PHOTOGRAPHERS' SENSITISATION DOCUMENT

TAKING PHOTOS WITH MSF - ISSUES FOR REFLECTION AND CONCERN

There is no doubt that pictures are important to MSF – they can demonstrate reality, expose neglect and despair, inspire hope and understanding and connect people around the world. They can also help us raise money to continue our work and inspire people to come and work with us. But taking photos of patients, often in distress or pain, brings up ethical questions. Images (both video and still photographs) can cause great harm and offence if they are too extreme, intrusive or if they are manipulated.

MSF works with photographers in a variety of different ways, sometimes under a formal contract, sometimes very informally. Whether you are under a contract with MSF or not, we would like you to read this document carefully before you start work, in order that you understand the organisation's concerns.

- 1) As doctors and nurses, we have a privileged relationship with the patients we treat. They put themselves in our care and trust us to try and heal them. It is our responsibility to ensure that they come to no harm in our care. MSF staff on the ground have been told to intervene if they witness a photographer or cameraman acting in a way which may harm the interests of the patient.
- 2) Be aware that the subject of a photo may be harmed in different ways: stigmatisation, security, dignity, privacy/confidentiality.
- 3) MSF is not generally the "owner" of the medical facility in which we work often the structure belongs to the Ministry of Health or local community authority. To avoid any military issues, it is vital that a photographer gets permission from the necessary authorities running the facility before starting to work.
- 4) Gaining consent from the subject of the photograph:
 We understand that it is extremely difficult to obtain formal written consent from every person photographed in the field. In fact, there may be occasions where it would actually be against the subject's best interests to sign such a document. We feel firmly that it is the quality of consent obtained that is important, not whether it is documented in writing. Please endeavour to get clear verbal agreement from patients or their families before taking their photograph.
 - a) We are aware that MSF medical staff do not have an equal power relationship with the patients in our care. When a photographer enters the hospital together with MSF medical staff, do our patients feel able to refuse to have their photo taken, or might they be worried of upsetting the person treating them in case it jeopardises their care? Consent should be discussed in the exact context with Head of Mission.
 - b) Consent negotiations must be carried out in the subject's native language. National medical staff may well be the best people to translate for you, but please be very clear with them that the patient is perfectly entitled to say no.
 - c) MSF's beneficiaries are often in difficult situations that may make it hard for them to give meaningful consent to be photographed. This can include patients who are mentally ill, unconscious, in great pain or distress, in a state of shock, or minors. In such cases, a caregiver or close relative should be asked for consent on their behalf. Ask MSF medical staff for their advice if you are unsure in such a case.

- d) Please explain any possible uses of the photo. If a subject is very concerned about the impact of being photographed, then don't. It is not realistic or possible for MSF staff to promise patients limited use of the picture, eq not on the internet, not in their home country.
- e) Please work with subjects to make them comfortable with the photo process allow them to keep their anonymity where they desire to do so.
- f) We will not use manipulated or photographs that look staged.
- g) We strongly recommend that photographers do not pay subjects to take their photos. Any *ex gratia* payment or gift you may personally choose to give afterwards should be done with great discretion.
- 5) Collecting data to accompany images: Without proper data to accompany images, we may not be able to use your output. We ask photographers collaborating with MSF to provide written information to help us accurately describe the contents of an image. This should (at a minimum) include: the date, place, a description of situation. The medical condition of a patient is often a vital piece of information (we would not want to describe someone as suffering from TB when actually they had cancer, for example). Ideally, please also record the names of all national staff in the picture, not just the expatriates.
- 6) Security matters: Please be aware that the MSF teams will hope to stay in a location long after you leave. We often have a precarious relationship with the authorities and other political/military actors in the region. Ideally, before you start working in the field, a member of the MSF field team will brief you about local security rules. MSF staff on the ground will be concerned about the implications that your behaviour might have on their security. Please be understanding about their concern and try and cooperate. On occasion, we may ask to have a visible arms-length relationship with you. You will have a more comfortable time working with MSF field teams if you can agree a few practical matters with them in advance. For example, will you be expected to follow the same security rules as expatriates, such as respecting curfews?
- 8) We consider it important to stay in contact with photographers after they return from a field trip in order to be able to make a proper selection of images and clarify any data and possible uses. Please ensure we have up-to-date contact details for you.

I acknowledge I have r	ead and understood the text above:	
SIGN	PRINT	
DATE		