

Lord Justice Leveson The Leveson Inquiry Royal Courts of Justice Strand London WC2A 2LL

November 30, 2011

Dear Lord Justice Leveson,

## The culture, practices, and ethics of the press: Reporting of cases involving mental health patients

I am writing to express the Royal College of Psychiatrists' concern about press reporting of cases involving vulnerable individuals, in particular adult forensic mental health patients and children, and to request that your Inquiry consider examining these reporting practices.

Our evidence is relevant to the question posed following the seminars run by your Inquiry in October as to "whether, and if so why, the press should be subject to any additional constraints in relation to behaviour and standards, for example relating to accuracy, treatment of vulnerable individuals, intrusion, financial reporting or reporting on crime, other than those imposed by existing laws."

We have a general concern that the press, in particular tabloid newspapers, rarely gives a balanced account of issues relating to mental illness and individuals with mental health problems when they are in the headlines. It is routine for pejorative and stigmatising language to be used when describing these issues, a prominent example being The Sun's 'Bonkers Bruno' story from September 2003, which it was forced to rewrite following complaints from the public and mental health charities. This increases the vulnerability of those with mental health problems in setting them apart, as 'other' and 'mad', whereas we know that one in four people will experience a mental health problem at some point in their lives and they deserve the same respect and understanding as someone with a physical health problem.

In addition, some newspapers have scant regard for the psychological impact on individuals and their families who are subject to the unwanted attentions of the press, such as the Dowler family.

There are two groups of mental health patients who are frequently subject to vilification in the press, namely adult forensic mental health patients and children, who are sometimes also high profile because of the offences they have committed. Forensic psychiatry is a specialty which helps mentally disordered people who are a risk to the public, and forensic psychiatrists work with some of

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NO HEALTH WITHOUT MENTAL HEALTH

the most damaged and vulnerable individuals in our society. I enclose detailed evidence provided by members of the College on the reporting of cases involving adult patients, which shows that breaches of the Editors' Code of Practice, particularly in relation to accuracy, privacy, harassment and hospitals, are far from uncommon. Such reporting tends to be partial and ill-informed. Moreover, doctors have no right of appeal against it, and cannot speak out because of their duty of confidentiality to their patients and restrictions that may be imposed on them by their Trust.

Our submission includes examples of journalists attempting to obtain jobs under false pretences, hounding psychiatrists following Serious Untoward Incidents, regardless of the quality of care they provided, and intruding on psychiatrists' privacy at their home addresses, causing extreme distress both to them and to their families. Dr Janet Parrott, Chair of our Faculty of Forensic Psychiatry, describes the general tenor of reporting as 'derogatory and misinformed about the expectations and powers of psychiatric services and ... commonly personalised in a vindictive way'.

When fuller information comes to light at a later date, perhaps requiring an apology from the newspaper concerned, it is rare for such an apology to be as prominent as the articles which prompted it. It is also the case that new developments in a case which exonerate the doctor concerned may not be reported at all. Further, inaccurate and damaging press reports remain on the internet in perpetuity, continuously damaging the reputation of the individual(s) concerned. This is another issue that in our view requires urgent attention.

We are also concerned about the media reporting of cases involving children and young people, including those who have committed serious crimes. Press articles regularly refer to these children, who are themselves vulnerable and damaged individuals, in disrespectful, derogatory, frequently demonising ways, failing to recognise their vulnerability and to consider sensitively the harm they have themselves suffered. Examples include the Daily Mail referring to the young brothers in the Edlington case as 'young monsters - aged 11 and 12' (January 22, 2010).

Indeed, the UK is known internationally for its often negative press reporting of children. In 2008, the UN Committee on the Rights of the Child, in its Concluding Observations report on the UK's compliance with the UN Convention on the Rights of the Child, recommended that the UK government should take action in this area to:

- a. Better protect children against discrimination by urgently dealing with the intolerance and negative stereotypes of children and young people in society and in the media.
- b. Do more to respect the privacy of children in the media, and especially to avoid publicly shaming children. This should be done in partnership with the media.

Unicef and the International Federation of Journalists (IFJ) have both developed principles and guidelines for reporting which concerns children which recognise children's essential developmental vulnerability and the fact that extra care and consideration should be given to reporting of and about children. The Unicef guidelines are specifically for reporting cases involving at-risk children, and set out the core principles which should govern this, together with best practice guidelines for interviewing children and reporting that involves them. These state that 'the dignity and rights of every child are to be respected in every circumstance' and that no story or image should be published 'which might put the child, siblings or peers at risk even when identities are changed, obscured or not used'.

They also state that reporting should 'not further stigmatise any child; avoid categorisations or descriptions that expose a child to negative reprisals – including additional psychological harm, or to lifelong abuse, discrimination or rejection by their local communities.'

(http://www.unicef.org/media/media tools guidelines.html)

The IFJ guidelines, developed in 1998, include the need 'to avoid the use of stereotypes and sensational presentation to promote journalistic material involving children', and 'to consider carefully the consequences of publication of any material concerning children and the need to minimise harm to children.' (<u>http://www.ifj.org/en/articles/childrens-rights-and-media-guidelines-and-principles-for-reporting-on-issues-involving-children</u>)

The Editors' Code of Practice, while containing important guidance on some aspects of reporting involving children, includes nothing about the nature and quality of the reporting, and no recognition of the impact that certain types of reporting can have on a child's psychological health and well-being. The Unicef and IFJ guidelines could be used as a basis for reviewing the Editors' Code of Practice on Children in the light of the UN Committee's recommendations and the concerns of many professionals who work with children.

In conclusion, the College believes that the media reporting of children and mental health patients, as set out in this letter and in our supporting evidence, not only breaches the Code of Practice but also falls well short of 'the highest ethical and professional standards', which should be the objective of responsible and well-informed reporting and which your Inquiry seeks to encourage.

I very much hope that you will consider these issues during your Inquiry. The College would be pleased to assist this process in any way that would be helpful.

Yours sincerely,

Professor Sue Bailey OBE, FRCPsych **President** 

*Enc: Royal College of Psychiatrists supplementary evidence to the Leveson Inquiry, to be read alongside this letter.*