British Psychological Society response to the Department of Culture, Media and Sport

Reality TV - Call for Evidence

The British Psychological Society (BPS), incorporated by Royal Charter, is the learned and professional body for psychologists in the United Kingdom. We are a registered charity with a total membership of just over 60,000.

Under its Royal Charter, the objective of the British Psychological Society is "to promote the advancement and diffusion of the knowledge of psychology pure and applied and especially to promote the efficiency and usefulness of members by setting up a high standard of professional education and knowledge". We are committed to providing and disseminating evidence-based expertise and advice, engaging with policy and decision makers, and promoting the highest standards in learning and teaching, professional practice and research.

The British Psychological Society is an examining body granting certificates and diplomas in specialist areas of professional applied psychology.

Publication and Queries
We are content for our response, as well as our name and address, to be made public. We are also content for the DCMS to contact us in the future in relation to this inquiry.

Please direct all queries to:-
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The response was led on behalf of the Society by:
John Oates HonFBPsS, Chair of the Media Ethics Advisory Group and Division of Clinical Psychology
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<td>The British Psychological Society (BPS) welcomes the DCMS inquiry examining duty of care to participants in broadcasts and the possible need for a regulatory framework. We would like to offer our support and input, based on our extensive experience in this area.</td>
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We support and enhance the development and application of psychology for the greater public good, setting high standards for research, education, and knowledge, and disseminating our knowledge to increase the wider public awareness of psychology and its importance.

Psychological research shows how broadcast media can influence public attitudes, beliefs and behaviour. Many psychologists who are members of the BPS also play active roles in all aspects of broadcasts. These roles include acting as presenters, as content and design consultants, and in developing and implementing robust safeguarding procedures for people who take part in broadcasts, especially children and young people, and other vulnerable people.

The BPS is concerned to ensure that psychology as a science and as an approach to helping people with mental health is portrayed accurately and positively in media, to ensure that people, including Reality TV participants, are encouraged to seek psychological help and support when they need it.

The BPS Media Ethics Advisory Group includes psychologists with extensive experience in all areas of broadcast work. The group regularly works with broadcast productions to implement best practice standards and to recommend appropriate support from the BPS’s database of appropriately experienced psychologists. Members of the group have also contributed to the development of legislation and regulation for children in performances, including broadcast productions.

The BPS publication ‘Psychology and Media Productions’ has been developed based on broad consultation and piloting across the broadcast industry and aims to provide a best practice framework for commissioners and producers. ([https://www.bps.org.uk/sites/bps.org.uk/files/News/News%20-%20Files/Media%20ethics%20guide%20FRIDAY%20FINAL%20v5.pdf](https://www.bps.org.uk/sites/bps.org.uk/files/News/News%20-%20Files/Media%20ethics%20guide%20FRIDAY%20FINAL%20v5.pdf))

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<th>What psychological support do production companies and broadcasters provide to participants in reality TV shows before, during and after the production process?</th>
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<td>1. The provision of psychological support is mixed across different TV productions and different production companies. The BPS is not able to provide evidence on reality TV shows that have not included the input and support of our members.</td>
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Where BPS members have been involved in TV productions, best practice can include:

- Initial screening of potential participants conducted by psychologists with the appropriate qualifications and experience to use the various tools available, including psychometric tests, structured interviews and clinical judgements
- Comprehensive risk assessment tailored to the expected demands and challenges of the proposed participation level in that particular production
- Psychologists to provide ongoing advice regarding the monitoring of participants and who may continue to be involved in that during production.
### What are examples of best practice, and where is there room for improvement, in the support that is offered to reality TV participants?

2. The BPS’s Media Ethics Advisory Group has extensive experience of working with broadcast production companies in advising on and developing safeguarding and duty of care protocols for contributors in a wide range of broadcast programme genres including reality TV.

Members of the group also have wide experience in working with productions in screening, supervision and after-care roles. Among the high profile series that members have been involved are ‘Child of Our Time’, ‘Castaway 2000’ and ‘Horizon: Rory Bremner: ADHD and Me’. The BPS was closely involved with the Thane Review into the licensing of children in performances and subsequent legislation and regulation in England and Scotland, contributing particularly on risk assessment and psychological harms. A key element here is the recognition of individual differences in vulnerability and resilience which mandate the need for well-designed screening approaches based on sound psychological techniques.

Unfortunately, it seems that programme-makers can often lack skills, awareness of and interest in contributor care. The BPS has produced an industry guide, ‘Psychology and Media Productions’ which sets out standards for psychologists and productions in the safeguarding of contributors and other aspects of psychology in broadcasts, including matters to do with mental health. The Society also has a set of guidelines for psychologists involved in productions to ensure that they follow and advocate for best practice (see page 27 of Psychology and Media Productions guide).

### Who should be responsible for monitoring whether duty of care policies are being applied effectively in the production of reality TV shows?

3. In common with professional practice in other domains, monitoring of standards must be conducted in such a way as to avoid bias and conflict of interest; hence independence of the monitoring must be ensured and be transparent. At the same time, there must be accountability for the adequacy of the monitoring. Currently, those with the greatest experience and responsibility (lawyers, executive producers etc.) are the furthest removed from contributors which means that the most vulnerable and inexperienced production staff are managing the most vulnerable contributors day to day. Enhancing the role of production lawyer(s) in the planning, discharge and evaluation of companies’ duty of care processes could help to ensure consistent application of best practice and provide, by way of the

- Working with chaperones or other persons in caring roles to ensure that adequate sensitivity to risks and potential harms is in place, along with protocols for intervening if problems are seen to arise.
- Planning aftercare that is tailored to the needs of the production and level of risk and potential consequences, informed by the reactions of the participants during the production.

Throughout the three stages of safeguarding, before, during and after production, the psychologist(s) involved will ensure that producers agree to follow the advice and guidance of the psychologist(s) to protect the best interests of the participant, to mitigate as far as possible psychological risks identified by the psychologist(s) and to put in place procedures such as provision for immediate mood restoration if participants show signs of distress during production or for more extended support if needed after the production. For aftercare that may involve psychological treatments, for example for anxiety or depression, appropriately qualified and experienced psychologists need be involved and the aftercare needs to be adequately resourced. Psychologists will advocate for and support valid consent and withdrawal protocols to ensure that the autonomy of contributors is protected.
professional duties of the lawyer, a duty-bound internal champion to provide oversight. There would be great benefit in clarifying who has responsibility for duty of care (and for how long) among the broadcaster, editorial policy, production company, managing director, executive producer, lawyer, psychologist, producer and researcher. The common practice of disbanding production teams long before broadcast poses a challenge for delivering effective post-transmission aftercare.

**Do the design formats for reality shows put unfair psychological pressure on participants and encourage more extreme behaviour? If so, how?**

4. It is clear from some broadcasts that the encouragement of extreme behaviour is part of the approach of some reality TV productions. While evidence of behind the scenes coercion is anecdotal from participants and production staff, the recent statements by such persons suggest that pressure is commonly exerted before recording. It has been stated that many reality shows use tactics to encourage on-screen conflict, such as using leading questions or having consecutive early starts so that contributors start to feel more irritable and more likely to engage in confrontational behaviour. The environment of a TV studio or location recording is potentially disempowering for individuals unused to such situations, leading to greater susceptibility to influence. The atmosphere of tension and time pressure, plus the presence of technology and production staff, often in communication through earpieces etc., can contribute to the disempowerment. Research in social psychology has shown the strong influence that settings can have on people’s behaviour and sense of well-being and has also highlighted the dominant effects of authority figures. (Atkin, 1976; Bandura, 1999; Valkenburg & Peter, 2013; Beresin & Olson, 2018)

**What is for the future for reality TV of this kind? How does it accord with our understanding of, and evolving attitudes to, mental health?**

5. The BPS is concerned to ensure that public understanding of mental health and psychological treatments is accurate, positive and encouraging. We are mindful of the potential harm that can result from careless, uninformed or inaccurate use of diagnostic labels, or when people receiving a diagnosis disagree with it.

Psychological assessments of individuals must only be made by appropriately qualified and registered psychologists and the content of such assessments should only be made public with the express consent of the individuals concerned. More extensive consideration of these issues is contained in the Society’s *Psychology in Media Productions* guidance and in further Society guidance on diagnosis in mental health [https://www.bps.org.uk/news-and-policy/diagnosis-policy-and-guidance-mental-and-behavioural-classification-systems-2013]. The BPS recognises increasing concerns around the impact of negative social media activity on contributor’s mental health following broadcasts, noting that consideration of this should be included as an integral element in duty of care planning.

**References**


End.