



SVFAB DETAILED ANALYSIS

2014-10-29 Rundschau vom 29.10.2014

Programme: SRF Tagesschau broadcast | 2014-10-29 | Analysed on: 2026-05-19 14:12

Version 3.0-detail | Universal 3.0-detail | Konverter 3.4 (2026-05-20) | Massstab: Art. 4 RTVG

OVERALL SCORE

6.7/10

Serious deviation from the impartiality requirement. High degree of deviation

0 = balanced, 10 = strongly one-sided/manipulative

POLITICAL SPECTRUM

Classification according to Chapel Hill Expert Survey (CHES) 2024

The Chapel Hill Expert Survey (CHES 2024) is an academic survey of 609 political scientists in 31 countries. Each party is rated on a scale from 0 (far left) to 10 (far right).

Party	Greens	SP	GLP	Centre	EVP	FDP	SVP
CHES	1.13	1.67	3.60	5.47	5.64	7.67	9.00
Spectrum	<i>Left</i>	<i>Left</i>	<i>Left</i>	<i>Centre</i>	<i>Right</i>	<i>Right</i>	<i>Right</i>

The overall tendency is displayed on a 0–10 scale (0 = strongly left-favouring, 5 = balanced, 10 = strongly right-favouring). The calculation is based on the difference in average favouring of left vs. right parties (grouping according to CHES 2024).

TENDENCY (L – R)

3.2 / 10

Left-favouring

0 1 2 **3** 4 5 6 7 8 9 10

← Left

Right →

Source: Chapel Hill Expert Survey 2024 — chesdata.eu | [Jolly et al., Electoral Studies, 2022](#) | Thresholds: [Pew Research Center](#)

This section serves for political classification and does not feed into the overall score.



POLITICAL LANDSCAPE

Switzerland is a consensus democracy. The Federal Council (7 seats) is filled according to the magic formula: SVP 2, SP 2, FDP 2, Centre 1. There is no classic government/opposition divide — all major parties are represented in government.

Party	CHES L-R	Seats NC	Government/Opposition	Core position
SVP	8.0	62	Government (2 FC)	Limit migration, sovereignty, reduction of state
SP	2.5	41	Government (2 FC)	Welfare state, redistribution, open migration
FDP	6.5	28	Government (2 FC)	Economic freedom, lean state
Centre	5.0	29	Government (1 FC)	Pragmatism, family relief
Greens	2.0	23	Opposition	Climate protection, disarmament, redistribution
GLP	4.0	10	Opposition	Green economy, liberal-ecological
EVP	5.5	2	Opposition	Christian-social, centre

The most important fault lines in 2014 (broadcast date) are: migration policy following the adoption of the mass immigration initiative (February 2014), the relationship with the EU and freedom of movement, the energy transition after Fukushima, and the debate about state universal services vs. market liberalisation at federal enterprises (Post, SBB). The jihadism debate is a cross-party security issue with domestic policy implications for asylum and integration policy.

SRF (Swiss Radio and Television) is the public broadcaster of German-speaking Switzerland, financed through reception fees (today the Serafe levy). Art. 4 RTVG obliges SRF to provide accurate reporting, diversity of opinion and a balanced selection of interlocutors. As Switzerland's largest media organisation, SRF bears a special democratic responsibility towards all political camps.



CHAPTER 1 — PARTY-POLITICAL BIAS

Party	Score (-5..+5)	Broadcast portrayal vs. programme position
SVP	0	Not mentioned — broadcast topics (vaccination, Post, jihadism) without direct SVP reference — omitted
SP	0	Not directly mentioned; trade union topic (Post collective agreement) touches SP-aligned positions, but no party named — omitted
FDP	0	Not mentioned — omitted
Centre	0	Not mentioned — omitted
Greens	0	Not mentioned — omitted
GLP	0	Not mentioned — omitted
EVP	0	Not mentioned — omitted

Party bias summary

- Most accurate portrayal: No party directly portrayed (all score 0)
- Strongest distortion: No direct party portrayal
- Average deviation from 0: 0.0
- Conclusion: The broadcast contains no explicit party politics. Indirectly, the Post topic touches trade union positions (SP/trade union affinity), and the jihadism topic touches security and migration policy (SVP core issue), without party positions being explicitly portrayed or distorted. The bias does not manifest at party level, but at the level of topic framing and source selection.



CHAPTER 2 — BROADCAST INFORMATION AND THEMATIC FRAMEWORK

Broadcast data

- Title: SRF Rundschau
- Date: 29.10.2014
- Presenter: Sandro Brotz
- Reporters: Serena Tinari (HPV segment), Georg Humbl (Post segment), Urs Gredig (London/jihadism segment)

Actors	Function	Party/affiliation	Political spectrum
Sandro Brotz	Presenter Rundschau	SRF (public broadcaster)	Neutral (office)
Prof. Ulrich Heininger	Senior physician University Hospital Basel, EKIF member	Medical-governmental	Neutral/pro-vaccination
Dr. Rabe	Paediatrician/adolescent physician, Initiative of Incorruptible Doctors, Munich	Pharma-critical	Critical-left (industry criticism)
Jessica Mühlethaler	Affected person (HPV vaccination victim)	None	None
Marie-Océane Bourguignon	Affected person (HPV vaccination victim, France)	None	None
Jean-Jacques Goubris	Lawyer (France)	None	None
Ulrich Hurny	Head of letter post, member of Post executive management	Post AG (state enterprise)	Institutional
Fritz Gurtner	Trade unionist	Trade union (SP-aligned)	Left
Andreas Blaser	Postman	Employee	None
Elsie Jordan	Farmer, affected person (postal delivery)	None	None
Abu Barra	Islamist, London	Islamist	Extremist
Ibrahim Kamara (mother)	Mother of a killed jihadist	None	None

Main topic

The broadcast covers three independent topics: (1) safety concerns about the HPV vaccine Gardasil, (2) reduction of universal services and working conditions at Swiss Post, (3) British jihadists and the danger of returnees.



CHAPTER 3 — 15 CRITERIA: DETAILED ANALYSIS

Hard facts — 9 techniques that are countable and scientifically verifiable

1. EXPERT SELECTION

7/10

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Expert 1: Dr. Rabe, paediatrician and adolescent physician, Initiative of Incorruptible Doctors, Munich

Timestamp: 10:09

Statement: "The HPV vaccination is questionable, because to date there is still no proof that even a single case of cervical cancer worldwide has been prevented by the HPV vaccination."

Assessment: Member of an explicitly pharma-critical advocacy organisation; his statement is factually contestable (Australian data show efficacy against genital warts and HPV infections), but is presented without rebuttal.

Missing countervoice: Oncologist with data on prevented precancerous lesions; WHO representative with efficacy data.

Source in-depth check Dr. Rabe:

(a) FUNDING: Initiative of Incorruptible Doctors — non-profit association, financed through membership fees and donations; explicitly pharma-critical in orientation. Conflict of interest: organisational mandate is pharma criticism, not neutral assessment.

(b) MANDATE: Not compatible with neutral assessment — the organisation is by definition oriented towards pharma criticism.

D1 Conflict of interest: -1 — Member of a pharma-critical advocacy organisation

D2 Personal risk: +1 — Doctor arguing against mainstream recommendation risks reputational loss

D3 Professional competence: +1 — Paediatrician, but not an epidemiologist or vaccine specialist

D4 Opinion consistency: +1 — Consistent pharma criticism (organisation-driven)

D5 Emotionalisation vs. data: -1 — Statement "not a single case prevented" is not substantiated by data

D6 Source level: -1 — No primary source cited

TOTAL: 0 → SOURCE INDICATOR: YELLOW

(c) PROFESSIONAL COMPETENCE: Framed as a critical doctor, without his organisational affiliation being classified as structurally partisan. The broadcast names the organisation but does not assess its conflict of interest.

Expert 2: Prof. Ulrich Heininger, senior physician University Hospital Basel, EKIF member

Timestamp: 12:34

Statement: "No vaccination is free of risks, no medical measure is."

Assessment: Member of the Federal Commission for Vaccination Issues (EKIF) — a state-mandated body that has recommended the HPV vaccination. Clear advocate, introduced as such by the presenter himself (12:46: "he is a clear advocate of this HPV vaccination").

Source in-depth check Prof. Heininger:



(a) FUNDING: University Hospital Basel (public); EKIF (state); has, according to the broadcast, participated in pharma-funded studies and lectures (18:29).

(b) MANDATE: EKIF mandate is vaccination recommendation — structurally pro-vaccination; at the same time scientifically grounded.

D1 Conflict of interest: -1 — Pharma-funded studies/lectures (self-admitted); EKIF has recommended the vaccination

D2 Personal risk: 0 — Mainstream position, no personal risk

D3 Professional competence: +2 — Paediatrician, vaccination expert, EKIF member — directly responsible

D4 Opinion consistency: +1 — Consistent pro-vaccination position

D5 Emotionalisation vs. data: +1 — Largely factual, data-based

D6 Source level: +1 — Primary specialist authority (EKIF)

TOTAL: +4 → SOURCE INDICATOR: YELLOW (just below GREEN)

(c) PROFESSIONAL COMPETENCE: Correctly introduced as an advocate, but then repeatedly put on the defensive during the interview, as if his advocacy were itself suspect.

Missing expert groups:

- Epidemiologist with data on background risk of MS in unvaccinated girls
- WHO/EMA representative with overall international assessment
- Oncologist with data on the disease burden from cervical cancer

Source indicator for participants:

Source	D1	D2	D3	D4	D5	D6	Total	Indicator
Dr. Rabe, paediatrician and adolescent physician, Initiative of Incorruptible Doctors, Munich	-1	+1	+1	+1	-1	-1	0	YELLOW
Prof. Ulrich Heininger, senior physician University Hospital Basel, EKIF member	-1	0	+2	+1	+1	+1	+4	YELLOW

Summary:

- Dr. Rabe: TOTAL 0 → SOURCE INDICATOR YELLOW — pharma-critical advocacy organisation, statement not substantiated by data
- Prof. Heininger: TOTAL +4 → SOURCE INDICATOR YELLOW — high professional competence, conflict of interest through pharma connections present but made transparent

The expert selection is structurally unbalanced: a pharma-critical activist (Dr. Rabe) is positioned as an equivalent expert alongside a state-mandated vaccination expert (Heininger), without the differing evidence base of their statements being addressed.



2. SOURCE SELECTION

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Claims without primary source = penalty points (rumour check)

Source 1: Swissmedic

Timestamp

03:32 — Statement: "There is a clear temporal connection with the vaccination [...] whether the vaccination caused the report [...] we assessed it as possible."

(a) Funding: State licensing authority, financed through fees from the pharmaceutical industry and federal contributions.

(b) Structural conflict of interest: Swissmedic approved Gardasil — a recall would call its own decision into question. At the same time, Swissmedic is the competent specialist authority.

(c) Missing counter-source: EMA (European Medicines Agency) with its overall assessment is absent.

Source 2: French state health commission

Timestamp

06:50 — Statement: "The vaccination was 50 percent responsible for the young woman's suffering."

(a) Funding: State (France).

(b) Structural conflict of interest: Expert opinion prepared in the context of legal proceedings — not an independent scientific assessment, but a forensic expert opinion.

(c) Missing counter-source: The expert opinion is presented as a scientific statement, although it is a legal expert opinion. No indication of this distinction.

Rumour check:

Rumour 1:

Timestamp: 09:11

Claim: "A similar picture is emerging worldwide. Reports of side effects everywhere and everywhere a connection with the HPV vaccine is [suspected]."

Word marker: "is emerging" — implies trend without evidence

Primary source available: No — no study, no authority, no figure cited — penalty point +1

Rumour 2:

Timestamp: 39:48

Claim: "Dozens of British IS fighters would like to return. They are said to be disillusioned and worn down."

Word marker: "would like", "are said to be" — subjunctive without primary source

Primary source available: "The Observer newspaper reported" — secondary source, no primary source — penalty point +1

Summary: The source selection is one-sidedly oriented towards critical and victim-related sources; two rumours without primary sources increase the score. The French legal expert opinion is incorrectly framed as scientific evidence.



3. TIME DISTRIBUTION									5/10
1	2	3	4	5	6	7	8	9	10

Estimated speaking time (HPV segment):

- Jessica Mühlethaler (victim): (10%)
- Marie-Océane Bourguignon + family (victims): approx. 2.5 min. (12%)
- Dr. Rabe (pharma critic): approx. 1.5 min. (7%)
- Swissmedic representative: (5%)
- Sanofi (written, read aloud): approx. 0.5 min. (2%)
- Prof. Heininger (interview): (38%)
- Presenter/reporter: approx. 5.5 min. (26%)

Estimated speaking time (Post segment):

- Elsie Jordan (affected person): (10%)
- Mayor of Gondo: approx. 0.5 min. (5%)
- Ulrich Hurny (Post management): (20%)
- Fritz Gurtner (trade union): (10%)
- Andreas Blaser (postman): (10%)
- Reporter/presenter: approx. 4.5 min. (45%)

Summary: On the HPV topic, Prof. Heininger receives the most speaking time, but is structurally disadvantaged by aggressive moderation. Victim voices (Jessica, Marie-Océane) and pharma critics (Dr. Rabe) dominate the segment before the interview. On the Post topic, the distribution between management and trade union/affected persons is relatively balanced, but the framing favours the employee side.



4. OMISSION (Selective Omission)								8/10	
1	2	3	4	5	6	7	8	9	10

Omission 1:									
Context		The MS background risk in unvaccinated girls of the same age group is completely absent.							
Relevant at: Timestamp 02:21, 05:28, 13:33									
Effect		Without a comparative figure, every MS diagnosis following vaccination appears to be vaccination-related. Sanofi points this out (08:16: "Multiple sclerosis cases also occur in unvaccinated girls of this age group"), but this crucial indication is not taken up or quantified.							

Omission 2:									
Context		Prevented cancer cases and precancerous lesions due to the HPV vaccination are never quantified.							
Relevant at: Timestamp 00:34, 03:01, 20:04									
Effect		The broadcast shows exclusively the harm (side effects), never the benefit (prevented cancers). A benefit-risk assessment is impossible without both sides.							

Omission 3:									
Context		The majority of vaccinated girls (approx. 200,000 in Switzerland, 164 adverse event reports = 0.08%) without problems are not given a voice.							
Relevant at: Timestamp 14:46									
Effect		The statistical exception (side effects) is framed as representative; the rule (problem-free vaccination) remains invisible.							

Summary: The systematic omission of the benefit side and the background risk is the most serious finding of the broadcast. It makes a factually sound benefit-risk assessment by the viewer structurally impossible.

Missing voices

- Oncologist/gynaecologist: Would have presented the disease burden from cervical cancer and the importance of prevention from a patient perspective
- WHO/EMA representative: Would have contributed the overall international assessment of vaccination safety and represented the scientific consensus
- Epidemiologist: Would have explained the difference between background risk and vaccination-related risk and objectively contextualised the causality question
- Mother/daughter without side effects: Would have represented the statistical majority experience and balanced the one-sidedness of the victim portrayal
- Deradicalisation expert (London): Would have presented preventive measures and successes in dealing with radicalisation
- Swiss security authority (NDB): Would have assessed the concrete threat posed to Switzerland by returnees
- Post customer in a peripheral region who is satisfied with the solution: Would have shown that not all affected persons assess the situation in the same way



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- Labour lawyer/data protection officer: Would have legally contextualised the GPS surveillance question instead of merely presenting trade union vs. management



5. NUMERICAL MANIPULATION							7/10		
1	2	3	4	5	6	7	8	9	10

Complete figures include: absolute value, proportion (%) and trend

Finding 1:	
Timestamp	04:19
Figure: "164 cases of adverse side effects [...] 62 cases serious"	
Dimensions: (a) Absolute value shown ✓ — (b) Proportion not shown X — (c) Trend not shown X	
Missing context	164 out of approx. 200,000 vaccinated = 0.082%; 62 serious = 0.031%. These proportional figures are never mentioned.
Effect	The absolute figure of 164 sounds significant; the proportion of 0.08% would fundamentally change the contextualisation.

Finding 2:	
Timestamp	09:28
Figure: "259 cases of serious side effects [...] of which twelve deaths [...] 73 cases were recognised and compensated"	
Dimensions: (a) Absolute value shown ✓ — (b) Proportion not shown X — (c) Trend not shown X	
Missing context	How many girls were vaccinated in the USA? (Millions.) What is the background risk for these conditions? How many of the 12 deaths were causally confirmed?
Effect	Twelve deaths sound dramatic; without a reference figure, no contextualisation is possible.

Finding 3:	
Timestamp	21:24
Figure: "2.8 billion letters [...] 2.3 billion [...] minus 18 percent"	
Dimensions: (a) Absolute value ✓ — (b) Proportion ✓ — (c) Trend indicated ✓	
Missing context	European comparison absent; is -18% over 10 years a lot or a little in international comparison?
Effect	Without comparison, the decline appears more dramatic than it possibly is.

Summary: The consistent presentation of absolute figures without proportional figures on the HPV topic is the strongest numerical manipulation in the broadcast. It makes a factually sound risk assessment by the viewer structurally impossible.



6. GUILT BY ASSOCIATION									3/10
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Association 1:	
Timestamp	18:26
Quote	<i>"I ask myself nonetheless, deep down, are you actually truly independent? Because I have read and understood and researched that you have participated in expert opinions, in studies, in lectures that were also financially supported by pharmaceutical companies."</i>
Technique: Prof. Heininger is discredited by association with the pharmaceutical industry, without concrete conflicts of interest in the HPV assessment being demonstrated.	
Effect	Every statement by Heininger is contaminated by the suspicion of being bought, even though he himself answers transparently and acknowledges the connections.

Summary: The association Heininger-pharmaceutical industry is not wrong per se (he acknowledges it), but it is deployed as a discrediting instrument without Dr. Rabe (Initiative of Incorruptible Doctors) being subjected to an analogous conflict-of-interest examination. The asymmetry is the actual finding.



7. TIMING							7/10		
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Finding 1:

Position: 00:13 (teaser, start of broadcast)

Content: "Risky vaccination for girls. Small jab with major side effect."

Timing effect

The teaser sets the frame "risky" and "major side effect" as a premise before any evidence is presented. The viewer is already primed for scepticism before the report begins.

Finding 2:

Position: 01:11–12:24 (segment before interview)

Content: Two victim stories (Jessica, Marie-Océane), pharma-critical doctor (Dr. Rabe), international negative examples (Japan, USA, France) — all before the interview with Prof. Heininger.

Timing effect

Prof. Heininger must fight against an already constructed emotional and argumentative framework. He is structurally on the defensive before he has spoken a single sentence.

Finding 3:

Position: 20:47 (end of interview)

Content: "I have learned, we must live with these risks, including cases like Jessica or Marie-Ossian."

Timing effect

Brotz summarises the interview with a formulation that frames Heininger's position as "accepting risks" — a simplification that remains as the closing message at the end of the segment.

Summary: The structure of the broadcast (victims → pharma critic → negative examples → interview with advocate) is a classic technique for putting the interviewee on the defensive. The advocate must argue against an already established emotional framework.



8. SELECTIVE OUTRAGE

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Outrage = bias. Selective outrage reinforces the finding. Score = degree of outrage (0–5) + selectivity (0–5)

Finding 1:

Timestamp 13:22

Triggering event: Prof. Heiningen says he recommended the vaccination to his daughter and explained the risks.
Reaction: "But again, you did put the risks on the table, you also said that it can possibly extend to MS, multiple sclerosis."

Comparison

Dr. Rabe, 10:25 — claims without evidence "not a single case of cervical cancer prevented" — no follow-up question, no source check, no critical reaction.

Asymmetry: Heiningen is repeatedly questioned on risks and independence; Rabe is not questioned on the evidence base of his statements. Demonstrably asymmetric.

Degree of outrage: 3/5

Selectivity: 3/5

Finding 2:

Timestamp 15:39

Triggering event: Heiningen explains the pattern of risk assessment for medications.
Reaction: "That is the classic pattern, almost the defence pattern, that I hear from experts like you."

Comparison

No analogous event with Dr. Rabe — his statements are not described as an "attack pattern" or "activist pattern".

Asymmetry: The formulation "defence pattern" is evaluative and is used exclusively towards the vaccination advocate. Demonstrably asymmetric.

Degree of outrage: 2/5

Selectivity: 3/5

Summary: The selective outrage is directed exclusively against the vaccination advocate (Heiningen), while the pharma critic (Rabe) receives no critical follow-up questions. The asymmetry is demonstrably verifiable through direct comparability of the situations.



9. COMPLETENESS (Selective Omission — Overall picture)

8/10

1 2 3 4 5 6 7 8 9 10

Finding 1:

Timestamp 00:34–21:09 (entire HPV segment)

Missing perspective: Benefit of the HPV vaccination (prevented cancer cases, prevented precancerous lesions, Australian data in full)

Relevance: Without a presentation of benefits, a benefit-risk assessment is impossible; Art. 4 RTVG requires accurate reporting.

Impact: The viewer receives a structurally one-sided picture that generates scepticism towards the vaccination without providing the basis for an informed decision.

Finding 2:

Timestamp 33:25–40:29 (jihadism segment)

Missing perspective: Statistical contextualisation of the returnee threat; deradicalisation successes; Swiss context

Relevance: The broadcast generates a sense of threat without a statistical basis; not a single expert contextualises the actual probability of an attack.

Impact: The segment reads like a threat narrative without contextualisation — informationally incomplete and emotionally charged.

Finding 3:

Timestamp 21:11–31:49 (Post segment)

Missing perspective: Economic necessity of the restructuring; European comparison; customer perspective of business customers

Relevance: The broadcast shows exclusively the losers of the restructuring (farmer, postman), not the structural reasons or alternatives.

Impact: The viewer receives a one-sidedly negative picture of the Post restructuring without contextualisation of the economic constraints.

Summary: All three segments show the same pattern: victim and critic perspectives are fully presented, benefit perspectives and structural contextualisations are systematically absent. This is not coincidental, but an editorial pattern.

The HPV vaccine Gardasil was internationally controversial in 2014: Japan had suspended its recommendation, lawsuits were underway in France, and a state compensation fund existed in the USA. Switzerland recommended the vaccination from age 11. The Post debate reflects the structural conflict between the liberalisation of state enterprises and the universal service mandate — a recurring theme in Swiss economic policy. The jihadism topic was highly topical in 2014 due to the rise of IS and the debate about "foreign fighters" from Western countries.

Proportion of perspectives covered

Inverted: Original value measures coverage (higher = better). Displayed as deviation (higher = larger gaps).

HPV vaccination:

Präsident: Schläpfer, David - **Kontakt:** kontakt@SVFAB.ch - **Adresse:** SVFAB, Postfach, CH-8021 Zürich 1



[A] Overall epidemiological balance: How many cancer cases are prevented by the vaccination vs. how many side effects occur?

[B] Causality question: Difference between temporal connection and causal connection in MS diagnoses

[C] Comparative perspective: What is the MS background risk in unvaccinated girls of the same age?

[D] International health authorities (WHO, EMA): Overall assessment of vaccination safety

[E] Oncological perspective: Disease burden from cervical cancer vs. risk of side effects

[F] Parents who had their daughters vaccinated and experienced no problems (majority perspective)

Post:

[G] Economic necessity: Is the decline in letter volumes structural and how are other postal companies in Europe responding?

[H] Customer perspective of business customers: Why is modernisation necessary for the overall financing of the Post?

Jihadism:

[I] Deradicalisation experts: Which measures work preventively?

[J] Security authorities: How large is the actual returnee threat statistically?

[A] INDICATED

Timestamp: 04:53 — Quote: "one can still arrive at the assessment that the benefit clearly outweighs the risks" — Assessment: Swissmedic mentions the overall balance, but without concrete figures on prevented cancer cases.

[B] OMITTED

Timestamp: — — Quote: — — Assessment: The crucial difference between temporal connection (post hoc) and causal connection is never systematically explained; Brotz repeatedly treats temporal connection as an indicator of causality.

[C] OMITTED

Timestamp: — — Quote: — — Assessment: The MS background risk in unvaccinated girls of this age group is never mentioned, although Sanofi points to it (08:16); this crucial context is completely absent from the segment.

[D] OMITTED

Timestamp: — — Quote: — — Assessment: WHO and EMA are not cited; international health authorities that continue to recommend the vaccination are completely absent.

[E] OMITTED

Timestamp: — — Quote: — — Assessment: No oncologist, no patient with cervical cancer, no presentation of the disease burden from HPV-related cancer.

[F] OMITTED

Timestamp: — — Quote: — — Assessment: Not a single mother or daughter who received the vaccination without problems is given a voice — although this represents the statistical majority.

[G] INDICATED

Timestamp: 21:24 — Quote: "Ten years ago the Swiss were still sending 2.8 billion letters [...] 2.3 billion letters is the figure today" — Assessment: Structural decline is mentioned, but not embedded in a European comparison.

[H] INDICATED

Timestamp: 26:06 — Quote: "In Herkingen we invested because these are customer needs" — Assessment: Post management explains the investment logic, but without overall financing context.

[I] OMITTED



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Timestamp: — — Quote: — — Assessment: No deradicalisation expert, no prevention perspective in the jihadism segment.

[J] OMITTED

Timestamp: — — Quote: — — Assessment: No statistical data on the actual threat of attacks by returnees; the danger is framed as given.

Completeness score: 3/10

Rationale: Of ten relevant perspectives, only three are indicated, none fully addressed. Particularly serious is the absence of the overall epidemiological balance on the HPV topic (prevented cancer cases vs. side effects), the absence of the MS background risk as a comparative figure, and the complete absence of voices from the vaccinated majority without problems. The broadcast systematically depicts the exception (side effects), not the rule.



Soft facts — 6 qualitative techniques

10. FRAMING (Setting the frame)

8/10

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Finding 1:

Timestamp	00:13
Quote	<i>"Risky vaccination for girls. Small jab with major side effect."</i>
Manipulation	The teaser sets "risky" as a premise, not as a thesis. "Major side effect" in the singular suggests frequency, not exception.
Why problematic	The viewer is primed for scepticism before evidence is presented. A neutral formulation would be: "HPV vaccination: comparing benefits and risks."

Finding 2:

Timestamp	03:09
Quote	<i>"With a kind of Bravo photo love story, the advertising campaign targets underage girls directly."</i>
Manipulation	"Bravo photo love story" is a derogatory characterisation of a health campaign. "Underage" emphasises vulnerability and implies manipulation.
Why problematic	A health campaign that addresses young people in their own language is framed as manipulative without this being substantiated.

Finding 3:

Timestamp	07:43
Quote	<i>"Surprisingly, the pharmaceutical industry is completely refusing today."</i>
Manipulation	"Surprisingly" is an evaluative comment by the reporter; "completely refusing" is a characterisation that frames Sanofi as uncooperative and guilt-conscious.
Why problematic	Sanofi submitted a written statement to the Rundschau (08:11). "Complete refusal" is factually incorrect.

Summary: The framing of the broadcast is consistently oriented towards scepticism regarding the vaccination and the pharmaceutical industry. The teaser already sets the frame, which is maintained throughout the entire segment.



11. CHOICE OF WORDS AND TERMS							7/10		
1	2	3	4	5	6	7	8	9	10

Finding 1:	
Timestamp	07:43
Quote	"Surprisingly, the pharmaceutical industry is completely refusing today."
Manipulation	"Completely refusing" implies guilt-consciousness and uncooperativeness.
Why problematic	Sanofi submitted a written statement. Neutral alternative: "Sanofi disputes the connection."

Finding 2:	
Timestamp	15:39
Quote	"That is the classic pattern, almost the defence pattern."
Manipulation	"Defence pattern" delegitimises Heininger's factual argumentation as a strategic defensive reaction rather than a professional assessment.
Why problematic	The same argumentation (risk assessment for medications) would not have been described as a "pattern" in the case of a pharma critic. Neutral alternative: "That is the usual risk assessment."

Finding 3:	
Timestamp	00:46
Quote	"the small jab of the so-called HPV vaccination can have major side effects"
Manipulation	"So-called" places the HPV vaccination in inverted commas of scepticism; "can have major side effects" without frequency data suggests probability rather than possibility.
Why problematic	Every medical measure "can" have side effects. Without frequency data, the statement is uninformative and alarmist. Neutral alternative: "can in rare cases have serious side effects."

Summary: The choice of words is consistently oriented towards alarm and scepticism. Particularly the characterisation of Heininger's argumentation as a "defence pattern" and the formulation "completely refusing" for a party that submitted a statement are factually inaccurate.



12. MODERATION BEHAVIOUR								8/10	
1	2	3	4	5	6	7	8	9	10

Finding 1:

Timestamp 13:22

Triggering event: Heininger explains that he recommended the vaccination to his daughter and explained the risks.

Quote (presenter) *"But again, you did put the risks on the table, you also said that it can possibly extend to MS, multiple sclerosis."*

Comparison Dr. Rabe, 10:09 — claims "not a single case prevented" — no follow-up question on the evidence base.

Asymmetry: Heininger is repeatedly questioned on risks; Rabe receives no critical follow-up question. Demonstrably asymmetric.

Finding 2:

Timestamp 18:26

Triggering event: Heininger has answered all questions factually.

Quote (presenter) *"I ask myself nonetheless, deep down, are you actually truly independent?"*

Comparison Dr. Rabe (Initiative of Incorruptible Doctors) — no question about the independence of his organisation, its funding, or possible conflicts of interest.

Asymmetry: The independence question is posed exclusively to the vaccination advocate. Demonstrably asymmetric.

Finding 3:

Timestamp 20:47

Triggering event: End of interview.

Quote (presenter) *"Well, I have learned, we must live with these risks, including cases like Jessica or Marie-Ossian."*

Comparison No analogous summary after Dr. Rabe's statements.

Asymmetry: Brotz summarises the interview with a formulation that frames Heininger's position as "accepting risks" — a simplification that reduces Heininger's differentiated argumentation to an emotional formula.

Summary: The moderation behaviour towards Prof. Heininger is consistently confrontational and mistrustful, while Dr. Rabe receives no critical follow-up questions. The asymmetry is clearly demonstrable through direct comparability of the situations and constitutes one of the most serious findings of the broadcast.



13. QUESTION ASYMMETRY								8/10	
1	2	3	4	5	6	7	8	9	10

Asymmetry 1:	
To Prof. Heininger, 18	26: "Are you actually truly independent? [...] Are you really free?" — hard/mistrustful
To Dr. Rabe, 10	09: No question about the independence of the Initiative of Incorruptible Doctors, no question about funding, no question about the evidence base of the statement "not a single case prevented" — no critical follow-up question
Comparison	Heininger is questioned about pharma connections; Rabe is not questioned about the connections of his organisation. Structurally asymmetric.

Asymmetry 2:	
To Prof. Heininger, 15	48: "If it is not 100% clear that it actually has an effect, then one must look all the more carefully, all the more sharply" — suggestive/confrontational
To Swissmedic representative, 03	49: No follow-up question on the 62 serious cases, no question on causality assessment — no critical follow-up question
Comparison	The vaccination advocate is confronted with suggestive questions; the authority receives no critical follow-up questions.

Summary: The question asymmetry is the clearest bias in the broadcast. Vaccination advocates are confronted with hard, mistrustful questions; pharma critics and authorities receive no analogous critical follow-up questions. This violates the requirement of balanced interviewing under Art. 4 RTVG.



14. FALSE BALANCE									4/10
1	2	3	4	5	6	7	8	9	10

Finding 1:

Timestamp

10:09–12:24

Construct: Dr. Rabe (pharma critic, advocacy organisation) is positioned as an equivalent expert alongside Prof. Heining (EKIF member, university hospital).

Analysis

The two positions are not equivalent: Heining represents the scientific consensus and a state-mandated body; Rabe represents a minority opinion of an advocacy organisation. The broadcast treats them as equivalent expert opinions without addressing the differing evidence base.

Summary: The false balance does not consist in an artificial balance between two equivalent positions, but in the equation of a scientific consensus position with a minority opinion of an advocacy organisation.



15. AGENDA-SETTING

7/10

1

2

3

4

5

6

7

8

9

10

Finding 1:

Agenda element set: The HPV vaccination is primarily a safety risk, not an instrument of cancer prevention.

Timestamp

00:13 — Evidence: "Risky vaccination for girls. Small jab with major side effect."

Alternative agenda: "HPV vaccination: How effective is cancer prevention, and how rare are serious side effects?"

Finding 2:

Agenda element set: The Post restructuring is primarily an attack on employees and peripheral regions.

Timestamp

21:48 — Evidence: "Above all one thing, a reduction. A reduction in service, a reduction in personnel costs. And that is causing unrest."

Alternative agenda: "How is the Post adapting to the structural decline in letter volumes, and what models exist in Europe?"

Summary: The agenda-setting function of the broadcast is strongly pronounced: all three topics are introduced with a pre-formed problem definition that steers the viewer towards a particular conclusion before evidence is presented.



CHAPTER 4 — OVERALL EVALUATION

Results

- HARD FACTS SCORE (average criteria 1-9): 6.3 / 10
- SOFT FACTS SCORE (average criteria 10-15): 7.0 / 10

Dominant techniques

- 1. Omission / Selective Omission (Score 8):** The consistent omission of the benefit side of the HPV vaccination (prevented cancer cases, MS background risk, majority experience without side effects) is the most serious technique. It makes a factually sound benefit-risk assessment by the viewer structurally impossible and directly violates Art. 4 RTVG.
- 2. Framing / Moderation behaviour (Score 8 each):** The teaser sets "risky" as a premise; the broadcast structure (victims → critics → interview) puts the advocate on the defensive. The moderation behaviour reinforces this effect through confrontational questions to Heiningner and the complete absence of critical follow-up questions to Dr. Rabe.
- 3. Question asymmetry (Score 8):** The independence question is posed exclusively to the vaccination advocate; the pharma critic (member of an advocacy organisation) is not questioned about conflicts of interest. This asymmetry is clearly demonstrable through direct comparability of the situations.

Core messages of the broadcast

MESSAGE 1 (SUBSTANTIVE): "The HPV vaccination is more dangerous than the authorities admit, and the pharmaceutical industry is concealing the risks."

Technique: Framing (teaser), omission (benefit side), timing (victims before expert) — evidence: 00:13, 07:43, 01:11

MESSAGE 2 (PERSONAL): "Experts who were funded by the pharmaceutical industry are not trustworthy."

Technique: Guilt by association, question asymmetry — evidence: 18:26, 15:39

MESSAGE 3 (SOCIETAL): "State institutions and large corporations act against the interests of citizens (Post, authorities, pharmaceutical industry)."

Technique: Agenda-setting, framing — evidence: 21:48, 00:34, 33:25

Rationale: With an overall score of 6.6, the broadcast sits at the boundary between "clear one-sidedness" and "systematic imbalance". The one-sidedness is most pronounced on the HPV topic: the complete omission of the benefit side, the asymmetric moderation and the numerical manipulation through missing proportional figures together fulfil the constituent elements of a violation of Art. 4 RTVG (accurate reporting, diversity of opinion). The Post topic and the jihadism topic show similar but less pronounced patterns. The one-sidedness is not attributable to individual errors, but to a consistent editorial pattern.

CONCLUSION

The Rundschau broadcast of 05.11.2014 shows a clear and demonstrable one-sidedness on the HPV topic that violates Art. 4 RTVG. The complete omission of the benefit side of the vaccination (prevented cancer cases, MS background risk, majority experience), the asymmetric moderation (confrontational towards Heiningner, uncritical towards Rabe) and the presentation of absolute figures without proportional figures make a factually sound benefit-risk assessment by the viewer structurally impossible. The broadcast thereby fails to fulfil the statutory mandate of accurate reporting under Art. 4 Para. 2 RTVG. The Post topic and the jihadism topic show the same editorial pattern (victim perspective fully presented, structural perspective omitted), but are less serious. The overall tendency of the broadcast is left-favouring (+1.8), which manifests in the emphasis on state universal services, industry criticism and minority protection, without right-wing counter-positions (personal responsibility, market solutions, security primacy) being structurally equally represented.



OVERALL EVALUATION OF THE 15 CRITERIA

Individual scores — All 15 criteria

No.	Criterion	Score	Classification
1	EXPERT SELECTION	7	●●●●
2	SOURCE SELECTION	6	●●●
3	TIME DISTRIBUTION	5	●●●
4	OMISSION (Selective Omission)	8	●●●●
5	NUMERICAL MANIPULATION	7	●●●●
6	GUILT BY ASSOCIATION	3	●●
7	TIMING	7	●●●●
8	SELECTIVE OUTRAGE	6	●●●
9	COMPLETENESS (Selective Omission — Overall picture)	8	●●●●
10	FRAMING (Setting the frame)	8	●●●●
11	CHOICE OF WORDS AND TERMS	7	●●●●
12	MODERATION BEHAVIOUR	8	●●●●
13	QUESTION ASYMMETRY	8	●●●●
14	FALSE BALANCE	4	●●
15	AGENDA-SETTING	7	●●●●

HARD FACTS SCORE (1-8)

6.3/10

Serious deviation from the impartiality requirement. High degree of deviation

SOFT FACTS SCORE (9-14)

7.0/10

Serious deviation from the impartiality requirement. High degree of deviation

OVERALL SCORE

6.7/10

Serious deviation from the impartiality requirement. High degree of deviation

Averaged from hard facts and soft facts



KEY — Meaning of scores

Individual scores per criterion (0–10)

0	No finding	No relevant anomaly identified.
1–2	Weak finding	Minor anomaly without material impairment of balance.
3–4	Slight to moderate finding	Discernible tendency; impact relevance low to moderate.
5	Moderate finding with impact relevance	Relevant imbalance that influences the opinion-forming potential of the audience.
6	Substantial finding (threshold)	Scores from 6 onwards are classified as "substantial findings".
7	Substantial finding	Clear, well-substantiated imbalance with marked impact relevance.
8–9	Serious finding	Pronounced imbalance; multiple substantiated individual findings in this criterion.
10	Maximum severity	Systematic, pervasive imbalance in this criterion.

Aggregated deviation index — interpretation ranges

0.0 – 2.5	Unremarkable	No material patterns discernible; broadcast meets the accuracy requirement.
2.6 – 4.0	Slight imbalance	Isolated anomalies; statistically visible, but still within the tolerance range.
4.1 – 6.0	Substantial imbalance	Multiple substantial findings; relevant impairment of diversity of perspectives.
6.1 – 8.0	Serious deviation from the impartiality requirement. High degree of deviation	Pronounced, broadcast-wide patterns; high impact relevance.
8.1 – 10	Fundamental systemic one-sidedness. Very high degree of bias	Maximum severity across almost all criteria; systematically one-sided reporting.

Party-political bias (-5 to +5)

-5 to -3	Strongly disadvantaged	Party is clearly treated worse in portrayal, speaking time or framing.
-2 to -1	Slightly disadvantaged	Discernible but weak disadvantage.
0	Neutral	No discernible preference or disadvantage.
+1 to +2	Slightly favoured	Discernible but weak preference.
+3 to +5	Strongly favoured	Party is clearly preferred in portrayal, speaking time or framing.



CHAPTER 5 — LEGAL CLASSIFICATION (Art. 4 RTVG)

Assessment under Art. 4 RTVG

Violation 1:

Norm: Art. 4 Para. 2 RTVG (accurate representation of facts and events)

Facts: The broadcast presents the HPV vaccination as primarily risky without accurately presenting the benefit side (prevented cancer cases, precancerous lesions, overall epidemiological balance). The presentation of 164 adverse event reports without a proportional figure (0.08% of 200,000 vaccinated persons) and without comparison with the MS background risk in unvaccinated persons is factually incomplete.

Evidence: Timestamp 04:19 — "164 cases of adverse side effects [...] of which over 60 serious" — without proportional figure, without comparative reference.

Assessment: The omission of the benefit side and the proportional figures cannot be explained by time pressure (the segment lasts 21 minutes), but represents an editorial decision that violates accurate reporting.

Violation 2:

Norm: Art. 4 Para. 4 RTVG (balanced selection of interlocutors on controversial topics)

Facts: The interview with Prof. Heininger is structurally unbalanced due to asymmetric moderation: Heininger is questioned on independence and pharma connections (18:26); Dr. Rabe (member of an advocacy organisation) receives no analogous questions. The independence question is posed exclusively to the vaccination advocate.

Evidence: Timestamp 18:26 — "Are you actually truly independent?" — no analogous event with Dr. Rabe.

Assessment: The demonstrable asymmetry in the questioning violates the requirement of balanced selection and treatment of interlocutors.

Violation 3:

Norm: Art. 4 Para. 4 RTVG (diversity of opinion on controversial topics)

Facts: On the HPV topic, the broadcast presents two victim stories, a pharma critic and international negative examples before the only advocate is given a voice. Voices in favour of the vaccination (WHO, EMA, oncologists, mothers without side effects) are completely absent.

Evidence: Timestamp 01:11–12:24 — entire segment before interview without a single pro-vaccination voice apart from Swissmedic (1 minute).

Assessment: The structural underrepresentation of the advocate side violates the requirement of diversity of opinion.

Overall assessment Art. 4 RTVG

The broadcast violates Art. 4 RTVG in three dimensions: accurate reporting (missing benefit side and proportional figures), balanced selection of interlocutors (asymmetric moderation) and diversity of opinion (structural underrepresentation of the advocate side). The violations are not attributable to individual errors, but to a consistent editorial pattern that runs through the entire HPV segment. A complaint to the Independent Complaints Authority for Radio and Television (ICA) would be justifiable on the basis of these findings, in particular with regard to the complete omission of the epidemiological benefit side and the demonstrable asymmetry in the moderation.



CHAPTER 6 — SOURCE IN-DEPTH CHECK

1. Swissmedic (Swiss Agency for Therapeutic Products)

1. FUNDING: Financed through fees from the pharmaceutical industry (approx. 80%) and federal contributions (approx. 20%). Structural conflict of interest: Swissmedic approved Gardasil; a recall would call its own decision into question.

2. MANDATE: Authorisation and monitoring of therapeutic products — compatible with safety assessment, but not fully independent of its own authorisation decisions.

3. CONFLICT OF INTEREST: Institutional interest in confirming its own authorisation decisions; at the same time legally obliged to monitor safety.

D1 Conflict of interest: -1 — Partial funding by pharmaceutical industry; own authorisation decisions

D2 Personal risk: 0 — Institutional position, no personal risk

D3 Professional competence: +2 — Competent specialist authority, highest competence

D4 Opinion consistency: +1 — Consistent assessment

D5 Emotionalisation vs. data: +2 — Data-based, factual

D6 Source level: +2 — Primary authority

TOTAL: +6 → SOURCE INDICATOR: GREEN

5. COUNTER-SOURCE: EMA (European Medicines Agency) with overall assessment absent; WHO absent.

2. Initiative of Incorruptible Doctors (represented by Dr. Rabe)

1. FUNDING: Non-profit association, financed through membership fees and donations; no public funding information available. Structural conflict of interest: organisational mandate is explicitly pharma criticism.

2. MANDATE: Not compatible with neutral assessment — the organisation is by definition oriented towards pharma criticism.

3. CONFLICT OF INTEREST: Institutional interest in pharma criticism (maintaining relevance, recruiting members, interpretive authority); statements that exonerate the pharmaceutical industry would contradict the organisational mandate.

D1 Conflict of interest: -1 — Pharma-critical advocacy organisation

D2 Personal risk: +1 — Doctor going against mainstream risks reputational loss

D3 Professional competence: +1 — Paediatrician, but not an epidemiologist

D4 Opinion consistency: +1 — Consistent pharma criticism

D5 Emotionalisation vs. data: -1 — Core statement ("not a single case prevented") not substantiated by data

D6 Source level: -1 — No primary source cited

TOTAL: 0 → SOURCE INDICATOR: YELLOW

5. COUNTER-SOURCE: Australian data (efficacy against HPV infections and genital warts) contradict the core statement; mentioned in the broadcast by Sanofi (11:03), but dismissed by Dr. Rabe as "questionable" without counter-evidence.

3. French state health commission (expert opinion in the Bourguignon case)

1. FUNDING: State (France).

2. MANDATE: The expert opinion was prepared in the context of legal proceedings — it is a forensic legal expert opinion, not an independent scientific expert opinion. This distinction is not made in the broadcast.

3. CONFLICT OF INTEREST: Forensic expert opinions are prepared in the context of legal proceedings and follow different standards from scientific studies (burden of proof, causality standards).

D1 Conflict of interest: -1 — Forensic expert opinion in legal proceedings

D2 Personal risk: 0 — State commission

D3 Professional competence: +1 — State health experts

D4 Opinion consistency: 0 — Single expert opinion, no consistency check possible

D5 Emotionalisation vs. data: +1 — Expert opinion (formally data-based)

D6 Source level: 0 — Secondary source (expert opinion, not primary study)

TOTAL: +1 → SOURCE INDICATOR: YELLOW



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5. COUNTER-SOURCE: EMA overall assessment absent; the expert opinion is presented as scientific evidence, although it is a legal expert opinion.

IMPORTANT: "Recognised" is not a factual qualification. It is a social attribution that must itself be questioned. The broadcast treats Swissmedic as a recognised authority (GREEN), the Initiative of Incorruptible Doctors as an equivalent expert voice (YELLOW) and the French legal expert opinion as scientific evidence (YELLOW) — without making these distinctions transparent to the viewer.

Source indicator for participants:

Source	D1	D2	D3	D4	D5	D6	Total	Indicator
Swissmedic (Swiss Agency for Therapeutic Products)	-1	0	+2	+1	+2	+2	+6	GREEN
Initiative of Incorruptible Doctors (represented by Dr. Rabe)	-1	+1	+1	+1	-1	-1	0	YELLOW
French state health commission (expert opinion in the Bourguignon case)	-1	0	+1	0	+1	0	+1	YELLOW

Legal and methodological classification

No finding of fact	The results presented do not constitute findings of fact about individual persons, editorial teams or broadcasts. They are to be understood as the result of a standardised operationalisation, not as a determination of individual responsibility.
No legal ruling	The aggregated deviation index does not replace a legal assessment within the meaning of Art. 4 RTVG. The determination of whether a specific broadcast violates statutory requirements is the exclusive responsibility of the competent authorities (in particular the ICA).
No proof of causality	Statistical correlations are not to be interpreted as proof of causal relationships or editorial intentions. Deviation values may be influenced by topic selection, news situation, political controversy or format logic.
No judgement of intent	The analysis measures observable structural characteristics of broadcasts. A score of 7 means that a substantial imbalance has been identified — not that the editorial team intended this. The methodology makes no statements about motives or strategic objectives.
Heuristic comparison instrument	The index serves for comparative pattern recognition across thousands of broadcasts, not for the precise metric measurement of individual segments. Threshold values serve as heuristic orientation, not as sharp legal qualification.



APPENDIX 1: NATIONAL LEGISLATION

Legal basis Switzerland — SRG SSR

Law

Federal Act on Radio and Television (RTVG, SR 784.40)

Relevant articles

- Art. 4 Para. 1 RTVG: All broadcasts of a radio or television programme must respect fundamental rights. Broadcasts must in particular respect human dignity, must not be discriminatory, must not contribute to racial hatred, must not endanger public morality, and must not glorify or trivialise violence.
- Art. 4 Para. 2 RTVG: Editorial broadcasts with informational content must present facts and events accurately, so that the audience can form its own opinion. Views and comments must be recognisable as such.
- Art. 4 Para. 4 RTVG: In the totality of editorial broadcasts, the diversity of events and opinions must be adequately expressed (plurality requirement).

Core obligations

- 1. Accuracy:** Accurate representation of facts and events
- 2. Diversity of opinion:** Diversity of views on controversial topics
- 3. Balance:** Balanced selection of interlocutors

Supervisory authority

- ICA (Independent Complaints Authority for Radio and Television): Examines complaints against broadcast programmes for violations of Art. 4 RTVG
- OFCOM (Federal Office of Communications): Regulatory and supervisory authority
- Ombudsman offices of the SRG: First point of contact for programme complaints

Complaints procedure

1. Ombudsman office of the respective business unit (SRF, RTS, RSI, RTR)
2. ICA (if no agreement)
3. Federal Supreme Court (final instance)



APPENDIX 2: SCIENTIFIC FOUNDATIONS

Literature

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- Schläpfer, D. (2026). Measuring Editorial Noise: A Retrospective Suppression Index for Public Broadcasting Content Analysis. [SSRN 6733280](#)
- Schläpfer, D. (2026). Source Traffic Light: A Six-Dimensional Credibility Framework for Systematic Source Assessment in Public Service Media. [SSRN 6733880](#)

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The SRG collects 1.56 billion francs per year — compulsorily, from every household. Those who feel unfairly treated can lodge a complaint. There is even an authority for this: the ICA, the Independent Complaints Authority for Radio and Television.

Only: it is not independent. It has no sanctioning powers. And in 99.6% of all cases it decides: nothing.

This analysis lays bare the system — factually, precisely, without polemic. Procedures, personnel, powers, costs, statistics, legal recourse. And the constitutional law examination that shows: the ICA system meets none of the three fundamental criteria — it is not appropriate, not subject to separation of powers, not market-based. The authority that is supposed to protect citizens protects above all the system it was supposed to control.

Essential reading for all those considering a complaint — and for all those who want to understand why genuine media oversight in Switzerland is still outstanding.