

FACTORS THAT DIMINISH OR EXACERBATE TRAUMATIC STRESS IN PRACTICING
JOURNALISTS

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Factors that Diminish or Exacerbate Traumatic Stress in Practicing Journalists

Journalism, as broadly defined by the Oxford dictionary, is the activity or profession of writing for newspapers, magazines, or news websites. It also extends into news to be broadcast over television and radio, but the definition doesn't get to the heart of what journalism is. In short, journalism is the profession of telling the human experience and stories of others. To do that, journalists are on the frontline of both the best and worst news events imaginable. They observe and report the details of events as they unfold, which can often involve suffering and tragedy of people within their respective communities. These traumatic stories can have a lasting impact on the journalists that cover them due to the nature of witnessing the events firsthand and interviewing those who have lived through them (Greenberg Gould, Langston, & Brayne, 2009).

However, a problem exists for journalists, unlike other professions that deal with trauma, in that they typically are forced to bear witness without being an active participant in the events that unfold. This can lead to complications when addressing the corresponding mental health complications that can arise from these events. Newsroom mentality and the way journalists approach observing, and reporting can compound these issues, according to scholars (Greenberg Gould, Langston, & Brayne, 2009; Newman, Simpson, & Handschuh, 2003; Feinstein, Owen, & Blair, 2002). For journalists, there is a lack of understanding when dealing with trauma in an already high-stress field along with the rigid journalistic norms of objectivity and impartiality. The autonomous nature of the job, and the lack of understanding about how and why trauma can affect them, discourages journalists from seeking help (Greenberg Gould, Langston, & Brayne, 2009). Multiple studies into the effects of traumatic news coverage have shown the effects of

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how traumatic stress affects reporters (Greenberg Gould, Langston, & Brayne, 2009; Feinstein & Nicholson, 2005; Pyevich, Newman, & Daleiden, 2003).

The current study adds to the literature by using in-depth interviews to further examine common traits or opinions journalists expressed on how they deal with traumatic news assignments during the course of their jobs. In doing so, the comprehensive narrative built from those interviews should expand what we have come to understand about journalist's relationship to trauma and how they respond to it.

Review of the Literature

Trauma Defined and Analyzed

Studies have shown that soldiers, once thought to be the profession with the highest rate of traumatic stress, are not the only occupational group that experiences complications from traumatic stress at a higher-than-average rate (Feinstein, Owen, & Blair, 2002; Pyevich, Newman, & Daleiden, 2003). First responders, including police, fire, and paramedics, suffer occupational hazards with traumatic stress as do the observing journalists who work on the sidelines of those professions during times of crisis (Pyevich, Newman, & Daleiden, 2003).

While the definitions of a traumatic event can vary, from car wrecks, sexual assault, war, and more, the common theme among the events is exposure to human suffering both either as the victim or someone bearing witness to the event at hand (Ochberg, 2009). Exposure to trauma affects the journalists who cover it as much as any soldier, emergency responder, or civilian caught in the fray (Bolton, 2010). News gatherers have a chance to experience PTSD or other traumatic stress issues that have a negative effect on their mental health. Many will leave it un-diagnosed and untreated because of a lack of support structure,

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unawareness of issues resulting from the trauma, or an unwillingness to seek treatment overall (Feinstein, Owen, & Blair, 2002).

In 2013, the American Psychiatric Association revised the PTSD diagnostic criteria in the fifth edition of its Diagnostic and Statistical Manual of Mental Disorders (DSM-5). These criteria, which also overlap with some other trauma related disorders, are: A person who was exposed to death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, through: a) Direct exposure b) Witnessing the trauma c) Learning that a relative or close friend was exposed to a trauma or d) Indirect exposure to aversive details of the trauma, usually in the course of professional duties like first responders or medics (5th ed., American Psychiatric Association, 2013).

Journalists often fall into the three later categories as they are not usually in the direct exposure category. This is not always the case as journalists themselves can be caught in the fray during natural disasters and civil unrest right along with the subjects they report on. Journalists usually bear witness to a multitude of events and learn about tragedies that befell members of their community, some of whom they may know personally.

There are seven key criteria for a PTSD diagnosis according to the DSM-5 if someone has had exposure to trauma as listed above. According to the DSM-5 one of the first criteria is that the traumatic event causes intrusive symptoms. These can include reoccurring, involuntary, and intrusive upsetting memories of the traumatic event. Repeated upsetting dreams where the content of the dreams is related to the traumatic event. The subject can also experience some type of dissociation (for example, flashbacks) where you feel as though the traumatic event is happening again. Strong bodily reactions (for example, increased heart rate) upon exposure to a reminder of the traumatic event (5th ed., American Psychiatric Association, 2013).

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The second criteria, according to the manual, is that the subject has frequent avoidance of reminders associated with the traumatic event. This can mean the avoidance of thoughts, feelings, or physical sensations that bring up memories of the traumatic event. This can also mean the avoidance of people, places, conversations, activities, objects, or situations that bring up memories of the traumatic event.

The third criteria, according to the manual, focuses on the subject's thoughts and mood. This can range from the inability to remember an important aspect of the traumatic event to persistent and elevated negative evaluations about oneself, others, or the world. Key focus for this criterion also looks at if a subject has a negative emotional state that is pervasive, loss of interest in activities that the subject used to enjoy, feeling detached from others, and the persistent inability to experience positive emotions. Some of these symptoms are critical when looking at what can happen to journalists after witnessing trauma.

The fourth criteria, according to the manual, focuses on the physical state of the subject. Problems here can manifest in difficulty concentrating, feeling constantly like danger is lurking around every corner, problems sleeping, a heightened startle response, impulsive or self-destructive behavior, and irritability or aggressive behavior.

The final three criteria are based on the severity and length of symptoms. The symptoms must bring about considerable distress with several different areas, last for more than one month, and the symptoms can't be due to another medical condition or some form of substance use.

Not every journalist who experiences trauma through their jobs will have post-traumatic symptoms that reach the full diagnostic criteria put forth in the DSM-5 (5th ed., American Psychiatric Association, 2013), but any stress-related symptoms should not be taken lightly as

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they can have an impact on the mental wellbeing of the subject. While the clinical diagnosis is required for PTSD and needs to meet the set of the criteria listed above, any symptom listed above that is exhibited by journalists for a period can disrupt both their work and their personal lives. The psychological stress can have a negative effect on a journalist resulting in decreased interest in activities, feeling isolated, or difficulty experiencing positive aspects in their life. Journalists can also experience symptoms of irritability or aggression, risky or destructive behavior, difficulty concentrating or difficulty sleeping (5th ed., American Psychiatric Association, 2013).

First Major Studies into Trauma Exposure and Journalists

The first major psychological study of trauma and journalists was a conducted by Anthony Feinstein and his colleagues in 2002 titled “A Hazardous Profession: War, Journalists, and Psychopathology” in the *American Journal of Psychiatry*. The study, which focused on war journalists has been cited nearly 300 times according to Google Scholar in other research articles as the base piece of literature which has served as the groundwork for looking at trauma and journalists. This is because the authors’ work identified there was an issue to begin with. The study used self-reporting questionnaires to interview 140 war journalists, all of whom reported symptoms of PTSD. With it being the first major study into the issue, it uncovered the basic truth to any arguments succeeding it: that combat journalists had similar rates of PTSD to combat troops.

The diagnosis rate of PTSD in war journalists who did seek help at some point in their lifetime was 28.6 percent, and the lifetime diagnosis rate of depression was 21.4 percent. Feinstein and colleagues (2002) noted, however, that journalists were no more likely to seek treatment than the general population who had not seen combat (Feinstein, Owen, & Blair,

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2002). The authors (2002) never hypothesized why that was the case; instead, the research only showed that it occurred. The study did show that the rates of trauma related stress are similar for those fighting a war, as those who were reporting on it.

A follow-up study by Feinstein and Nicholson (2005) expanded on his earlier research by not only looking at the rates of PTSD and other disorders among journalists, but also tried to determine if there were differences in PTSD rates between embedded combat journalists and those who were not embedded (Feinstein, & Nicholson, 2005). The study discovered no difference in the rates of standalone journalists or those embedded with the military units they questioned. While seeming like a minimal difference, this evidence was a key advancement because it was simply covering traumatic events — and not a specific way it was covered — that caused the PTSD in the journalists. Whereas Feinstein's earlier work in 2002 was based on the Balkan conflict, this data was from Iraq. It showed a consistency across theaters of war. The research narrowed the problem significantly so further study could then focus on causes instead of re-addressing the issue that there was a problem at hand (Feinstein & Nicholson, 2005). It is through Feinstein and his colleague's research that the first actual scale of the problem was documented and even acknowledges that traumatic stress injury was prevalent in journalists who reported on topics involving death and injury outside of combat zones. In particular, the research revealed that the lifetime prevalence of PTSD in war reporters is similar to rates reported for combat veterans, while the rate of major depression in war reporters exceeded that of a general population.

Trauma Outside the Battlefield

The initial study by Feinstein (2002) focused on PTSD as a primary indicator for trauma related issues, but when researchers began to look at other symptoms and afflictions from

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exposure to trauma suffered by journalists, the problem was put into an even larger context.

When examining trauma related stress, it's a more common issue than many realize. According to one study, most people are exposed to at least one traumatic event in their lifetime (Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995). While they are initially upset after exposure, most do not develop long-lasting psychological disorders from that exposure (Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995). In fact, further studies examined that while at least 60 percent of the general population is exposed to traumatic events, only 10-18 percent of those exposed go on to develop PTSD (Kessler et al., 1995). These studies didn't account for other professions that deal with higher rates of exposure to trauma, and while they may show a baseline, the studies left more to be told when looking at traumatic stress and media professionals.

One main problem with Kessler's (1995) findings is that they did not account for other psychiatric illnesses that Alana Newman, a professor in Psychology at the University of Tulsa, discussed in her research on traumatic stress primers. These other illnesses can manifest as clinical depression and other depressive disorders stemming from the repeated exposure to the stress (Newman, Simpson, & Handschuh, 2003). PTSD can be one consequence of trauma, but simply feeling down, burned out, or guilty/depressed are certainly important for newsrooms looking out for their reporters' mental states. Therefore, while many journalists would fall into the numbers observed by Kessler (1995), they did not account for symptoms outside of those related to PTSD. The scope of how many journalists are affected by this has not been fully determined and remains inconclusive. Research suggests that between 80-100% of journalists have been exposed to a work-related traumatic event (Newman et al., 2003; Pyevich et al., 2003). How many of those suffered short or long-term complications isn't clear.

Secondary Trauma Exposure for Journalists

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Reporters who do not cover wars or even violent events in the civilian side are still affected by trauma in their reporting, both directly and indirectly. Indirect trauma, also described as secondary trauma, is examined in Ochberg's article for the Dart Center for Journalism & Trauma on PTSD 101. According to Ochberg, repeated exposure to traumatic events such as fatal car wrecks, homicides, and other disasters have a numbing effect seen in other traumatic-event survivors (Ochberg, 2009). The effects of trauma on civilian journalists is only recently being examined by researchers, as it was an overlooked field of study. Case studies, however, are proving to be just as eye opening and ever growing as traumatic news coverage of mass shootings, civil unrest and disastrous weather events increase. Exposure to trauma can come in many forms both directly from experience and indirectly through interviewing sources and viewing material that contains distressing imagery (Ochberg, 2009). Journalists outside of war zones frequently report that motor-vehicle accidents, murder, and events involving injured or dead children are the most upsetting and most common types of stories they encounter (Newman et al., 2003).

Frequency of Trauma in News Coverage

Frequency of trauma related coverage was an issue discussed in a series of interviews with photojournalists by Elana Newman in 2003. In that research, they, along with Roger Simpson and David Handschuh came to the generalization that news photographers are exposed to multitudes of trauma in their line of work (Newman, Simpson, & Handschuh, 2003). Because of this, photographers are frequently the targeted group for examining the profession as they are on scene of many traumatic events. "Every time you see the picture whether it be on the front page of the newspaper or displayed for an award, you re-live the sights, sounds, smells, and the adrenaline that is associated with that picture" (Newman, Simpson, & Handschuh, 2003).

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Handschuh even had personal experience with it, as he was a staff photographer for the New York Daily News when he was sent to cover the 1999 shooting at Columbine High School.

Their study used sample of 875 photojournalists who filled out a four-page questionnaire that was sent to all subscribers to News Photographer (about 10,400 subscribers in total). Nearly 98 percent reported they had been exposed to events that mental health professionals would deem traumatic; automobile accidents, fires, and murders were the most common assignments. Close to 6 percent met the criteria for a diagnosis of post-traumatic stress disorder (Newman, Simpson, & Handschuh, 2003). Handschuh was quoted by Gabriel Arana in a 2015 Huffington Post piece on mental health in newsrooms saying that journalists were soldiers. “We’re not getting shot at most of time. But we are witnessing things with our notepads that normal, rational human beings are running from. And we’re staying and recording and telling the truth,” Handschuh said (Arana, 2015).

Through the Newman, Simpson, & Handschuh (2003) study and others like it, frequency has been critical in the examination of traumatic exposure that more and more researchers have identified as a source of complications due to traumatic stress or PTSD. More research should better articulate the similarities and differences in the severity of traumatic stress and the different levels of traumatic exposure in journalists.

This issue is only compounded by the fact that newsrooms are shrinking. According to Elizabeth Grieco with the Pew Research Center, newspapers have shed half of their newsroom employees since 2008. The Pew Research Center analysis of Bureau of Labor Statistics data showed that it wasn’t solely one industry as overall newsroom employment in the U.S. dropped by 23%. However, newspapers were clearly carrying the bulk of lost jobs (Grieco, 2020). Of the different types of jobs included in the research center’s analysis, reporters made up the bulk of

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all newsroom employees (Grieco, 2020). In a practical sense, this means that fewer reporters are able to spread out the coverage needs for any given beat, not only increasing the stress of content requirements for the reporter, but problem of there being too few reporters to sub in when one needs a break from traumatic exposure.

Reporters' Attitude Towards Trauma

As researchers begin to uncover more information about trauma and journalists, the reasons for journalists' hesitance to seek help in dealing with complications are becoming clearer. Reporters commonly refer to newsroom culture and a machismo attitude as reasons they do not want to raise an alarm when a challenging story is affecting their mental health (Ward, 2014).

War correspondents are a prime example for how journalists can view trauma in their work, and how their roles as observers can complicate their response to trauma. "If I get killed, I kind of think, 'So what? People die all the time. I watch people die. I'd rather it not be me. I want to do more stories,'" said Rita Leistner, a war photojournalist who had worked in both Iraq and Afghanistan (Hampson, 2004). The experiences shared in this with the photojournalist in the *Globe and Mail* in an article on June 6, 2004, are not uncommon among professionals in the industry both on and off the battlefield. Quotes like these are frequent from journalists interviewed in both articles and studies (Ecer, & Ahmad, 2008; Massé, 2011; Keats, 2010; Joelsing 2010) and highlight a serious concern for the industry about the mindset of journalists who report on trauma. In a newsroom, one of the largest issues in diagnosing trauma is that most journalists have a mindset that they are an observer — detached and immune from what they are reporting. Therefore, they may think they are not affected by trauma the same way their subjects may be.

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While inroads have been made to further understand trauma and its effects on reporters, issues persist for many journalists who don't recognize symptoms resulting from trauma exposure and therefore don't seek treatment. According to Dr. Elisa Bolton with the National Center for PTSD, journalists are rarely the first people to talk about trauma. "Exposure to the traumatic events they report on has been viewed as within their job description," Bolton states. Bolton goes on to say that journalists consider it a "standard hazard of the profession," (Bolton, 2010) similar to first responders. Bolton investigated several key studies at the time to gain a better understanding of traumatic stress and the journalism industry and found the following: "The literature indicates that few employers of photojournalists recognize the stress and negative impact on mental health that is associated with some assignments. Even fewer employers offer counseling services and education about PTSD symptoms," (Bolton, 2010, par. 10).

Bolton's findings were only strengthened when The Center for Journalism Ethics at Wisconsin University credited the news-industry environment for fueling journalists to push past clear warning signs of trauma. Denial, according to the Institute, "may be a necessity seen by journalists to justify continued exposure to war zones." They also fault employers for not making it clear when it's okay to mention trauma experienced; instead, it is seen as a fault (Ward, 2014). Both studies fail to examine factors which may mitigate the harmful impact of journalists' exposure to trauma; rather, both note that there is a need for such research. Further study needs to corroborate these findings and pursue some of the shortfalls noted above.

Guilt and Bylines

Tess Browne and colleagues 2012 study titled "Trauma-related Guilt and Posttraumatic Stress among Journalists" indicated that survivor's guilt commonly seen in soldiers and first responders also affected journalists covering traumatic events. Browne and

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her fellow researchers (2012) hypothesized that trauma exposure was directly correlated to the PTSD symptoms. A key identifier for those journalists at risk dealt with guilt cognitions. First examined in soldiers, guilt cognition deals with the way they had to go about dealing with a traumatic event that may violate the values they live by in their civilian lives (Browne, Evangeli, & Greenberg, 2012). For journalists, this is often viewed by the journalist as being a bystander and bearing witness instead of taking part and “helping” during a traumatic event (Browne, Evangeli, & Greenberg, 2012). Journalists often view their work outside of the direct event despite the exposure and help that may come from the reporting that’s done.

This research showed the importance of post-trauma appraisals of guilt for determining risk factors for PTSD. Browne and colleagues (2012) concluded that there was an even greater need following a journalist’s exposure to traumatic stress to identify PTSD (Browne, Evangeli, & Greenberg, 2012). The research laid a foundation for looking after journalists following traumatic exposure, but it did have flaws in examining other variables that could influence the care of the journalist. The research did not examine if any prior training was done to prepare them for their traumatic exposure. In order to examine the pre-exposure training for trauma journalists, Newman’s (2003) research through other studies must be referenced. Newman and colleagues (2003) determined that journalists were not properly prepared to deal with the situations they were exposed to (Newman, Simpson, & Handschuh, 2003). The bulk of Browne’s work focused on how to identify specifically PTSD after the traumatic experiences take place and did not fully encompass other issues related to trauma exposure. Browne’s partner Neil Greenberg had other success in his research which further shed light on issues following traumatic exposure that were causing journalists harm.

Coping with Trauma

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In earlier work done in 2009, Neil Greenberg examined journalists' attitudes about PTSD and seeking help for it. The study titled "Journalists' and media professionals' attitudes to PTSD and help-seeking: A descriptive study" polled 124 journalists from an international news organization. The study asked the participants, "If you were feeling the effects of having been exposed to a traumatic event (e.g., disturbed sleep, usually irritable or recurrent distressing memories of the unpleasant event for more than two weeks), how likely would you be to initially approach the following for help and or advice?" The results showed journalists were most likely to reach out to a family member or friend (outside work), but they were least likely to reach out to a junior manager or religious figure (Greenberg, Gould, Langston, & Brayne, 2009). Through this, the authors found that while journalists had no negative attitude or stigmas in dealing with PTSD, they were unlikely to seek help and generally felt less positive about seeking professional help. This becomes the backbone of organizational challenges with treating PTSD and other trauma complications in journalists: Journalists were not reaching out to their superiors, but there was never a solid conclusion as to why that was so.

Studies have found that establishing connections with others is one way that journalists cope with reporting on trauma (Pyeovich, Newman, & Daleiden, 2003; Newman et al., 2003). For example, the study of photojournalists by Newman referenced above showed that 84 percent of the participants reported talking to friends or family members about their reactions to trauma-related stories (Newman, Simpson, & Handschuh, 2003). Newman surmised that the process of integration and connection may be a powerful way of responding to or limiting the negative effects that may occur after exposure to trauma. A common theme being derived from those studies is that the guilt from bearing witness could factor in the journalists talking about their

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experiences. Qualitative studies have journalists citing the witness bearing as being a stressful part of the profession (Newman et al., 2003; Keats, 2010). Studies that typically examined trauma-related guilt among at risk groups normally focus on emergency workers or military personnel. Journalists are different than those professions, according to the study, in that they often experience or witness traumatic events, but they are not expected to intervene (Pyeovich, Newman, & Daleiden, 2003). Approximately half had reported from the scene of a traumatic assignment (56%) or interviewed someone in extreme distress (47%). Higher levels of exposure were significantly associated with higher levels of PTSD related symptoms and guilt cognitions. Journalists reporting greater guilt cognitions also reported higher levels of PTSD-related symptoms (Browne, Evangeli, & Greenberg, 2012).

Browne, Evangeli, and Greenberg's (2012) final analysis was that media organizations should encourage distressed staff on their teams to seek help and ensure managers are equipped "to deal appropriately with distressed employees" (Greenberg, Gould, Langston, & Brayne, 2009, *p.* 544). The problem with the study is it doesn't come up with a clear conclusion on why newsroom journalists won't seek help; instead, it narrowed it to three possibilities.

Participants replied to a question of why they would not seek help, and the most commonly selected were "I would be less likely to be given roles/tasks of responsibility," "I would not be trusted by my peers when faced with stressful situations," and "I would be embarrassed by asking for help," (Greenberg, Gould, Langston, & Brayne, 2009, Table III, *p.* 546). These are good staging grounds for a further examination as to why those are the case, although Greenberg never addresses that specific topic. Greenberg's research, however, never investigates the "I would not be trusted by my peers when faced with stressful

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situations” answer provided by the study. It is a common missing gap in many of the studies.

If one part of the research showed that there is no stigma on the disorder, then why are journalists afraid to lose their positions by acknowledging the potential effects the trauma can have on them?

Within the narratives expressed in Greenberg’s study, we can see how deep-seated the issues go for journalists marred by their experiences. The narratives provide an emotional context to the quantitative reports documented by Greenberg that showed on paper journalists acknowledge traumatic stress and don’t have an overt stigma about mental health issues on their own. When it comes to their own personal beliefs, there is a separation of what happens to their colleagues and what happens to themselves (Browne, Evangelini, & Greenberg, 2012).

Barriers to Getting Help

Newman showed in her 2009 research that a lack of addressing trauma was an industry-wide issue not only because of the reporters but also because of the media companies they work for. Mark Massé, a former professor of journalism at Ball State University, supported this conjecture through a series of interviews in his book titled *Trauma Journalism: On Deadline in Harm's Way* (Massé, 2011). Massé (2011) focused on several studies that examined how many journalists can be pitted in an ethical dilemma. On one hand, journalists are expected to treat subjects with compassion and consideration. This can be difficult, though, as the pillars of journalism ethics — to remain an observer and not a participant — often crafts attitudes in journalists to perform as detached-third-party observers. The study went so far as to ask whether “professional ethics can supersede the moral compulsion to help a fellow in distress,” (Massé, 2011, p. 136)

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Journalists have only been examined by a few studies on dealing with traumatic stress. Even fewer of those studies attempt to examine coping mechanisms in journalists with different frequencies of exposure to a traumatic stress event. Studies have found that establishing connections with others is one way that journalists cope with, and adapt to, the challenges of reporting on trauma. For example, in a study of photojournalists, 84% of the participants reported talking to friends or family members about their reactions to trauma-related stories (Newman et al., 2003). Inside the workplace, journalists don't necessarily have the resources needed either. "Despite their exposure to trauma, only 11% of the photojournalists reported that they were advised by their employers of the potential emotional impact of the job, and only 25% noted that their employers had offered counseling," (Newman, Simpson, & Handschuh, 2003).

Another integral study that examined the mindset of those covering the trauma is "The moment is frozen in time: Photojournalists' metaphors in describing trauma photography" by Patrice A. Keats. The 2010 study in the *Journal of Constructivist Psychology* focused on the metaphor's photojournalists used to conceptualize their experience.

Keats (2010) says, "The unique aspect of these metaphors was how they were reflective of aspects of journalism culture and the work of trauma photography," (Keats, 2010, p. 231). The research tied the most into how a journalist feels about the job and their specific exposure to traumatic news coverage. This is unlike other studies that just examine PTSD or the rates thereof in the subjects (Feinstein, Owen, & Blair, 2002; Browne, Evangeli, & Greenberg, 2012). Keats (2010) narrows the research conclusions by showing that the research has consistently reiterated the journalistic view that any display of traumatic stress

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after witnessing trauma is a sign of weakness. Because of this, there is an assumption that their peers will view them as unable to work successfully or even lead to reassignment (Keats, 2010). Keats also concluded through several examined studies that among photojournalists there is a mindset that there shouldn't be any subject matter that they are unable to make pictures or document (Keats, 2010, *p.* 233).

Keats provides an insight into the difficulties of the pre-diagnosis portion of treating traumatic stress in journalists. Members of the journalism community can see the issue as something that will cost them the “prestigious” assignments they have worked for years to get. Keats only went so far as to show why journalists may choose not to step forward but never suggests that it was ingrained in them to stay silent, which could explain why some are willing to step forward in research.

Keats's research does, however, pull together several aspects overlooked by the other key studies on the topic by showing correlations into training and outlook as to why journalists may have difficulty with diagnosis and treatment for PTSD and traumatic stress.

Are Newsrooms Adapting?

Early research has made suggestions on how to better improve newsrooms in order to help journalists covering traumatic events. Stephen Ward, in an article on the University of Wisconsin's Center for Journalism Ethics, says that it's vital that newsrooms have programs in place for journalists (2014). Ward continues to explain that the situation is not simply about journalists who cover wars, but the daily stories in a newspaper can leave journalists with exposure to traumatic stress. Ward posited that journalists all have:

- Sustained direct exposure to potentially traumatizing events;
- Secondary or indirect exposure through interviews with traumatized persons;

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- Recurring exposure through new assignments.

He began his qualitative research by confirming several already-adopted theories. For one reason or another, journalists are not willing to come forward when they are in distress, and while many of the studies acknowledge that fact, few offer any substantial hypothesis as to why that would occur. According to Ward's summary of the research at hand: "The myth still exists that journalists shouldn't need trauma programs because journalists are supposed to be 'tough as nails.' When it comes to trauma, journalism sometimes appears to be one of the last 'macho' professions" (Ward, 2014).

Mathew Fisher, a combat reporter, said the following in an interview with Ward during his research at the University of Wisconsin: "I don't know if surreal is the right word, but you don't feel personally involved... You cannot afford to get too involved in this emotionally, or you're done for" (Ward, 2014). It sums up one of several key issues in journalism ethical reporting standards and the reality of trauma journalism. Key things the reporter has to do to form a high-quality, compelling story can also leave them vulnerable emotionally and physically. This ties directly to the guilt cognition theory surmised by Greenberg (2009) and other researchers. Other qualitative research supports many of the theories surrounding the topic at hand.

Moving forward, more research needs to be conducted to confirm many of the standing theories involving journalists either not recognizing signs of traumatic stress or not seeking treatment for problems from the stress. Is there more recognition of the toll these stories take on a journalist? Do they feel comfortable speaking up? Do they have differences in opinion on what support structures in place could help cope with the traumatic stress? Much of the literature currently available uses quantitative data gathering, which treats all journalists exposed to trauma

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as one large pool. Using qualitative methods, there can be more of a voice given to how trauma affects everyday journalists.

Research Questions

The research conducted in this study addressed several questions based on the current body of research. They were:

R1: How do journalists view traumatic stress they encounter in their work?

R2: How do journalists cope with traumatic stress they encounter?

R3: Who do journalists feel comfortable talking to about issues from trauma exposure?

R4: What resources do journalists want to see in newsrooms to better deal with trauma?

The first research question (R1) focused on how journalists viewed traumatic stress in their work? This includes examining how each journalist prepared for traumatic assignments, and their recognition of trauma in their work. Specific focus will be given to how the individual journalists view mental health in their work life.

The second research question (R2) focused on how journalists cope with trauma after being exposed to it. This focused on the journalist's traumatic exposure and how they handled, both positively and negatively, any changes to their own mental health.

The third research question (R3) focused on how willing the journalist was to address traumatic stress with others. This included how willing they might be to talk to managers, colleagues, or other persons in the reporter's life that could be a confidant. Questions helped establish who the journalist typically spoke to about complications, if they might be willing to speak to a colleague about the issue, and if they'd be willing to talk to their managers at their

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respective news organizations. Focus was given on the relationship journalists had with their respective newsrooms and their level of comfort discussing trauma with them.

The fourth and final research question (R4) examined what journalists wanted to see in newsrooms so that they would feel more prone to discussions around mental health and traumatic stress. Questions to ascertain this included a focus on the journalist's willingness to speak about issues, why they felt journalists don't reach out when feeling overwhelmed, and what initiatives may help them cope better following traumatic exposure.

Methodology

In order to advance the available body of research, the principal researcher conducted qualitative interviews with 14 different journalists who have varying exposure to trauma through a variety of news coverage that they do for their respective media outlets. Specific questions were based around the previously conducted field of research explained in the above chapters. In-depth interviews were key to confirming or refuting already existing literature on the subject as well as revealing new information about how reporters view traumatic stress and what resources they utilize to cope with it. The interviews were semi-structured in order to allow the subjects to lead the discussion to areas they feel are also important to their respective cases (see interview questions in Appendix A).

In-depth Interviews

While many studies have helped identify the scope of the problem, there has been a lack of research giving a voice to those statistics. Journalists live or die by quotes in their stories because it gives a voice to the voiceless over a specific issue. By adding in narratives from those who have experienced trauma in their jobs as reporters, a more holistic understanding of the

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issue can be found. A series of in-depth interviews were determined by the researcher as the best approach to collect the data. Other methods of quantitative and qualitative research were either too resource-intensive or would not yield the in-depth responses needed to better understand the topic at hand. For instance, gathering data in focus groups wouldn't achieve the goal because a group setting might interfere with the individual nature of how each research participant dealt with his or her own respective trauma. The American Psychological Association calls this "conformity," where the subjects being in a group setting would cause subjects to adjust their opinions, judgments, or actions so that they become more consistent with the opinions, judgments, or actions of other people in the group (VandenBos & American Psychological Association, 2007).

The reason for the limited range of respondents was to get a varied group of input until there was an observed saturation of responses that pointed toward a common theme for each of the questions at hand. Scholarly articles on qualitative data debate what number of research participants are required to reach a conclusion in research. According to some scholars, "The experience of most qualitative researchers is that in interview studies little that is 'new' comes out of transcripts after you have interviewed 20 or so people," giving some guidance to the number decided on in this research (Green, & Thorogood, 2009, *p.* 120). The research that was conducted was not meant to serve as a new imperial standard for the field but to add to the existing narratives and to see if it supports the conclusions determined in other research.

Quantitative measures were not used because they fell short in gathering a more in-depth look into the issue (Green & Thorogood, 2009). A limited pool of possible candidates restricts the number of potential respondents to a survey, which became problematic for

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researchers in previous studies cited in this research. The most extensive surveys typically had under 500 candidates. Due to limited networks and resources, the primary researcher would have been unable to obtain that number and produce results that would yield statistical significance to the questions at hand. Large-scale figures also lack the nuance observed in qualitative measures.

Sampling and Recruitment Parameters for Research Participants

Research participants were gathered through several professional networks of photojournalists and journalists who cover trauma. These networks were tied to networking organizations like the Society of Professional Journalists (SPJ); the Kalish Workshop, a group of photographers and editors who meet for a yearly conference; Ball State University's Journalism Alumni Network; and word of mouth through both social media and email solicitations. When it came to social media for gathering research participants, groups via Facebook that are dedicated to journalists who cover trauma were utilized. No journalism organization partnered with the primary researcher; instead, the primary researcher utilized several of these groups to find willing participants.

Research participants had to be at least 18 years old and worked for a U.S.-based media outlet. The subject either was or currently is a member of a media organization that covers spot news, including crime and breaking news within the last five years. This was so subjects could better recall memories and experiences from their time as a reporter. Research subjects also must have worked in the journalism field for a minimum of one year prior to participation in the study. This was so participants have some amount of repeated field experience from which to discuss during the interviews. Participants were excluded from the study if they did not meet the requirements listed above. No participants were excluded by

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race, gender, or age beyond the minimum to be classified as an adult by U.S. law. See table 1 for a breakdown of research participants by gender, age range and role.

Research Subject Characteristics Breakdown			
<u>Subject ID</u>	<u>Gender</u>	<u>Age Range</u>	<u>Medium/Role in Journalism</u>
Subject A	Female	20-30	Radio
Subject B	Male	30-40	Photojournalist/Print
Subject C	Female	30-40	Photojournalist/Print
Subject D	Female	20-30	Reporter/Print
Subject E	Female	30-40	Reporter/Print
Subject F	Male	50-60	Photojournalist/Print
Subject G	Male	20-30	Television
Subject H	Male	30-40	Photojournalist/Print
Subject I	Male	50-60	Photojournalist/Print
Subject J	Male	20-30	Photojournalist/Online
Subject K	Male	50-60	Reporter/Print
Subject L	Female	20-30	Photojournalist/Print
Subject M	Male	20-30	Photojournalist/Print
Subject N	Male	20-30	Television

Some characteristics of the respondent pool worth noting that could potentially skew the results or make it impossible to make uniform observations, is that nearly two-thirds of the respondents were male. Within this study, only five respondents identified as female and nine male. Another issue is that over half the respondents were photojournalists over other types of reporters for different mediums. Half the respondents were also under the age of 30, which skews the overall response pool to a younger demographic representation in the industry. Because of candidate pool, no sweeping generalizations about journalism medium (print, radio, or television) or gender will be made in the conclusions of the research.

Research participants gave verbal consent after reviewing consent material after being selected as a participant by the primary researcher. Interviews were recorded for analysis. Due to the sensitive nature of the topic and that many of the research subjects may feel more

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open to talking about their own experience, confidentiality and anonymity was assured for each participant. This provided an environment in which the research questions explained above could be examined without the influence of employers or the perceived judgment of their peers. Each of the participant names have been given a generic label to represent each individual interview. In the consent document, subjects were made aware of the ability to back out of the research because of its sensitive nature. Subjects were also promised a copy of the final thesis in exchange for their participation. No other compensation was offered so as not to influence the subjects in any manner.

Analysis of the Data

After notes and interview transcriptions were made, the researcher conducted careful analysis and initial processing of the data to find categories and themes related to the research questions. Each interview was arranged between the research subject and researcher via the Zoom video-conferencing system for audio-recording purposes, which assisted in the transcription process. Following the interviews, each interview was transcribed into a word document by an automated service through Otter.ai. The researcher helped refine the transcriptions before they were coded. Automated transcription services tend to not be 100% accurate to the audio that was input; therefore, some sentences needed to be corrected from the software's incorrect transcription, which could vary from incorrect sentence punctuation to incorrectly transcribed proper nouns or phrases.

Each of the interviews were then individually coded and eventually used in the creation of the final research by the primary researcher. Qualitative data is exceedingly complex and isn't something that can be seen in standard measurable units (Marshall & Rossman, 2006). Therefore, going into the analysis phase of the research, the primary

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researcher applied a generic pattern for analysis as examined in the fourth edition of *Designing Qualitative Research* by Catherine Marshall and Gretchen Rossman (2006).

Categories were designed to help sort common themes as they appeared in the interviews with research candidates. The researcher conducted a thematic analysis, searching for an identification of common threads that extend throughout an entire interview or set of interviews. Frequently, these themes are concepts indicated by the data rather than concrete entities directly described by the participants. Once identified, the themes appear to be significant concepts that link substantial portions of the interviews together (Morse, 1995).

This initial analysis involves highlighting relevant sections using a color-coded method to better understand the patterns (Marshall & Rossman, 2006). During the analysis of the interviews, each transcript was systematically analyzed by grouping together comments on similar themes and attempting to determine how that fits in with the current literature using grounded theory as a baseline (Marshall & Rossman, 2006; Morse, 1995). Those comments were organized by the researcher using a hierarchy coding system that broke down each line of the transcript into specifically coded themes, words, and phrases that were applied across the array of interviews. Each of those themes were then assigned to a specific research question for later use in the final documentation. New codes were created when a statement in the transcript was representative of something that a previous code was not appropriate for. Codes were placed within a theme based on how well they fit within the description of that theme created by the researcher, ultimately answering one of the several research questions at hand. The categories used were not rigid and instead focused on breaking up full interviews into a matrix of different ideas (Marshall & Rossman, 2006).

Results

Trauma and Journalists

Research question one (R1) asked how journalists view traumatic stress. Journalists involved in the study typically expressed how they prepared for an assignment in the terms of narrative coverage and physical safety. Very few, if any, said that they prepared themselves for what traumatic scenes they might come across while on a specific assignment. “Oh, I was pre-visualizing all the way out there. I was thinking of the gear I wanted to take. What kind of assignment it was, whether I'm going to stay back with a long lens,” said Subject F. Their response was common among the journalists interviewed because many said they didn't know if it was possible to prepare for scenes that may be traumatic.

“I'm not sure, at least for me, there's any way to prepare for seeing a dead body on the ground or hearing someone's mother crying out for them. That's just reality; that's just life. Bad things happen,” Subject C said when asked about how they prepare for an assignment they knew could be traumatic.

Those involved in the study who indicated they had a method for preparing for traumatic assignments said that it was a matter of preparing themselves to become overtly objective for the story. They said this was so their own personal emotions didn't creep into their reporting. “There's a handful of things that I do before I get out of my car that are physical things of like reminding myself: fix your face; you're going to be fine. This is the job. This is what we're doing,” said Subject A. Moving into a more detached mindset is how they were able to report and do the job. “It's kind of hard to explain, but there is just sort of a mindset of you have a job to do just like everybody else there,” said Subject H.

Understanding Trauma in News Coverage

Journalists involved in the study had a wide range of understanding their emotional responses to trauma. Some did not recognize the complications from traumatic stress until long after an event, while others were more cognizant of how the trauma affected them. There were no consistent elements to be able to correlate which journalists understood trauma. Initial comparisons between interviews showed that if a journalist was younger in age, and if the journalist received information about traumatic stress from outside their respective newsrooms, they typically understood some of the emotions they might experience when dealing with trauma. Typically, based on the aggregate responses, the younger a journalist was, the more they were able to recognize issues with their own mental health. With such a low sample size, though, it would be premature to use that as an overall basis for the journalism industry. Reporters who already were seeing a therapist also seemed to have a better handle on their emotional responses to trauma. Journalists who had also attended some form of trauma-information seminar or had gone through information through the Dart Center, a resource center and think tank for journalists who cover violence, conflict, and tragedy around the world, generally had a better understanding of the issue.

None of those factors made a difference in how the journalist responded to the trauma as they varied widely. Even when journalists understood traumatic stress, they rarely addressed it directly in their daily lives. “You just kind of find a way of pushing the emotions down. You just deal with it later. You just make yourself involved in the minutiae and the specifics of the job,” Subject B said. Subject B noted when covering traumatic news coverage, there was a detachment from their own emotional state until after the assignment was completed. This was a factor even when the trauma directly affected the journalist’s own

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safety, putting them in harm's way. For example, when covering an earthquake overseas as a freelancer, Subject B was put in harm's way through subsequent aftershocks that nearly killed the reporter. "There was a moment during the quake where I was pretty sure I was about to die," Subject B said. "I have my camera in hand, and I'm shooting. What I was trying to tell myself at the time is you don't have time to feel the emotions you have. This is important to get on camera. So, I just kept trying to ignore how I was feeling." That attitude was determined to be detrimental in the long run by the journalist, especially when they recalled the event. "I think if I stopped to actually process it for a minute, I would have produced much better work and would be a lot healthier in the long run," Subject B said. This was an expression voiced by four of the respondents — that a better connection to their emotions could help them write better stories. Subject B and those who voiced similar thoughts were unable to say how it would affect their reporting, simply stating it would help.

Those statements were contradictory to others ($n=10$) in the study who voiced they wanted to remove those emotions as often as possible because of a code of conduct. Respondents in that category usually referred to their news training or code of ethics as why they couldn't allow themselves to be invested emotionally. Numerous subjects in the interviews ($n=10$) expressed that their way of responding to the traumatic stress was simply part of the job and that not addressing it was the most efficient thing to do for their workflow. "I was in the mindset of I need to do my job. It's my responsibility to do these stories. I wasn't even really considering what the emotional impact would be on me going in," said Subject D. The mantra was repeated by those 10 reporters regardless of age, medium of journalism, and years in the field. It was also backed up by the research showing that journalists think their job excludes them from being able to process their emotions when

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exposed to trauma (Massé, 2011). “I tend to seize up emotionally; actually, it kind of comes in a flood after I'm gone,” said Subject J. “I have a job I'm doing. I have to really focus on it to stay safe. When I leave, I'm kind of, like, in this weird space for sometimes several days.” Subject J described his state of mind as being easily distracted, sometimes expressing a heightened level of emotion.

Newspaper size also had no observable affect as both journalists at smaller news outlets and large ones had similar responses of compartmentalizing their feelings. “I'm less worried about what's going on around me and more worried about the logistics of where do I park? Where can I go? Are police going to stop me? Are my cameras good? So, I'm sort of more internally focused than worried about what I'm going to see,” noted Subject L during the interviews.

The most common emotions expressed while directly on the scene of traumatic news was sadness and anger at the situation. Subject H noted with a couple of murders they covered: “It was pretty dark and pretty heavy to realize what I had seen or what I come across, and there's certainly a processing there. I think that it's just kind of a general sadness: You're sad for the victims; you're sad for their family members. Sad for the situation.”

Repeated Exposure Does Have an Effect on Journalists

More repeated exposure that a journalist experienced to traumatic news coverage in a short span usually wore down their emotional screen that many implemented, indicative of some of the currently established research on repeated exposure (Newman, Simpson, & Handschuh, 2003). Subject N specifically outlined how covering back-to-back homicides or deadly car wrecks would quickly exhaust them emotionally. “There were times where, you

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know, just parts of the year where you're like, dang, we need a break. We're doing this every day. It feels like it's one thing to another,” Subject N said. “You get exhausted, especially if you're doing this every single day. I don't think you're exhausted because you don't want to do it; you're exhausted because your emotions are on a roller coaster every day.”

Depending on the beat the journalist was reporting on affected the frequency and type of exposure to trauma they had. Some journalists were first-hand witnesses, while others became affected through secondary exposure in interviewing survivors of those involved. Especially in 2020 with the global COVID-19 pandemic, reporters interviewed for the study who commonly worked on health and medicine noted serious issues after covering the pandemic. “I started having intrusive thoughts before bed where I would have kind of, like, flashbacks to my reporting,” Subject D stated. The reporter had interviewed the family of a woman in her early 40’s who had ended up dying of complications with COVID-19. The reporter even noted after interviewing the doctor that it was actually the first time in a long time during the pandemic that doctor had had trouble falling asleep. After Subject D talked to the family, they noted trouble falling asleep for several days following the exposure to the trauma via the interview.

While about two thirds of respondents in the study ($n=12$) reported traumatic stress symptoms that lasted a few days, some subjects ($n=2$) who faced long-term exposure over years of work in the industry without adequate coping mechanisms led more serious complications. Subject F expressed some of the worst complications from trauma out of those interviewed. Frequent exposure to violent crime and death through accidents and disaster were the most common for Subject F. It resulted in symptoms clearly identified under the DSM-5 classification for PTSD but was never clinically diagnosed. “I was having

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daily panic attacks; I couldn't sleep at night with the lights off. I couldn't shut the door in my bedroom because I felt trapped,” Subject F said.

That eventually led to severe issues with alcohol, which were used to cope with the symptoms. Subject F stated:

I became quite a drinker the last three or four years on my job. I can safely say it now that, you know, there was a bar across the street and after work, I'd go drink. I became a very heavy drinker. When I would fly out to cover the (the local sports team) towards the end, I would make sure I packed a bottle in my bag that went underneath, so I didn't have to drive around and look for a liquor store. I was to the point where I had to have something; I had to have alcohol. I never drank on the job. I never drank before going into work. It was always after. But all of that came to, you know, a head when I was dealing with all this traumatic stuff from 30 years of this job. I drank more and more and more and more. I put on a good face, and people never knew I drank. But it got to a point where I ended up going to AA. I've been sober a year and a half in four days. That was my way to mentally cope with how I was feeling. I would stuff it down. I would I would put a buzz on, wouldn't think about it. I was drinking a bottle a day. (Subject F)

Coping Strategies Used by Journalists

Research question two (R2) asked how journalists cope with traumatic stress. Journalists varied greatly in their coping strategies with stress. Those more informed on how traumatic stress affected them had better coping strategies, while a few interviewees expressed no coping mechanisms at all until much later on in their careers. “I didn't have

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really good coping strategies earlier this year. I know at the very beginning, when my workload was just crazy, I was skipping meals,” Subject D said. Eventually the subject reached out for clinical help using teletherapy. This allowed them to work through their emotional state with a trained professional. The subject could regularly seek help and find constructive coping mechanisms in dealing with the traumatic stress through that resource. Subject D eventually found help through exercise, setting more of a routine, and using grounding techniques. The subject said they hadn’t thought about seeking help until reporting on several distressing stories this year in succession. As discussed above, the more repeated exposure a journalist has to traumatic news coverage in a set amount of time, the more likely they are to develop issues (Newman, Simpson, & Handschuh, 2003). “I had already done, like, at least eight traumatic stories before I had even started acknowledging it with within myself and, like, with my editors and stuff,” Subject D said.

Others have resisted seeking clinical help out of fear. “I can say that one of the reasons I have resisted going to therapy for so long has been because I have this deep dark fear that I'm going to go to a therapist... and they'll say... I don't think that you're cut out for journalism,” said Subject A. The fear of being considered unfit for the profession was mentioned by eleven research subjects ($n=11$) during the interviews.

Journalists in the study who expressed unhealthy coping mechanisms said they would resort to alcohol, burying themselves in their work at the cost of isolating themselves from friends and family, and internalizing the trauma without ever addressing it.

Three journalists in the study said they took advantage of workplace policy for personal days to give themselves a break when they needed it. “I am not at all ashamed or afraid to take what most people call a mental health day. I got no problem doing that. Because if I'm just not

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feeling it, I'm not going to perform the right way," Subject N said. Other respondents either didn't directly address that topic or said they felt they never had to take time off to cope with traumatic exposure.

A common theme among those interviewed — and consistent with the current body of research — was that journalists also tried to avoid triggers when possible that reminded them of specific traumatic events. For Subject A, that meant avoiding areas where they had covered particularly traumatic assignments and even been physically harmed during coverage. "I'm still working through those issues and still trying to figure out a better way to deal with the feelings that are drummed up when I'm in those locations," Subject A said. "I think that kind of imposter syndrome is there. Everybody else can deal with this, so why can't I?"

Subject E, who had a well-versed knowledge of trauma in general, still said that despite the knowledge, the practical applications rarely followed. "I've had a vocabulary for what to be aware of and all the self-care practices and that stuff. It just didn't live in the same space as the work I was doing," Subject E said. "I didn't think I had the time even to think about it. I thought there was something protective in understanding it, even if I wasn't able to practice any of these things we talk about, which is obviously irrational."

Work served as the impetus for the trauma exposure, and while journalists took pride in that work, most said they tried to avoid the work when processing the emotions. "The writing is very important to dealing with the emotions. Otherwise, I watched a lot of Netflix; I slept a lot," said Subject E. "I'd focus my energies into something else that took my mind away," stated Subject F.

Journalists Feel Guilt When Covering Trauma

A frequent statement made by journalists interviewed was a guilt factor they experienced in covering traumatic news and then later being emotionally affected by that exposure. Nine subjects in the study expressed direct concern about feeling any emotional response to the trauma they were exposed to. “It felt very selfish to think about what I was going through,” said Subject B during the interviews. This also revolved around the journalists’ drive to remain impartial in their work. “You’re a journalist; you’re supposed to be objective. You shouldn’t let this stuff, like, mess with you,” said Subject C. Subject C continued to discuss how they felt when they were actually working in the field:

I do kind of feel like I’m in this place of privilege. I am entering somebody else’s world when, you know, they’re experiencing the worst day of their life. Who am I to have residual feelings or feel bad or feel traumatized after this? (Subject C)

Noted by many as “observers’ syndrome,” the journalists not only felt they needed to detach from common emotional responses to trauma for their work, but that in doing so, any residual emotions were not earned (Ecer, & Ahmad, 2008; Massé, 2011; Keats, 2010). The journalists that identified as having such feelings all referenced their ability to leave, while their subjects could not. “That sort of sense of the fact that you have the freedom to leave means that you don’t deserve to have the feelings that you have,” said Subject E.

Three subjects said directly that reporting on tragedy had a voyeuristic sense to it — one that in the long term made them feel partially ashamed of covering people who were suffering. “I’m there to basically cover other people’s tragedies. It’s not something that always sits well

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with me, but it's part of the job description, and it's part of the public discourse,” said Subject M.

For other journalists in the study, the emotional response was ingrained into chasing down the story and the adrenaline that can be associated with that. Subject H discussed their guilt in association with their work as follows:

I think when you get into journalism, you want to get into things that a lot of other people don't see. Now, that doesn't necessarily mean you want to be going to fatal accidents and shootings and stuff, but there is a certain level of excitement that comes along with the adrenaline of covering breaking news. (Subject H)

Some of this emotion came from how the reporter responded to the day to day news cycles. “I think on some level we all kind of feel this guilt... I was kind of excited when that (breaking news) happened because it broke up the monotony of the day,” Subject H said.

Who Do Journalists Rely on When Dealing with Trauma?

Research question three (R3) asked who journalists feel comfortable using as a support network, and why. Support networks have proven to be critical for journalists seeking an outlet with respondents overwhelmingly stating they usually had to find someone to talk to when coping with traumatic stress. While all the journalists in the study said they had some version of a support network, they were not always within the newsroom. Seven journalists also expressed concern of being a burden on those whom they did confide.

Journalists in the study who viewed support groups in a negative light typically evolved after reaching out to another person. Subject J, who had internalized much of the traumatic stress from assignments, said they originally resisted reaching out because they'd

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feel like a burden. “Then my therapist pointed out saying that was because I was assuming it's a burden on other people,” Subject J said. “I've actually been pleasantly surprised that, when something's really eating at me, my friends, partner, and family — they're all down to listen.”

While it wasn't always the preferred method of handling exposure to trauma, journalists in the study often realized that they needed to talk to someone about what they see in the field.

“I talked to my mom a lot about it. I think she secretly hates it when I talk to her about all the stressful stuff with my job,” Subject B said. Getting a chance to vent emotions to those whom the journalist considers supportive was critical for their long-term coping strategy. “It's hard to talk about this stuff with people that don't cover it. I don't feel like my friends back home really want... I mean they just don't know. They don't really want to hear about, like, how awful this thing that I had to cover was,” Subject C said. “I know if I don't get it out, then it's just going to ferment in me and just turn into something a lot worse,” Subject B said. That became one of the subject's main reasons for reaching out to others. “So, it's important for me to kind of vent those feelings. Once I've said it, it has a lot less strength. It doesn't affect me as much,” Subject B said.

Relationships with Management in the Newsroom

Interview participants varied whether they relied on journalism industry-based support through colleagues or outside support in friends and family. Some did rely on management when they were feeling overwhelmed ($n=7$), which differs from the other half of study participants. The issue showed a clear divide on comfort level with upper management in newsrooms, but no

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correlation could be identified between subjects. Instead, the main factor seemed to be on prior relationship standing with their newsroom leadership.

“I was incredibly fortunate that my boss was very vocal about making sure that I was okay, not only physically, but mentally that I was okay,” Subject A said in favor of talking to management. Those who had a strong relationship with editors prior to traumatic exposure felt the office environment was a safe space to discuss those problems. For those who saw management as a viable outlet for concern following assignments, they typically had a less formal relationship with those in charge. Subject G explained their relationship with management in response to a question over their comfort level in voicing concerns:

I know (my manager) understands. I know it's confidential, and he's very open about offering whatever I might need kind of thing,” said Subject C. “I feel comfortable talking to the manager because I see that manager as a friend. Someone that I can be open and honest with without it coming back to bite me, right? That's rare. (Subject G)

Management was still viewed as a risk for being a point of contact when dealing with traumatic stress because of perceived effects it could have on the journalists' career path. While seven responded they would be willing to talk to management, the other half said they would not. “I just feel like they might overly react. They might think ‘Oh, he's fragile. He can't cover these things.’ I just feel like it would affect my career in certain ways,” Subject J said.

Subject L wanted to stay out of newsroom support structures. They typically said they'd prefer talking to people not involved in the industry and instead confide in their family. “I could talk to them without fear of that idea in the back of my head that that if I can't do it, I shouldn't

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be here. So, with friends and family, I could feel my feelings with no fear of professional repercussions.”

Subject B, including others in the study, were sometimes reluctant to reach out to management should they have issues following traumatic news exposure. No firm consensus among those interviewed showed if journalists were overall willing to speak to management or not. When asked if they would talk to management, Subject B said, “My first answer is no, but I don't really know why. I know my editor would be very happy to talk to me about it, but I don't know. Something about that just feels weird.” It wasn't an uncommon response. One factor for the subject was they were a freelancer in their market, but their rationale was also expressed by those in staff positions as well. “I think it's this kind of freelance mentality of don't make waves. You want them to hire you again. I don't want it to seem like I can't be relied upon for those sorts of assignments,” Subject B said. “It's always a worry; they're going to interpret that as an inability to complete the assignment.” The journalists' desire to not be pulled from an assignment also fed into feelings for some respondents that the management simply doesn't care about the field reporters. “I do think that my newsroom does not handle this stuff well. I don't think that there's a culture of editors checking in with reporters to see if they're okay,” Subject D said.

For Subject F, they said the editors simply couldn't understand the pressure and exposure to trauma in the field. “They don't have a clue; they can look and say, ‘Hey, that's a great picture to go with a headline,’ but they don't understand what it takes to get those things, to get those images,” Subject F said. Subject K said something similar in their response. “I think you just don't talk to them. You don't have time (to talk with management),” Subject K said. Ultimately for that respondent talking to management wasn't a priority.

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For other journalists with reactions to trauma that didn't alarm the respondent, they simply never saw the need to reach out to management. "I never thought that it was affecting my other work. I think if it had been, then I might have stepped back. I just never really felt like it got to that level for me," Subject H said.

Within the newsroom, most of the respondents said that they preferred confiding in coworkers. Responses focused on the fact that coworkers understood the pressures that their given newsroom is under to produce the work, despite that coverage sometimes being the issue for the journalist. Subject D discussed that their gender may have played a role in not wanting to talk to their editor:

At first, I didn't want to mention it to my editor because I think a lot of reporters — and particularly women in journalism — sense that if you admit that this kind of stuff is taking a toll on you that they're going interpret it as you can't do your job. (Subject D)

For Subject E, a roommate who was also a journalist covering similar subjects for another outlet became a close confidant. "We became sort of each other's receptacles for the quote (in a story) you know will never make it in. The horrible thing that you both saw, but you could never write about because your editor would say 'That's too brutal,'" Subject E said. Journalism connections played a large role for over two-thirds of the research participants ($n=11$) as they understand the particulars of the industry, and they played heavily into journalists feeling more comfortable with peer support networks above any of the other options discussed. "You swap those stories in a way that's not necessarily like trying to top one another, but just in that way of like, 'Yeah, I know; I've been there'," Subject H said. The subject didn't feel that reaching out to management was a practical option. "There's not a chance anyone's going to trust

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their superiors, their managers, the people who do their performance reviews, to treat them holistically,” Subject H said.

What Resources do Journalists Want to See in the Newsroom?

The final inquiry that was asked of interviewees was tied to the fourth research question (R4), which looked at what resources they wanted to see in newsrooms to better assist journalists in dealing with trauma. Ultimately, each of the journalists interviewed expressed what they wanted to see happen in the news industry to better allow journalists cope with trauma. Four of the journalists in the study expressed that there should be better training for news editors on how to recognize traumatic stress in their staff. Nearly all of the journalists ($n=13$) expressed in some fashion that open discussions in newsroom about traumatic response would ideally help change newsroom culture regarding traumatic stress. Finally, the majority of respondents ($n=11$) wanted to see more support networks either within or outside of newsrooms for journalists to connect with.

Most of the research participants wished there were more trainings for both staff and management over trauma. Specifically, journalists said they wished management had more trauma awareness to be better able to work as a safety net for reporters they were putting into traumatic news coverage. None of the journalists interviewed felt full-time counseling for staff was a practical measure for the industry, but a more proactive approach from those in newsrooms would be appreciated. “I would say that the few remaining editors in newsrooms should have some sort of training. Even if it's just liked an afternoon workshop on how to talk with your staff if they have been out to cover trauma,” Subject I said. “I served as a supervisor in two different capacities... We got a lot of training on how to have conversations

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if somebody is going to be suspended, and it could just as easily have been about how to have these other conversations (about trauma).”

This was explained at length by Subject L, who said that training editors to be more trauma conscious would be nice but having newsrooms make it more of a priority in promoting available resources would be helpful too. Journalists in the study said mental health was rarely mentioned in their newsrooms with it normally being relegated to a footnote in employee handbooks about counseling sessions. Most felt this was inadequate. “I think it should be more accessible. Go to your HR representative and have them literally walk you through the process of finding help. They could actually give you phone numbers and help facilitate that process,” said Subject L.

The effort from upper management wouldn’t have to be formal either with minor changes or check-ins from managers going a long way for those interviewed. “Even though it was kind of belated, when my editor called me, that made a difference to me because it showed to me that he cared enough,” Subject D said. “When you're just halfheartedly providing phone numbers and links and stuff, I just end up feeling like a lot of people probably don't end up actually accessing the resources.”

The more formalized the resources, the more likely journalists perceive it as a way for the media company to basically check a box. “It seems to me that part of the problem is they're set up from a legalistic position in which having peer support structures makes it less likely that you can be sued if somebody jumps and commit suicide, right?” said Subject E.

The need for change in editors alluded to a need for more change in newsroom culture. Newsroom culture was brought up frequently when discussing better resources. Most

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journalists in the study felt that newsroom culture, while improving in many ways, did not reach levels they felt their peers would be willing to admit when there is a problem from covering traumatic news. “I think we've created this culture in the industry that it's only for the people that can handle it, right?” posed Subject G. “You got to be mentally tough. You got to be aggressive, tenacious. We used these adjectives and these words; we've used them for decades in this industry.” Subject G said this only exacerbated journalists not wanting to come forward for fear of not being cut out for the industry.

“If there's not a culture that truly embraces and understands, it just doesn't feel like an open environment where you kind of share stuff because it doesn't feel like you're going to get heard,” said Subject D.

Newsroom culture continually played a key role in responses. Either journalists felt they couldn't step forward, or felt there simply wasn't time to worry about those problems. “I do think that a lot of times it really does get kind of lost in in the shuffle and the bustle of a newsroom on deadline,” said Subject H.

Some journalists said that being able to rotate staff in and out of breaking news coverage would help with the frequency of exposure to trauma and the eventual burnout related to repeated exposure. “What's crazy is the paper would ask you to go right back out into the shit,” Subject F said in their interview. The subject backed up common themes from others that repeated exposure over and over in rapid succession can do the most harm, reiterating the need for some type of rotation. Subject D also noted that there was not a good system in their newsrooms for rotating reporters and photojournalists during traumatic ongoing coverage during natural disasters or in pandemic coverage this year specifically. Subject D stated:

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What ends up happening in journalism is that expertise is valued so highly. If I go in and I do one story where I embed with a COVID unit, naturally, if we want to do another story like that, I'm going to be the person who is looking to do the next story. I already had that experience from doing it previously. I've done it, and I think the same applies when, like, you're covering a mass shooting. If you send one person to that site to talk to people in the neighborhood, or victims, or cops, or whatever, like, you're going to want to send the same person back because they already did it. They have that knowledge from reporting previously. The problem is, is that when you are doing this with a trauma story, what ends up happening is that approach just ends up exposing the reporters and photographers to trauma over and over. (Subject D)

More support networks were welcomed by nearly every respondent — even when they themselves admitted that they might not be the first one to utilize them. Subject B said that looking back at their career, they wish they had been more aware of their emotional responses to trauma and voiced them to their newsroom. Subject B said:

In retrospect, I wish I had been a little less concerned about my career and a little more concerned about me. I know my editor that I was working with... was very concerned about me and my safety. I kept downplaying it because I didn't want them to stop buying images. (Subject B)

Journalists were open to having both internal and external support networks of fellow journalists who also cover trauma in group support like Alcoholics Anonymous. Those involved continually look out for the wellbeing of others in the industry. “Make it a safe place for people to reach out so that they don't feel like they're on their own completely with dealing with some of this stuff,” said Subject C when prompted about increasing support networks.

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If journalists will utilize resources put into a newsroom or created by a third-party agency isn't yet clear, but with the number of interviewees recommending such structures, the likelihood is high. Informal support networks through journalism organizations like the National Press Photographers Association, The National Society for Professional Journalists, and more could be utilized to create peer support. "I think it would be nice to have like a support group kind of thing. Just like places to decompress with other journalists about these sorts of things after they happen," Subject J said.

Conclusions

The interviews confirmed many of the conclusions already established by the existing body of research in how journalists approach trauma and how they deal with complications from traumatic stress.

When it came to frequency of trauma in news, reporters on a wide array of beats reported having covered traumatic scenes. This clearly backed up the prior study led by Newman (2003) that showed nearly all of the journalists had been exposed to events that mental health professionals would deem traumatic. These ranged from automobile accidents, fires, and murder. Close to 6 percent of those who responded to that study met the criteria for a diagnosis of post-traumatic stress disorder (Newman, Simpson, & Handschuh, 2003). The interviewees studied had no formal diagnosis process to give a clinical diagnosis of PTSD or other related symptoms. The rate of exposure to trauma described by journalists interviewed, however, showed no significant change over the past decade.

When it came to how journalists view traumatic stress they encounter in their work (R1), journalists' responses indicated a wide range of emotional response. Reporters' attitude

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toward trauma also matched what was seen in other studies of the industry. While some understanding of mental health seemed better, this study reaffirmed what was already explained by multiple researchers. Journalists don't recognize symptoms resulting from trauma exposure and therefore don't seek treatment (Newman, 2003; Bolton, 2010). Journalists involved in this study showed a wide range of how well they understood their emotional responses to trauma. Some did not recognize the complications from traumatic stress until long after an event, while others were more immediately cognizant of how the trauma affected them. Those more informed on how traumatic stress affected them had better coping strategies, while a few interviewees expressed no coping mechanisms at all until much later in their careers.

The responses from the second research question (R2), which focused on how journalists cope with traumatic stress, indicated that journalists cope in a multitude of different ways. Initial comparisons between interviews showed that if a journalist was younger in age, and if the journalist received information about traumatic stress from outside their respective newsrooms, they typically understood some of the emotions they might experience when dealing with trauma. Those more informed on how traumatic stress affected them expressed more positive coping strategies. Those that did not expressed little to no coping mechanisms until much later in their careers.

Journalists in the study who expressed unhealthy coping mechanisms said they would resort to alcohol, burying themselves in their work at the cost of isolating themselves from friends and family, and internalizing the trauma without ever addressing it. Others who had a better handle on their mental health said they didn't hesitate to take a personal day or seek therapy when feeling overwhelmed. The fear of being considered unfit for the profession was

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mentioned by 11 research subjects during the interviews when asked why they would or would not step forward with issues from trauma. This shouldn't be overlooked when examining newsroom mentalities toward trauma.

The biggest divide in the consensus of respondents for this study occurred in whom journalists feel comfortable talking to about trauma. The third research question (R3), which looked at who journalists feel comfortable talking to about trauma, showed that half of the respondents would talk to a manager about difficulties in dealing with a traumatic assignment. The other half of those interviewed said they would not want to talk to management. Support networks in any form have proven to be critical for journalists seeking help with respondents overwhelmingly stating they usually had to find someone to talk to when coping with traumatic stress. Journalists in the study did not agree on who they should go to, however. This divide brought into question established research that showed journalists normally don't reach out because of an assumption that their peers will view them as unable to work successfully or even lead to reassignment (Keats, 2010). While that sentiment was still expressed enough in this study to be considered relevant, respondents who had strong bonds with colleagues or managers indicated they felt more comfortable bringing it up when there was a problem with a traumatic assignment.

Newsrooms are only beginning to adapt, but it's clearly not enough. Earlier literature indicated that few employers of journalists recognize the stress and negative impact on mental health that is associated with some assignments. Even fewer employers offer counseling services and education about PTSD symptoms (Bolton, 2010). While most respondents said their newsroom had counseling mentioned in a handbook, only those with proactive managers

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looking out for the journalist's well-being responded they felt like concerns on how trauma was affecting the reporter were being respected.

The journalism industry must continue to re-examine the outlook on social responsibility theories, social norms in the industry, and its code of ethics when sending reporters to cover trauma. Research has indicated that more resources are needed to help mitigate the effects of trauma the same way other professions such as law enforcement, firefighters, and paramedics are giving adequate resources to those who place themselves in harm's way (Newman, Simpson, & Handschuh, 2003; Bolton, 2010; Arana, 2015).

Finally, journalists who comprise the data in this study simply want to see an additional focus on trauma as discussed in research question four (R4), which looked at what resources journalists want to see made available for dealing with trauma exposure. While a limited number of respondents wanted to see more training in newsrooms, the majority simply wanted to see more discussions about the effects of trauma and mental health happen in their newsrooms. By discussing the issue more openly in newsrooms, the consensus from respondents was that it would allow for more journalists to reach out when a problem occurs following traumatic exposure. These don't have to be overtly formal discussions either. The more formalized resources were, the less likely journalists were going to use them. It is unclear if this is a unique result for this study, or if more research is needed to confirm this finding. Most journalists in this study felt that newsroom culture, while improving in many ways, did not reach levels they felt their peers would be willing to admit when there is a problem from covering traumatic news. If journalists will utilize resources put into a newsroom or created by a third-party agency isn't yet clear, but with the number of interviewees recommending such structures, the likelihood is high. Informal support networks through journalism organizations

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like the National Press Photographers Association, The National Society for Professional Journalists, and more could be utilized to create peer support.

Further Research

The ongoing COVID-19 pandemic in 2020 has been a major source of concern for journalists because of the amount of death they have covered. While several respondents were medical reporters, almost every respondent mentioned their pandemic stories as some of the more difficult to cover. Subject D may have summed the issue best when discussing their work in hospitals. “One of the ER doctors that I spoke with here put it really well: He called the pandemic like a rolling mass-casualty event,” Subject D said. It would be worth further study on how the pandemic has specifically impacted journalists’ exposure to trauma news as entire newsrooms are drafted into coverage they may not be used to doing.

All three of the longtime veterans in the news industry involved in this study expressed that there was a clear change in attitudes regarding reporters’ mental health and mental health in general. While archaic tropes in the industry still reinforce a culture of silence, the three interviewees who had been in journalism for at least two decades noted there have been more conversations among staff in the past few years than over their entire career as journalists. “I don't think the stigma is as bad today as it was. It's really empowering to see that. It's okay if you have issues right now. You know, I think that helps everybody move above and beyond,” Subject F said. More study is needed to see if this is an actual industry trend and if opinions on mental health are changing industry wide.

APPENDIX A

1. During your work, how often did you come across homicides, car wrecks, or other news coverage that might be considered traumatic?
2. When covering these assignments, how do you prepare for them?
3. Is there any type of debrief when you return to your office?
4. What type of emotions have you experienced when covering a tragedy?
5. Following an event, did you ever feel increased stress? Anxiety?
6. How did you cope with those feelings?
7. Does your office or workplace have any guidelines for dealing with a troubling assignment?
8. Whom do you go to when feeling stressed after a tough assignment that has dealt with trauma? Why?
9. Would you feel comfortable talking to a manager or editor if you had problems? Why or why not?
10. Would you feel comfortable talking to a colleague over a manager? Why or why not?
11. Why do you think journalists don't typically reach out when they feel overwhelmed emotionally following a story?
12. Do you think there are resources that would make it easier for journalists to reach out? Which ones?

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