Dear Prime Minister,

I am the Chairman of the Board of the UK Council for Psychotherapy (UKCP), one of the UK’s foremost psychological governing bodies. However, I write this open letter in my own capacity. I believe I have a professional obligation to write to you in an attempt to protect the public from any further harm caused by the unethical application of psychological research and practice.

I unreservedly condemn the UK Government’s use of unethical psychological techniques intended to elicit feelings of fear, shame and guilt, under the guise of behavioural science / insights which were designed to change the public’s behaviour without their knowledge and conscious participation. It is now clear that in 2020 the UK Government deliberately chose to artificially inflate the level of fear within the UK population by exaggerating the risk factors of Covid19, and concomitantly downplaying the protective factors. We also witnessed the Government’s promotion of social disapproval and guilt messaging. These techniques were embedded into a multi-channel, co-ordinated public health campaign designed to change the public’s behaviour without their knowledge. Moreover, in tandem with the mainstream media, the Government also proactively suppressed, censored, and ostracised any healthcare professional or scientist who suggested alternative responses to Covid19, or who simply questioned the messaging and measures being implemented by the Government.

Evidence of the recommendation of using unethical psychological techniques to gain behavioural change

The Government document titled ‘Options for increasing adherence to social distancing measures’ (Gov.uk, 2020) was written for the Government by the Scientific Pandemic Insights Group on Behaviours (SPI-B) which is a subgroup of the Scientific Advisory Group for Emergencies (SAGE).
The premise of the document was to provide options for changing the behaviour of the UK public without their knowledge. A passage within this document states:

“A substantial number of people still do not feel sufficiently personally threatened”. It makes certain recommendations including:

- “The perceived level of personal threat needs to be increased among those who are complacent, using hard hitting emotional messaging”.
- “Coercion”
- “Social disapproval”.

(Gov.uk, 2020)

The recommendations made by SPI-B included ones intended to elicit feelings of fear, shame and guilt. Psychological practitioners know that deliberately trying to frighten someone into change with erroneous or exaggerated information can easily cause long-term psychological damage. We also know that using social disapproval can create splits and divisions within society, and that inducing feelings of guilt can elevate the risk of suicide.

SPI-B also included a simple risk assessment matrix which acknowledges that the ‘spill over effects’ of using media to increase the sense of personal threat and of using social disapproval ‘could be negative’. There is also a statement demonstrating there was a conversation regarding the spill over effects, although this does not appear to be fully documented. The risk factors and ethics of using fear, shame, guilt, and coercion would almost certainly have been known to the members of SPI-B because several members were British Psychological Society (BPS) registered chartered psychologists. In an interview with one of the members of SPI-B, BPS registered educational psychologist Dr Gavin Morgan, he refers to the use of fear by his SPI-B colleagues and says:

‘Clearly using fear as a means of control is not ethical. What you do as a psychologist is co-construction. Using fear smacks of totalitarianism. It’s not an ethical stance for any modern government.’ . . . Was it unethical to use fear, I asked? ‘Well I didn’t suggest we use fear’ But your colleagues did. What do you think of that? He paused. ‘Oh God’. ‘Another reluctant pause. ‘It’s not ethical,’ he said (Dodsworth, 2021, pp. 262,263).

Like Dr Morgan, any BPS registered psychologists within SPI-B would or should have recognised that recommending the Government uses fear as a means of controlling the public breached their professional code of ethics and conduct. An urgent investigation is required both by the UK Government and the BPS. Two specific points of The British Psychological Society Code of Ethics and Conduct (2021) that may have been broken are (with my underlining):

3.3 Responsibility. Because of their acknowledged expertise, members of the Society often enjoy professional autonomy; responsibility is an essential element of autonomy. Members must accept appropriate responsibility for what is within their power, control or management. Awareness of responsibility ensures that the trust of others is not abused, the power of influence is properly managed and that duty towards others is always paramount. Statement of values: Members value their responsibilities to persons and peoples, to the general public, and to the profession.
and science of psychology, including the avoidance of harm and the prevention of misuse or abuse of their contribution to society. In applying these values, psychologists should consider:

- Professional accountability;
- Responsible use of their knowledge and skills;
- Respect for the welfare of humans, non-humans and the living world;
- Potentially competing duties.

### 3.4 Integrity

**Acting with integrity** includes being honest, truthful, accurate and consistent in one’s actions, words, decisions, methods and outcomes. It requires setting self-interest to one side and being objective and open to challenge in one’s behaviour in a professional context. **Statement of values**: Members value honesty, probity, accuracy, clarity and fairness in their interactions with all persons and peoples, and seek to promote integrity in all facets of their scientific and professional endeavours”.

**Evidence that psychological techniques to induce fear, shame, guilt and coercion were used on the UK public**

The SPI-B document in question (Gov.uk, 2020) demonstrates that the options of eliciting feelings of fear, shame, guilt and the use of coercion was recommended to the UK Government. There is evidence that those options were indeed subsequently deployed on the UK population.

In August 2022, you stated:

> “In every brief, we tried to say: let’s stop the ‘fear narrative’. It was always wrong from the beginning. I constantly said it was wrong... It was wrong to scare people like that”. (Sunak, R as quoted in The Spectator, 2022).

Additionally, leaked WhatsApp messages from the former Health Minister at the time, Matt Hancock, published in The Daily Telegraph in March 2023, confirm that fear and guilt were used:

> “Hancock:   We frighten the pants of everyone with the new strain. But the complications with that Brexit is taking the top line
Poole:   Yep that’s what will get proper bahviour (sic) change
Hancock:  When do we deploy the new variant”

And,

> “Case:     Ramping up messaging – the fear /guilt factor vital”

(The Daily Telegraph, 2023a)

The above are just two examples where senior Government Ministers recognised that fear and guilt was used as drivers for behavioural change of the UK population without their knowledge.
The existing literature

It is important to acknowledge that the above-mentioned psychological techniques were used on the UK population without their knowledge or consent, and that this in direct contradiction of long-established and carefully considered behavioural science advice which made clear that, in theory and practice, the consent of the public is paramount.

“The use of MINDSPACE (or other ‘nudge’ type policy tools) may require careful handling – in essence, the public need to give permission and help shape how such tools are used”. (Institute of Government, 2010, p. 10) Continuing, the report states:

“Policy-makers wishing to use these tools summarised in MINDSPACE need the approval of the public to do so”. (Institute of Government, 2010, p. 74) Further literature supports that permission from the public is essential:

“If there is one great risk to the application of behavioural insights in policy, it is that the thread of public permission wears too thin. If governments, or indeed communities or companies, wish to use behavioural insights, they must seek and maintain the permission of the public to do so” (Halpern, 2015, p. 365).

As there was no approval obtained, the options recommended and deployed were not in alignment with the principles of behavioural science.

It is important to highlight that the same kinds of techniques were used on children in relation to mask wearing, social distancing and vaccine uptake, with many techniques continuing into 2022. These techniques violated UNICEF’s (2021) recommendations from their ethical toolkit for behavioural science projects directed at children. The tool-kit states:

“A core idea underlying the applied behavioural science approach is that interventions should not restrict choice and should transparently communicate project goals. When designing an intervention, practitioners should determine how transparent it will be to those affected by it. They should ensure that children and parents can easily opt out, and should design feedback mechanisms so that children and their parents can voice concerns, see the outcomes of their objections, and hold decision-makers to account”. (UNICEF, 2021)

The behavioural science literature also indicates a potential link between the misuse of behavioural psychology and an increased risk of suicide, stemming from an All Party Parliamentary Group Report on the Morse Review into the Loan Charge in 2020. One of the recommendations within the report demands:

“An independent assessment and a suspension of HMRC’s use of behavioural psychology / behavioural insights, in light of the ongoing suicide risk to those impacted by the Loan Charge”. (Loan Charge All-Party Parliamentary Group, 2020)

The literature highlights that approval from the public must be sought and maintained. Additionally, all behavioural science projects directed at children must have effective feedback mechanisms and methods of opting out, with decision makers able to be held
accountable. There are also existing potential concerns that behavioural science may increase suicide levels. These important ethical aspects and safety signals appear to have been ignored. The lessons of history warn us that in times of existential crisis, whether real or only perceived, our ethics are at risk of being abandoned, and psychological knowledge can become misused by governments:

“Under some historical conditions or circumstances and contexts, psychologists and psychological knowledge were in danger of being abused by political powers, largely for clandestine purposes, such as conducting torture or the persecution of political opponents.” (Maercker A, Guski-Leinwand S, 2018)

It is of grave concern that the actions of the UK Government during the covid era potentially fit into the category of abusing psychological knowledge and being absent of ethics, thus require serious investigation.

The impact of psychological pressure on informed consent

For the sake of brevity, I will not reiterate the multiple concerns already documented by others surrounding the consequences of the Government’s actions around lockdown, hospital discharges, school closures and mask mandates (Amnesty International, 2020), (Byrne S et al, 2023) (Daily Telegraph, 2023b), (Mail Online, 2022), (Office for National Statistics, 2021), (The Guardian, 2021). I do, however, wish to highlight one extremely serious consequence that I believe has occurred as a direct result of the use of unethical psychological techniques / behavioural insights on the unknowing public: by adopting the techniques used, the Government significantly and materially undermined, if not removed, the UK population’s ability to give valid informed consent to taking a Covid19 vaccine.

According to Public Health England:

“Consent must be obtained before starting any treatment or physical investigation or before providing personal care for a patient. This includes the administration of all vaccines”. Also,

“It is a legal and ethical principle that valid consent must be obtained before starting personal care, treatment or investigations”. Also,

“For consent to immunisation to the (sic) valid, it must be given freely, voluntarily and without coercion by an appropriately informed person who has the mental capacity to consent to the administration of the vaccines in question”. (Gov.uk, 2021)

From the above, it is clear that for medical consent to be valid it must be given without coercion. The Encyclopedia Britannica defines coercion as:

“The threat or use of punitive measures against states, groups or individuals in order for them to undertake or desist from specified actions. In addition to the threat of or limited use of force (or both), coercion may entail economic sanctions, psychological pressures, and social ostracism.” (Encyclopedia Britannica, 2023).

The psychological techniques used by the UK Government fall under that definition of coercion. If follows that according to Public Health England’s statements and for the general
public at least, consent to immunisation was, invalidated by the behaviour of the UK Government. It is also important to highlight that there have been serious injuries and death directly linked to the Covid19 vaccine. Many of those injured or who have died would not have taken a vaccine if they had not been psychologically pressured, feared being ostracised socially and / or were given accurate information.

The removal of the general population’s ability to give informed medical consent is of the gravest concern, and a severe and dangerous consequence of using behavioural insights / psychological techniques on an unknowing public.

**Conclusion**

The need to hold tightly to professional ethics, in particular to the ethical principle of informed consent, is not just an ‘academic’ issue. It is a matter of practical and fundamental importance to responsible government.

According to Halpern (2015, p. 348) “Behavioural insights, like any other form of knowledge, can be used for good or bad”. It is my opinion that the use of behavioural insights and psychological techniques designed to elicit feelings of fear, shame and guilt utilised by the UK Government since March 2020 has been unethical. The consequences are still unravelling but they appear to include serious damage to trust in government and its agencies, the NHS, and the medical and scientific professions.

I propose that there be an immediate cessation of the use of all behavioural science techniques designed to elicit feelings of fear, shame and guilt used by the Government pending an urgent, open and independent inquiry. This inquiry should also have as an objective the re-establishment of ethical frameworks necessary to protect the public and to provide accountability. I would welcome a discussion on this most important of matters.

Most respectfully

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**References**


7