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The Potential Consequences of Journalists' Exposure to Traumatic Experiences and Coping Strategies

Habercilik Alanında Çalışanların Travmatik Yaşantılara Maruziyetleriyle Oluşabilecek Sonuçlar ve Baş Etme Yöntemleri

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The Potential Consequences of Journalists' Exposure to Traumatic Experiences and Coping Strategies

Abstract

Individuals working in the field of journalism are at risk of encountering psychologically distressing events due to the inherent nature of their profession. Such exposures may occur directly, as in the case of field reporters witnessing traumatic incidents, or indirectly, for those working behind the scenes who are confronted with disturbing and uncensored images. Following exposure to these events, symptoms such as post-traumatic stress, depression, somatic complaints, heightened anxiety, and burnout may emerge. In addition, indirect exposure can lead to secondary traumatic symptoms or the more enduring phenomenon of vicarious trauma. These psychological consequences are shaped not only by individual vulnerability factors but also by journalism-specific conditions. Ethical dilemmas, organizational structures that suppress the expression of trauma-related difficulties, encourage participation in demanding assignments, and fail to provide sufficient mental health screenings play a significant role in this regard. Although the literature on trauma has expanded in fields such as healthcare and emergency response, research on journalism remains limited and fragmented. Building on this gap, the present review examines the traumatic experiences of journalists, the psychological challenges associated with these experiences, and coping strategies, within the framework of profession-specific and institutional stress factors. The study aims to provide a comprehensive perspective on journalists' post-traumatic experiences and to contribute to the literature at both theoretical and practical levels. The findings underscore the importance of developing trauma-sensitive organizational cultures and ensuring systematic mental health support within journalism.

Keywords: Post traumatic stress disorder, secondary trauma, burnout, journalism, coping

Habercilik Alanında Çalışanların Travmatik Yaşantılara Maruziyetleriyle Oluşabilecek Sonuçlar ve Baş Etme Yöntemleri

Öz

Habercilik alanında çalışanlar, mesleğin doğası gereği ruhsal açıdan zorlayıcı olaylarla karşılaşma riski altındadır. Bu olaylar, sahada görev yapan muhabirlerin doğrudan maruziyeti ile ortaya çıkabileceği gibi, haber merkezlerinde rahatsız edici görüntü ve içeriklerle çalışanların dolaylı maruziyeti şeklinde de yaşanabilmektedir. Travmatik olaylara maruz kalma sonrasında travma sonrası stres belirtileri, depresif ve somatik belirtiler, yoğun kaygı ve tükenmişlik görülebilmektedir. Ayrıca dolaylı travmatik maruziyetin ikincil travma belirtilerine veya daha kalıcı değişimlere işaret eden üstlenilmiş travmaya yol açabildiği bilinmektedir. Bu psikolojik sonuçlar bireysel risk faktörlerinin yanı sıra, haberciliğe özgü bazı koşullardan da etkilenmektedir. Etik ikilemler, travma sonrasında olumsuz etkilerin görünür kılınmasını baskılayan, zorlayıcı görevleri teşvik eden ve ruh sağlığı taramalarına yeterli önem vermeyen kurumsal yapılar bu bağlamda kritik rol oynamaktadır. Literatürde sağlık ve acil müdahale alanlarında travmaya ilişkin kapsamlı çalışmalar bulunmasına karşın, habercilikteki araştırmalar sınırlı ve dağınık kalmıştır. Bu boşluktan hareketle mevcut çalışmada, habercilerin travmatik deneyimlerine, bu deneyimlerle ilişkili psikolojik zorluklara ve baş etme önerilerine, alana özgü koşullar ve kurumsal stres faktörleri çerçevesinde yer verilmiştir. Çalışmanın amacı, habercilerin travma sonrası yaşantılarına bütüncül bir bakış sunarak hem teorik hem de pratik düzeyde literatüre katkı sağlamaktır. Elde edilen sonuçlar, kurum kültürünün travmaya duyarlı biçimde yeniden yapılandırılmasının ve sistematik ruh sağlığı desteğinin sağlanmasının önemini vurgulamaktadır.

Anahtar Kelimeler: Travma sonrası stres bozukluğu, ikincil travma, tükenmişlik, habercilik, baş etme

Introduction

Although the term "trauma" originates from the Latin word *traum*, meaning physical injury, it now also refers to psychological and emotional harm (Deutscher, 2007). Just as a physical injury disrupts the body's integrity through external intervention, psychological trauma poses a significant threat to an individual's sense of wholeness. Traumatic experiences involve threats to an individual's physical integrity and life and are characterized by unpredictability, uncontrollability, and vulnerability, unlike daily stressors, which have higher probability or

manageability (Saari and Silver, 2005). This traumatic impact can result from directly experiencing a threat, witnessing such events in person, or being repeatedly exposed to their disturbing details due to professional responsibilities (American Psychiatric Association, 2013). Most people experience at least one traumatic experience during their lifetime, and the lifetime prevalence of trauma has been found to be 70.4% as a result of surveys conducted in many countries (Benjet, 2016).

Traumatic events are classified based on their origin into 'natural' and 'man-made' categories (American Psychiatric Association, 2000). Man-made events are further divided into those 'intentionally caused by humans' and those 'accidentally caused by humans'. Naturally occurring traumatic experiences include life-threatening natural events such as diseases, earthquakes, floods, hurricanes, and tsunamis, while man-made traumatic experiences include intentional events such as war, torture, sexual assault, physical assault, terrorism, genocide, detention, or accidental events such as fire, nuclear accident, work accident, traffic/ship/aircraft accident (American Psychiatric Association, 2000). Research has shown that the psychological effects of intentionally caused man-made traumatic events tend to be more severe and long-lasting (Breslau and Davis, 1987; Thomas, 2021). In addition to these distinctions, both naturally occurring and man-made traumatic experiences can have profound impacts on individuals but also have the potential to affect large human collectives. Traumatic experiences that affect large numbers of people are referred to as 'collective trauma' (Luszczynska et al., 2009).

Stress responses to these challenging life events are considered normal reactions to abnormal situations that significantly disrupt an individual's life. These responses are typically observed across four primary dimensions: emotional, cognitive, physical, and behavioral/social. Emotionally, individuals may experience feelings of insecurity, anxiety or fear, sadness, shock or numbness, anger, guilt or shame, and hopelessness. Cognitive symptoms often include loss of concentration, intrusive thoughts, persistent mental preoccupation, forgetfulness, confusion, and decreased situational awareness. Physical reactions may manifest as muscle tension, extreme fatigue, sleep disturbances, and changes in appetite. On a behavioral and social level, individuals may exhibit avoidance, increased use of alcohol or substances, a desire for isolation, communication difficulties, and interpersonal conflict. Symptoms of Post-Traumatic Stress Disorder (PTSD), which occurs as a result of direct or indirect exposure to a traumatic event and can be understood within the context of these stress responses, are diagnostically characterized by four main symptom clusters: intrusion, avoidance, alterations in arousal and reactivity, and negative alterations in cognition and mood (American Psychiatric Association, 2013). Some of the post-traumatic stress symptoms, when lasting for a minimum of three days and up to a maximum of one month, and if not better explained by another psychological disorder, may indicate a diagnosis of Acute Stress Disorder (ASD) (American Psychiatric Association, 2013). On the other hand, a diagnosis of PTSD is considered if these symptoms persist for at least one month and cause significant distress or clinically significant impairment in the individual's social life (American Psychiatric Association, 2013).

The symptoms that arise following a traumatic event are not limited to ASD and PTSD. Secondary traumatic stress, vicarious trauma, and burnout are concepts that refer to the

indirect effects of trauma, particularly emerging because of exposure to unpleasant details of the event or contact with victims due to occupational responsibility.

Employees who interact with trauma victims or are exposed to distressing details of traumatic events due to their work may encounter various psychological difficulties. Often, the post-traumatic stress symptoms observed in those working with trauma victims are referred to as "secondary traumatic stress" (Figley, 1995). Additionally, to explain the more enduring changes that may occur in the cognitive schemas and beliefs of these employees, the concept of "vicarious trauma" is introduced (McCann and Pearlman, 1990). Furthermore, the concept of "burnout" is emphasized to address the occupational stress arising from prolonged exposure to emotionally burdensome situations (Maslach and Jackson, 1981).

Secondary traumatic stress can arise because of indirect exposure to trauma. The stress experienced by those working with individuals who have been physically or psychologically harmed is often viewed as a natural consequence of gaining information about a traumatic event affecting another person (Figley, 1995). It is suggested that the feelings of sympathy, sadness, and compassion felt towards the individuals exposed to the traumatic event or the guilt of not being able to help them may be the factors contributing to secondary traumatic stress (Figley 1995). Symptoms of secondary traumatic stress encompass experiences like those of PTSD, such as the involuntary recollection of distressing details related to the traumatic event, nightmares, avoidance of reminders associated with the event, sleep disturbances, difficulties with concentration, and a heightened state of alertness (Figley, 1995). It is emphasized that these secondary traumatic stress reactions can emerge even from a single encounter with a trauma victim, potentially disrupting the professional functionality, objectivity, decision-making abilities, social relationships, and personal lives of the employees involved (Figley, 1995).

Vicarious trauma, which is viewed as a natural and unavoidable consequence of engaging with the details of a traumatic event and empathizing with the individual who has experienced it, is suggested to emerge cumulatively over time. It encompasses the changes in cognitive schemas and beliefs that arise from employees frequently interacting with trauma victims within the scope of their professional responsibilities (Pearlman and Saakvitne, 1995). Vicarious trauma is proposed to manifest not only in mental health professionals but also among various other occupational groups, including healthcare workers, firefighters, police officers, lawyers, social service practitioners, and journalists, who engage in empathic interactions with trauma victims (Pearlman and Saakvitne, 1995). As a result of vicarious trauma, individuals may experience issues similar to the symptoms of secondary traumatic stress. Furthermore, as in secondary traumatic stress, the extent of identification with the victim is a prominent factor in the development of vicarious trauma. On the other hand, while secondary traumatic stress encompasses acute stress symptoms associated with indirectly experienced traumas, vicarious trauma relates to the more cumulative and enduring changes observed in cognitive schemas and beliefs over time (Pearlman and Saakvitne, 1995).

Employees in emotionally charged environments, including those that involve aiding others, often experience intense stress, which can gradually lead to emotionally debilitating effects and culminate in burnout (Maslach and Jackson, 1981). In addition to the emotional aspect of the job, negative experiences in the workplace, heavy workloads, time pressures, and

stressful working conditions are also believed to contribute to the emergence of burnout (Maslach, 2001). While experiencing burnout, which encompasses emotions such as anger, shame, fear, sadness, and helplessness, the uncertainty and frustration felt may gradually increase with the inability to process these emotions and solve the stressful conditions in which they exist (Maslach and Jackson, 1981). This can lead to problems at both the individual and organizational levels. Accordingly, it can result in a range of issues including physical ailments, cognitive impairments, chronic fatigue, insomnia, substance use, difficulties in family relationships, decreased job satisfaction, a decline in the quality of services provided, and ultimately, resignation (Maslach et al., 2001). The core symptoms that characterize burnout are outlined by Maslach and Jackson (1981) in three primary dimensions: Emotional exhaustion, defined as the feeling of having no emotional resources left to offer others due to excessive strain on one's emotional reserves; desensitization, referring to a sense of numbness and disconnection from various aspects of the job; and a decrease in self-efficacy, involving negative evaluations of self and work.

Violent or disaster-related news tends to attract more attention in the media (Olajide Talabi et al., 2024). As a result, those working in journalism—such as war correspondents, photojournalists, reporters, editors, producers, and other staff involved in the news production process—may either prefer covering such stories or, unwillingly, find themselves engaging with them (Keats and Buchanan, 2013). Consequently, journalists are frequently exposed to these threatening events either by experiencing them directly in their line of duty, witnessing them firsthand, or encountering disturbing content through media or interactions with victims (Pyeovich et al., 2003; Buchanan and Keats, 2011; MacDonald et al., 2017). This exposure can lead to post-traumatic stress symptoms, often accompanied by depression, substance use, and anxiety (Feinstein et al., 2014). Moreover, journalists suffer from a high rate of Posttraumatic Stress Disorder (PTSD) (Newman et al., 2003), and some studies even show that this rate exceeds the rate in the general population (Aoki et al., 2013).

Research on the high levels of trauma exposure and resulting stress symptoms among journalists has increased significantly over the past two decades (Hughes et al., 2021; Osmann et al., 2021). However, compared to professionals such as military, police, firefighters, and emergency medical personnel who have access to more training and institutional support in the field of trauma, journalists still have inadequate coping resources and continue to receive much less support (Buchanan and Keats, 2011). As Feinstein et al. (2014) emphasize, good journalism relies on the well-being of healthy journalists. Thus, there is a growing need for programs that provide resources for journalists and consider individual and institutional factors specific to this field to holistically address coping strategies for stress symptoms (Osmann et al., 2021).

This review aims to examine the trauma exposure of journalism professionals, the psychological consequences of this exposure, and the unique challenges journalist faces. It also seeks to offer coping strategies and address the role of institutional factors in supporting journalists. By doing so, it aims to contribute a comprehensive resource for developing more supportive working conditions and implementing preventive intervention or trauma education programs tailored to the demands of the field.

1. Method

This study adopts a qualitative approach based on a comprehensive review of existing literature and theoretical frameworks relevant to trauma and journalism. The methodology is structured around two main objectives: (1) to synthesize existing research on journalists' exposure to traumatic events and their psychological consequences, and (2) to propose evidence-based recommendations from a clinical psychology perspective to support journalists in coping with these challenges.

The literature review focused on peer-reviewed journal articles, books, and reports published in the fields of journalism studies, trauma psychology, and occupational health. Sources were identified through systematic searches in academic databases such as PubMed, PsycINFO, and Google Scholar, using keywords like "journalism and trauma", "psychological impact on journalists", "coping strategies of journalist", "journalism and secondary trauma", "burnout in journalism", and "occupational stress in media workers". Articles were selected based on their relevance, recency, and contribution to understanding the psychological challenges faced by journalists.

To ensure a clinical perspective, the study incorporates insights from established psychological theories, including post-traumatic stress frameworks, resilience-building strategies, and trauma-informed care principles. Recommendations were developed through an integrative process, combining findings from the literature with best practices in mental health support for professionals exposed to high-stress environments.

The analysis is descriptive and interpretive, aimed at identifying recurring themes, gaps in the literature, and practical implications for supporting journalists. While the study does not involve empirical data collection, it offers a conceptual foundation for future empirical research and provides actionable insights for media organizations, policymakers, and mental health professionals.

2. Results

2.1. Journalism and Trauma

2.1.1. Direct or Indirect Exposure of Journalists to Traumatic Events

Individuals working in the field of journalism may encounter a variety of traumatic situations during their duties, including vehicle accidents, natural disasters, fires, murders, sexual or physical assaults, and warfare. They may directly witness these events or be continually exposed to the disturbing details of such incidents during the reporting process. In a study involving 906 American journalists, it was found that 78.7% of the participants reported covering at least one traumatic experience at the scene, while 53.8% had reported on a horrific scene. Moreover, 36.1% had to share the information about the death with the relatives of the victim, 22.4% were assigned to identify the victim or perpetrator, 20.2% witnessed someone being injured or killed during their work, and 6.1% reported being personally wounded while on duty (Pyeovich et al., 2003).

Another study conducted with 115 journalists indicated that 62.6% had worked at a traumatic event scene within the past year, with 53.9% participating in several traumatic assignments within just one week. Furthermore, 34.8% had witnessed someone being injured while on duty, 20.9% had informed a family member or friend about a death, and 8.7% reported being injured during their assignments (Dadouch and Lilly, 2021). Similarly, in a study surveyed 62 journalists working as reporters, photojournalists, editors, and editors-

in-chief in many parts of Türkiye, it was found that approximately 80% of the participants had witnessed someone being injured or killed while on duty and about 70% had been exposed to several such traumatic incidents in the same week (Çevik 2019). Consistent with these findings, another study revealed that 79.6% of journalists had reported at least one traumatic experience at the scene. Moreover, the most common incidents that journalists covered were fires, automobile accidents, homicides, and natural disasters (Smith et al., 2018).

Along with these similar findings regarding journalists' exposure to traumatic experiences, it appears that the type of traumatic events encountered may also vary depending on the country. Accordingly, in a study conducted in Pakistan, it was found that 63.3% of the journalists had covered militant activities, 77.1% had covered bomb or suicide blast incidents, and 33.1% reported having a colleague whom they believed had been killed due to work-related circumstances (Koster et al., 2022). Similarly, another study undertaken in Pakistan revealed that journalists were most frequently exposed to trauma related to being affected by war (Shah et al., 2022). On the other hand, a study carried out with Korean journalists revealed that, as part of their professional duties, 73.41% had been exposed to fire incidents, 66.47% had encountered automobile accidents, 66.47% had reported on railroad and subway accidents, and 62.84% had covered suicide cases (Lee et al., 2018).

Studies highlighting exposure to multiple traumatic events among journalists are also noteworthy. For instance, one study indicated that nearly all participating journalists had encountered at least four traumatic situations (Weidmann et al., 2008). Moreover, they are exposed to multiple traumatic situations even within a week (Çevik, 2019; Dadouch and Lilly, 2021; Lee et al., 2018; Shah et al., 2024). Given that cumulative trauma is associated with more negative psychological outcomes (Briere et al., 2016), it would be important to conduct further research on how this cumulative exposure impacts journalists' reactions to subsequent traumatic exposures and their coping strategies. In addition, there is a need to address this cumulative exposure in the context of vicarious trauma in workers who are routinely exposed to horrific content in the back end of the news process.

2.1.2. Psychological Consequences of Journalists' Exposure to Traumatic Events

While many media professionals demonstrate significant resilience in the face of horror, studies indicate that they may be more vulnerable to secondary traumatic stress, burnout, and post-traumatic stress disorder (PTSD) than the general population due to both the nature of their work and the training they receive in this regard may be insufficient (Dadouch and Lilly, 2021). Accordingly, it has been found that 89% of journalists in Türkiye did not take a journalism course on violence at the university, 71% did not receive any training on violence in the organization where they work, and about 70% of them have an average level of burnout and secondary traumatic stress (Çevik 2019). Similarly, A qualitative study involving Canadian journalists and photojournalists who had worked with victims of individual or collective trauma revealed that the vast majority exhibited signs of secondary traumatic stress and burnout (Keats and Buchanan, 2013).

Furthermore, a study by Feinstein et al. (2002) found that 28.6% of war correspondents developed PTSD at some point during their average 15-year careers. Another study conducted in the United States, which included a more diverse group of journalists such as newspaper reporters, editors, TV reporters, and TV producers, reported a PTSD prevalence

of 9.7% (Smith et al., 2018). Additionally, a study involving photojournalists revealed that 98% of participants had encountered traumatic events, with approximately 7% meeting the diagnostic criteria for PTSD (Newman et al., 2003). The findings suggested that the number of potentially traumatic assignments, personal trauma history, and low social support could significantly influence the level of traumatic stress symptoms among photojournalists. Moreover, a study conducted with Korean journalists found that 43.2% of participants met the criteria for PTSD, suggesting that prevalence rates can be substantially higher in certain populations (Lee et al., 2018).

It has also been observed that one of the factors that may influence these variable but high PTSD rates is the level of professional experience. Indeed, it has been reported that journalists with less professional experience have both a higher prevalence of PTSD and exhibit more severe PTSD symptoms (Shah et al., 2024). Similarly, lower levels of age and work experience have been shown to be associated with higher levels of secondary traumatic stress symptoms (Xiong and Liao, 2024). In addition, being female and being single have also been found to be associated with experiencing more negative psychological outcomes (Feinstein and Osmani, 2024; Malik et al., 2022). Finally, the type of trauma experienced during assignments has also been identified as an important factor. Specifically, traumatic experiences associated with being present in war zones have been found to be linked to higher levels of PTSD symptoms (Williams and Cartwright, 2021).

A study involving journalists in Pakistan reported that the majority of participants exhibited symptoms of agitation, difficulty concentrating, and intense anxiety following traumatic events (Siddiqua and Iqbal, 2024). Similarly, another study conducted with journalists in Australia found that those who had reported on traumatic events within the past three years experienced significantly higher levels of physical complaints, anxiety, sleep problems, and social dysfunction compared to those who had not (McMahon, 2001). In addition, during the study period, participating journalists displayed intrusive thoughts, avoidance behaviors, and depression symptoms that, while diminishing over time, remained higher than those of the group that did not report on traumatic events even after three years (McMahon, 2001). These findings on long-term post-traumatic stress symptoms were similarly revealed in interviews with 8 local journalists who worked during the 1999 Marmara Earthquake (Şafak, 2023). With this qualitative research, it was observed that journalists who were actively working during the disaster still showed some post-traumatic stress symptoms such as flashbacks, sleep disorder, nightmares, intrusive memories, and alertness even 23 years later (Şafak, 2023).

Research examining the psychological effects of exposure to disturbing media imagery is also present in the literature. For instance, a study involving personnel from the Federal Law Enforcement Center indicated that exposure to disturbing images related to child pornography in the course of their work might be associated with increased secondary traumatic stress and burnout (Perez et al., 2010). Specifically, it was found that 18% of those working with disturbing imagery exhibited high levels of secondary traumatic stress, while another 18% displayed moderate levels, 54% reported being in the exhaustion component of burnout, and 18% expressed low professional competency. Similar results were expected among journalists exposed to such gruesome content and several studies have been conducted in this direction. It was found that 80% of employees working with violent images

on television reported recurrent intrusive thoughts (Weidmann and Papsdorf, 2010). In addition, another study with journalists suggested that uncensored and disturbing photographs or videos sent to newsrooms by the public could lead to negative psychological outcomes for those reviewing the materials. It was found that the frequency of indirect exposure to such content predicted levels of anxiety, depression, alcohol consumption, and PTSD symptoms (Feinstein et al., 2014). Moreover, it has been suggested that the secondary traumatic stress symptoms of those working with disturbing media may correlate with the duration of time spent working with such material and the elapsed time since their first exposure (Perez et al., 2010). These findings support Stevenson's (2007) conclusions that exposure to disturbing imagery can evoke emotional distress in almost all employees and that the severity of such distress can escalate depending on the duration and intensity of exposure. In addition, in this study, it was reported that intrusive thoughts and images related to the exposed media and awareness of the inhumanity in the world increased. (Stevenson, 2007). This finding, which reflects a changing perspective on the world and humanity, is supported by Pinchevski (2016), who argues that media violence affects the attitudes, beliefs, and social behavior of individuals in society, and it can lead to not only emotional but also clinical harm. From this point of view, similar to those who directly experienced or witnessed the traumatic event, it was revealed that the assumptions that maintain healthy functioning in the world (Janoff-Bulmann, 1989) can be shaken in those who work with disturbing media (Pyeovich et al., 2003) and supportive results were obtained for the concept of vicarious trauma.

2.1.3. The Impact of Journalism-Specific Conditions on Psychological Outcomes

Journalists interacting with victims often experience various anxieties while reporting on challenging life events (Maxson, 2000). These include: (A) the editors' insufficient sensitivity to the work performed by the reporter and the victim's privacy; (B) the dilemma between respecting the victim's privacy and the need to obtain and report the story; and (C) conveying to the victim that they are being pressured or intervened upon. When considering these job-specific factors collectively, it becomes evident that journalists must prioritize the welfare of the interviewee both during the interview and in the preparation of the news (Maxson, 2000), which is believed to generate significant stress.

Moreover, other studies have highlighted ethical dilemmas reflecting conflicts between journalists' job descriptions, their responsibilities, and their values. For instance, Idås (2019) identified that the ethical dilemmas faced by journalists in challenging assignments represent the most significant peri-traumatic risk factor for PTSD (cited in Idås et al., 2019). This finding is reinforced by another study indicating a correlation between experiencing more ethical dilemmas and higher levels of PTSD (Idås et al., 2019). Additionally, ethical dilemmas, such as witnessing traumatic events without having a direct helping role, the pressure to make an event more sensational, or the obligation to press victims for information, may also trigger feelings of guilt among journalists. This guilt is associated with longer durations of exposure to traumatic situations, which can result in more pronounced post-traumatic stress symptoms (Browne et al., 2012).

Various recommendations have been proposed to help journalists who regularly face these ethical dilemmas manage them more effectively. These include experienced journalists sharing their experiences of handling ethical dilemmas encountered in previous assignments

with younger journalists to better cope with traumatic situations and symptoms, along with the need for journalism programs to address these dilemmas and crises within the framework of trauma (Idås et al., 2019). Furthermore, developing comprehensive training programs tailored for journalists regarding trauma and interviews with victims is also suggested (Maxson, 2000).

In addition to ethical dilemmas, individuals working in journalism may also face stressful living conditions inherent to their profession. For journalists who live and work in the same environment, these conditions may include experiencing traumatic events while simultaneously having an increased perception of threats resulting from their work, along with being continuously exposed to stressors that threaten their lives outside of their professional duties. This threat encompasses living within uncertainty and insecurity, receiving constant derogatory comments, and facing intimidation and harassment, which can escalate to aggression resulting in injuries, or potentially putting their families at risk (Feinstein, 2013; Löfgren Nilsson and Örnebring, 2016; Lee et al., 2018; Charles, 2022; Koster et al., 2022). With this ongoing threat, these individuals may have higher levels of PTSD and depression. (Feinstein, 2012). Both studies reporting that journalists who are threatened and followed experience higher levels of PTSD, depression, and anxiety symptoms (Koster et al., 2022) and the Cognitive Model (Ehlers and Clark, 2000), which suggests that a persistent sense of threat may lead to persistent PTSD, highlight the importance of considering such living conditions in institutional functioning and treatment planning.

2.1.4. Coping with Post-Traumatic Stress for Journalists

Understanding stress responses to traumatic experiences is crucial for developing effective coping strategies. Allowing oneself the time to process and recover from a stressor that disrupts integrity is a significant first step in coping. Symptoms of post-traumatic stress can fluctuate over time; however, there is a tendency for these symptoms to become chronic. In such cases, it will be important for individuals to take appropriate measures and consult mental health professionals when necessary.

To cope with the negative effects of traumatic experiences, activating one's own resources and enhancing functionality is vital. Research consistently suggests a positive relationship between social support and psychological well-being in this context. Specifically, social support is believed to act as a buffer against the harmful effects of stressful situations, facilitating adaptation to these circumstances and thereby easing coping (Cohen and Wills, 1985). Supporting this, a study by Perez et al. (2010) found that participants working with disturbing media, who perceived support from their loved ones, exhibited lower levels of secondary traumatic stress and burnout while reporting higher levels of professional competency. In addition, when looking at the participants' self-reported coping methods, 36% stated that social support resources such as family, friends, and colleagues were their primary coping resources, 25% said that hobbies were their primary coping resources, and many participants reported humor as an important coping resource, emphasizing its importance, especially in the work environment (Perez et al., 2010). Another study also revealed that receiving social support from colleagues, family, and friends, as well as the use of problem-focused coping strategies based on the belief that the traumatic experienced through their work ultimately contribute to making the world a better place, were common

and found to be beneficial for journalists (Obermaier et al., 2023). Similarly with these findings, another study also reported that journalists primarily used coping strategies such as acceptance, emotional support, and humor (Shah et al., 2024). Other functional coping strategies used by journalists may include engaging in physical activities, believing their work benefits society, and employing strategies such as journaling or writing for emotional release.

In contrast, maladaptive coping mechanisms reported by this group included avoidant behaviors at work, overworking, substance use, and attempts to manage emotions by avoiding discussions about traumatic events (Buchanan and Keats, 2011; Seely, 2019). Accordingly, these dysfunctional coping strategies and more negative beliefs were associated with PTSD symptoms (Lee et al., 2018). Additionally, the use of active emotional and avoidant emotional coping strategies was found to predict more severe PTSD symptoms (Shah et al., 2022). Moreover, it has been suggested that the use of memory suppression strategies related to traumatic experiences may further hinder coping with trauma in the long term (Obermaier et al., 2023).

In conclusion, a series of recommendations that can facilitate coping with traumatic stress include: Meeting basic physiological and safety needs (through personal and organizational support), returning to routine or creating a new routine as much as possible, utilizing social support (from family, friends, and colleagues), engaging in emotional expression, increasing physical activity (such as sports or exercise). In addition to the factors that contribute to effective coping, certain behaviors should be avoided when dealing with traumatic stress: Using alcohol or substances, taking medication without medical supervision, avoiding social relationships, suppressing emotional expression, refusing to talk about the event at all, focusing exclusively on the traumatic event. By following these guidelines, journalists can better manage their work's emotional and psychological challenges. Recognizing the importance of self-care, seeking professional support when needed, and utilizing functional coping strategies can help mitigate the impact of secondary traumatic stress, vicarious trauma, burnout, and PTSD in journalism.

2.1.5. The Role of Organizational Factors in Coping with Post-Traumatic Stress

In general, there is a culture of journalism in which journalists see it as a sign of weakness to show the negative effects that come with exposure to traumatic situations and therefore suppress their symptoms as opposed to seeking help; they prefer to participate more in these assignments, ignoring their resilience factors and conditions, because news stories involving traumatic situations, war or conflict are more appreciated; or they have to succumb to pressures that they should participate in these difficult assignments (Keats and Buchanan, 2013). Indeed, a study conducted with journalists in Türkiye found that 67% of respondents were not interested in seeking therapy for traumatic experiences they had experienced in the course of their work (Çevik, 2019). When the reasons for this situation were examined, some participants explained that they did not need such help. In contrast, others said that this kind of assistance, also related to the dynamics of the organization, was not appropriate for their profession, that it could create the impression that they were not a good journalist, and that they would therefore hesitate to disclose this situation to their colleagues. Similarly, in another study conducted in Türkiye, it was revealed that journalists frequently emphasized the need to remain calm during trauma or to be accustomed to these images by accepting violence and trauma as a part of the profession (Şafak, 2023). All of this research reaffirms

the existence of a journalistic culture that tends to normalize or ignore traumatic experiences, which is particularly important given that such attitudes are thought to be associated with greater PTSD symptoms (Lee et al., 2018).

Moreover, other organizational stressors can also predict the severity of PTSD symptoms after traumatic exposure (Smith et al., 2018). Indeed, a study proposed that if organizations fail to take necessary steps to mitigate the effects of trauma or reduce the likelihood of such experiences, stress among employees could increase (Dadouch and Lilly, 2021). In another study, limited organizational support was identified as a significant factor contributing to the reluctance to seek therapy for psychological consequences stemming from work-related trauma (Siddiqua and Iqbal, 2024). These highlights the importance of openly discussing the challenging aspects of the profession within the organizational context, normalizing concerns related to symptoms, and facilitating referrals to treatment resources when necessary (Dadouch and Lilly, 2021).

Considering all these findings related to organizational factors, it seems that an effective approach to dealing with traumatic stress in journalism should include a supportive environment that acknowledges the emotional challenges of the profession. To this end, regular psychological screenings should be conducted, tasks should be assigned according to the needs of employees, and access to mental health professionals should be provided when necessary. Such an approach, which addresses institutional expectations and encourages the expression of emotional challenges, is expected to improve journalists' well-being and resilience.

Conclusion

Research on the psychological health of journalists has predominantly focused on the stress and traumatic effects associated with the nature of their work (Osman, 2021). These studies indicate that journalists frequently encounter traumatic events related to their duties. Moreover, it is revealed that exposure to this traumatic experience can be experienced directly by those working in the field as well as indirectly by those working in the background with news-related content and images. Consequently, journalists may exhibit symptoms of post-traumatic stress, while also facing issues such as alcohol use, depressive symptoms, and heightened anxiety (Feinstein et al., 2014; Feinstein, 2012). Additionally, due to indirect exposure, secondary traumatic stress symptoms may arise, potentially leading to vicarious trauma as these symptoms accumulate over time.

Specific conditions inherent to the practice of journalism contribute to the emergence of these psychological outcomes. Notably, ethical dilemmas may arise for journalists because of interacting with victims, which can substantially increase the risk of PTSD (Idås et al., 2019). Furthermore, journalists may face threats from the groups they cover outside of work, exposing them to traumatic experiences. Such circumstances, which can be life-threatening or stressful, can also pose a risk to their families, thereby affecting their social support resources and further perpetuating traumatic stress (Löfgren Nilsson and Örnebring, 2016; Charles, 2022).

Although studies on how journalists manage symptoms of post-traumatic stress are limited, awareness of the typical reactions to such traumatic events and allowing oneself time to process these experiences are considered important first steps in coping. In the subsequent phase, social support from friends and colleagues, emotional sharing related to the incident,

engaging in hobbies, increasing physical activity, and staying engaged with routine tasks are all functional coping strategies that journalists can employ post-exposure to traumatic situations. In addition to these personal factors, organizational aspects also play a significant role in coping with stress symptoms. For instance, the norms that prevail within journalistic organizations encourage employees to disguise indications of stress resulting from traumatic experiences and to prioritize news items that involve greater trauma, due to the attention they attract. This environment can exert considerable pressure to report such stories or result in sustained, intense workloads. When coupled with the perception of inadequate institutional support, these factors can significantly impair employees' capacity to cope and increase the likelihood of burnout or post-traumatic stress disorder (PTSD) (Keats and Buchanan, 2013; Dadouch and Lilly, 2021). It is therefore essential to create a work environment that enables the expression of the emotional difficulties associated with traumatic experiences and encourages the seeking of assistance. Moreover, the implementation of regular psychological screenings in the workplace, trauma-related training, and work plans that consider the psychological impact of traumatic exposures will facilitate more effective coping among journalists. Furthermore, considering the significant impact of organizational culture and social support resources on psychological outcomes following traumatic experiences, future research should investigate both the psychological symptoms experienced by journalists' significant others and how these symptoms affect their relationships with the journalists over time, preferably through longitudinal designs. Finally, to enable the development of more effective prevention efforts, it would be beneficial to more accurately identify and examine the interactions among individual, occupational, and organizational pre-trauma risk factors in journalists.

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