

# **Emotional Intelligence in Peace Journalism: A four-part paper**

## **Section One: Emotional Intelligence and Trauma in Journalism**

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### **Abstract**

This paper will examine the benefit of linking the two relatively new concepts of 'Emotional Intelligence' and 'Peace Journalism'. The aim is to explore how media people, media interest groups and the general public, together, can influence the current media culture through an increased awareness about the impact of media productions, reporting styles, journalistic conventions, and the risks affecting journalists today, including that of becoming traumatized through emotionally challenging media work. The objectives further include raising public awareness about the impact of media productions on populations in different contexts and the need for active public participation in the debate about the desirability of certain media productions in society. Views from the fields of psychology, trauma therapy, journalism, and peace and conflict studies will be presented and examined to ascertain how findings and experiences from these areas can be beneficially combined to work towards achieving these objectives in the media context.

### **Preface -- A Four-part Series on Emotional Intelligence in Journalism**

This series of four papers undertakes to examine the benefit of linking the two relatively new concepts of 'Emotional Intelligence' and 'Peace Journalism'. The aim is to explore how media people, media interest groups and the general public, together, can influence the current media culture through an increased awareness about the impact of media productions, reporting styles, journalistic conventions, and the risks affecting journalists today, including that of becoming traumatized through emotionally challenging media work.

In the debate around a more conscious approach regarding modern media responsibilities, the media corporations' conduct certainly presents a major factor. The limitations imposed by the expectations of media corporations have a direct effect on journalistic quality, and an indirect impact on audiences.

At the same time, the called-for changes in media consciousness, and the way in which it may impact on media corporate behaviour, is least likely to originate in the industry's decision making bodies. Hence the focus of this paper will be limited to those parties that are the most likely to effect change in media culture and in the quality of media productions. Corporate media politics will therefore not be touched on as a separate issue.

It will also be suggested that attending to media people's own intrinsic psychological needs will increasingly enable the media to operate in an emotionally congruent way, as well as how such an attitude will subsequently benefit its readers, viewers, listeners and those who they report on in the world.

This series will address four aspects of emotional intelligence in the media context in four separate sections:

Section one will deal with the need for a more aware communication on an intrapersonal level within each media professional. This includes the aspect of personal traumatization through working as a journalist, as well as assessing media people's potentially unconscious motivation for the choice of their profession.

This section will also look at a changing trend in the media culture towards an environment where such care and considerations towards journalists and other media people is considered a priority.

Section two will explore the evolving distinction between a 'war' and 'peace' journalistic orientation as a new and promising influence on the mainstream media. Either orientation influences the media, concerning, for example, whether newspaper or TV reporting practices tend to select news items according to their market-value on the day, or the degree to which they could improve the state of the world. One of the important recognized aspects in the new field of Peace Journalism is the need for journalists to familiarize themselves with conflict analysis tools for a more impact-conscious and responsible way of presenting world news in the media. A section on the physical risks to journalists is also included.

Section three will build on the previous two sections as a basis for outlining existing media alternatives and new media options, as well as the development of specific training for journalists that introduces the concept of emotional intelligence on an intrapersonal level (raising journalists' consciousness about their own motivation, risks and challenges involved in their work) in combination with teaching conflict analysis tools as part of a peace journalism-oriented training perspective.

Section four will explore the public's responsibility regarding media issues. In a free market society, public demand for certain types of media productions does have an impact on what the media will produce. The public's 'right to know what is happening in the world' will be put into perspective, particularly also in view of the consequences from certain media presentations on different under-age groups. This section will also include the conclusions for all four sections combined.

## **Introduction**

One of the relatively recent developments in the media world is the recognition of the traumatizing effects certain journalistic activities can have on the psyche of media people. Journalists are no less at risk of burnout and post traumatic stress disorder (PTSD) than are professionals in other high risk areas involving emotionally challenging work activities.

Around the world, workshops are now being offered for traumatized journalists. The main objective, as the author is aware from working with traumatized war refugees, is to assist individuals to find better ways of processing their traumatic experiences, come to terms with their current life reality and achieve better levels of functioning.

The recently developed concept of Emotional Intelligence will be introduced as an approach that aims to apply findings about PTSD and burnout from the areas of psychology, brain research and communication science to the professional media context. This involves helping people make the link between decisions made through an intellectual process and their underlying emotional processes, which often remain outside of people's consciousness. Through bringing any unconscious motivating forces into consciousness and through introducing a more heart-focused orientation into the profession, the aim is to develop a more emotionally intelligent approach to facing the increasing range of modern media challenges.

### **1.1. Emotional Intelligence and Trauma in Journalism**

'Emotional Intelligence' is an increasingly popular term of reference for an optimal psychological state within an individual and their interaction with their environment. The term is usually associated with author Daniel Goleman and his mid-1990 bestseller by the same name. Goleman promoted the idea of an 'EQ'<sup>1</sup> (for emotional intelligence) as a prerequisite for effectively using one's IQ. In Goleman's understanding 'EQ' stands for the capacity for compassion, empathy, motivation, self-awareness, altruism, appropriate response to, and distinction between, pain and pleasure, and to bringing energy back into flow within an individual.

As will be explained below, an intrinsic intelligence of the heart affects an individual's decision making at the level of the brain and moves them towards a state of internal wellbeing.<sup>2</sup> Research in neuroscience is

confirming that emotional and mental capacities are separate but interacting systems, each with its own unique type of intelligence. There are numerous and strong neural connections within the wiring of the brain between the emotional system and the IQ related system. Emotions, once experienced, become powerful motivators of future behaviour. In this way they have an effect on actions, attitudes and achievements. Goleman and others have pointed to neuro-scientific research results that show that the emotional brain is as involved in reasoning as the thinking brain.<sup>3</sup>

According to research on the EQ theory carried out by Doc Childre in the *Heart Math Institute*<sup>4</sup>, a high 'EQ' determines success in the face of life's challenges as much or more than a high IQ, notably in the context of physiologically detectable stress levels.

Since Goleman's coining of the term in the nineties, the concept of emotional intelligence has become increasingly popularised and has gained acceptance both in clinical psychological and academic environments. In Western society people often arrive at decisions in a very mentally-oriented way. Recently an increasing number of voices from psychological circles have been heard, in recognition of the importance of emotions in decision making, often quite outside of the individual's consciousness.<sup>5</sup> Two US psychologists, Wilson and Schooler, conducted experiments, the results of which suggest that the decisions and choices that people make spontaneously tend to be more appropriate for them rather than those arrived at on the basis of meticulous mental assessment processes<sup>6</sup>.

Albert Einstein is known to have arrived at his ground-breaking theories as a result of flashes of insight rather than linear thought processes, saying that "...everything that really counts is intuition".<sup>7</sup> and "*The intuitive spirit is a holy gift, and the rational mind its faithful servant. We have created a society in which the servant is honoured and the gift forgotten*" (author's translation).<sup>8</sup>

Sigmund Freud also advised against thinking very hard about important life decisions, and also argued in favour of spontaneous, intuitive decisions.<sup>9</sup> The founding directors of several multinational companies have admitted to often having based their important business decisions on intuitive perceptions<sup>10</sup>, and different authors refer to phenomena like *an inner voice*," *following one's heart*," *the other way of knowing*," or *"gut decisions"*.<sup>11</sup>

According to Dijksterhuis, a Dutch professor of psychology who specializes in "*automatic processes in social psychology*"<sup>12</sup>, intuition is understood as a mental process that is subconsciously informed by emotional impulses. When a thought process has been initiated the mind often continues to work on it outside of the person's awareness and the result is often far more influenced by an emotional input that the person has not consciously considered. Dijksterhuis advises to involve the conscious mind in minor decision making and leave the more complex, impactful decisions in life to the unconscious. He found that the unconscious is more likely to take into consideration those emotional aspects that are really important to the individual, whereas a purely mental decision making process tends to be unsustainable, leaving the decision-maker dissatisfied after some time, because the criteria that were closer to his heart hadn't been considered.

According to Doc Childre<sup>13</sup> the physiological heart has its own complex independent nervous system which he refers to as "*the brain in the heart*". Childre refers to a two-way communication system between heart and brain, whereby information is relayed back from the heart's intrinsic 'brain' and nervous system to the brain in the cranium. Childre refers to Lacey's findings, according to which the brain 'obeys' incoming messages from the heart, thus influencing a person's behaviour through messages from the heart. This research has also shown that the heart generates the strongest electromagnetic field produced by the body, and that a loving intention results in an exchange of electromagnetic energy with healing effects between individuals. Positive emotions such as love, care and appreciation have also been shown to increase the synchronization between the heart, brain and body within an individual.<sup>14</sup>

These findings have important implications in the media context, both in terms of the question of to what degree journalists communicate in an intra-personally resourceful way, but also in terms of the messages they convey subconsciously to their audiences through this same mechanism.

The following sections will explore how applying the research results and empirical evidence from this new psychological field can be beneficial in the media context, both on the level of the internal

communication within each individual journalist, as well as in terms of an emotionally intelligent approach to media work.

## 1.2. Emotional Trauma in Journalism – Evolving Perceptions

“...I was so much overcome by what I saw that I could not remain where the fight had been closest and deadliest. I longed to get away from it....It was now that the weight of the task I had accepted fell on my soul like lead.”

William Howard Russel <sup>15</sup>

This statement by Russel, the first ever acknowledged war correspondent, on his impressions of the first frontline combat situation he was covering is interesting in that it is the impression of a man who is not following any precedent or role model of other reporter's standards of expectation: he simply relates his natural human response to what he experienced. After Russel began his career as a war correspondent in 1841 it was to take nearly a century before it became acknowledged that combat situations had a psychologically traumatizing effect on all parties involved.

Virginia Woolf's 1925 novel *Mrs Dalloway* conveys a contemporary interpretation of the war-related traumatic stress effects in the post WWI era: Septimus Smith, an enlistee in WWI, had witnessed the death of a close friend and was “*far from showing any emotion or recognizing that here was the end of a friendship, congratulated himself upon feeling very little and very reasonably. The War had taught him*”.<sup>16</sup>

When the symptoms of, what today is called, Post Traumatic Stress Disorder (PTSD) were witnessed during WWI, they used to be referred to as ‘war neurosis’, ‘war shock’, or ‘shell shock’, or were often dismissed as a ‘malady of the will’ and interpreted as an unconscious attempt to escape from combat duty. Army doctors would sometimes administer surprise electric shock treatment, often with the person naked to enhance feelings of helplessness and dependence, and with the intention of returning the sufferers to the front at the earliest opportunity.<sup>17</sup>

By today's definition, a diagnosis of PTSD requires an extreme traumatic stressor involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threats to one's physical integrity; or witnessing an event that involves death, injury, or a threat to the physical integrity of another person, or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or close associate.<sup>18</sup>

Gordon Turnbull, a psychiatrist specializing in trauma treatment says that even today there still is a high degree of denial present in regard to PTSD as an actual condition and cites an article in a prominent British newspaper proclaiming that there was an exaggerated tendency to diagnose PTSD in traumatized Vietnam war veterans in the US; a claim which he considers completely unjustified.<sup>19</sup> Individuals in different contexts have also been accused of exaggerating traumatic stress symptoms in the hope for any secondary gains; these could include compensation payments or an avoidance of combat situations.

In spite of some examples of such attitudes persisting until today, generally speaking, the cultural perceptions and interpretations of war related trauma affecting combatants or any other individuals have dramatically changed over the last few decades. The improving insights into the effects of psychological trauma on the structural and biochemical workings of the human brain have been assisting the gradual departure from the earlier accusations. Today, traumatized individuals are less often confronted with assumptions about motives of malingering or ill-will than was previously the case. Based on a large amount of neurobiological research, the effects of trauma on the level of the brain are being increasingly appreciated in the medical and psychological professions.

Anatomically speaking, the neo-cortex (the outermost layer of the brain) is the most recent addition in the course of the brain's evolution: it is in charge of the capacity for thinking, reflection and compassion and is also informed through emotional input from the heart as described above.

The hippocampus, a structure within the thinking part of the brain, functions like a decoding device for information processing. Under traumatic stress, large amounts of adrenaline and cortisol, two major stress hormones, are released by the adrenal glands, and these actually damage the hippocampus. As a result, the hippocampus is bypassed and incoming traumatic information is stored in the amygdala, an almond-shaped structure in the center of the more primitive, sensory, emotional part of the brain, the limbic system. This information is often encoded in shattered and fragmented components without context. Such fragments of information can escape from the amygdala into the conscious, neocortical sections of the brain, resulting in what Titchener (1986) refers to as a “*leakage of anxiety*”.<sup>20</sup>

Under normal circumstances, the prefrontal cortex in the anatomically youngest section of the brain provides corrective responses to any anxious impulses from the amygdala region. Hence the prefrontal lobe of the neo-cortex is also referred to as the ‘Emotional Manager’. In the case of an irrational overreaction, additional information is required from the ‘Emotional Manager’ by way of a rational evaluation, thus providing the ‘impulse-control’ to the situation.<sup>21</sup>

One corrective intervention aims at ‘reeducating the emotional circuitry’ through a process of frequently building in new information from the prefrontal lobe. The effects of this process of ‘desensitization’ can be demonstrated with the assistance of positron emission tomogram (PET) imaging. This reprogramming of the emotional memory patterns through the formation of new pathways enables a more balanced, rational stimulus response.<sup>22</sup>

The stronger a person’s traumatic memory-imprints from a previous traumatic experience in the amygdala region are, the more they are going to determine the person’s automatic, reflex-like response to an even remotely similar experience in the present. This can result in a physiological panic-reaction even if the present situation is completely innocuous in comparison to the one experienced originally. When the limbic system reacts to traumatic memories without any effective, rational neo-cortical input the situation typically results in poor impulse control; this phenomenon is also referred to as “*emotional hijacking*”.<sup>23</sup>

In the case of traumatization, the neo-cortex aims to suppress the traumatic experiences through shutting the gates to the limbic system to avoid emotional overload. This happens in an attempt to secure the capacity for thinking and functioning, which could otherwise be impaired by the traumatizing experiences. According to Candice Pert, who is known for her biochemical research on the links between consciousness, mind, and body, the imprints from experienced trauma tend to stay ingrained on the cellular level in brain and body<sup>24</sup>, and are often referred to as “*the issues in the tissues*”. As a result, powerful feelings and physical sensations can be experienced, triggered off in an individual by unlikely situations, often without any immediately traceable origin. PTSD is characterized by a persistent re-experiencing of the traumatic event either in intrusive painful recollections (flashbacks) or in dreams, an avoidance of situations that trigger the recollection of trauma, the numbing of general responsiveness and signs of hyperarousal.

The imprints of past traumatic experiences trigger chemical responses that travel around in closed circuits of neuronal pathways within the limbic system. Alternatively they can result in physical symptoms and the person often has no awareness that they are affected by trapped emotional energy from traumatic experiences. In the case of trauma going back to childhood experiences, these memories have been suppressed long ago.

Until only a few years ago it was thought that the brain had no capacity to repair itself. Recent approaches to the treatment of psychological trauma take into account that there are in fact constant repair mechanisms in process. The brain has the capacity to generate new stem cells so that damaged sections in the hippocampus can be restored and normal thinking ability regained. Turnbull emphasizes that it is important not to interfere with this natural self-repairing mechanism and says that it takes about one month to restore the function of a hippocampus damaged by traumatic stress through the brain’s intrinsic healing capacity.<sup>25</sup>

Most data on PTSD has been derived from war veterans and can be generalized to non-combat-related PTSD. While exposure to trauma is a necessary condition for the development of PTSD, other factors, both of a biological and a psychological nature have been found to contribute to the development of

PTSD. Many research findings point to early childhood trauma, induced by a variety of situations, as a predisposing factor for PTSD, and this association can be reasonably assumed to apply equally to journalists who develop PTSD on the basis of very similar experiences to those experienced, for example, by individuals in combat situations.<sup>26</sup>

Along with all military personnel, journalists and particularly war correspondents are increasingly considered at risk of being emotionally traumatized as a result of experiencing and witnessing emotionally challenging situations in the course of their work. At the same time media professionals are less likely to be trained in recognizing the effects of traumatization on themselves and when they need to seek help.

Mariette van der Merwe points to the risk of burnout and vicarious trauma for journalists and press photographers, and says that media people can be as at risk from secondary or vicarious traumatization as trauma therapists are. Through a constant exposure to tragedies, images become encoded into traumatic memories. Many psychotraumatology experts use a metaphoric terminology to describe the memory effects of traumatic events: Van der Merve quotes Terr using such metaphors as “*a terrible, photographic memory shot*” or “*a snapshot of the event that freezes certain visual and sensory information into a lasting image*”.<sup>27</sup>

Van der Merve says that journalists “*must expect their own pain and trauma to be reactivated by the incidents they report. If they do not have such awareness and develop constructive coping strategies, they may slip into pathology with their own life scripts moving them into negative downward spirals*”.<sup>28</sup> She says that the person’s sense of objectivity may become ineffective, and that there may be “*long-term alterations in cognitive schemas or mental frameworks, beliefs and assumptions about self and others*”.<sup>29</sup>

Janoff-Bulman points to a condition of “*shattered assumptions*” that sometimes affects traumatized journalists, whereby their normal trust in the basic goodness of life changes into “*viewing the world as harsh and cruel, expecting the worst and having limited hope in human kindness*”.<sup>30</sup> According to Janoff-Bulman, this can be characterized by an attitude of negativity, of cynical and cruel humour, of being bored, disillusioned and lethargic,<sup>31</sup> and Meichenbaum points to the typical development of “*non-constructive coping skills*” that may lead to self-pity, passivity, personal neglect, withdrawal and avoidance.<sup>32</sup>

In some authors’ view, there is a lack of research on psychological trauma in the media-context in stark contrast to the abundant trauma literature on the emotional impact of combat on soldiers. Anthony Feinstein, a Canadian psychiatrist, who conducted a survey examining post-traumatic stress reactions among journalists says that prior to the publication of his research, “*in the absence of empirical data, eloquent anecdotal evidence remains the only source offering clues as to the mental well-being of war journalists*”.<sup>33</sup>

Feinstein’s study<sup>34</sup> included 140 war journalists from several major news organizations, investigating the extent and nature of psychopathology among reporters of news from the world’s (violent) conflict zones. The general finding from Feinstein’s research was a higher rate of psychopathology for war correspondents in comparison with a demographically matched comparison group of 107 non-war journalists. This finding was evidenced through higher rates of alcohol consumption, as well as of PTSD and major depression for this group.

The traumatizing experiences that had affected the journalists in the study group included being shot at, in some cases on several occasions; being wounded; being present when close colleagues were killed while they were working together on assignments; being subjected to mock executions; having bounties placed on their heads; surviving a plane crash while the pilots were killed, but being subsequently robbed by looting soldiers; as well as having close colleagues commit suicide.

The findings indicate that intrusive and hyper-arousal symptoms, i.e., unwanted recollections of specific events accompanied by hyper-vigilance and autonomic arousal, were more common than avoidance phenomena. The study exposed that the affected correspondents generally returned constantly to working in war zones as a sustained pattern over many years.

This behaviour seemed to be the result of certain maladaptive strategies as part of a typical “avoidance pattern” in PTSD, such as “My feelings about it were kind of numb” and “I felt as if it hadn’t happened”<sup>35</sup>. Evidently any seriously disturbing recollections of the witnessed events were being suppressed and unconsciously circumvented, resulting in the seemingly paradoxical response of seeking out further traumatizing exposure rather than staying away from reminders of the trauma. Feinstein suspects that the failure to refrain from further exposure to traumatizing scenes may have contributed to these individuals’ high lifetime prevalence of PTSD. He also notes that, in all but one case, PTSD developed after the journalists began working in war zones. In his view this suggests “*a strong connection between the dangers confronted in war and the development of psychopathology*”.<sup>36</sup>

Feinstein further notes that the study reveals a lifetime prevalence of PTSD in war journalists exceeding that reported for traumatized police officers and approximately equivalent to figures for combat veterans; with variations for different sources. In his view this comparative frame of reference is, at the same time, misleading, because the soldiers and policemen received extensive training to deal with violence, while the war journalists did not.

The study exposes similarly high figures for major depression in this group, which again were substantially higher than those for the comparison group. Apart from those general statistical figures, interviews with 20% of the group revealed that they were profoundly affected by their symptoms of PTSD. Common complaints mentioned by all individuals in the interviewed group, according to Feinstein, are: considerable social difficulties, e.g. an inability to adjust to life under normal conditions, a reluctance to mix with friends, troubled relationships, the use of alcohol as a hypnotic and embarrassing startle responses that led to social avoidance. In clinical terms they fulfilled the diagnostic criteria of symptoms that cause “*significant distress or impairment in social, occupational or other important areas of functioning*”.<sup>37</sup>

Feinstein points out that these results may be facilitated by “*a culture of silence on the part of the news bosses and the journalists themselves*”. In this context he asks: “*What motivates war journalists to return to situations of extreme peril, particularly when almost one in four have suffered from PTSD at some point in their careers?*”<sup>38</sup>

Feinstein assumes that the discouragement of dealing with issues of psychological stress in the profession, based on a view that “*to be a war journalist you had to have the ‘right stuff’*”<sup>39</sup>, is partly to blame. He says that many people in the profession suffered in silence due to a macho culture where admitting to emotional stress was highly frowned upon, and that some journalists (who may not have been suitable for it) had become war reporters in the belief that this would give them a high media profile.

He says that the deaths of several celebrated war journalists on assignment had a catalyzing effect for a reappraisal of such views. He also refers to, what he labels as, “*psychological naiveté*” on the part of some media professionals as a likely contributing cause for journalists repeatedly exposing themselves to trauma, despite the observable adverse effects on them.

His impression was that there was a belief running through the media that, as a profession, its members were somehow immune to the psychological effects of what they experienced. He says that some of the interviewed journalists were deeply affected by symptoms of PTSD and depression, but were quite unaware of suffering from a serious condition and, that while they could articulately list their symptoms and name their subjective distress, they had no idea that all this fitted the diagnosis of PTSD. He says that this denial of the reality around exposure to trauma and its likely psychological consequences may be “*a necessary, albeit distorted prerequisite allowing war journalists to venture repeatedly into situations of grave physical danger*”<sup>40</sup>.

Turnbull also refers to a “prevailing ignorance” about the impact of trauma in media circles and believes that bio-medical evidence and increasing knowledge about how the brain processes traumatic memories, and the fact that it does so in a recognizable way, will be instrumental in overcoming this ignorance.<sup>41</sup>

The overall conclusion from Feinstein's study is that war correspondents have significantly more psychiatric difficulties than journalists working in other areas, and that the lifetime prevalence rates for PTSD are similar to those for combat veterans; while other trauma-related psychological diagnoses are also higher than those for the general population.

The biochemical and physiological make-up of some individuals may lend itself to them engaging in high-risk behaviors and certain types of journalism are areas that will attract such individuals. The attraction to such adrenaline-stimulating activities is usually based on early-life experiences where such patterns became imprinted as acquired coping mechanisms, in physiological as well as emotional terms. An early familiarity with high levels of adrenaline output will lead the individual's system to perceive a state of high alert as the normal and desirable state of being. Hence a state of addiction to these internally released chemicals develops, which, in principle, is no different from addiction to externally administered substances.

This distortion of the, normally perceived, undesirability of stress on an intra-personal level also carries the inherent risk of a physiological burn-out situation due to exhaustion of the adrenal glands. Thus the individual may feel compelled to seek out high-risk situations in their professional life, also as a result of a physiological addiction-motivation. He may have no conscious awareness that he is really unconsciously re-enacting an old scenario of perceiving high blood-levels of stress hormones as consistent with survival-requirements.

A journalist perceiving the 'excitement' of engaging in high risk activities as part of his professional duties may subjectively be under the impression that he is just doing what is necessary, what he enjoys, or for experiencing the thrill of outdoing a competitor. In contrast, neuroscientific research findings suggest that situations resulting in an ever-continuing production of more stress hormones in order to maintain high output levels tend to be sought out by individuals with an acquired insensitivity to them. This behaviour is thought to be the result of an adopted, perceived coping mechanism due to previous stress.

Jack Laurence, a correspondent with 30 years experience of working for American television networks, conveys an impression of this attraction to high-risk situations: "*The experience to a young reporter is thrilling. You must all know that...several things happen in one's own psyche to enhance the experience.*"<sup>42</sup>

He says that, for a journalist, the attraction of becoming a war correspondent is very strong, in that such assignments attract great praise from colleagues and superiors and that job chances are much improved by covering a war. He says that this becomes an incentive, even for young journalists with no original intention of becoming war correspondents. According to him, even when correspondents have had considerably traumatizing experiences these weren't seen as deterrents, in spite of feeling "*so frightened you're paralysed, thinking you're about to die at any moment*".<sup>43</sup>

What this may mean for the psychological health of young inexperienced journalists is alluded to in Feinstein's study. Feinstein remarks that there was a perception among the individuals in the group that refusing dangerous assignments could have adverse consequences for their careers. He says that this was the case even in the absence of any direct pressure on journalists to cover news from conflict zones and that particularly inexperienced young journalists showed a tendency "*to accept every war story*", whereas only the more established war journalists felt that they could afford to be more selective in this regard.

While there is an awareness developing in media circles about these risks, David Loyn, known as an ardent critic of the concept of peace-journalism, has expressed equally critical views regarding this issue. Loyn says: "*The thing that makes me most angry about the tendentious arguments of the new orthodoxy of peace journalism is the claim that reporters who cover wars are somehow unhealthily addicted to violence, putting too much of it in front of the audience*".<sup>44</sup>

In contrast to Loyn's impressions, the *Survival Guide for Journalists* warns against "*a macho culture and a competitive urge for danger*" or an "*adrenaline high*"<sup>45</sup>, and reminds its readers that a journalist's job is



about telling, rather than “*becoming*”, the story.<sup>46</sup>

### 1.3. Emotional Traumatization Through Images

“Please don’t forget the backroom boys... I did...They were usually eighteen to twenty-five year-olds, ... sitting in a darkened lab in front of over-size screens, checking and cleaning images of often horrific situations, Rwanda, Afghanistan, 9-11 . . .”

Susannah Harrison<sup>47</sup>

The viewing of photographic images and other visual footage in the newsroom environment is another recently discovered risk area for psychological traumatization in a professional media context. In the same way as there used to be a prevailing culture of expecting war correspondents to remain emotionally unaffected by what they experienced in the course of their professional duties, so too did this trend dominate the news room environment.

Traumatization as a result of exposure to film footage can also occur and, as the viewer is not personally witnessing real-life trauma or atrocities, this is referred to as vicarious traumatization. The effects of vicarious traumatization have been widely acknowledged in psychological circles and are dealt with through the provision of appropriate support systems for counsellors.

In order to raise awareness about the serious nature of vicarious traumatization, the Dart Centre recommends thinking of the effects of traumatic images on people’s psyche “*as if they were radiation — with an objective, unavoidable impact on the body and psyche*”.<sup>48</sup> The Centre’s advice is to treat them like the necessary negative side-effects from a job that needs to be done, but with an awareness that exposure should be minimized. The analogy to the risks from nuclear radiation seems poignant in terms of the invisible, and often delayed, effects from both types of exposure. In the same way as the magnitude of the impact from radiation exposure on the physical body can take years to become fully apparent, the same applies in terms of the emotional scarring that can result from the unchecked exposure to traumatizing images.

There are specific aspects involved in traumatization through visual images. Mariette Van der Merwe comments on the “*psychotraumatic effects of the double exposure*”<sup>49</sup>, which press photographers typically deal with when they “*encode images in their traumatic memories while also encoding it on film*”<sup>50</sup>, as well as subsequently being exposed to these film images through the selection process.

Van der Merwe also says that due to the particular film techniques used in the shooting of trauma, more detail is picked up during traumatic events than the naked eye would pick up under ordinary circumstances.<sup>51</sup> Susannah Harrison, a psychotherapist with a background in photography, remembers the moment she became aware of the traumatizing effects of emotionally challenging visual footage. She remembers one young man, in a newsroom situation, coming up to her one day and asking her “*somewhat nervously*” if they “*really had to look at images like this*”, referring to a massacre in Rwanda, and it was then that she realized, for the first time, how this work affected the newsroom staff. She says that, subsequently, attempts were made to issue warnings about content but says she does not believe that the issue was truly resolved.<sup>52</sup>

One of the issues to be addressed, in affecting a ‘culture change’ in an environment of expected toughness, is the fact that different individuals can respond to the same exposure in very different ways. Those who have been exposed more than others can be affected even more by what they witness, through a kind of cumulative effect on their psyche and worn out defenses. When the viewed images correspond with traumatic experiences from earlier stages in life their defenses may be considerably less effective. This is in keeping with the findings of the earlier cited study, according to which there is a high correspondence between PTSD developing in war veterans, and other high-risk populations, and early childhood trauma.

In the age of terrorism and globalization, news room staff are faced with entirely new emotionally impacting situations. Gavin Rees, of the BBC,<sup>53</sup> points to the new genre of images released over the internet, where the intention of their dissemination constitutes a traumatizing and distressing factor in itself. He refers to videos, distributed via the internet, that show the beheadings of several hostages by Al Qaeda members and offers the important comment that what makes them more difficult than other traumatic footage is that this material is deliberately designed and produced to serve as propaganda. He makes this point very succinctly when he says: "*If somebody is being beheaded, one of the things that you as a viewer are doing is participating in the perpetrators' sense of power*".<sup>54</sup> He says that simply watching the contents feeds the perpetrators' perception that they have achieved their goal.

This latter aspect must be seen as an additional ingredient in the damaging effects that are generally associated with the viewing of emotionally challenging material. It also raises new questions regarding the controversial notion of 'the media's responsibility of informing the viewer'. The dilemma Rees points to in the hostage footage issue<sup>55</sup> lies in the notion of responsibility and ethical standards towards the subjects of the viewed material on the one hand, and the media's perceived responsibility to itself, and to its consumers, on the other hand. This issue will be further commented on in the conclusion.

Nael Shyoukhri, a distinguished Palestinian cameraman who has worked for the Reuters news agency in the West Bank since 1995, comments on the effect of traumatic images from his own experience. He says: "*(These) images stay with you sometimes for years, and not only days or weeks*".<sup>56</sup> Shyoukhri found shooting pictures of dead children and people particularly challenging when he had known them personally. His account conveys the challenging nature of his specific situation of working and living in the location where the violence is happening. He says that he often shoots pictures depicting violence affecting people he knew from before and clearly considers this an aggravating factor for himself in emotional terms. He says that his experience is the same as his colleagues in that "*the images and memories never stop coming into my mind*".<sup>57</sup> He says that these experiences often affect his mood, as well as his enjoyment of food, life, or sex. He also refers to a tendency of feeling the urge to stay away from people most of the time, which affects his family relationships.

Shyoukhri also mentions a commonly reported experience of feeling profound anger when others cannot appreciate his emotional situation and don't feel with him; or when the environment expects the affected person to deal with things "*as a normal person*"<sup>58</sup>, when this is not possible. He also describes his observation that the moment of shooting emotionally challenging pictures provides a certain protection from the impact of what is seen and that it is often not until the shooting is over that the awareness and emotional impact of the contents sets in.

This latter issue points to an important aspect distinguishing the impact on the cameraman from that of the people in the news room: while the cameraman may do the shooting in a state of incomplete awareness of the events around him, the newsroom people, who are selecting the footage, are potentially more immediately emotionally exposed to the incoming material. At the same time, as stated earlier, this state of relative 'unawareness', on the part of cameramen, can also constitute the insidious risk of not noticing high levels of accumulating traumatizing effects until a certain threshold is reached. Since the newsroom people are in a better position to retain a close link to 'everyday reality' they can stay more aware of the extreme nature of the material they are scanning. The journalist/cameraman, on the other hand, is 'embedded' in the context of a specific reality and is likely to perceive many situations relative to the current reality, rather than the one he knows in his normal life. There is evidently a difference, in this regard, between the situation for professionals like Shyoukhri and people coming in for the purpose of covering an event for a time.<sup>59</sup>

Van der Merwe points out that journalists are often omitted when target groups of traumatic situations are identified for debriefing and post-trauma counselling and instead, are frequently seen as a nuisance and targets for aggression by those they reported on.<sup>60</sup>

The best known media organization offering information, training and workshops for journalists relating to issues around trauma and violence, the Dart Centre for Journalism and Trauma<sup>61</sup> published a study in January, 2003, entitled *Photographers and Trauma*.<sup>62</sup> The study mentions that, despite the exposure to trauma, only a small percentage of employers tend to warn photographers about any emotional effects of the job, while physical hazards are more typically warned about, and only in about 25% of cases was counselling offered to staff.

#### 1.4. Prevention and Treatment of Emotional Trauma in Journalism

“There is an unwritten code among journalists that few, if any, assignments defy one’s capacity to take photographs, gather facts, or produce a story...that journalists should not acknowledge the emotional toll of covering a violent event or of a beat that repeatedly involves traumatic events.”

##### Simpson and Boggs<sup>63</sup>

Jack Laurence strongly emphasizes the effects of trauma on journalists, from his perspective as an experienced war correspondent, and strongly argues in favour of news organizations developing early intervention approaches through identifying professionals who show early signs of not coping, “*who are isolating or drinking too much or are tranquilizing themselves into a stupor*”<sup>64</sup>, particularly immediately after returning from a war zone.

He says that, in his experience, a phone call or an invitation from peers, friends dropping around unexpectedly and ‘just checking up’ on the at-risk person can be helpful acts. He says that, in his own experience, acts like these can be life-saving and that such measures should be introduced into media circles in the same way as they have become established in the police force and the military.

According to Jack Laurence, one forum for war correspondents to cope with the effects of psychological trauma is “*the scene in the bar at the hotel after the stories have all been filed*”.<sup>65</sup> This is a reference to the strength correspondents in war zones tend to gain from sharing their experiences with colleagues; often, as Laurence points out, under the influence of large amounts of alcohol. He refers to this behaviour as a way in which journalists have learned “*to take care of one another*”.<sup>66</sup> He perceives these get-togethers, late at night at the hotel bar, as “*a kind of natural way of reliving what happened to each of us in that day’s experience...*”<sup>67</sup>, and says that “*the story telling that goes on is a kind of therapy*”.<sup>68</sup>

These comments point to the need for war correspondents to find immediate forms of relief from the trauma they experience, particularly from peers whom they know have experienced similar things and have been under the same kind of stresses. While the environment and the circumstances Laurence describes may not pass as a perfect psychotherapy-setting, the stress-relieving effects of this spontaneous form of peer ‘co-counselling’ under war-zone conditions should not be dismissed particularly when other forms of immediate debriefing are unlikely to be available.

Van der Merwe also emphasizes the need for peer support groups, trusted friends or professional trauma therapy for journalists working in environments where they could be traumatized. She says that “*indirect exposure to the traumas of others clearly has a multidimensional effect on people to the extent that changes in world view and cognitive schemas may occur*”.<sup>69</sup> She also points to the need for journalists to be aware of how they are predisposed to traumatization through their own biographical life scripts and traumatic memory material, and how this may impact on them when they report on extreme events.

The earlier mentioned Dart Centre for Journalism and Trauma<sup>70</sup> sees itself as “*a global resource for journalists who cover trauma and violence*”.<sup>71</sup> Its director, Mark Brayne, describes the centre’s aim as “*shifting the culture*” and taking “*the mythology*” and “*the taboo*” out of addressing issues around the psychological consequences of (war-) correspondence. In the context of this new media culture, Brayne speaks of “*a legitimate awareness of the need for emotional intelligence and an emotional dimension to politics and to journalism and the human condition in the twenty-first century*”.<sup>72</sup>

As part of this process, Brayne sees the need for bridging the gap between the journalistic organisation and the psychological expert professions, and comments on the profession's reluctance to embrace such issues. The Dart Centre introduces questions such as what reporting war does "*to the reporter's soul*" pointing out that ten years ago such questions would not have been raised within the profession.

The aim of the centre's staff is to capitalize on the increasing trend for a culture shift and the acceptance of the need for trauma prevention and treatment in organizational environments, and for psychological counselling as an accepted aspect of the organization's running. The intention is to translate the experiences of other organizational environments into the media organizational context and treat them with the same degree of urgency as other security training for high-risk areas of journalism.

Training programmes in other organizations like the Marines, the police force or the fire brigade are being assessed for their suitability in the media organizational context. One approach under consideration for the prevention and management of trauma in journalists is the Marines' Trauma Risk Management (TRIM) programme<sup>73</sup> which is a peer-delivered six-stage model that aims for a pro-active as opposed to re-active response to traumatic incidents.

While PTSD is often mentioned in the context of traumatization affecting media people through their profession, there are other, related but not identical, conditions that fall into this category. Feinstein mentions major depression, substance abuse, and dissociative disorder as among the most common and disabling conditions and says that these findings correspond with documented responses to both man-made and natural disasters. He says that all the reports conclude that individuals "*will develop an array of psychopathology in response to situations of great personal danger*".<sup>74</sup>

Ian Palmer, who was an SAS doctor for four years in places like Rwanda and Bosnia, emphasizes that PTSD is not a psychotic illness, but that it is multi-factorial in its origins and genesis, and says it is "*an interaction between the individual, the event, the environment in which that event occurs...and the culture*"<sup>75</sup>, and he sees the meaning of the traumatizing event for an individual as more significant than the event itself.<sup>76</sup>

Hamper and Lewis mention Boyden (1994) as conveying the message that post-traumatic stress should be seen as a normal reaction to an abnormal event and that the use of medical labels like 'disorder' and 'syndrome' can lead to an understanding of trauma as a pathological state with an implied need to treat it as such.<sup>77</sup> Turnbull also emphasizes that physiological trauma responses and their resulting (temporary) impairment of mental functioning should not be regarded as a mental illness.<sup>78</sup>

A noteworthy characteristic of programmes such as the Marines' Trauma Risk Management (TRIM) programme is that they involve rather factual interviews applied in a before-, during- and after-the-event pattern, whereby the emotions are not delved into to a great extent. One psychologist indicates this departure from some of the popular approaches to trauma in these words: "*It's not about putting a box of tissues in the middle of the room and not leaving until everyone's been through it all*".<sup>79</sup>

This reflects the increasing recognition, in recent years, that certain forms of therapies can actually re-traumatize individuals through the way in which they address the experienced events. Most newer forms of trauma therapy aim for a resource oriented approach which aims to tap into residual well-functioning emotional response mechanisms, or into an intrinsic brain capacity for healing trauma.

Van der Merwe also stresses that such salutogenic approaches, those with a focus on post-traumatic growth, are now favoured over pathogenic models that emphasize sickness and symptoms.<sup>80</sup>

An example of the resource-oriented approaches would be the use of guided visualizations and some forms of transpersonal psychotherapy, as well as many spiritually oriented paths. The best researched form of trauma-therapy is EMDR (eye movement desensitization and reprocessing), which aims to assist the brain in its natural capacity to process traumatic experiences. This approach has often yielded

astonishing results, for example, in Vietnam war veterans whose internal processing capacity appeared to be 'blocked' in some form until forty years after the events. In some cases only a few sessions with this method were needed to 'unlock' the brain's natural processing capacity, with most of the disturbing chronic PTSD symptoms disappearing over a short period of time.<sup>81</sup>

Supportive treatments for trauma-related conditions include a wide range of body-focused therapies; such as physiotherapy, osteopathy and massage, as well as acupuncture, reflexology, yoga, meditation and tai chi. These therapies can assist in controlling the symptoms of distress typically experienced in PTSD, particularly in regard to symptoms of hyperarousal and a hypervigilant attitude, helping individuals to relax as well as to better manage stress. Anxiety-reducing medication and antidepressants are required in some cases.<sup>82</sup>

Van der Merve defines *Salutogenesis* as meaning "*learned resourcefulness, or the ability to use stressful situations for self-direction and growth*"<sup>83</sup> even through traumatic events. She refers to Meichenbaum's (1994) listing of salutogenic qualities, such as coping styles, self-efficacy, hardiness and an internal locus of control. She also quotes Matsakis, who sees post-trauma reactions as defenses to cope with abnormal experiences, and that "*getting better implies mobilizing inner healing and creative powers and binding up emotional wounds*".<sup>84</sup> In keeping with this emphasis, Matsakis favours the growth model for recovery from trauma, which works from an approach based on strengths; to the deficit model, which is based on the assumption that the traumatized person is "*sick, wrong or inadequate in some way*".<sup>85</sup>

Turnbull also refers to an increasingly acknowledged natural resilience in people and emphasizes that the focus in modern trauma management approaches is on resilience, and much less on the question of vulnerability. He says, "*...you can learn your way out of a trauma. It's not exactly a nice training exercise to go through, but it is something that can lead to a very positive outcome*".<sup>86</sup>

In a similar vein, Mark Brayne says about his work with psychotherapy, "*I'm very aware that trauma and distress can be turned into a profound experience of meaning*".<sup>87</sup>

Van der Merwe mentions "*seeing opportunities for positive media reporting*" and for media people to see their job "*...as opportunity to make a difference, i.e. to create awareness about negative and extreme life events*"<sup>88</sup>, as two important focus points within a salutogenic approach for media people recovering from vicarious traumatization.

George Couch comments on the challenges facing organizations that aim for a change of their culture; he says, "*It's taken the Metropolitan Police about five years to turn the culture round from a hard-bitten, cynical bunch of individuals dealing with murder and rape and everything else, to a group of individuals who now recognise that stress affects everybody*"<sup>89</sup>, and the Dart Centre mentions the Marine trauma assessment programme as an example for making the concept of addressing trauma issues in media circles acceptable to the profession<sup>90</sup>.

This potential for the cross-fertilization of organizational culture-change is captured in this appeal by the Dart Centre: "*If the Marines are OK with getting emotional and wobbly, who are we as hardened hacks to say that we're tougher than the Marines?*".<sup>91</sup>

Therapeutic modalities with entirely different orientations have also evolved in the meantime. The salutogenic approaches are based on a combination of empirical evidence and scientific research results about how the brain's trauma-processing capacity can be accessed. The transpersonal psychotherapies offer an added perspective through occasionally tapping into the realm of mystical experiences; sometimes providing a relieving sense of meaning for even highly traumatizing experiences. Such experiences can have the effect of putting an individual's traumatic event and its repercussion for their life into a formerly unthinkable, transcended perspective. Some of the above cited authors' statements hint at the dimension of such experiences in the context of healing the effects of PTSD.

An experienced spiritual dimension in the course of such healing processes often results in a state of connectedness between the mental and emotional aspects within the individual. This has been described in the first section as an intrapersonal emotionally intelligent state. The process of healing from trauma can lead an individual to experience a state of physiological and psychological resourcefulness that also defines emotional intelligence.

In this sense, a culture change within the media profession that aspires to prevent its members from being traumatized in the course of their work, and which is committed to supporting its professionals in the healing process from experienced trauma, contributes at the same time to a changing awareness of the effects of violence and trauma in society at large.

While Section one introduced the concept of Emotional Intelligence and discussed various emotionally challenging aspects and risks that journalists typically encounter in the context of their work, section two will look at other challenges journalists are faced with, and how they may be addressed.

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