you can better understand how they would like their experiences to be described and portrayed.

There is a link between the kinds of distress that lead people to seek professional help and social disadvantage. Even very serious experiences such as hearing voices can be reactions to such stressful events and life circumstances – particularly abuse or other types of trauma. Many social and environmental factors have been shown to lead to later mental health problems.

For journalists, broadcasters and writers it is important to make the connection between these life experiences and our psychological wellbeing.

Journalists, people working in the media, film makers and programme makers have a responsibility to ensure that the public is aware of important factors shaping our psychological wellbeing and the fact that we can, by working together, change them.

Media portrayals of psychology theory and research

Psychology has developed a wide range of experimental and observational techniques for researching human behaviour, thoughts and feelings.

Consider the Stanford prison experiment or the use of EEG caps - many of these are highly televisual and can give audiences striking insights, but it is crucial to understand, and to ensure that audiences understand, that valid results can only come from precisely following well-defined procedures. Varying any of these can totally invalidate the outcomes.

Experiments

The 'experimental approach' usually depends on using very specific materials or apparatus, in strictly controlled conditions comparing results from two or more different conditions. Sometimes an experimental design requires different participants for each condition, which means that an individual participant's behaviour only makes sense in comparison with behaviour in another condition.

Focusing on how a single individual behaves in a particular experiment or observation is not usually the way that psychologists gain new knowledge. Human behaviour is variable and often it is necessary to combine data from many individuals to be able to draw conclusions. To give one example, to compare one child aged six years with another who is five years old, tackling the same task, is unlikely to tell us very much about development, since children vary so much in their individual profiles of development.

Observational methods

Experimentation in controlled conditions is not the only research method in psychology; observations of behaviour in more natural settings are also widely used. Here again, systematic techniques are used, and results and interpretations tend to be based on analysing across numbers of people. It can be very misleading to seek to make general statements about an individual child, young person or adult on the basis of a single observation or 'test' because behaviour is so dependent on context. The environment of filming for a production is so very different to that of a psychology laboratory or an everyday setting that it is rarely valid to make general judgements based on what is filmed. However, individual observations can legitimately be used as illustrations of more general principles derived from research, as long as the individual is not labelled or judged on the basis of the single observation.

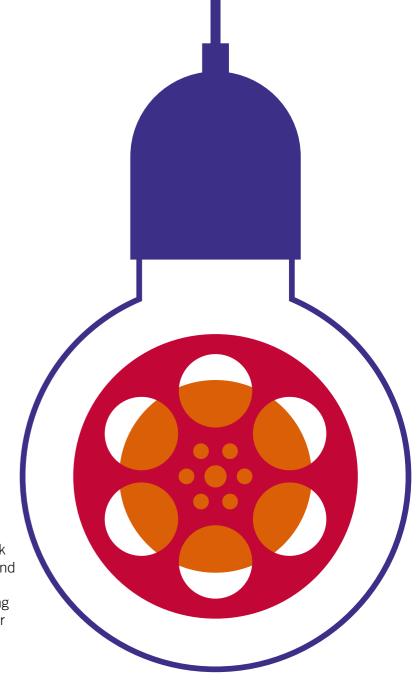
The British Psychological Society takes a strong position on this; that it can be stigmatising to 'label' a person based on a single observation in an unfamiliar context. Any psychologist taking part in a production should be expected to follow this guidance, and this can extend to a responsibility to work with the production to ensure that any commentary similarly avoids such 'labelling'.

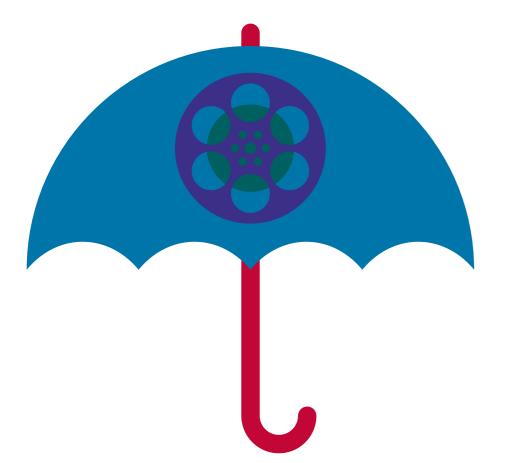
Portrayals

Psychologists are also expected to ensure that individuals' views about how they would like to be portrayed are respected, and will seek to work with productions to achieve this. With children and young people, thought needs to be given to how portrayals of them may be felt to be embarrassing or unwelcome when they become older and their sensitivities change.

Deception

When psychologists carry out research, it is sometimes necessary to withhold the full details of an experiment while people consent and participate, because revealing the full purpose might invalidate the findings. Very occasionally there may be an element of deception as a necessary part of the research design. The Society's Code of Human Research Ethics is clear that withholding information and other forms of deception are unethical unless fully justified by the scientific demands of the study, and participants should be fully debriefed and their mood fully restored if it has been affected. Also, adequate provision must be made for follow-up to ensure no lasting harm. This is even more important for media portravals of psychological experiments, where the risks of disrespect to people's dignity and autonomy, and longer-term effects are generally greater.





Safeguarding vulnerable groups

The regulations safeguarding children and young people in performances in England and Scotland, the Ofcom Broadcasting Code and the EU Audiovisual Media Services Directive all highlight the need to recognise the vulnerabilities of participants in productions, and the risks of harms associated with productions and broadcasts.

As risk assessment guidance now clearly recognises the range of psychological risks that may be present in performances, production companies can benefit from knowing more about psychology and how it can help. This is relevant not only for children and young people but also for other vulnerable groups, as well as members of the public participating in productions.

(See Checklist 1: Key safeguarding questions for productions)

How can psychologists help with safeguarding children and young people?

Appropriately experienced and qualified psychologists can provide a 'safety-net' safeguarding function by acting as a source of advice if concerns arise during a production about a participant's

wellbeing, whether these concerns are felt by a member of the production team, a chaperone, parent or guardian. If there is potential for concerns arising, which is frequently the case, especially where a degree of stress accompanies the participation, it should be made clear to all parties what the route is for raising concerns and how confidentiality and respect are to be maintained if concerns are raised. Adult drama productions for screen or stage will often contain scenes that portray violence, sex, drug use or other 'adult' themes that are not appropriate for children to witness, while in the same production there are roles that need to be filled by children. Although the Ofcom guidance on people under eighteen in programmes provides a framework to aid safeguarding in such situations, in the case of a specific production a psychologist can usefully provide a script review to highlight points of risk and can advise on ways to minimise exposure and consequent risk to young participants.

I helped a production to plan a shoot with scenes containing adult language and references to sexual matters, so that the child participant was not exposed to these and separate cut-ins were shot with the child.'

A clinical psychologist working on a BBC drama

(See Checklist 2: Identifying risks in productions and vulnerabilities of individual children)

Where it is necessary for a child or otherwise vulnerable person to be in a scene where powerful emotions or actions are portrayed, a psychologist's advice can be useful in helping the production team to better understand the risks involved and how they can be minimised through agreeing modifications to a person's role in such scenes and careful prebriefing of participants and crew.

Psychologists can help alleviate any negative feelings following a performance and demonstrate healthy ways to manage any ongoing ill effects.

(See Checklist 3: Recommended background characteristics of people giving 'expert' psychological advice on productions involving children and young people)

Conditions such as disability or disfigurement, or statuses such as certain ethnicities, religious affiliations or gender identifications may (although by no means always) be associated with greater vulnerability if these conditions or statuses are featured in productions for example reality TV programmes featuring children and young people exploring their gender or sexual orientation.

Productions showing concern for the welfare of participants will consider how to avoid stigmatising or negative portrayals in these circumstances, and take pains to properly screen participants for specific sensitivities that may be linked with heightened vulnerability. Anticipating risks of expressions of negative audience reactions through social media and other channels, and through adverse publicity in other media, can usefully form part of an ethical approach which will help to safeguard participants.

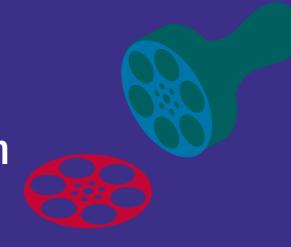
Anticipating risks of distress or other harm to family, relations, friends and associates of participants where sensitive issues are portrayed recognises the significance of individuals' social contexts as also involving potential vulnerabilities.

I spent over two years involved with a production featuring a minority group and all participants subscribed to the idea that showing their 'true story' and helping accurate information to be available about them would be beneficial in the long run for educating others. Making the rationale and ethical basis of the production overt at all stages was extremely helpful and as a psychologist I was able to facilitate this.'

A educational and child psychologist supporting a reality TV programme

Celebrity participants in certain documentary/reality TV programmes can be more vulnerable than one might anticipate. They are expected to 'know the territory'. Despite their fame, like other vulnerable and sensitive people, their self-perceptions, self-esteem, self-worth and confidence may be derived from others' perception of them and require significant external validation, and their careers may depend on popularity.

Gaining consent from adult participants



A key principle in gaining and maintaining consent from participants in productions is the validity of their consent. Crucially, to the fullest possible extent, the foreseen consequences (including risks as well as benefits) of participation should have been properly communicated, and seen to have been understood, before a potential participant is asked to consent.

As in most ethics judgements, a balance has to be struck, here in the case of seeking consent, between adequate recompense for participation and the avoidance of undue coercion to participate. For this reason, productions can usefully consider an offered fee level that achieves an appropriate balance between these factors.

Consent to withdraw

Because a person can never be fully aware of the experience that they will have during participation, where there is a potential for stress or challenge in the production it is good ethical practice to include in the contractual agreement a condition for withdrawal without adverse consequences. Such a condition needs to take account of the potential negative consequences for the production of withdrawal at late stages in the production; a solution to such difficulties can be to seek renewed consent once a participant has a fuller comprehension of what is involved but before too much investment is made in their contribution. This could, if appropriate, form part of a contractual agreement. A psychologist may be able to help where a contributor has concerns about what has been recorded.

Capacity to consent

Capacity to consent is also a significant factor to be considered, particularly, but not only, where there is a risk of a participant lacking the mental abilities to understand what consent entails. Cases where this issue might arise could include filming contributions from older people or people with mental health difficulties. However, incapacity to consent should never be assumed. Guidance on how to approach such challenges can be offered by appropriately experienced psychologists and with reference to the Mental Capacity Act 2005. In general, it is best practice to make full efforts to enable potential contributors to understand sufficiently what participation entails and support them in making autonomous decisions before considering alternatives.

The Ofcom Broadcasting Code specifies clearly the requirements for treating programme contributors fairly and seeking consent from them (Section 7).

'I helped a production that showed a member of the public who was not managing an aspect of his life and was receiving psychological treatment. There was also a complicated dynamic where another person might have been coercing the contributor, so I helped to devise measures that helped to ensure that valid consent was sought and kept under review.'

Sensitivities and vulnerabilities of children and young people

There are important considerations relating to children of different ages (taking 0–18 month olds, preschoolers, and primary and secondary school-aged children as working categories).

Preschoolers particularly need the presence within sight of a 'secure base' person who they trust as a source of comfort and security and can go to easily.

Primary school-age children also need to know of the presence of such a person, but may be able to tolerate knowing that they are available, even if not always in sight. Pre-screening will usually be necessary to establish whether potential child participants have attachment issues that may need special care and attention. Psychologists can help to ensure best practice for working with those with additional needs or disabilities, and to facilitate liaison with school, medical and social service staff when needed.

Primary school-age children are likely to be sensitive to the comments and reactions of their peers. They also need clear boundaries and careful behaviour management. They will be also sensitive to missed periods of schooling.

Secondary school-age children have different sensitivities, especially around self-esteem, bodyimage, intellectual abilities, and gender and sexuality matters. While they may wish to be treated as adults, and their autonomy should be respected, children of this age may nevertheless be less aware of the possible harmful consequences of participation, such as losing in a competition or failing a challenge. Productions that cover such sensitive topics should be aware of children's differing sensitivities.

Psychologists can help with briefing chaperones and production teams in how best to be alert to the ways in which children may show signs of distress and to stop recording, and how to restore mood rapidly. Some children will be more sensitive than others to the stresses and demands of participation; those people responsible for the child's welfare during participation should recognise this.

(See Checklist 4: Safeguarding children and young people in productions)

In the run-up to exams, secondary school-age children are likely to be adversely affected by missed school periods. Periods of testing of younger children in school should also be taken into consideration. Where appropriate, there should be liaison with participants' schools before, during and after production.

Where there is a likelihood of repeated broadcast or other forms of distribution of productions, the changing sensitivities of children of different ages should also be kept in mind. What may be acceptable to a younger child (for example, crossgender dressing) may be a source of humiliation for that child when older. Wherever possible, opportunities should be made available for children to view and comment on material showing them. Loss of privacy is experienced differently by different children and at different ages. Information about possible intrusions into private matters should always be conveyed and be seen to be understood prior to consent being sought.

Some members of the BPS have specialised experience in screening potential contributors, adults as well as children, to ensure that they are robust enough to participate, given the specific risks and stressors of the production.

Gaining valid consent/assent from children and young people

It is crucial that children of all ages should be made aware, in age-appropriate ways, that they are free to withdraw their consent and participation at any time, and they should be clear about how they can do this without any pressure to continue.

Ofcom's Broadcasting Code (Rule 1.28) deals specifically with consent and under eighteen year olds. 'Due care must be taken over the physical and emotional welfare and the dignity of people under eighteen who take part or are otherwise involved in programmes. This is irrespective of any consent given by the participant or by a parent, guardian or other person over the age of eighteen in loco parentis.'

Gaining valid (informed, freely given, renewed) consent and assent should be understood as potentially achievable with children of any age as a first position, while not replacing parental consent. Valid parental consent should also be sought for children of all ages up to sixteen years. However, coercion from parents for children to participate should be seen as equally compromising of the child's interests as any coercion from other sources. For 0–18 month olds there should be constant monitoring for signs of distress. For all ages of children, consent should be an ongoing process during the production, not a one-off process completed before the child gains a more informed understanding through participation.

Information given in relation to consent should be clear, unambiguous and matched to the child's level of understanding. For younger children (preschool and primary) verbal explanation of participation conditions and full answers to children's questions should be given to supplement written information. Consent should be sought by a person who is seen by the child as independent of the interests of the production company and who can ensure that the child is aware that saying no to a request is fully acceptable and carries no negative consequences.

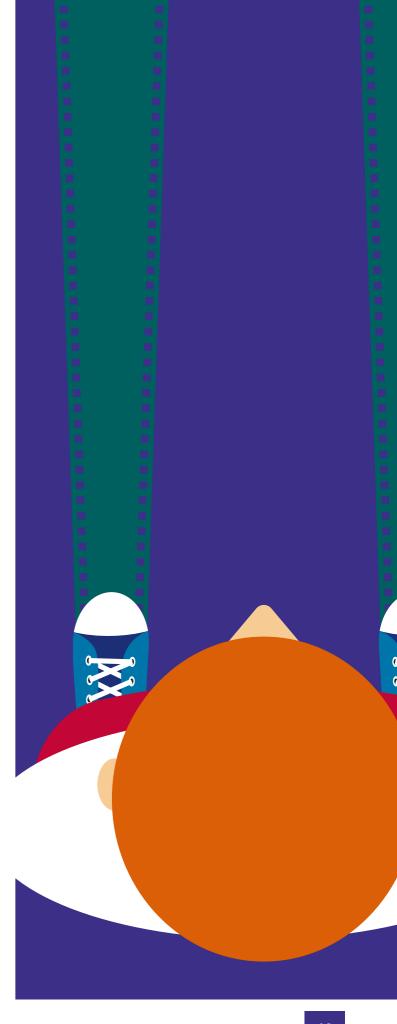
For younger children, recording consent on camera or by audio recording can be an acceptable alternative to signed consent.

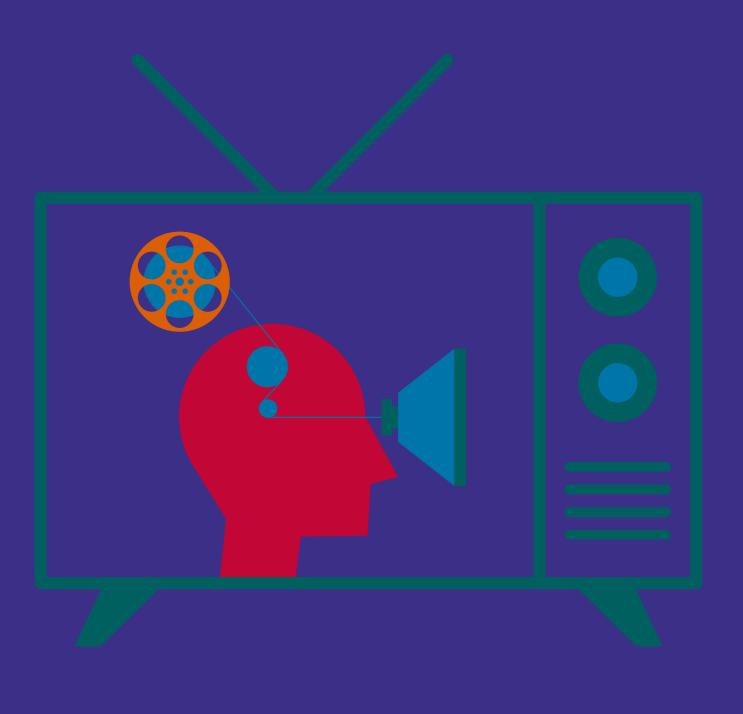
In all of this, the children's wishes and feelings should be paramount. It is not unknown for a parent to be overly 'pushy' for their child's participation, and for production crews to be resistant to a child's wish to cease participating. This is in a way understandable if it happens, for example, in the middle of a shoot with an expensive set-up and tight schedule, but it is not ethical and it does not respect a child's rights.'

Child and educational psychologist working on a reality TV programme

Safeguarding the human rights of contributors is paramount, in particular for children, young people and others where a power imbalance may inhibit the expression of concerns. Psychologists can help with enabling good communication among all involved in a production and for the voices of contributors to be heard and respected. It should also be recognised that due care of people aged under eighteen participating in a programme, irrespective of any consent given, is a clear requirement of the Ofcom Broadcasting Code (Rule 1.28).

Another significant rule in the Ofcom Code in this area is 'People under eighteen must not be caused unnecessary distress or anxiety by their involvement in programmes or by the broadcast of those programmes' (Rule 1.29).





Checklist 1:

Key safeguarding questions for productions

- What are the ages of the children/young people/ adults who will be involved?
- Are you aware of the professional registration and regulation frameworks for practitioner psychologists?
- Has a risk assessment been carried out, and if so, by whom?
- What risk mitigation is planned?
- How will participants be informed of the nature and potential benefits and risks of participation?
- Will participants be informed about broadcast times and for how long the programme will be available online?
- How will the participants' consent be sought and monitored?
- How will the concerns of contributors be heard and respected, especially those of children and young people?

- Are the appropriate nations' safeguarding legislation, guidance and licensing procedures being followed?
- How will participants be screened for vulnerability and resilience?
- What chaperonage/support will be in place?
- Do chaperones have access to a psychologist for consultation, and is there a protocol in place for this?
- What provision is being made for aftercare, and what advice will participants be given about dealing with postings in social media about the production?
- How will any potential risks for relatives and friends be assessed and mitigated?
- How much involvement will participants and chaperones or psychologists have in accepting/ vetoing filmed material?

Checklist 2:

Identifying risks in productions and vulnerabilities of individual children

- Risk in terms of what is involved in the specific production and thinking through any potential ramifications.
- The key messages which are going to be represented and any ramifications of this (e.g. if the programme is seeking to illustrate that children are amoral or some such negative message, what effect might this have on the child's identity after they watch it?).
- Any risks related to the child's family network and their ideas about the child taking part.
- Any risks related to the individual child's level of self-esteem and mental health which are already nascent pre-production.

Red lights

- Anything in the production that would not be broadcast to/seen by children.
- Encouragement of or failure to curb confrontational, abusive or otherwise negative behaviour in the child participants.
- Exposure of child participants to confrontational, abusive or otherwise negative behaviour that they would not normally experience and which is seen as condoned.
- Condoning of illegal or socially unacceptable behaviour.
- Likelihood of intentional distress or unintentional distress that is not immediately dealt with.

- Putting children under stress without a 'secure base' person present and clear opportunity to withdraw.
- Age-inappropriate sexual content or exposure to such content.
- Deception or deliberate withholding of significant information.

How to carry out risk assessments to facilitate rather than impede children participating while safeguarding them

- What is the programme format: drama/ competition/reality/documentary/makeover?
- What ages will the participating children be?
- Have developmental issues and concerns been taken into consideration in planning the programme?
- Is there any risk of:
 - damage to caregiver/child bonding/ attachment?
 - distress in the children?
 - broadcasting of any distress displayed by the children?
 - potential for bullying of children as a result of broadcasting their actions or behaviour?

- If the answer is 'yes' to any parts of the previous question above, has the programme specification been reviewed by the BPS Media Ethics Advisory Group?
- What is the justification for making the programme and for the participation of children?
- What additional care protocol has been put in place to protect children who may suffer distress? (This may be suggested by the group referred to above.)
- Will appropriate local authority licences be in place for the children?
- Are current clear DBS enhanced disclosures in place for all production team members who will have contact with the children?
- Have you involved a qualified psychologist to ensure the continuing care and protection of the children? The BPS can help put you in touch with an appropriate qualified professional.
- Will the programme aims, procedures and implications (particularly possible negative repercussions) of participation of the children be fully explained to the parents/guardian?
- Are the children of an age when they can give consent?

- If yes, will the programme aims, procedures and implications of participation be fully explained to the children?
- If no, how will assent be monitored?
- Will the children give consent orally on camera or in an audio recording?
- How will coercion to consent by parents or the production team be avoided?
- What screening will be done to identify any children who might be especially at risk of negative effects from participation?
- Are the children taking part as a member of a team that might provide them with social support?
- Is the programme content such that it would not be appropriate for children under sixteen/eighteen to watch?
- Is the programme content likely to show children behaving badly in a way that might influence child viewers?
- What are the arrangements for chaperones to be provided for each child and/or group of children?
- What training is required of the chaperone(s)?

Checklist 3:

Recommended background characteristics of people giving psychological or chaperonage advice or support on productions involving children and young people

For advice in the course of individual productions:

- Experience in or good understanding of productions that involve children and young people.
- Experience in child and adolescent psychology/ psychiatry, either in research, clinical or teaching capacities.

For advice from practitioner psychologists:

- Registration with the Health and Care Professions Council and having Chartered status in the British Psychological Society.
- Evidence of substantial experience in professional work with children in a range and variety of contexts such as the home, community and schools.

For other psychological advice:

Graduate membership of the British Psychological Society, and where significant risks are identified, chartered status and/or membership of a relevant division or section of the Society; for example, the Division of Clinical Psychology, the Developmental Psychology Section or the Division of Educational and Child Psychology.

For psychological advice in relation to the approval of applications for licensing:

Membership of a recognised British Psychological Society list of members competent to provide such advice.

Chaperonage

Recommended skillset and training for chaperones of children in productions:

Vetting and safeguarding:

- Clear enhanced DBS disclosure obtained no more than three years before the completion date of the chaperonage.
- Training in child protection, as a minimum, Safeguarding Children Level 1.

Knowledge and understanding of:

- Legal frameworks as applied to children in performances.
- The guidelines around safeguarding (e.g. Working Together to Safeguard Children (DCSF) and Safeguarding Children and Young People from Sexual Exploitation (DCSF).

- Key aspects of child development: attachment, cognitive abilities (especially related to competence to assent/consent), conformity (sensitivity to overt and covert pressure), emotional vulnerability (sensitive topics such as body image, self-esteem, family structure, gender), anxiety and fatigue effects, social development and verbal communication development, and individual differences in children's temperament, attachment styles, extraversion–introversion, background and living circumstances and other aspects that may affect reactions to participation.
- The Every Child Matters Common Core of Skills and Knowledge for the Children's Workforce (DCSF) six areas: effective communication and engagement with children, young people and families; child and young person development; safeguarding and promoting the welfare of the child; supporting transitions; multi-agency working; sharing information.
- Working with children and young people with additional needs and disabilities.
- Referral opportunities within and beyond the production company for any issues of wellbeing.
- Processes involved in media productions, roles and responsibilities of key personnel.

- Ofcom rules and guidance on under-eighteens in broadcasting.
- Ethics principles (e.g. respect for the autonomy, privacy and dignity of individuals, integrity and social responsibility).

Skills:

- Evidence of first aid training.
- Competence to negotiate a contract with a production company that includes a clear protocol for independence in supporting child performers and their families; for sufficient control to discharge the chaperone responsibilities in an adequate and timely manner; and for adequate provision for followup if necessary.
- Being able to keep accurate and useful records.

Personal qualities:

High priority attached to children's interests; empathy; sensitivity to children's paralinguistic signals and body language; capacity to establish rapport with children and parents from a range of backgrounds; ability to express views clearly and firmly; capacity to listen to, understand and respect children's views; ability to negotiate solutions to protect children's interests.

Checklist 4:

Safeguarding children and young people in productions

- Production planning should be sensitive to the range of risks present in involving children in productions and include mechanisms for risk assessment.
- The protections and mitigations required for individual productions should be proportionate to the level of risks identified.
- Where significant risks are identified, independent expert advice should guide the provision of adequate protection protocols.
- Chaperonage should be independent and competent in protecting children's interests.
- The capacity of children to give or withhold assent and consent to their participation should always be assumed and respected.
- Consent for repeat broadcasts, as they occur, should again be sought from child participants including if they have become adults at time of such repeats.

- Parental consent should always be required for participation of children under sixteen years of age.
- Children's participation should not be coerced by any parties involved in the production; neither production staff, chaperone(s), parents nor persons in loco parentis should influence a child's decision regarding participation.
- The differing capacities and sensitivities of children of different ages and personal characteristics should be understood and taken into account in the design and planning of productions.
- Core ethics principles of respect for the privacy, autonomy and dignity of individuals, and for integrity and responsibility should be adhered to.
- Positive and healthy adult models of behaviour, especially in relation to the management of emotions and relationships, should be shown in every production involving children.

Psychologists working with the media – standards

Members of the British Psychological Society who are working with media or participating in media productions are encouraged to uphold their professional standards by –

Respecting the autonomy, dignity and privacy of contributors and other persons by:

- Being open in dealings with production companies and contributors.
- Working on a basis of valid consent from contributors.
- Promoting fairness and sensitivity in portraying individuals and groups.
- Advocating reasonable rights of reply.
- Observing best practice standards for privacy, confidentiality and anonymity which are only infringed with the valid consent of the individual(s) concerned or where there is a clear overriding public interest.
- Refraining from public comment on the behaviour or psychology of identifiable individuals where there is any risk of offence, distress or other harms.
- Considering potential effects on third parties such as relatives and colleagues of contributors.
- Advocating caution in the use of archive or library material involving emotional trauma, illness, death or suffering, or revelations of a personal nature, and in the need for appropriate consent for the re-use of such material or material supplied by third parties.
- Advocating for the protection of the rights of persons who are vulnerable or of limited capacity.

Supporting high standards of integrity:

- Maintaining high scientific standards of accuracy and evidence.
- Advocating respect for academic freedom and integrity.
- Advocating coverage of a diverse range of views and fostering debate.
- Advocating for engagement with appropriate ethics review.
- Avoiding offering comment, opinion or advice beyond one's zone of professional competence.
- Maintaining high standards of professional practice and ensuring appropriate supervision and support from professional peers.
- Respecting the duty of confidentiality to one's clients.
- Ensuring that one's correct professional title is referenced in the production or in the credits, as appropriate.

Being socially responsible:

- Recognising that media production exists within the context of human society and has a potential for great influence.
- Accordingly, acknowledging a shared collective duty for the welfare of human and non-human beings, both within the societies in which media production takes place, and beyond them.
- Considering possible risks and seeking to minimise them while maximising benefits.

4th EFPA Symposium on Professional Ethics - Prague, 1–3 October 2010

Guidelines on working with the media

1. Preamble

- 1.1 The guidelines are based upon the European Federation of Psychologists' Associations (EFPA) meta-code of ethics, approved by the EFPA General Assembly, Granada, July 2005 (www.efpa.eu).
- 1.2 Psychologists have a responsibility to share their knowledge, insights and expertise with the public through the media (television, radio, internet, print media). Nowadays, the media have become an important source of knowledge, opinions and power. By using the media psychologists aspire to contribute to the welfare of people in our societies.
- 1.3 Psychologists have multifold responsibilities when dealing with the media. For example:
 - a. To disseminate information regarding various areas of psychology, research and services rendered
 - b. To inform people about the possibilities of psychological services as well of the ways to obtain them.
 - c. To play a part in the presentation of problems with the use of media.
 - d. To act as consumer educators.
 - e. To take part in empowerment activities.
 - f. To reduce uncertainty and stress in times of crisis in an informative way.
- 1.4 These underlying guidelines have been developed to support member associations in developing national guidelines in order to:
 - a. Support psychologists who are appearing in public media to behave in an ethically sound way.

- b. Respect and protect the rights of all people involved.
- 1.5 Below are the basic elements of the media guidelines. Each item is followed by a short explanation and a reference to the relevant article(s) of the meta-code (MC).
- 2. Basic elements of a media guideline a psychologist appearing in public media should:
- 2.1 Show respect for all people involved.
 - Though respect is expected in all professional activities, it is of utmost importance when the psychologist appears on television, writes in a newspaper or when the psychologist presents to the public. Appearing in the media involves many people watching or hearing the psychologist.

 One should be careful to not to show unintended disrespect to any person involved or to refer negatively to any individual or organisation without

(MC: 3.1.1.ii)

sufficient evidence.

2.2 Avoid diagnosis statements about any person in public.

It is generally accepted among psychologists that diagnosing a person should be based on a proper investigation which can only be done with the consent of the person involved, if not otherwise required by legal regulations. A proper investigation often includes observations, interviews and/or tests.

But even if it could be considered possible to make a professional judgement about a person based solely on information provided by public media, the psychologist should remain silent because he/she has no consent from the person. In general, this rule does not apply in the study of people who are no longer alive. But even in this situation one should be careful not to harm the interests of others, like descendants.

(MC: 3.1.2, 3.1.3 and 3.2.3.ii)

2.3 Be careful not to bring into public any personal data about people with whom the psychologist has (had) a professional relationship.

Confidentiality is a key value in the work of psychologists. Even with consent or on request from the client the psychologist should refrain from bringing information about his/her client to the public. Being a spokesman for the client will rarely be compliant with the role of being the clients' psychologist.

The psychologist should be aware of taking on different roles like taking care of a particular group of clients and at the same time publishing about these clients. Misperception of conflicting interests or a violation of confidentiality by those involved should be prevented.

(MC: 3.1.2.ii and 3.4.4.i)

2.4 Be careful not to go beyond his/her field and degree of competence.

Successful media performances by the psychologist may result in the psychologist being asked to return to them again at a later time with regard to similar or other questions. The psychologist should be aware of the challenges to go beyond his/her field of competence.

(MC: 3.2.2)

2.5 Aim at empowering the audience. Psychologists aim at sharing psychological knowledge and insights that may be relevant to the lives of their audience. The psychologist should be sensitive to the effects of self-promotion.

- It is advised to use a language that will be understood by the general public and does its best to prevent misunderstanding.

 (MC: 3.1.1.i and 3.4.4)
- 2.6 Be aware that he/she is representing the community of psychologists.
 - Being aware of this responsibility, the psychologist should be respectful to different psychological models, work styles and abstain from remarks that could hinder the work of other psychologists. However, fair critique with valid arguments should not be hindered; this might even strengthen the profession.

(MC: 3.3.1.ii)

- 2.7 Be sensitive to the potential effects on third parties, like relatives and other acquaintances. Although it may be difficult to foresee negative effects on third parties and their relations, the psychologist should do his/her best to avoid effects, like blaming family or friends for problematic behaviour of any individuals in society.
- 3. Recommendations for the member associations
- 3.1 To implement these EFPA guidelines on the ethical aspects of working with the media.
- 3.2 To check if possible within the national legal regulations whether persons who are presented in public media as psychologists really are indeed psychologists according to the regulations of the country.
- 3.3 To offer their members media training which includes training in the ethical aspects beside more technical and informative aspects, like rights and customs within the media field.

References

- 1. Coid, J., Yang, M., Tyrer, P. et al. (2006). Prevalence and correlates of personality disorder in Great Britain. *British Journal of Psychiatry*, *188*, 423–431.
- 2. Health and Social Care Information Centre (2009). *Adult psychiatric morbidity in England, results of a household survey.* Leeds: NHS Digital.
- 3. Bracken, S., Thomas, P., Timimi, S. et al. (2012). Psychiatry beyond the current paradigm. *British Journal of Psychiatry*, *201*, 430-434.
- 4. Division of Clinical Psychology (2013). Classification of behaviour and experience in relation to functional psychiatric diagnoses: Time for a paradigm shift. Leicester: British Psychological Society. Available at www.bps.org.uk/system/files/Public%20files/cat-1325.pdf

Web resources

BPS Code of Ethics and Conduct: www.bps.org.uk/news-and-policy/bps-code-ethics-and-conduct

BPS Chartered Psychologist: www.bps.org.uk/join-us/membership/chartered-membership

HCPC Practitioner Psychologists: www.hcpc-uk.co.uk/aboutregistration/professions/index.asp?id=14

Check if a psychologist is Chartered: www.bps.org.uk/bpslegacy/lcm

Health and Care Professions Council: www.hpc-uk.org/aboutregistration/professions/index.asp?id=14

Ofcom Broadcasting Code:

www.ofcom.org.uk/__data/assets/pdf_file/0005/100103/broadcast-code-april-2017.pdf

Ofcom Guidance Notes, Section 1: Protecting the under 18s:

www.ofcom.org.uk/__data/assets/pdf_file/0017/24704/section1.pdf

Child performance and activities: Licensing legislation:

www.gov.uk/government/publications/child-performance-and-activities-licensing-legislation

Examples of best practice in child performance licensing:

http://downloads.bbc.co.uk/guidelines/editorialguidelines/pdfs/Child Licensing.pdf

Every Child Matters – Common Core of Skills and Knowledge for the Children's Workforce:

http://webarchive.nationalarchives.gov.uk/20100202104324tf_/http://www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/commoncore/commoncoreofskillsandknowledge/

Scottish Government – Young performers: A guide for parents and guardians:

www.gov.scot/Topics/People/Young-People/families/young-performers

Welsh Government - Keeping young performers safe:

Guidance to accompany the 2015 child performance regulations:

www.learning.gov.wales/docs/learningwales/publications/151029-keeping-young-performers-safeen-v2.pdf

