

**The need for an open discussion of the ethical issues involved in psychologists promoting what amount to unethical policies pursued in connection with COVID.**

**Call for expressions of interest and support.**

John Raven

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**Background**

Prompted in part by attendance at a meeting of the UK Chapter of the *Systems Dynamics Society* in the spring of 2020, I wrote a long piece entitled *Some abuses of "science", logic, and authority illustrated from responses to the COVID-19 threat and especially in the Dynamic Systems Models being used by policy consultants*<sup>1</sup>. In that article I, among other things, summarised an OECD paper showing that the worldwide death and destruction inflicted by Lockdown and associated policies would be out of all proportion to the lives saved through those policies<sup>2</sup>. I argued that neglect of these issues reflected an inappropriate interpretation of the role of scientists and, indeed, of science itself. At the same time it raised important ethical issues.

The Systems Dynamics Society does not have a Newsletter which could carry such an article, and it was much too long for *The Psychologist*. Nevertheless, I was able to sneak reference to it into a number of *Comments* I posted on various articles in the on-line version of *The Psychologist* (see below).

At much the same time, the April issue of *The Psychologist* contained various articles describing ways in which psychologists were supporting the policies I had criticised. I was incensed and wrote *Some Comments on Psychologists' reactions to the "Covid-19 'crisis'"*<sup>3</sup>. Although Jon Sutton rejected this as "too dangerous" I was again able to insert a link to it into the on-line version of *The Psychologist*.

Thereafter I inserted a number of *Comments* raising concerns about these issues into the on-line versions of *The Psychologist*. First there was my reaction to a piece by Robson on *Vaccinating against Viruses of the Mind* which more or less designated information countering government propaganda as "misinformation". My *Comment* eventually found its way into the on-line version of the journal<sup>4</sup>. Thereafter, the published version of *The Psychologist* included a paragraph headed *Mass infection not an option*. This does not appear in the on-line version, but it was possible to insert a link to my comment on it (*Psychologists' responses to policies initiated in connection with COVID 19*) into the on-line version following an entry entitled *Following, listening, or genuinely engaging?*<sup>5</sup>

Fast forward to February 2022. At this point I stumbled across a couple of newspaper articles saying that a retired clinical psychologist, Gary Sidley, had submitted a letter, signed by 40 psychologists and 15 other health care professionals, protesting the role of

psychologists in promoting the evidence-short policies being promoted by the government to the to Public Administration and Constitutional Affairs Committee (PACAC) (a Commons select committee chaired by William Wragg MP) to formally request an independent inquiry into the Government's use of covert psychological strategies. (In my view, history teaches that it is seriously unethical to follow policies promoted as being in the public interest when all counter evidence to those policies is officially censored - and especially when such censorship is reinforced by threats of enormous fines and imprisonment<sup>6</sup>.)

I could not find Dr. Sidley's contact address (I am unwilling to join Twitter). So I wrote to both "enquiries" at the BPS and Jon Sutton asking for help. I got a reply from someone at the BPS (whose name I am omitting in order to avoid the possibility of accusations of incompetence) saying, effectively, that the BPS knew nothing about it and Jon, unusually, did not reply.

In the light of what will emerge below, this seeming ignorance on the part of the BPS seems extraordinary.

In the end, by a devious route, I did manage to get a contact address for Dr. Sidley.

At this point I discovered that, almost a year earlier, Dr. Sidley had sent a letter, countersigned by 47 psychologists, to the BPS<sup>7</sup> and received what appear to me to be unsatisfactory replies. A copy of this letter now appears on the next page and copies of Dr. Sidley's correspondence with the BPS are available at<sup>8</sup>

I have to say that I was seriously unimpressed by the responses Dr Sidley got from the BPS (available in the material referenced at note 8). Those concerned seemed to have found a way to evade the commitments to ethical behaviour embedded in our Charter by arguing that they could be superseded by the "the public interest" nature of the government's Lockdown and related policies. But hasn't that, in the past, been precisely the argument that has been used to justify unethical behaviour by individuals and hasn't it turned out that what was promoted as being in the public interest was often anything but the case?

Before moving on, I should just close out the Sidley story I should, to avoid confusion, perhaps underline that the letter to which the newspaper articles which set me off on this trail was not that addressed to the BPS but that addressed, a year or so later, to the Public Administration and Constitutional Affairs Committee<sup>9</sup>

So far, so good.

But somewhere along the route I stumbled on a reference to a book by Laura Dodsworth entitled *A State of Fear*, published and re-printed four times in 2021.

In that book Dodsworth provides detailed accounts of the work of psychologists in at least two government units and their out-sourced affiliates dedicated to "nudging" people to comply with government regulations. She outlines the dubious strategies employed. (These strategies amount, of course, to those widely pursued by psychologists employed by advertising agencies and campaigning groups ... including those promoting government health, educational, and recruitment programmes.)

In the light of all this, the case for initiating an open discussion of the ethics of using psychology in ways which might otherwise be acceptable to promote policies which, on further reflection, might be considered unethical seems overwhelming.

(Note, however, that I would not wish to limit the discussion to COVID. Many of the policies governments are pushing for in relation to “health care”, “education”, and other areas seem to me to be, at best, potentially ethically dubious.)

I would be more than interested to hear from anyone who feels able to encourage us, or, better, help us, promote such a discussion within the BPS.

John Raven

## Letter sent to BPS by Gary Sidley and 40 others, 6th January 2021

### **Re: Ethical issues arising from the role of psychologists in the development of the Government's communication campaign in regards to coronavirus**

We are writing to you as a group of psychological specialists to raise ethical concerns about the activities of the government-employed psychologists working in the 'Behavioural Insights Team' (BIT) (1) in their mission to gain the public's mass compliance with the ongoing coronavirus restrictions. Our view is that the use of covert psychological strategies - that operate below the level of people's awareness - to 'nudge' citizens to conform to a contentious and unprecedented public health policy raises profound ethical questions. As the professional body overseeing the work of psychologists in the UK, we would welcome your perspective on this important issue.

#### Background

The British public's widespread compliance with the Government's restrictions has arguably been the most remarkable aspect of the coronavirus crisis. The unprecedented limits imposed on our basic freedoms - in the form of lockdowns, travel bans and mandatory mask wearing - have been passively accepted by the large majority of people, despite the lack of evidence for the efficacy of these measures. A major contributor to the mass obedience of British citizens is likely to have been the activities of government-employed psychologists working as part of the BIT.

The BIT was conceived in the Prime Minister's office in 2010 as 'the world's first government institution dedicated to the application of behavioural science to policy' (2). According to the BIT website (3), their team has rapidly expanded from a seven person unit working with the UK government to a 'social purpose company' operating in many countries around the world. It may seem beneficial to use any method, even techniques impacting subconsciously on behaviour, to attempt to preserve life and the publicised aims of the BIT are clearly altruistic; for example, 'to improve people's lives and communities'. However, the use of these techniques during the coronavirus crisis raises key ethical concerns. Arguably, health decisions should take place consciously, based on transparent information, including fully informed consent. Additionally, the moral integrity of the use of these techniques within current contexts is even more questionable given the major disagreement amongst specialists about whether the measures are, overall, helpful or harmful.

#### The strategies used by BIT psychologists

A comprehensive account of the psychological approaches deployed by the BIT is provided in the document, MINDSPACE: Influencing behaviour through public policy (Dolan et al., 2010) (4). The authors of MINDSPACE describe how their behavioural strategies provide 'low cost, low pain ways of **"nudging" citizens ... into new ways of acting by going with the grain of how we think and act**' (p7) (Our emphasis). By expressing the process of change in this way, this statement reveals a key difference between the BIT interventions and traditional government efforts to shape our behaviour: their reliance on tools that often impact on us subconsciously, below our awareness.

Historically, Governments have used information provision and rational argument in their efforts to alter the behaviour of their citizens, thereby encouraging people to logically (and

consciously) weigh up the pros and cons of each of their options and consider changing their behaviour accordingly. By contrast, many of the nudges developed and put forward by the BIT psychologists are, to various degrees, acting upon us automatically, below the level of conscious thought and reason. Although we accept there may be legitimate ways of utilising covert psychological strategies within our communities – perhaps as a marketing tool to shape opinion about a consumer product or as part of, for example, Government campaigns to discourage vandalism or to prevent young men stabbing each other – in the sphere of individual health decisions we believe transparency is required.

To inform and direct the Government's communication strategy aimed at achieving the public's compliance with coronavirus restrictions, it is apparent that the BIT psychologists have promoted a range of covert psychological interventions (see blogpost (5) by Dr Sidley for further details). For example, our inherent need to preserve a positive self-image has been exploited as revealed by the incessant slogans and mantras insisting that compliance with the Government's coronavirus diktats is akin to the altruism of helping others – a focus on 'ego', to use the MINDSPACE terminology. Another example has been the use of peer pressure ('norms') on the non-compliers by casting these supposed miscreants in the uncomfortable bracket of a deviant minority. But the most potent, and most ethically dubious, strategy has been the inflation of fear ('affect') as a means of coercing people into obedience.

### Fear elevation

The decision to inflate the fear levels of the British public was a strategic one, as indicated by the minutes of the meeting of the Government's expert advisors (SAGE) on the 22nd March 2020 (6). Clearly, the BIT psychologists recommended scaring people as an effective way of maximising compliance with the coronavirus restrictions, as indicated by the following statements in the minutes:

*'A substantial number of people still do not feel sufficiently personally threatened'.*

*'The perceived level of personal threat needs to be increased among those who are complacent using hard-hitting emotional messaging'.*

*'Use media to increase sense of personal threat'.*

Consequently, the general population has had to endure a media onslaught primarily aimed at inflating perceived threat levels that has included: the daily announcement of coronavirus-death statistics, displayed without context (such as the fact that 1600 people die in the UK each day under ordinary circumstances); repeated footage of people dying in Intensive Care Units; scary slogans, such as 'IF YOU GO OUT, YOU CAN SPREAD IT. PEOPLE WILL DIE'; and the promotion of face coverings – a potent symbol of danger – despite there being little evidence for their effectiveness in reducing viral spread.

The strategic decision to inflate fear levels has had unintended consequences, resulting in many people being too scared to leave their houses or to let anybody in, thereby exacerbating loneliness and isolation which – in turn – have detrimental impacts on physical and mental health. Persistent fear compromises the immune system and works against the objective of keeping us safe and healthy. Eight months on, the population remain in a state of heightened anxiety; surveys show (7) that, by July, UK citizens believed that coronavirus had killed 7% of the population, a total – if true – of 4,500,000 people (the official figure at the time was

around 45,000). Tragically, there is accumulating evidence that inflated fear levels will be responsible for the ‘collateral’ deaths of many thousands of people with non-COVID illnesses who, too frightened to attend hospital, are dying in their own homes (8) at a rate of around 100 each day (9). There is also evidence that parents have been too scared to take their ill children to Accident & Emergency departments (10). Furthermore, the damage inflicted on the mental health of the nation, particularly on our young people (11) is as yet difficult to quantify but is likely to be substantial.

### Ethical questions

Back in 2010, the authors of the MINDSPACE document recognised the significant ethical dilemmas arising from the use of influencing strategies that impact subconsciously on the country’s citizens. They acknowledged that the deployment of covert methods to change behaviour ‘has implications for consent and freedom of choice’ and offers people ‘little opportunity to opt out’ (p66 – 67). Furthermore, it is conceded that ‘policymakers wishing to use these tools ... .. need the approval of the public to do so’ (p74). So have the British people been consulted about whether they agree to Government using covert psychological techniques to promote compliance with contentious public health policies? We suspect not. It seems the BIT psychologists are operating in ethically-murky waters in implementing their nudges, without our consent, to promote mass acceptance of infringements on basic human freedoms.

In the British Psychological Society Code of Ethics & Conduct (2018) (12), one of the ‘Statement of Values’ is:

*3.1 ‘Psychologists value the dignity and worth of all persons, with sensitivity to the dynamics of perceived authority or influence over persons and peoples and **with particular regard to people’s rights.***

*In applying these values, Psychologists should consider: ... consent ... self-determination.*

*3.3 ‘Psychologists value their responsibilities ... to the general public ... including the avoidance of harm and the **prevention of misuse or abuse of their contribution to society.**’ [Our emphasis].*

We believe that the BIT psychologists - in their deployment of covert strategies to achieve compliance with unprecedented lockdowns, travel restrictions and mask mandates – have blatantly failed to practice in a way that is consistent with your stated ethical values.

Based on the above concerns, we respectfully request that the British Psychological Society (BPS) respond to the following questions:

1. Does the BPS believe that the use of covert behavioural strategies, without explicit public consent, to ‘nudge’ people to comply with Government policies is a legitimate use of psychological skills and knowledge?
2. Is it ethically acceptable to use covert psychological strategies to increase compliance with contentious public health policies, such as the Government’s coronavirus responses?

3. Does the BPS agree that BIT psychologists who recommended that the Government's coronavirus campaign use covert strategies, that purposefully increase fear and encourage the scapegoating of the non-compliant minority, are practising in a way that infringes the BPS Code of Ethics?

4. Assuming that the BPS recognises that there are some ethical issues arising from the use of covert psychological techniques in the ways described, what does the BPS propose to do to address these issues?

5. To minimise the likelihood of psychologists acting in an unethical way in the future, and to thereby prevent a repeat of the widespread 'collateral damage' associated with applying covert psychological strategies to win compliance with contentious public health policies, would the BPS publicly condemn the use of psychological skills and knowledge for this purpose?

Thank you in advance for your time in considering these important issues. We look forward to a prompt response.

#### References:

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3. BIT Website. <https://bit.ly/33qVTUB>

4. Dolan et al., (2010). MINDSPACE: Influencing behaviour through public policy. <https://bit.ly/3b2Q1E5>

5. Sidley (2020). How the MEAN psychologists got us to comply with coronavirus restrictions. <https://bit.ly/31Dv13A>

6. SAGE Minutes of 22nd March 2020. Options for increasing adherence to social distancing measures. <https://bit.ly/3h3Kted>

7. COVID-19 Opinion Checker. <https://bit.ly/3ikxOUG>

8. Office for National Statistics (Oct. 2020). <https://bit.ly/3maIhUS>

9. BBC News (19th October 2020). <https://bbc.in/2IJ0g6u>

10. Open Democracy UK website (2020). <https://bit.ly/39UtUiA>

11. Townsend, E. (2020). The impact of lockdown on self-harm in young people. <https://bit.ly/3jSAcMB>

12. British Psychological Society (2018). Code of Ethics & Conduct <https://bit.ly/35ngMRc>

Dr Gary Sidley (Former NHS Consultant Clinical Psychologist)

+ 40 Co-signatories:

## REFERENCES

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- <sup>1</sup> Raven, J. (2020, July). *Some abuses of “science”, logic, and authority illustrated from responses to the COVID-19 threat and especially in the Dynamic Systems Models being used by policy consultants.* <http://eyeonsociety.co.uk/resources/Abuses-of-Science-and-authority-COVID-19.pdf> Also available on *Systems Community of Inquiry* and [https://www.researchgate.net/publication/343127688\\_Some\\_abuses\\_of\\_science\\_logic\\_and\\_authority\\_illustrated\\_from\\_responses\\_to\\_the\\_COVID-19\\_threat\\_and\\_especially\\_in\\_the\\_Dynamic\\_Systems\\_Models\\_being\\_used\\_by\\_policy\\_consultants](https://www.researchgate.net/publication/343127688_Some_abuses_of_science_logic_and_authority_illustrated_from_responses_to_the_COVID-19_threat_and_especially_in_the_Dynamic_Systems_Models_being_used_by_policy_consultants)
  - <sup>2</sup> The research supporting this claim has subsequently been greatly strengthened through the work of Allen and the UN World Food Programme. {[1] Allen, D.W. (2022) Covid-19 Lockdown Cost/Benefits: A Critical Assessment of the Literature. *International Journal of the Economics of Business* Volume 29, 2022 - Issue 1 p 1-32 <https://doi.org/10.1080/13571516.2021.1976051> Non paywalled version at <https://www.sfu.ca/~allen/LockdownReport.pdf>. After comparing regions with and without lockdowns around the world, and after counting the negative effects of lockdown on public health, he concluded that, for every year of life lockdowns has saved, it has caused the loss of between 3.2 and 282 years of life, the figure for Canada being 141 life-years lost for every life-year saved. [2a] UN food program (2020) *Global report on food crises* <https://www.wfp.org/publications/2020-global-report-food-crises> [2b] *Risk of hunger pandemic as coronavirus set to almost double acute hunger by end of 2020* <https://www.wfp.org/stories/risk-hunger-pandemic-coronavirus-set-almost-double-acute-hunger-end-2020> 265 million people (up from 135 million) in low and middle-income countries will be under severe threat unless swift action is taken to tackle the pandemic. <https://www.wfp.org/news/wfp-chief-calls-urgent-funds-avert-famine>. [2c] The UN World Food Programme has elsewhere reiterated that COVID-related hunger could kill more people than the virus [https://unglobalcompact.org/take-action/20th-anniversary-campaign/covid-related%20hunger-could-kill-more-people-than-the-virus`](https://unglobalcompact.org/take-action/20th-anniversary-campaign/covid-related%20hunger-could-kill-more-people-than-the-virus)
  - <sup>3</sup> Raven, J. (2020). *Some Comments on Psychologists’ reactions to the “Covid-19 ‘crisis’”.* <http://eyeonsociety.co.uk/resources/bps-july-2020.pdf> also at [https://www.researchgate.net/publication/343998750\\_Some\\_Comments\\_on\\_Psychologists'\\_reactions\\_to\\_the\\_Covid-19\\_'crisis'](https://www.researchgate.net/publication/343998750_Some_Comments_on_Psychologists'_reactions_to_the_Covid-19_'crisis')
  - <sup>4</sup> Raven, J. (2021) *Comment on Robson’s Vaccinating against viruses of the mind.* This Comment comes up if you click on <https://thepsychologist.bps.org.uk/volume-33/summer-2020/vaccinating-against-viruses-mind> and scroll down to *Comments*. Also available at <http://eyeonsociety.co.uk/resources/Robson-Comment.pdf> .
  - <sup>5</sup> Raven, J. (2021). Psychologists’ responses to policies initiated in connection with Covid 19. *The Psychologist on line*, following an entry entitled *Following, listening, or genuinely engaging?* [September, 2021,34, 12)] also available at <http://eyeonsociety.co.uk/resources/COMMENT-ON-Mass-infection-not-an-option.pdf> and [https://www.researchgate.net/publication/358478112\\_Psychologists'\\_responses\\_to\\_policies\\_initiated\\_in\\_connection\\_with\\_COVID\\_19](https://www.researchgate.net/publication/358478112_Psychologists'_responses_to_policies_initiated_in_connection_with_COVID_19)
  - <sup>6</sup> Monteith, B. (2021) Ofcom’s mission creep is a threat to our liberty and more. *The Scotsman*, 7 June 2021. <https://www.scotsman.com/news/opinion/ofcoms-mission-creep-is-a-threat-to-our-liberty-and-more-brian-monteith-3262905>
  - <sup>7</sup> Sidley, G. (Jan 2021) *The ethics of using covert strategies - a letter to the British Psychological Society (II)* <https://www.coronababble.com/post/the-ethics-of-using-covert-strategies-a-letter-to-the-british-psychological-society-ii> .
  - <sup>8</sup> Sidley, G. (Sept 2021) *Evasive, disingenuous and wholly unconvincing - the BPS response to ethical concerns about 'nudging'* <https://www.coronababble.com/post/evasive-disingenuous-and-wholly-unconvincing-the-bps-response-to-ethical-concerns-about-nudging>
  - <sup>9</sup> Sidley, G. (January 2022) *The dubious ethics of 'nudging': We urgently need an independent inquiry.* <https://www.coronababble.com/post/the-dubious-ethics-of-nudging-we-urgently-need-an-independent-inquiry>