



## SVFAB DETAILED ANALYSIS

2023-01-10 *Satanic Panic in der Schweiz – Der Fall Leonie*

Broadcast: SRF Tagesschau broadcast | 2023-01-10 | Analysed on: 2026-05-19 16:49

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

**OVERALL  
SCORE**

**4.7/10**

*Significant imbalance*

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 favouring left, 5 = balanced, 10 = strongly favouring right). The calculation is based on the difference in the average favouring of left vs. right parties (grouping according to CHES 2024).

**TENDENCY (L – R)**

**5.0 / 10**

*Balanced*

0 1 2 3 4 5 6 7 8 9 10

← Left

Right →

Source: Chapel Hill Expert Survey 2024 — [chesdata.eu](https://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 with a seven-member Federal Council composed according to the so-called magic formula. All major parties are represented in government: SVP (2 seats), SP (2 seats), FDP (2 seats), The Centre (1 seat). There is no classic government-opposition dichotomy. Parties outside the Federal Council (Greens, GLP, EVP) form a parliamentary opposition without governmental responsibility.

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, EU rapprochement
FDP	6.5	28	Government (2 FC)	Economic freedom, lean state, bilateral agreements
Centre	5.0	29	Government (1 FC)	Pragmatism, family relief, stability
Greens	2.0	23	Opposition	Climate protection, redistribution, disarmament
GLP	4.0	10	Opposition	Green economy, liberal migration, innovation
EVP	5.5	2	Opposition	Christian values, centre positions

The most important political fault lines in Switzerland in 2024 are: (1) Migration and asylum — SVP demands a change of system, SP/Greens defend an open policy; (2) EU Bilateral III — negotiations on new agreements divide parties along the sovereignty vs. integration question; (3) Healthcare costs — health insurance premiums at record high, single-payer scheme (SP/Greens) vs. competition model (FDP/SVP); (4) Energy and climate — debate on new nuclear power plant construction following the vote on the Energy Act.

SRF (Swiss Radio and Television) is the public broadcaster of German-speaking Switzerland and is subject to the Radio and Television Act (RTVA). Art. 4 RTVA obliges SRF to present facts accurately, to reflect a diversity of opinions on controversial topics, and to select interlocutors in a balanced manner. As Switzerland's largest media organisation funded by licence fees, SRF bears a special democratic responsibility for political opinion formation.



## CHAPTER 1 — PARTY-POLITICAL BIAS

Preliminary remark: The present report is an investigative documentary on malpractice in the psychiatric system (Satanic Panic / ritual abuse). It has no direct party-political reference. No party is mentioned by name, no party position is presented or distorted. The analysis of party positions is therefore structurally not applicable — all scores are 0 (not addressed).

Party	Score (-5..+5)	Broadcast portrayal vs. programme position
SVP	0	Not mentioned — topic without direct SVP reference — not addressed
SP	0	Not mentioned — topic without direct SP reference — not addressed
FDP	0	Not mentioned — topic without direct FDP reference — not addressed
Centre	0	Not mentioned — topic without direct Centre reference — not addressed
Greens	0	Not mentioned — topic without direct Greens reference — not addressed
GLP	0	Not mentioned — topic without direct GLP reference — not addressed
EVP	0	Not mentioned — topic without direct EVP reference — not addressed

### Party bias summary

- Most accurate portrayal: Not applicable (Score 0)
- Strongest distortion: Not applicable (Score 0)
- Average deviation from 0: 0.0
- Conclusion: The report addresses a medical-psychiatric topic (malpractice through conspiracy narratives) without any discernible party-political reference. No party position is presented, distorted, or omitted. A party-political bias in the classical sense cannot be demonstrated. The relevant bias analysis shifts to institutional, professional, and societal dimensions (psychiatry, justice, the therapeutic profession).



## CHAPTER 2 — BROADCAST INFORMATION AND THEMATIC FRAMEWORK

### Broadcast data

- Title: "Satanic Panic" — Investigative report on malpractice through conspiracy narratives (series format, part unknown)
- Date: 10.01.2023
- Presenter / Reporter: Ilona (first name given, surname not in transcript); second reporter not identified by name
- Persons interviewed:

Actors	Function	Party/affiliation	Political spectrum
Leonie	Affected patient	None	Not political
Carmen	Leonie's sister	None	Not political
Leonie's mother	Relative	None	Not political
Jérôme Endras	Forensic psychologist, expert on extremism	No party	Science/subject expert
Leonie's trauma therapist	Accused therapist (written statement)	None	Not political
Chief physician, Mairi private clinic	Accused physician (declines to comment)	None	Not political
Thomas Reisch	Former medical director PZM Münsingen (refers to PZM)	None	Not political
PZM clinic director	Clinic management PZM Münsingen (press conference)	None	Not political
Solothurn Public Prosecutor's Office	Authority (written statement)	None	State
KESB Biel	Authority (written statement)	None	State
Medical director, Mairi private clinic	Clinic management (written statement)	None	Not political

### Main topic

An investigative report documents how patient Leonie was subjected to malpractice, physical restraint, and surveillance by authorities on the basis of a conspiracy narrative about Satanist ritual abuse, carried out by a trauma therapist and subsequent psychiatric institutions.



## CHAPTER 3 — 15 CRITERIA: DETAILED ANALYSIS

### Hard facts — 9 techniques that are countable and scientifically robust

#### 1. EXPERT SELECTION

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**Expert 1:** Jérôme Endras, forensic psychologist and expert on extremism

Timestamp: approx. 24:00–27:00

Statement: "Conspiracy narratives have no place in psychiatry, in medicine in general, or in psychotherapy. They are only destructive."

Assessment: Endras is a forensic psychologist specialising in extremism — not primarily a trauma therapist or psychiatrist. His statements on therapists' susceptibility to conspiracy thinking are plausible, but his field of expertise (extremism/forensics) does not fully coincide with the core topic (trauma therapy, DID diagnosis, psychiatric treatment standards).

Missing countervoice: A trauma therapist or psychiatrist who explains the complexity of DID diagnoses and differentiates between legitimate trauma therapy and malpractice is entirely absent.

#### Source in-depth check:

**(a) FUNDING:** Jérôme Endras is a forensic psychologist — presumably in state or university employment (exact institution not mentioned in transcript). No obvious private interest funding discernible.

**(b) MANDATE:** His mandate (extremism research, forensic psychology) is partially compatible with the assessment of conspiracy narratives, but not fully congruent with psychiatric treatment quality or trauma therapy standards.

D1 Conflict of interest: +1 — No obvious conflict of interest; no institutional advantage through a particular statement discernible

D2 Personal risk: +1 — Criticism of the therapist community carries a certain professional risk; he takes a clear position

D3 Subject competence: +1 — Forensic psychology/extremism relevant for susceptibility to conspiracy thinking, but not for trauma therapy specifics; partial competence

D4 Opinion consistency: 0 — No prior statements documented in transcript; not assessable

D5 Emotionalisation vs. data: +1 — References "empirical studies" (30–50% susceptibility), remains largely factual

D6 Source level: 0 — Secondary source (expert comments on case files, no own primary research on the case)

**TOTAL: +4 → SOURCE INDICATOR: YELLOW**

**(c) SUBJECT COMPETENCE:** Endras is framed as a neutral expert ("expert on extremism"), although his field does not fully coincide with the core topic. The broadcast uses his authority to confirm the overall narrative without obtaining a countervoice from the trauma therapy field. This is a partial source distortion through selection.

*Missing expert groups:*

- Trauma therapist/trauma researcher with a scientific overview of DID diagnoses
- Psychiatrist with experience in coercive measures (restraint) and their legal basis
- Legal expert on patient rights and psychiatric law

Summary: The only expert is Jérôme Endras (YELLOW), whose field only partially coincides with the core topic. No countervoice from trauma therapy or psychiatry. The expert selection is one-sidedly positioned and exclusively confirms the main thesis of the report.



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**Source indicator for participants:**

Source	D1	D2	D3	D4	D5	D6	Total	Indicator
Jérôme Endras, forensic psychologist and expert on extremism	+1	+1	+1	0	+1	0	+4	<b>YELLOW</b>



## 2. SOURCE SELECTION

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Claims without primary source = penalty points (rumour check)

### Source 1: Files of the Solothurn Public Prosecutor's Office (surveillance documents)

**Timestamp** approx. 20:00–21:00 — Statement: "You fill two full files here, recordings, video cameras."

- (a) **Funding and sponsorship:** State authority, publicly funded
- (b) **Structural conflict of interest:** The Public Prosecutor's Office has an institutional interest in presenting its actions as lawful; its written statement is defensive and not explanatory
- (c) **Missing counter-source:** A legal opinion on the lawfulness of the surveillance is absent; no independent lawyer comments on the measures

### Source 2: Internal clinic files (PZM Münsingen, Mairi private clinic)

**Timestamp** approx. 08:00–10:00, approx. 29:00–32:00 — Statement: "Leonie was conceived for the sect and programmed for the sect from an early age."

- (a) **Funding:** PZM is cantonal funded (Canton of Bern); Mairi private clinic is privately funded
- (b) **Structural conflict of interest:** The files were made available by Leonie — one-sided selection by the affected person possible; the clinics have no access to the selection of cited passages
- (c) **Missing counter-source:** Complete files were not reviewed; only passages selected by Leonie are cited

### Source 3: Investigation report by the Canton of Bern on PZM

**Timestamp** approx. 33:00–35:00 — Statement: "The conspiracy narrative has fed into the therapy."

- (a) **Funding:** State (Canton of Bern)
- (b) **Structural conflict of interest:** The canton has an interest in presenting the problem as recognised and resolved; however, the report is an official document with an audit character
- (c) **Missing counter-source:** No independent external review of the investigation report itself

Rumour check (penalty points):

Rumour 1:

Timestamp: approx. 26:00

Claim: "The therapists have, in the last three years, driven three patients who told me this to suicide."

Word marker: "who told me this" — indirect source, no primary source

Primary source available: NO — penalty point (+1)

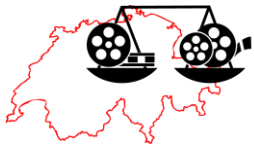
Note: Immediately afterwards a qualification is added: "To what extent this can be attributed to this conspiracy narrative cannot be said precisely." — The qualification mitigates but does not cancel the finding.

Rumour 2:

Timestamp: approx. 28:00

Claim: "YouTube is full of women who say they experienced ritual Satanist abuse."

Word marker: No explicit source citation; general claim



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Primary source available: NO — penalty point (+1)

Summary: The source selection is based primarily on files made available by the affected person and a state investigation. Two rumour points (+2 penalty points). No independent legal or psychiatric contextualisation of the cited documents. Score: 5/10.



3. TIME DISTRIBUTION									4/10
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Estimated speaking time:

- Leonie (affected person): (35–40%)
- Carmen / mother (relatives): (15–18%)
- Jérôme Endras (expert): (12%)
- Reporter Ilona (moderation/commentary): (18–20%)
- Accused therapist (written): approx. 30 sec. (<2%)
- PZM clinic director: (5%)
- Public Prosecutor's Office / KESB (written): (3%)
- Chief physician Mairi / Thomas Reisch: approx. 30 sec. (<2%)

Summary: Speaking time is strongly asymmetric in favour of the affected party (Leonie + family: approx. 55%) and the confirming expert (12%). The accused persons and institutions together account for less than 10% of speaking time, almost exclusively in written form. This distribution is problematic for an investigative report making serious allegations — it does not correspond to the principle of the right to be heard (audiatur et altera pars).



#### 4. OMISSION (Selective Omission)

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##### Omission 1: Scientific context on DID (Dissociative Identity Disorder)

###### Context

The DID diagnosis is highly controversial in psychiatry. There is a serious scientific debate about whether DID is a valid diagnosis or whether it is iatrogenically produced (through treatment) by therapists. This context is entirely absent.

Relevant at: approx. 24:00 (Endras interview)

###### Effect

The viewer receives the impression that the problem is exclusively the conspiracy narrative, not the underlying diagnostic category. The structural question of the DID diagnosis is not raised.

##### Omission 2: Professional and criminal consequences for the therapist

###### Context

The therapist is confronted with serious allegations (tracking, malpractice, filing reports on the basis of conspiracy narratives). It is not reported whether professional proceedings were initiated, whether her licence was revoked, or whether criminal steps were taken.

Relevant at: approx. 12:00–14:00

###### Effect

The viewer does not know whether the system has responded to the malpractice — a central element for societal contextualisation.

##### Omission 3: Possibility of real abuse in Leonie's history

###### Context

Leonie became mentally ill as a teenager and sought trauma therapy. What the original reason was remains unclear. The broadcast presents the entire abuse history as a construct without clarifying whether there was a real traumatic background that was misinterpreted.

Relevant at: approx. 07:00–08:00

###### Effect

The complexity of trauma diagnoses is simplified; the viewer receives the impression that Leonie's mental illness was caused exclusively by the therapist.

Summary: Three relevant omissions: missing scientific context on DID, missing information on consequences for the therapist, and missing differentiation between real trauma and misinterpretation. These omissions reinforce the main thesis of the report without reflecting the complexity of the topic.

### Missing voices

- Professional association FSP (Federation of Swiss Psychologists): Would have contributed to professional regulation, oversight, and consequences for accused therapists.
- SGPP (Swiss Society for Psychiatry and Psychotherapy): Would have contextualised the scientific consensus on DID and ritual abuse and explained guidelines.
- Patient protection organisation (e.g. Patientenschutz Schweiz): Would have presented structural protection mechanisms and complaint options for those affected.
- Independent trauma researcher: Would have differentiated the debate between legitimate trauma therapy and malpractice — not all trauma therapy is a conspiracy narrative.
- Lawyer for patient rights: Would have contextualised the legal dimension of forced restraint and surveillance.



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- Cantonal physician Bern / Health Directorate: As the supervisory authority over psychiatric clinics, he/she could have commented on the regulatory question.
- Accused therapist (in depth): Two sentences of written statement are insufficient for a person who is at the centre of serious allegations — a more detailed interview or a more comprehensive statement would be journalistically required.
- Other patients of PZM/Mairi: Would have confirmed or relativised the systemic pattern.



## 5. MANIPULATION OF FIGURES

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

### Finding 1:

**Timestamp** approx. 24:30

Figure: "30–50% of society has a susceptibility to conspiracy narratives according to empirical studies."

Dimensions:

- (a) Absolute value: not given
- (b) Proportion: 30–50% — given, but very wide range
- (c) Trend: not given

**Missing context**

Which studies? What definition of "susceptibility"? Is "susceptibility" equivalent to "believes in conspiracy narratives"? The range 30–50% is so wide that it is barely meaningful.

**Effect**

The figure suggests scientific grounding without the source or methodology being verifiable. It simultaneously normalises therapists' susceptibility.

### Finding 2:

**Timestamp** approx. 26:00

Figure: "Three patients [...] driven to suicide."

Dimensions:

- (a) Absolute value: 3 — given
- (b) Proportion: not given (out of how many patients in total?)
- (c) Trend: not given

**Missing context**

How many patients were treated in total? Is the suicide rate higher than average? Causality vs. correlation is not clarified.

**Effect**

The figure 3 appears dramatic without a comparative benchmark being provided.

Summary: Two findings with missing contextual dimensions. The figures are used argumentatively without complete contextualisation. Score 3/10 — no serious manipulation, but incomplete contextualisation.



<b>6. GUILT BY ASSOCIATION</b>									<b>4/10</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	5	6	7	8	9	10

<b>Association 1:</b>	
<b>Timestamp</b>	approx. 28:00
<b>Quote</b>	<i>"YouTube is full of women who say they experienced ritual Satanist abuse and had to kill children, in some cases also eat hearts. Truly completely crazy."</i>
Technique: The statements of YouTube women are used as evidence for the absurdity of the conspiracy narrative. At the same time, these women are implicitly associated with Leonie — as if their experiences were equally constructed.	
<b>Effect</b>	All persons who report similar experiences are blanket-discredited as part of a conspiracy narrative, without differentiation between constructed and possibly real abuse experiences.

<b>Association 2:</b>	
<b>Timestamp</b>	approx. 28:30
<b>Quote</b>	<i>"All of this is just a conspiracy theory. Through the lowest-drawer journalism, all the witnesses and victims in this series are portrayed as incredible."</i>
Technique: This insert (apparently a quote from a critic of the broadcast) is displayed without a source citation and without a rebuttal. The formulation "lowest-drawer journalism" is presented to the viewer without the criticism being answered substantively.	
<b>Effect</b>	Criticism of the broadcast itself is discredited through association with conspiracy ideology — whoever criticises the broadcast stands on the side of the conspiracy narrative.

For persons framed as "conspiracy theorists":

Leonie's therapist is not explicitly labelled a "conspiracy theorist", but is framed through the overall narrative as an actor who has fallen prey to a conspiracy narrative.

SOURCE CHECK:

- Does the therapist work with verifiable primary sources? Partially — she cites the book by Alison Miller, a real publication; her reports and notifications of endangerment are documented
- Are her core statements falsifiable? YES — the investigations found that the alleged events "can be completely ruled out to a high percentage"

RISK MATRIX:

- What has the therapist lost? Professional reputation, possibly licence (not reported)
- What does she gain? Nothing discernible — no book, no community, no income through the conspiracy narrative
- Net: Risk > Gain — increased credibility for subjective conviction (not for correctness)

TONALITY: The therapist barely gets a word in; her tonality is not assessable.

RESULT CATEGORY: B — Borderline case. The therapist has obviously made mistakes and followed a non-evidence-based conviction. Whether she is a conspiracy ideologue or a misguided professional cannot be conclusively determined from the transcript. The broadcast treats her as C (conspiracy ideologue) without making the differentiation.



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Summary: Two association findings. The broadcast tends to frame all involved parties (therapist, doctors, authorities) blanket as believers in conspiracy narratives, without differentiating between misguided conviction and ideological manipulation. Criticism of the broadcast itself is discredited through association with the conspiracy narrative.



## 7. TIMING

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### Finding 1:

Position: Beginning (approx. 00:00–02:00)

Content: "For me it was a hopeless situation. I had the feeling I was constantly in danger." — Audio recording of Leonie, restrained in bed

#### Timing effect

The report begins with the most emotional and dramatic material — Leonie's voice from the restraint. This sets the emotional frame for the entire broadcast before any context is provided. The viewer is emotionally positioned before knowing the facts.

### Finding 2:

Position: End (approx. 38:00–end)

Content: "The whole story with Leonie makes me incredibly sad. Above all, that nobody had the courage to stand openly in front of our camera and apologise."

#### Timing effect

At the end, the reporter breaks journalistic distance and expresses personal emotions ("makes me incredibly sad", "makes me really angry"). Placed at the end, this leaves the viewer with an emotional message rather than a factual contextualisation.

### Finding 3:

Position: Middle (approx. 28:30)

Content: Display of the criticism "Through the lowest-drawer journalism, all the witnesses and victims in this series are portrayed as incredible."

#### Timing effect

This criticism is placed in the middle of the report, immediately after YouTube clips of other affected persons — whereby the criticism of the broadcast itself is associated with the conspiracy narrative. A response to the criticism does not follow.

Summary: Three timing findings. Emotional opening, missing factual contextualisation at the end, and strategic placement of criticism without rebuttal. The structure of the report is oriented towards emotional impact, not factual completeness.



## 8. SELECTIVE OUTRAGE

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

*Methodological principle K11+K8: Document the triggering event — asymmetry only demonstrable with a comparable trigger without an analogous reaction towards other guests/positions.*

### Finding 1:

**Timestamp** approx. 38:00

Triggering event: PZM does not explicitly apologise to Leonie; clinic director shifts responsibility to individual staff members.

Reaction: "The whole story with Leonie makes me incredibly sad. Above all, that nobody had the courage to stand openly in front of our camera and apologise for the malpractice that was definitively carried out in this case."

### Comparison

The therapist who sent Leonie to South Africa, tracked her, and wrote over 5,000 messages gets away with two sentences of written statement — no comparable outrage from the reporter about the therapist's failure to apologise.

Asymmetry: The outrage is directed primarily against the clinic (PZM), not against the therapist who triggered the case. This is noteworthy, as the therapist appears to be the main person responsible for the malpractice.

### Finding 2:

**Timestamp** approx. 38:30

Triggering event: Therapists continue to spread the Satanic Panic narrative.

Reaction: "What really makes me angry is that the story of Satanist ritual abuse is still being spread by therapists."

### Comparison

No analogous moment of outrage regarding the question of why authorities (Public Prosecutor's Office, KESB) acted without critical scrutiny — although this is structurally equally problematic.

Asymmetry: The outrage is directed against therapists, not against authorities. The latter are criticised, but without emotional marking.

Degree of outrage: 3/5 — Multiple and clear, but not consistently intense

Selectivity: 2/5 — Slight to moderate asymmetry; outrage directed against clinic and therapists, not against authorities

Summary: The reporter breaks journalistic distance at the end and expresses personal outrage. This is directed asymmetrically against the clinic and therapists, not against the authorities. For a public broadcaster's investigative report, the reporter's personal expression of outrage is problematic — it departs from the level of factual reporting.



## 9. COMPLETENESS (Selective Omission — Overall picture)

6/10

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### Finding 1:

**Timestamp** Entire report

Missing perspective/fact: Scientific consensus and dissent on DID (Dissociative Identity Disorder) and ritual abuse  
Relevance: DID is one of the most controversial diagnoses in psychiatry. There is a serious scientific debate (Spanos, Lilienfeld et al.) about whether DID is iatrogenically produced. This context would explain why the problem is systemic, not merely an individual case.

Impact: Without this context, the problem appears to be a failure of individual persons, not a structural problem of an entire therapeutic direction.

### Finding 2:

**Timestamp** approx. 12:00–14:00

Missing perspective/fact: Consequences for the therapist (professional proceedings, licence revocation, criminal complaint)

Relevance: The viewer does not learn whether the system has responded to the malpractice. This is central to the question of whether it is a systemic failure or an individual failure.

Impact: The absence of this information leaves open whether the therapist continues to practise — which increases the urgency of the topic but also affects fairness towards the therapist.

### Finding 3:

**Timestamp** approx. 20:00–22:00

Missing perspective/fact: Legal basis for surveillance and coercive measures

Relevance: The surveillance by the Public Prosecutor's Office and the forced restraint by the clinic are presented as scandalous without explaining the legal basis. Under what conditions are these measures legal? Were they correctly ordered?

Impact: The viewer cannot assess whether the measures were unlawful or whether the problem lay in the underlying conviction (conspiracy narrative), not in the measures themselves.

Summary: Three significant completeness gaps: missing scientific context on DID, missing information on consequences for the therapist, missing legal contextualisation of the coercive measures. These gaps reinforce the emotional impact of the report but impair its factual completeness.

The phenomenon of "Satanic Panic" refers to a social moral panic that emerged in the USA in the 1980s and related to alleged Satanist rituals, child abuse, and secret cults. In psychotherapy, a subculture has developed that believes in "ritual abuse" and "dissociative identity disorder" (DID) as a consequence of cult abuse — scientifically highly controversial. In Switzerland and Germany there are documented cases in which therapists have therapised patients into these belief systems, with sometimes grave consequences (family breakdown, forced institutionalisation, suicides). The debate touches on fundamental questions of psychotherapy regulation, patient protection, the responsibility of authorities, and the scientific validity of psychiatric diagnoses.

*Proportion of perspectives covered*

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

- [A] Perspective of the affected person (Leonie):** First-hand experience of malpractice
- [B] Perspective of relatives:** Impact on family, presumption of innocence
- [C] Perspective of the accused therapist:** Justification, treatment logic
- [D] Perspective of the accused clinics (PZM, Mairi):** Institutional response
- [E] Perspective of independent psychiatry/psychotherapy experts:** Scientific state of knowledge on DID, ritual abuse, trauma therapy
- [F] Perspective of authorities (Public Prosecutor's Office, KESB):** Legal basis for measures
- [G] Perspective of patient rights organisations:** Structural protection mechanisms
- [H] Perspective of professional associations (psychotherapists, psychiatrists):** Professional consequences
- [I] Perspective of other affected persons:** Systemic pattern or individual case?
- [J] Perspective of critics of the Satanic Panic theory** who nonetheless do not exclude real abuse

**[A] ADDRESSED**

Timestamp: Throughout (approx. 02:00–end) — Quote: "I had the feeling I was constantly in danger." — Assessment: Leonie's perspective is presented extensively and in detail; she is the central voice of the report.

**[B] ADDRESSED**

Timestamp: approx. 18:00–22:00 — Quote: "In this situation, destroying my sister's life." — Assessment: Sister Carmen and mother speak at length; their experiences with interrogations and clinic meetings are documented.

**[C] INDICATED**

Timestamp: approx. 12:00 — Quote: "I categorically reject the allegations made." — Assessment: The therapist speaks only in writing and very briefly; her treatment logic is not explained in depth, only cited and immediately refuted by Leonie.

**[D] ADDRESSED**

Timestamp: approx. 30:00–38:00 — Quote: "At PZM we do not tolerate any form of conspiracy theories." — Assessment: PZM clinic director speaks at a press conference; Mairi private clinic declines to comment.

**[E] ADDRESSED** (partially)

Timestamp: approx. 24:00–27:00 — Quote: "Conspiracy narratives have no place in psychiatry." — Assessment: Jérôme Endras as the only expert; his perspective is clearly positioned (against conspiracy narratives), but no countervoice from the trauma therapy community.

**[F] INDICATED**

Timestamp: approx. 20:00–21:00 — Quote: "In the context of the criminal proceedings, various investigative actions were taken." — Assessment: Public Prosecutor's Office and KESB speak only in writing and very defensively; their legal logic is not explained.

**[G] OMITTED**

Timestamp: — — Quote: — — Assessment: No patient rights organisation, no ombudsman, no patient protection body speaks — an important structural perspective is missing.

**[H] OMITTED**

Timestamp: — — Quote: — — Assessment: No professional association (FSP, SGPP) comments on professional consequences or the regulatory question — although this would be central to the systemic question.

**[I] ADDRESSED** (partially)



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**Association suisse** pour une information équilibrée  
**Associazione svizzera** per un reporting equilibrato

Timestamp: approx. 28:00 — Quote: "YouTube is full of women who say they experienced ritual Satanist abuse."  
— Assessment: Other affected persons are briefly mentioned but not included as independent voices; three suicides are mentioned but not explored in depth.

**[J] OMITTED**

Timestamp: — — Quote: — — Assessment: There are researchers and clinicians who acknowledge real abuse but reject the Satanic Panic narrative — this differentiated position is entirely absent.

**Completeness score: 5/10**

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**Rationale:** The report covers the core perspectives (affected person, family, clinics, one expert) but omits important structural voices: professional associations, patient rights organisations, and differentiated trauma research are absent. The accused therapist speaks with only two sentences, which is insufficient for a legally robust investigative report. The authority perspective (Public Prosecutor's Office, KESB) is not explained, merely cited.



## Soft facts — 6 qualitative techniques

### 10. FRAMING (Setting the frame)

5/10

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#### Finding 1:

<b>Timestamp</b>	approx. 00:00–02:00 (opening)
<b>Quote</b>	<i>"For me it was a hopeless situation. I had the feeling I was constantly in danger."</i>
<b>Manipulation</b>	The topic is framed from the outset as a personal suffering narrative, not as a systemic analysis. The viewer is emotionally positioned before facts are presented.
<b>Why problematic</b>	An investigative report that aims to expose systemic grievances should begin with the systemic problem, not with the most emotional personal moment. Framing as a story of suffering limits the analytical depth.

#### Finding 2:

<b>Timestamp</b>	approx. 05:00
<b>Quote</b>	<i>"The false memories arose in psychotherapy."</i>
<b>Manipulation</b>	The formulation "false memories" is framed as an established fact, not as an interpretation. The concept of "false memories" (False Memory Syndrome) is itself scientifically controversial.
<b>Why problematic</b>	The viewer receives the impression that it is scientifically established that Leonie's memories are false — without the complexity of memory research being explained.

#### Finding 3:

<b>Timestamp</b>	approx. 24:00
<b>Quote</b>	<i>"In this case an extreme amount went wrong."</i>
<b>Manipulation</b>	Endras frames the case as an exception ("in this case"), while the broadcast simultaneously suggests a systemic pattern. This tension is not resolved.
<b>Why problematic</b>	Is this an individual case or a systemic problem? The framing oscillates between both without giving a clear answer.

Summary: The framing of the report is primarily constructed as a suffering narrative, not as a systemic analysis. Scientifically controversial concepts ("false memories") are framed as established. The tension between individual case and systemic problem is not resolved.



<b>11. WORD CHOICE AND TERMINOLOGY</b>									<b>5/10</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	6	7	8	9	10

<b>Finding 1:</b>	
<b>Timestamp</b>	approx. 05:00
<b>Quote</b>	<i>"Preventively, because certain therapists treated Leonie on the basis of a conspiracy narrative."</i>
<b>Manipulation</b>	"Conspiracy narrative" is a value-laden term that characterises the therapists' convictions as irrational and dangerous. The more neutral term would be "non-evidence-based conviction" or "controversial therapeutic approach".
<b>Why problematic</b>	A neutral alternative would be: "on the basis of a conviction about ritual abuse that is not scientifically substantiated."

<b>Finding 2:</b>	
<b>Timestamp</b>	approx. 38:00
<b>Quote</b>	<i>"What really makes me angry."</i>
<b>Manipulation</b>	The reporter uses colloquial language of outrage ("hässlich machen" in Swiss German = to make angry). This is not journalistic language but a personal expression of emotion.
<b>Why problematic</b>	A neutral alternative would be: "What is particularly problematic from a journalistic perspective."

<b>Finding 3:</b>	
<b>Timestamp</b>	approx. 28:30
<b>Quote</b>	<i>"Through the lowest-drawer journalism, all the witnesses and victims in this series are portrayed as incredible."</i>
<b>Manipulation</b>	This sentence (criticism of the broadcast) is displayed without a source citation and without a rebuttal. The formulation "lowest-drawer journalism" is an extreme value judgement that is left without comment.
<b>Why problematic</b>	Either the criticism should have been answered substantively, or it should not have been displayed. The uncommented display of an extreme criticism without rebuttal is journalistically questionable.

Summary: The word choice of the report is consistently value-laden in favour of the affected person's perspective. "Conspiracy narrative" as a standard term, the reporter's personal language of outrage, and the uncommented display of criticism are the strongest findings.



## 12. MODERATION BEHAVIOUR

4/10

1 2 3 4 5 6 7 8 9 10

*Methodological principle K11+K8: Document the triggering event.*

### Finding 1:

**Timestamp** approx. 10:00

Triggering event: Leonie describes how the therapist told her she had decapitated an infant and removed its heart.

**Quote (reporter)** *"Did she tell you that you had decapitated the baby? [...] So you believe you did that? She told you that you had done that?"*

**Comparison** The therapist (written statement) is not asked how she justifies these statements — no analogous follow-up question.

Asymmetry: The reporter asks Leonie multiple follow-up questions to highlight the absurdity of the conviction. Any in-depth follow-up question is absent with the therapist. Demonstrably asymmetric.

### Finding 2:

**Timestamp** approx. 20:00

Triggering event: Reporter sees surveillance photos of Leonie in the files.

**Quote (reporter)** *"I can only say one thing. I cannot believe it."*

**Comparison** The Public Prosecutor's Office (written statement) is not questioned with comparable outrage.

Asymmetry: The reporter expresses personal distress towards Leonie, not towards the authorities. Demonstrably asymmetric.

### Finding 3:

**Timestamp** approx. 36:00

Triggering event: Leonie reports that PZM has not apologised.

**Quote (reporter)** *"Did they apologise to you? [...] Did they admit that they made mistakes?"*

**Comparison** The therapist is not asked whether she has apologised.

Asymmetry: The demand for an apology is only raised towards the clinic, not towards the therapist. Demonstrably asymmetric.

Summary: Moderation behaviour shows three demonstrable asymmetries: in-depth follow-up questions only with Leonie, personal expressions of distress towards the affected person, and demand for apology only from the clinic. The reporter departs from journalistic distance on multiple occasions.



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

<b>Asymmetry 1:</b>	
<b>To <b>**Leonie**</b>, approx. 07</b>	00: "Before you came to your therapist, had you never heard anything about Satanist ritual abuse?" — soft, confirmatory
<b>To <b>**therapist**</b> (written), approx. 12</b>	00: "We confronted Leonie's trauma therapist with the allegation that she had subjected Leonie to malpractice." — confrontational, but no opportunity for oral rebuttal
<b>Comparison</b>	Leonie receives open, confirmatory questions in a personal conversation. The therapist receives confrontational allegations in written form without the possibility of follow-up questions. The asymmetry lies not only in the content but in the format (oral vs. written).

<b>Asymmetry 2:</b>	
<b>To <b>**PZM clinic director**</b> (press conference), approx. 34</b>	00: "Does PZM intend to apologise to these patients?" — direct, demanding
<b>To <b>**Solothurn Public Prosecutor's Office**</b> (written), approx. 21</b>	00: "We confronted the Solothurn Public Prosecutor's Office with this and asked why they surveilled and wiretapped Leonie on the basis of a conspiracy narrative." — confrontational, but written and without the possibility of follow-up questions
<b>Comparison</b>	The clinic director must answer directly and publicly at a press conference. The Public Prosecutor's Office can respond in writing and defensively. The asymmetry in format favours the clinic as the target of outrage.

Summary: Clear question asymmetry between affected persons (soft, confirmatory, oral) and accused parties (confrontational, written, without possibility of follow-up questions). The clinic director is the only accused actor confronted orally — and receives the hardest questions.



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

#### Finding 1:

**Timestamp** approx. 12:00

Construct: The broadcast cites the therapist's written statement ("I categorically reject the allegations made") and presents this as a "counter-statement", although two sentences do not constitute an equivalent representation of the therapist's perspective.

#### Analysis

This is not false balance in the classical sense (artificial equivalence), but the opposite — a nominal counter-statement that does not establish genuine balance but creates the appearance of fairness.

Summary: No classical false balance demonstrable. The report does not establish artificial equivalence — it is clearly one-sidedly positioned. The nominal counter-statements (written statements) create the appearance of fairness without establishing genuine balance. Score 2/10 — no serious finding.



## 15. AGENDA-SETTING

6/10

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### Finding 1:

Agenda element set: It is taken for granted that "Satanic Panic" / ritual abuse does not exist and is exclusively a conspiracy narrative.

**Timestamp** approx. 05:00 — Evidence: "The false memories arose in psychotherapy."

Alternative agenda: The question of whether real ritual abuse exists (documented cases in other countries) is not raised. The agenda presupposes that the answer is known.

### Finding 2:

Agenda element set: It is taken for granted that the therapist is the main person responsible and the clinic bears institutional responsibility.

**Timestamp** approx. 38:00 — Evidence: "The malpractice that was definitively carried out in this case."

Alternative agenda: The question of whether Leonie may have had a prior history that justified trauma therapy, and whether the malpractice lay in the method or in the conviction, is not raised.

### Finding 3:

Agenda element set: It is taken for granted that an apology from the clinic would be the minimum.

**Timestamp** approx. 36:00–38:00 — Evidence: "That nobody had the courage to stand openly in front of our camera and apologise."

Alternative agenda: The question of what legal and institutional consequences would be appropriate (not just an apology) is not raised.

Summary: Three agenda-setting findings. The broadcast presupposes as self-evident that ritual abuse does not exist, that the therapist is the main person responsible, and that an apology would be the central goal. These presuppositions limit the analytical depth of the report.



## CHAPTER 4 — OVERALL EVALUATION

### Results

- HARD FACTS SCORE (average criteria 1–9): 4.9 / 10
- SOFT FACTS SCORE (average criteria 10–15): 4.5 / 10

### Dominant techniques

- 1. Time distribution / speaking time asymmetry (Score 4):** The affected party receives approx. 55% of speaking time in oral, emotional form; the accused parties together account for under 10%, almost exclusively in written form. This structural asymmetry is the strongest individual technique of the report and violates the principle of the right to be heard (audiatur et altera pars) in journalistic terms.
- 2. Framing as suffering narrative (Score 5):** The report is constructed from beginning to end as a personal story of suffering, not as a systemic analysis. Emotional opening, personal expressions of outrage by the reporter at the end, and the consistent centring on Leonie's experience prevent a factual contextualisation of the systemic problem.
- 3. Omission / Selective Omission (Score 6):** Three essential contexts are missing: the scientific discourse on DID, the consequences for the therapist, and the legal basis for the coercive measures. These omissions reinforce the emotional impact but impair factual completeness and fairness towards the accused.

### Core messages of the broadcast

**MESSAGE 1 (SUBSTANTIVE):** "The psychiatric system has systematically harmed a vulnerable patient through conspiracy narratives, and nobody has taken responsibility."

**Technique:** Suffering narrative + time distribution + omission — Evidence: approx. 02:00 (opening), approx. 38:00 (conclusion)

**MESSAGE 2 (PERSONAL):** "Leonie is an innocent victim of a system that did not believe her about what is real."

**Technique:** Framing + word choice + moderation behaviour — Evidence: approx. 07:00 (no prior knowledge of Satanic Panic), approx. 10:00 (therapist implanted the convictions in her)

**MESSAGE 3 (SOCIETAL):** "Conspiracy narratives in psychiatry are a systemic problem that remains unresolved and costs lives."

**Technique:** Agenda-setting + timing + selective outrage — Evidence: approx. 26:00 (three suicides), approx. 38:30 (therapists continue to spread the narrative)

**Rationale:** The overall score of 4.7/10 lies on the boundary between "slight tendency" and "clear one-sidedness". The report exposes a legitimate and important topic — psychiatric malpractice through non-evidence-based convictions is a real problem. The core statements of the report are supported by files and an investigation report by the Canton of Bern. The problems lie not in the falsity of the core statements but in the methodology: one-sided speaking time distribution, missing countervoices from trauma therapy, personal expressions of outrage by the reporter, and the omission of important contexts. According to Art. 4 RTVA, the accurate presentation of facts and the balanced selection of interlocutors are not fully met — in particular, the principle audiatur et altera pars is violated by the minimal representation of the accused party's perspective.

### CONCLUSION

The report exposes a socially relevant and document-supported problem: psychiatric malpractice through conspiracy narratives about Satanist ritual abuse. The core statements — malpractice, forced restraint, surveillance on the basis of unsubstantiated convictions — are supported by files and a cantonal investigation report. Journalistically problematic, however, is the methodology: the accused persons (therapist, doctors) together account for less than 10% of speaking time, almost exclusively in written form, while the affected party receives approx. 55% of broadcast time. At the end, the reporter departs from journalistic distance and expresses personal outrage ("makes me incredibly sad", "makes me really angry"), which for a public broadcaster's report does not meet the standard of accurate reporting according to Art. 4 RTVA. Essential contexts are missing: the scientific discourse on DID, the consequences for the therapist, and the legal basis for the coercive measures. The report is valuable as investigative journalism but does not fully meet the requirements of balance and accurate presentation according to Art. 4 RTVA.



**Schweizerischer Verein** für ausgewogene Berichterstattung  
**Association suisse** pour une information équilibrée  
**Associazione svizzera** per un reporting equilibrato



## OVERALL EVALUATION OF THE 15 CRITERIA

### Individual scores — All 15 criteria

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

**HARD FACTS SCORE (1–8)**

**4.9/10**

*Significant imbalance*

**SOFT FACTS SCORE (9–14)**

**4.5/10**

*Significant imbalance*

**OVERALL SCORE**

**4.7/10**

*Significant imbalance*

*Averaged from hard facts and soft facts*



## KEY — Meaning of scores

### Individual scores per criterion (0–10)

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

### Aggregated deviation index — interpretation ranges

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

### Party-political bias (-5 to +5)

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



## CHAPTER 5 — LEGAL CLASSIFICATION (Art. 4 RTVA)

### Assessment under Art. 4 RTVA

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Art. 4 RTVA requires: accurate presentation of facts and events, diversity of opinion on controversial topics, balanced selection of interlocutors.

#### Violation 1:

Norm: Art. 4 para. 2 RTVA (accurate presentation)

Facts: At the end of the report, the reporter expresses personal outrage and departs from the level of factual reporting.

Evidence: approx. 38:00 — Quote: "The whole story with Leonie makes me incredibly sad. Above all, that nobody had the courage to stand openly in front of our camera and apologise for the malpractice that was definitively carried out in this case. What really makes me angry is that the story of Satanist ritual abuse is still being spread by therapists."

Assessment: A reporter's personal expression of outrage in a public broadcaster's report departs from the level of accurate presentation. The formulation "definitively carried out" is a statement of fact without a judicial determination. This does not meet the standard of accurate reporting according to Art. 4 para. 2 RTVA.

#### Violation 2:

Norm: Art. 4 para. 4 RTVA (balanced selection of interlocutors)

Facts: The accused persons (therapist, chief physician Mairi, Thomas Reisch) together account for less than 5% of broadcast time, exclusively in written form and without the possibility of oral rebuttal or follow-up questions.

Evidence: approx. 12:00 — Quote: "I categorically reject the allegations made." (sole statement of the therapist, approx. 2 sentences)

Assessment: For a report that makes serious allegations against specific persons (malpractice, tracking, filing reports on the basis of conspiracy narratives), the balanced selection of interlocutors according to Art. 4 para. 4 RTVA is not fulfilled. The principle *audiatur et altera pars* — both sides shall be heard — is violated.

#### Violation 3:

Norm: Art. 4 para. 2 RTVA (accurate presentation on controversial topics)

Facts: The concept of "false memories" and the non-existence of ritual abuse are presented as established facts without reflecting the scientific discourse.

Evidence: approx. 05:00 — Quote: "The false memories arose in psychotherapy."

Assessment: The question of whether memories of abuse can be constructed through therapy (False Memory Syndrome) and whether ritual abuse exists is scientifically controversial. Presenting it as an established fact without contextualising the scientific discourse does not correspond to the accurate presentation of controversial topics according to Art. 4 para. 2 RTVA.

### Overall assessment Art. 4 RTVA

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The report exposes a legitimate and socially relevant topic supported by documents and a cantonal investigation report. The core statements — malpractice through non-evidence-based convictions — are not per se a violation of Art. 4 RTVA. The violations lie in the methodology: the reporter's personal expression of outrage violates Art. 4 para. 2 RTVA (accurate presentation); the minimal representation of the accused party's perspective violates Art. 4 para. 4 RTVA (balanced selection of interlocutors); and the presentation of scientifically controversial concepts as established facts violates Art. 4 para. 2 RTVA. These violations are not serious enough to disqualify the report as a whole, but do justify a complaint to the Independent Complaints Authority for Radio and Television (ICA).



## CHAPTER 6 — SOURCE IN-DEPTH CHECK

### 1. Jérôme Endras — Forensic psychologist, expert on extremism

**1. FUNDING:** Presumably state/university (exact institution not in transcript). No private interest funding discernible.

**2. MANDATE:** Forensic psychology / extremism research — partially compatible with assessment of susceptibility to conspiracy thinking, not fully congruent with trauma therapy specifics or psychiatric treatment standards.

**3. CONFLICT OF INTEREST:** No obvious institutional conflict of interest. Possible reputational gain through media presence, but no structural advantage through a particular statement discernible.

D1 Conflict of interest: +1 — no obvious conflict

D2 Personal risk: +1 — criticism of the therapist community carries professional risk

D3 Subject competence: +1 — partial competence (extremism/conspiracy yes; trauma therapy/DID no)

D4 Consistency: 0 — not assessable

D5 Emotion vs. data: +1 — references empirical studies, remains factual

D6 Source level: 0 — secondary source (comments on case files)

**TOTAL: +4 → SOURCE INDICATOR: YELLOW**

**5. COUNTERVOICE:** No trauma therapist, no DID specialist, no psychiatrist with a different focus speaks. Endras's assessment is not supplemented or questioned by a professional perspective from trauma therapy.

**IMPORTANT:** Endras is introduced as an "expert on extremism" — this is a correct designation, but it obscures the fact that his field does not fully coincide with the core topic (trauma therapy, DID diagnosis, psychiatric treatment standards). The broadcast uses his authority as an expert to confirm the overall narrative without obtaining a countervoice from the relevant specialist discipline.

### 2. Psychiatric Centre Münsingen (PZM) — Cantonal psychiatric clinic

**1. FUNDING:** Cantonal funded (Canton of Bern); PZM AG as a public-law joint-stock company.

**2. MANDATE:** Psychiatric care for the Canton of Bern — not compatible with neutral self-assessment when allegations are made against own staff.

**3. CONFLICT OF INTEREST:** Strong institutional interest in minimising the extent of the malpractice and presenting the problem as recognised and resolved. The clinic director's press conference statements are to be read with this caveat.

D1 Conflict of interest: -2 — strong institutional interest in damage minimisation

D2 Personal risk: -1 — clinic director risks reputational damage through admissions

D3 Subject competence: +2 — clinic management has subject competence for psychiatric procedures

D4 Consistency: -1 — statements at press conference vs. refusal towards Leonie

D5 Emotion vs. data: +1 — factual, but defensive

D6 Source level: +1 — primary source (own institution)

**TOTAL: 0 → SOURCE INDICATOR: YELLOW**

**5. COUNTERVOICE:** No independent psychiatrist comments on PZM's measures. The cantonal investigation report is the only external contextualisation.

### 3. Solothurn Public Prosecutor's Office — Criminal prosecution authority

**1. FUNDING:** State (Canton of Solothurn).

**2. MANDATE:** Criminal prosecution — not compatible with neutral self-assessment when allegations are made against own investigative actions.

**3. CONFLICT OF INTEREST:** Strong institutional interest in presenting its own actions as lawful. The written statement ("As a matter of practice, no information can be provided on individual investigative actions in ongoing proceedings") is a refusal to provide information, not a substantive answer.

D1 Conflict of interest: -2 — strong institutional interest

D2 Personal risk: -1 — authority risks reputational damage

D3 Subject competence: +2 — subject competence for criminal prosecution available

D4 Consistency: 0 — not assessable

D5 Emotion vs. data: +1 — factual-defensive



D6 Source level: +1 — primary source

**TOTAL: +1 → SOURCE INDICATOR: YELLOW**

**5. COUNTERVOICE:** No independent lawyer comments on the lawfulness of the surveillance and telephone monitoring. This is a significant gap.

Overall conclusion source in-depth check: All three cited institutions receive YELLOW. No source is clearly independent and without conflict of interest. The only external expert (Endras) has only partial competence for the core topic. An independent psychiatric or legal contextualisation is entirely absent. This is the strongest structural deficiency of the report from a journalistic perspective.

#### Source indicator for participants:

Source	D1	D2	D3	D4	D5	D6	Total	Indicator
Jérôme Endras — Forensic psychologist, expert on extremism	+1	+1	+1	0	+1	0	+4	YELLOW
Psychiatric Centre Münsingen (PZM) — Cantonal psychiatric clinic	-2	-1	+2	-1	+1	+1	0	YELLOW
Solothurn Public Prosecutor's Office — Criminal prosecution authority	-2	-1	+2	0	+1	+1	+1	YELLOW

#### Legal and methodological classification

<b>No finding of fact</b>	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.
<b>No legal ruling</b>	The aggregated deviation index does not replace a legal assessment within the meaning of Art. 4 RTVA. The determination of whether a specific broadcast violates statutory requirements is the exclusive responsibility of the competent authorities (in particular the ICA).
<b>No proof of causality</b>	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.
<b>No judgement of intent</b>	The analysis measures observable structural characteristics of broadcasts. A score of 7 means that a significant imbalance has been identified — not that the editorial team intended this. The methodology makes no statements about motives or strategic objectives.
<b>Heuristic comparison instrument</b>	The index serves for comparative pattern recognition across thousands of broadcasts, not for the precise metric measurement of individual reports. Threshold values serve as heuristic orientation, not as sharp legal qualification.



## APPENDIX 1: NATIONAL LEGISLATION

### Legal basis Switzerland — SRG SSR

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#### Law

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

#### Relevant articles

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- Art. 4 para. 1 RTVA: 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 RTVA: Editorial broadcasts with informational content must present facts and events accurately so that the audience can form its own opinion. Opinions and commentary must be recognisable as such.
- Art. 4 para. 4 RTVA: In the totality of editorial broadcasts, the diversity of events and opinions must be adequately expressed (requirement of diversity).

#### Core obligations

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

#### Supervisory authority

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

#### Complaints procedure

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1. Ombudsman office of the respective business unit (SRF, RTS, RSI, RTR)
2. ICA (if no agreement)
3. Federal Supreme Court (last 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](#)
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The interview is not a conversation. It is a stage — and someone else has written the script.

Those who do not know this provide material. Good quotes that are cut incorrectly. Correct statements that end up in the wrong context. Honest answers that are framed as confessions.

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For politicians, activists, entrepreneurs, whistleblowers — for everyone who is exposed and wants to understand how the game works. So that they stop playing along — and start shaping it.

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**You think you see the world.** In reality you see the frame that someone has placed around it. Framing is the oldest and most elegant manipulation technique in the world. It does not change the facts — it changes what we make of the facts. How we feel. What we believe. How we decide. And it works — because we all participate. Daily. Unconsciously. You too. This book is not a dry textbook. It is a workbook — playful, direct, full of examples from real life. You learn not only how others frame you. You learn how you yourself frame — and how you can use it consciously and fairly.

Because those who understand framing see the world more clearly. Listen to the news differently. Conduct conversations with more confidence. And can no longer so easily have a frame imposed on them that someone else has chosen.

With many exercises and concrete examples from politics, media, and everyday life — and the occasional smile.

**Framing with style. Because the frame changes everything.**



The SRG collects 1.56 billion francs per year — compulsorily, from every household. Those who feel unfairly treated can complain. 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. Proceedings, personnel, powers, costs, statistics, legal recourse. And the constitutional law review 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 primarily protects the system it was supposed to control.

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