A Focus on Exposure: Trauma and the psychological implications for TV news camera operators

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<th>Description</th>
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<tbody>
<tr>
<td>Agg-Host</td>
<td>Aggression-Hostility</td>
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<tr>
<td>APA</td>
<td>American Psychiatric Association</td>
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<tr>
<td>ASD</td>
<td>Acute Stress Disorder</td>
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<tr>
<td>BDI–II</td>
<td>Beck Depression Inventory – Second edition</td>
</tr>
<tr>
<td>BDI–13</td>
<td>13-item Beck Depression Inventory</td>
</tr>
<tr>
<td>CES–D</td>
<td>Center for Epidemiological Studies Depression Scale</td>
</tr>
<tr>
<td>CoS</td>
<td>Chief of Staff</td>
</tr>
<tr>
<td>DASS–42</td>
<td>Depression Anxiety Stress Scales – 42</td>
</tr>
<tr>
<td>DSM</td>
<td>Diagnostic and Statistical Manual of Mental Disorders</td>
</tr>
<tr>
<td>ENG</td>
<td>Electronic news gathering</td>
</tr>
<tr>
<td>GAD</td>
<td>Generalised Anxiety Disorder</td>
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<tr>
<td>GHQ–28</td>
<td>General Health Questionnaire – 28</td>
</tr>
<tr>
<td>IES</td>
<td>Impact of Event Scale</td>
</tr>
<tr>
<td>IES–R</td>
<td>Impact of Event Scale – Revised</td>
</tr>
<tr>
<td>JTES</td>
<td>Journalist Trauma Exposure Scale</td>
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<tr>
<td>MDD</td>
<td>Major Depressive Disorder</td>
</tr>
<tr>
<td>N-Anx</td>
<td>Neuroticism-Anxiety</td>
</tr>
<tr>
<td>PCL</td>
<td>PTSD Checklist</td>
</tr>
<tr>
<td>PCL–C</td>
<td>PTSD Checklist – Civilian Version</td>
</tr>
<tr>
<td>PDS</td>
<td>Post-traumatic Diagnostic Scale</td>
</tr>
<tr>
<td>PRISMA</td>
<td>Preferred Reporting Items for Systematic Reviews and Meta-Analyses</td>
</tr>
<tr>
<td>PTEs</td>
<td>Potentially traumatic events</td>
</tr>
<tr>
<td>PTSD</td>
<td>Posttraumatic Stress Disorder</td>
</tr>
<tr>
<td>RQ</td>
<td>Research question</td>
</tr>
<tr>
<td>SASRQ</td>
<td>Stanford Acute Stress Reaction Questionnaire</td>
</tr>
<tr>
<td>SES</td>
<td>State Emergency Service</td>
</tr>
<tr>
<td>SLR</td>
<td>Systematic literature review</td>
</tr>
<tr>
<td>TA</td>
<td>Thematic analysis</td>
</tr>
<tr>
<td>THQ</td>
<td>Trauma History Questionnaire</td>
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<tr>
<td>TLEQ</td>
<td>Traumatic Life Events Questionnaire</td>
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<tr>
<td>TV</td>
<td>Television</td>
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<tr>
<td>VIS</td>
<td>Victim impact statement</td>
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Certificate of authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person nor material which to a substantial extent has been accepted for the award of any other degree or diploma at Charles Sturt University or any other educational institution, except where due acknowledgment is made in the thesis.

Any contribution made to the research by colleagues with whom I have worked at Charles Sturt University or elsewhere during my candidature is fully acknowledged. I agree that this thesis be accessible for the purpose of study and research in accordance with the normal conditions established by the Executive Director, Library Services or nominee, for the care, loan and reproduction of theses.

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Date: 27/06/2017
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I wish to extend great appreciation to all of the camera operators, reporters, and sound recordists who kindly agreed to participate in the interview and/or questionnaire study. In relation to those individuals who anonymously participated in the questionnaire study, I am deeply grateful for your interest in the overall research project, and enthusiasm to assist your industry colleagues and me by contributing to this research. Thank you kind strangers! With respect to those who participated in the interview study, your openness in discussing issues relating to the research, and willingness to tell me when you thought I might have it wrong was humbling, and provided an ideal environment for the development of the findings reported. I feel a great sense of appreciation for the opportunity to meet each of these individuals and to hear their stories. Thank you to Ms Taryn Humphries and Mr Timothy MacDonald for assisting with the transcription of interviews.

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There are a number of individuals who have improved the quality of this thesis through their feedback on draft chapters and manuscripts, aside from the efforts of my supervisory team. In particular I would like to acknowledge the feedback of the following people: Ms Cassily Charles, Mr Bruce Gater, Ms Taryn Humphries, Mr Timothy MacDonald, Dr Erica McIntyre, Ms Claire Moloney, and Ms Linda Ovington. Special thanks goes to Dr Robert Rowe for his professional editorial assistance on this thesis. To each of you, I enjoyed our conversations and have learned from your expertise; it is a bonus that each of you also happens to be a very kind and interesting person.

Finally, I wish to thank my family and friends for their support, curiosity, and understanding throughout my candidature. At times, research and writing can be all consuming. It is on resurfacing to be greeted with love and friendship from those closest to you, that you really appreciate those relationships in your life that are unconditional and unwavering. Without a doubt and without exception, the person most committed to this thesis, has been my husband and best friend, Tim. This journey has been our shared delight and burden!
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Ethics

Charles Sturt University’s Human Research Ethics Committee approved the studies requiring collection of original data from human participants, namely the in-depth interviews and the online questionnaire (Protocol number: 205/104).\(^1\) This research conforms to the ethical principles of the Declaration of Helsinki.

\(^1\) Ethics approval for both studies was applied for simultaneously, hence only one protocol number was assigned.
Professional editorial assistance

Professional editor, Dr Robert Rowe, provided copyediting and proofreading services, according to the guidelines laid out in the university-endorsed national ‘Guidelines for editing research theses.’ Dr Rowe’s areas of academic and professional specialisation include science, interactive media, and health.
Statement of author contributions

The contents of Chapter 2 have been published in a peer-reviewed journal (see below). Two other manuscripts resulting from this PhD research, focusing on experiences of burnout and substance use in journalists, have also undergone peer-review and subsequently been accepted for publication. These three manuscripts were based on the systematic literature review (SLR) reported in Phase A. In each case, this author was responsible for: (1) conceptualising the review manuscripts and method, (2) conducting the literature search, (3) reviewing and critically analysing the literature, (4) drafting the manuscripts, and (5) addressing reviewers’ comments.

Professor Anthony Saliba and Dr Gene Hodgins provided instrumental advice and feedback regarding the method and drafting of the three manuscripts. Ms Linda Ovington conducted the second review of a random sample of the search results—as an indication of the reliability of the screening process—and provided feedback on the burnout manuscript.
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Work published by the author incorporated into the thesis


Relevant work published by the author not forming part of the thesis

In order to keep this thesis as concise and focused as possible, the following three manuscripts were not included as chapters:


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Abstract

News frequently requires footage of stories relating to fatal car accidents, crime, murder, suicide, natural disasters, and various other forms of violence and tragedy within society. Camera operators are exposed first-hand to the emotional and visceral experience of filming individuals and communities in times of adversity and disaster. Despite this, there are currently no empirical studies focusing on camera operators’ psychological well-being or trauma exposure. This thesis details research considering what it is like to cover potentially traumatic events (PTEs) as a television (TV) news camera operator, and the psychological implications of this work.

The research was implemented according to a sequential between-strategies mixed-methods design and the findings are reported in three phases (Phases A–C). Phase A consisted of a series of systematic literature reviews (SLRs) relating to the psychological implications of journalistic work. The findings confirmed that camera operators have been grouped with other journalistic roles in previous research, but have not been researched individually. Research with general journalist samples indicates that journalists, particularly reporters, experience elevated levels of trauma exposure and reactions.

For Phase B, in-depth interviews were conducted with 21 TV news camera operators and reporters. Social constructivist and interpretivist theory informed the study, and the data was analysed according to a thematic analysis method. This study provided three critical insights regarding the experiences of trauma exposure of camera operators. First, camera operators experience what is referred to in the present study as the viewfinder effect, a seemingly unconscious perceptual mechanism serving to
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separate them from what they are filming, ultimately reducing their psychological distress. Second, there is a hierarchy within TV news organisations that has important implications for the social dynamics of news workers and the psychological well-being of camera operators. Finally, there are important differences between roles in terms of social visibility, which have both physical and psychological risk implications.

Phase C involved the use of an online quantitative questionnaire sampling both camera operators and other TV news workers \( n = 134 \). The questionnaire included measures assessing demographics, professional and personal trauma exposure, and trauma reactions. The findings suggest that a high proportion of professionals currently working in the TV news industry could exceed clinical cut-offs for posttraumatic stress disorder (PTSD). Camera operators are not only exposed to as many PTEs as other news workers, they also experience elevated levels of psychological distress equivalent to that of other news workers.

The findings of this thesis serve to raise the status of the psychological implications of journalistic work for TV news camera operators. Previous trauma exposure and reactions research in journalist samples posits that reporters are an at-risk population and worthy of increased industry support and further research. Therefore, the finding that camera operators and other TV news workers have comparable levels of trauma exposure and trauma reactions makes camera operators a noteworthy population by association. Hence, camera operators are equally as deserving of acknowledgement in terms of the potential psychological risks and implications of their work, as well as the accompanying support and research interest.
Chapter 1. Introduction

News frequently requires footage of stories relating to fatal car accidents, crime, murder, suicide, natural disasters, and various other forms of violence and tragedy within society. Whilst much of what is shown on broadcast news segments is censored, camera operators are exposed first-hand to the emotional and visceral experience of filming individuals and communities in times of adversity and disaster. Despite this, there are currently no empirical studies focusing on camera operators’ psychological well-being or trauma exposure. This thesis details research considering what it is like to cover potentially traumatic events (PTEs) as a television (TV) news camera operator, as well as the psychological implications of the work for this particular occupational role.

This introductory chapter provides an overview to the research project. First, background information is provided regarding trauma exposure and reactions amongst journalist samples in general. Second, a case is made for why camera operators are a group of particular interest warranting specific research investigation. Finally, this chapter details the research aims, methodology, method, and thesis structure.

1.1. Background

This thesis aims to explore the specific psychological implications for camera operators within the TV news industry as a result of their exposure to PTEs. The term PTEs is used because not all people respond to circumstances in a uniform way; some will experience an event as traumatic whilst others will not (Bonanno & Gupta, 2012; Bonanno, 2005). The nature of trauma responses is therefore best understood in terms of a continuum based on individual differences, in which some people will experience
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little or no symptomology and others will have severe traumatic responses (Bonanno & Gupta, 2012).

Past research and individual reports indicate that the experiences of journalists in their day-to-day work can result in negative psychological implications for them (Simpson & Boggs, 1999; Weidmann & Papsdorf, 2010), their families (Anstey, n.d.; Brayne, n.d.), and the broader journalism industry. The term ‘journalist’ is typically used to refer to a range of roles in the news production industry, including camera operators, reporters, sound technicians, editors, and other management and technical staff (Newman, Shapiro, & Nelson, 2012). In the empirical literature, this generic term is also used when sampling news production staff in the exploration of the psychological implications of such work. Considering the subjective nature of responses to PTEs (Bonanno, Brewin, Kaniasty, & La Greca, 2010), as well as the trend within the broader trauma literature of moving away from blanket definitions and exploration of traumatic responses, this approach to sampling (whilst convenient) seems counterintuitive. As such, there is a need to go beyond convenience sampling of journalists in general and to consider the psychological impact on specific roles within the news production crew (Newman et al., 2012).

By researching a specific role within the news production team, as opposed to grouping all roles under the single term ‘journalist’, it will become clearer what resources and support might be required, as well as how to best implement these to meet the needs of specific news crew members. The literature has also tended to rely on the use of psychometric scales with a focus on measuring posttraumatic stress disorder (PTSD) within journalist samples. Newman et al. (2012) suggest that there is a need to go beyond the assessment of symptomology and prevalence of psychopathology in the
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journalism industry by incorporating an exploration of individual attitudes and responses. This thesis aims to provide a greater overall understanding of the topic, and to complement the current deductive trend in the literature by focusing specifically on TV news camera operators, utilising a range of research methods.

1.1.1. The uniqueness of news camera operator experience of trauma

This section proposes a number of factors likely to make camera operators’ experiences of trauma different to those of other news workers; these factors may also be associated with increased psychological risk. Yet there are currently no empirical studies focusing on camera operators’ psychological well-being or trauma exposure from which to establish potential differences across TV news crew roles. Hence, the author identified the factors proposed here after spending a week shadowing a TV news crew; these role differences for camera operators were then discussed with individuals currently working within the TV news industry, and were confirmed with the interview participants (discussed in Phase B of this thesis).

The role of camera operators within broadcast news is fundamentally different to other journalistic roles in four distinct ways. The first concerns access to information. The most common physical arrangement of television news stations is for the reporters and chief of staff (CoS) to occupy the newsroom: listening to the police scanner, deciding on which stories to cover, and making various contacts to gain information regarding the selected stories. The camera operators occupy a separate space, the edit suite, where they wait until they are assigned a story. Often the camera operator is not aware of where they are going until they are en route, and even then may have little or no information about what the story they are covering entails. In this way, camera operators have reduced expectancy of what they might be exposed to; reduced capacity
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to prepare for what they are likely to be exposed to increases the chance of negative post-trauma reactions.

The second fundamental role difference relates to proximity, temporality, and perception. The visual component of television news is what makes it unique in relation to other news mediums, such as newspapers and radio. As such, the minimum requirement for a story is footage of the event covered. Whilst reporters often accompany camera operators into the field, their presence is not crucial as much of their role can be performed from the station. A key industry indicator of this distinction in role is evident in the fact that camera operators are those placed on-call after hours. Camera operators must get up close and personal with the subject of the story in order to capture the best quality footage possible. This proximity has an inextricable temporal aspect in that getting quality footage requires not only close proximity but also longer exposure. In addition, there is also likely to be a perceptual difference in the experience of traumatic stimuli considering that camera operators view much of the PTE through the viewfinder of a camera.

A third difference is that post exposure to PTEs, the camera operator’s role is to return to the edit suite at the station and spend extended periods editing the footage, essentially re-experiencing the event over and over. This unique kind of exposure to PTEs, re-watching and working on footage in great detail, has the potential to either sensitise or desensitise camera operators to trauma. Finally, the very nature of reporting involves the ability to articulate social issues and concerns. Such skills are likely to be utilised in times of personal distress, allowing the reporter to seek appropriate social and organisational resources and support. However, camera operators are not trained in this kind of communication. Their skills focus on visual, as opposed to verbal,
communication. This difference is evident in the anecdotal literature, in which reporters are those most likely to write articles regarding the psychological impact of working in the journalism industry.2

1.2. Methodology and methods

1.2.1. Problem statement

Ongoing exposure to PTEs as part of the journalist’s role can result in psychopathology (Simpson & Boggs, 1999; Weidmann & Papsdorf, 2010), as well as other psychological implications, such as altered world assumptions (Pyevich, Newman, & Daleiden, 2003). However, empirical research in the area has tended to (1) take a one-size-fits-all approach by exploring psychological implications in convenience samples comprising individuals from a wide variety of journalistic roles, and (2) focus on quantitatively measuring psychological symptoms and estimating disorder prevalence. Hence, there is currently no empirical literature concerning role differences in trauma exposure and reactions amongst TV news journalists; there is also an absence of understanding relating to attitudinal and experiential differences across role groups. This is problematic considering that the role of camera operators within broadcast news appears to be fundamentally different to other journalistic roles in terms of (1) access to information, (2) proximity, temporality, and perception of trauma exposure, (3) re-exposure to traumatic footage through the editing process, and (4) reduced capacity to articulate their concerns within the news organisation context. It may be that these fundamental differences are associated with increased psychological risk, and hence are worthy of specific research attention.

2 A review of the anecdotal literature of journalists’ trauma experiences was conducted. Journalists’ anecdotal reports are articles outlining professional experiences of covering stressful stories, and include the discussion of a range of personal and psychological implications of this coverage. This review has not been included in the present thesis.
1.2.2. Pragmatist philosophy

This thesis is firmly located within the pragmatist approach to research. Researchers practicing from a pragmatist perspective place primary emphasis on the research problem and specific questions they aim to answer, as opposed to beginning with a stringent set of epistemological rules to work within (Denscombe, 2010; Tashakkori & Teddlie, 2010). Methods are evaluated and selected based on their relative ability to produce the most useful and informative answer to the research problem and questions. No specific method is considered superior and, because of this, pragmatists often conduct mixed-methods research to answer a range of related research questions through a series of discrete studies (Denscombe, 2010). In contrast to other more polarised philosophies regarding social research, pragmatist researchers consider social reality to be both discoverable and socially constructed, social knowledge to be provisional, and dualism to be counterproductive (Denscombe, 2010). This is not to suggest, however, that issues of epistemology are irrelevant within pragmatist research. Rather, appropriate epistemological and methodological decisions are made in light of the research aims and questions (Denscombe, 2010; Tashakkori & Teddlie, 2010). As such, trustworthy pragmatist research provides explicit descriptions of the theory underpinning various phases of the overall project.

1.2.3. Sequential between-strategies mixed-methods design

The present research was implemented according to a sequential between-strategies mixed-methods design (Tashakkori & Teddlie, 2009), in which the qualitative and quantitative methods held equal weight. Such a design was adopted because the research questions include a combination of both confirmatory and exploratory elements (Tashakkori & Teddlie, 2009). The design is considered to be between-strategies because the primary qualitative and quantitative data collected throughout the
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project was collected separately using different strategies, namely by questionnaire and interview techniques. The design is sequential, as opposed to parallel, in that the collection of the quantitative questionnaire data followed the collection of the qualitative interview data (Tashakkori & Teddlie, 2009); all those who were interviewed, and eligible to participate in the questionnaire study, indicated that they had completed the quantitative questionnaire. Using a within-subjects design allows for contrasts and comparisons of qualitative and quantitative findings to be made in a way that elaborates on, and informs, the confirmatory findings from the questionnaire with the unique and experiential qualitative data from participant interviews. As such, this research aims to provide a greater overall understanding of the topic and to complement the current deductive trend in the literature, which focuses primarily on psychometric scales (Newman et al., 2012).

1.2.4. Research phases

Three studies were conducted in total and are presented within this thesis in three phases, respectively. Phase A aimed to provide a series of concise, comprehensive, and systematic literature reviews (SLRs) of the quantitative literature relating to the psychological implications of journalistic work. In this phase of the research, the focus was on journalists in general as there is currently no literature focusing specifically on TV news camera operators. The SLR method adopted was that prescribed by Fink (2010) comprising three main elements: sampling the literature, screening the literature, and extracting data. Phase A consists of a series of SLRs synthesising the quantitative literature for each of the three key constructs identified through the review process: trauma exposure, trauma reactions, and mood disorders.
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Phase B involved conducting semi-structured, in-depth interviews with 21 TV news camera operators and reporters. The overall aim was to explore individual subjective experiences as well as the processes associated with exposure to PTEs, psychopathology, and role differences. Social constructivist and interpretivist theory informed the study. Data was analysed according to the thematic analysis (TA) method prescribed by Braun and Clarke (2006).

Phase C involved the use of an online quantitative questionnaire sampling both camera operators and other TV news workers to: (1) explore the psychological implications for news workers as a result of their exposure to PTEs, (2) establish differences in trauma exposure and reactions due to role, and (3) highlight the role of individual differences in trauma reactions. The questionnaire included measures assessing demographics, professional and personal trauma exposure, and trauma reactions (PTSD, depression, anxiety, and stress).

This thesis focuses on the experiences of camera operators. Other news workers were recruited in the interview and questionnaire studies, with the intention of providing greater context for camera operators’ experiences and also elucidating which experiences and symptoms were unique to camera operators, as opposed to those which were general across TV news workers. The discussion of research aims, findings, and implications throughout the thesis demonstrates this shift from a specific focus on camera operators, to a broader consideration of factors impacting TV news workers more generally.
1.2.5. Research aims

The overall aims of the present research are to:

1. Provide a series of concise, comprehensive, and systematic literature reviews (SLRs) of the quantitative literature relating to the psychological implications of journalistic work (Phase A).

2. Explore the kinds of potentially traumatic events (PTEs) camera operators and other news workers are exposed to (Phases B and C).

3. Explore a range of factors that are associated with greater psychological distress in camera operators and other news workers (Phases B and C).

4. Explore potential differences in trauma exposure and reactions between camera operators and other news workers (Phases B and C).

Subsidiary aims and specific research questions developed over time, as a result of the findings of earlier phases of the research; such aims and questions are stated within the phase-specific introductions and chapters.

1.2.6. Potential contributions

Potential contributions of this research include:

1. Being the first investigation to specifically focus on the psychological implications of trauma exposure amongst TV news camera operators. By researching a specific role within the news crew, as opposed to grouping all roles under the one term ‘journalist,’ it becomes clearer what resources and support are necessary for camera operators, as well as how to best implement these resources and support. Currently, it is taken for granted that individuals
of all journalistic roles can be considered conjointly, the inference being that the psychological and physical risks are equal across role groups.

2. A greater understanding of the nature of trauma exposure and reactions in TV news coverage in general. Because the SLR (Phase A) focuses on the literature of journalist samples, and in addition to camera operators, reporters and sound recordists were recruited as a comparison group for the interview (Phase B) and questionnaire (Phase C) studies, broader industry implications can be developed. Using a mixed-method design also has the potential to identify a number of trauma exposure experiences and implications not previously explored, and to provide a more nuanced understanding of trauma within TV news workers.

3. The SLR (Phase A) has the potential contribution of: (1) providing a synthesis of the existing knowledge base concerning the psychological implications of journalistic work, for use as a comprehensive reference to inform the work of future researchers and individuals working within the journalism industry, and (2) raising issues and identifying a number of future directions in terms of methodology and theory.

1.3. Thesis structure

1.3.1. Phases of the research

Three studies were conducted in total and are presented within this thesis in distinct phases. Each phase and the associated methodology are introduced in turn and then the findings for each phase are reported in the associated chapters, as described
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below. Specifically, the SLR chapters (2–4) are preceded by a stand-alone introductory methodology section entitled Phase A. Systematic Literature Review; the qualitative findings chapters constituting Phase B (Chapters 5 and 6), and the quantitative findings chapter (Chapter 7) constituting Phase C, are each similarly preceded by a stand-alone introductory methodology section.

1.3.1.1. Phase A: Systematic literature review

Phase A aims to present a series of concise, comprehensive, and systematic literature reviews (SLRs) of the quantitative literature relating to the psychological implications of journalistic work. In this phase of the research, the focus was on journalists in general, as there is currently no literature focusing specifically on TV news camera operators. Phase A consists of three chapters (Chapters 2–4) representing a series of SLRs that synthesise the quantitative literature for each of the three key constructs identified through the review process: trauma exposure, trauma reactions, and mood disorders. The findings of these SLR chapters provide a sound foundation for the research directions, aims, and questions implemented in Phases B and C.

Chapter 2 provides clarity regarding the definitions and relative significance of personal and work-related exposure to trauma in relation to understanding trauma reactions in journalists. The findings and implications of an SLR focusing on trauma exposure amongst journalist samples are then reported. The content of this chapter has undergone peer-review and has subsequently been accepted for publication in Fusion Journal (MacDonald, Hodgins, & Saliba, 2017).

Chapter 3 explains why journalists may be at increased risk of developing trauma- and stressor-related disorders, and anxiety disorders, compared to the general
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population. Relevant clinical and theoretical context is provided regarding the general population prevalence rates for such disorders. The chapter then reports the findings and implications of an SLR focusing on journalists’ trauma reactions.

Chapter 4 explains why journalists might be at increased risk of developing mood disorders, compared to the general population. Relevant clinical and theoretical context is provided regarding the general population prevalence rates for relevant depressive disorders, and bipolar and related disorders. The chapter then reports the findings and implications of an SLR focusing on journalists’ experiences of mood disorders.

1.3.1.2. **Phase B: In-depth interviews**

Phase B involved conducting semi-structured, in-depth interviews with 21 TV news camera operators and reporters. The findings of this qualitative phase of research are reported in two parts (Chapters 5 and 6). While it was necessary to focus on the broader journalist literature in Phase A, Phases B and C aimed to narrow the focus to camera operators, and how their experiences can be compared to the experiences of other TV news workers.

Chapter 5 provides a detailed analysis of participants’ individual subjective experiences of, as well as the processes associated with, exposure to PTEs. The findings are broken down into six themes broadly representing the kinds of PTE exposure experienced by TV news camera operators and reporters: accidental or other death-related events, direct involvement in events, man-made violence, medical events, natural disasters, and transport-related accidents. Specific attention is given to events that have previously gone unconsidered, or under-considered, in the existing literature of journalists’ exposure to trauma.
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The findings of Chapter 6 are broken into two key areas relating to role differences between TV news camera operators and reporters. First, the chapter considers perceived role differences as they relate to the journalism industry culture and associated role expectations, agency, and efficacy. The discussion of cultural differences in the industry emphasises the organisational hierarchy that news workers find themselves operating within. Second, the focus shifts to a consideration of perceived differences in exposure to PTEs as a result of role. Three key role differences in trauma exposure are explored: physical proximity, social visibility, and the viewfinder effect.

1.3.1.3. Phase C: Online questionnaire

Phase C involved quantitative analysis of data collected through an online questionnaire that sampled both camera operators and reporters (n = 134). The questionnaire included measures assessing demographics, professional and personal trauma exposure, as well as trauma reactions (PTSD, depression, anxiety, and stress). Chapter 7 reports the findings of Phase C; the analysis and results focused on (1) overall sample trends in trauma exposure and trauma reactions, and (2) group differences in trauma exposure and reactions, based on a range of demographic variables and role.

1.3.2. General discussion

Chapter 8 includes an overview of key findings and a discussion of the implications of the research. The aim of this concluding chapter is to establish and discuss the conclusions, contributions, and implications that can be derived from carefully integrating the findings reported in each of the individual research findings chapters in this thesis.
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**Phase A. Systematic literature review**

The aim of Phase A was to provide a series of concise, comprehensive, and systematic literature reviews (SLRs) of the quantitative literature relating to the psychological implications of journalistic work (research aim 1). The approach was to maintain clear inclusion and exclusion criteria, as well as transparency regarding the manner in which quality of the studies sampled was assessed. In this way, the findings provide a valuable synthesis of existing knowledge to inform future directions in psychological research and practice with journalists. The research question was: *What insights can the quantitative literature provide regarding the psychological implications of journalistic work?* In this phase of the research the focus was on journalists in general, as there is currently no literature focusing specifically on TV news camera operators. The extent and nature of the introduction and background information provided at the beginning of each SLR chapter varies, as some clarification of key concepts and arguments not covered in the thesis introduction (Chapter 1) is required, in order to provide necessary context for the findings presented in these chapters. Chapters 2–4 consist of SLRs synthesising the quantitative literature for each of the three key constructs identified through the review process: trauma exposure, trauma reactions, and mood disorders.

**A.1. Method**

A single SLR method was the foundation for each of the findings chapters in this phase. The common aspects of the method are described below to reduce repetition. Aspects of the method that are unique to an individual chapter are included within that chapter. The method adopted within the present study was based on that prescribed by

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3 The systematic literature review method described in this section has been published (MacDonald, Hodgins, & Saliba, 2017; MacDonald, Saliba, & Hodgins, 2016; MacDonald, Saliba, Hodgins, & Ovington, 2016).
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Fink (2010) and contains three main elements: sampling the literature, screening the literature, and extracting data. This approach to the SLR process is highly congruent with the steps outlined in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) checklist for SLRs and meta-analyses (Moher, Liberati, Tetzlaff, Altman, & Group, 2009). Figure A.1. is a flow chart of the steps taken throughout the procedure, beginning with the research question and concluding with the synthesis of results.

A.1.1. Sampling the literature

The literature was sampled in two steps. In the first step, key terms were developed and used to source appropriate studies from a number of electronic databases. This search took place between 7th January and 31st March 2013. The electronic databases used (listed in Figure A.1.) were selected because they cover a range of journalism, communications, and social science publications, and so are likely to contain studies relating to psychological implications of journalistic work. The search terms used included every combination of Group A terms paired with Group B terms (listed in Figure A.1.). Search terms were originally derived theoretically, through preliminary reviewing of the literature, and from key terms associated with seminal studies. A group of professionals in the news production industry was provided with the original list of key terms and encouraged to suggest additions; this group included two television news camera operators, two television news reporters, and an academic journalist with experience in a range of journalistic outlets, including various print mediums and radio. A panel of experienced researchers and practitioners, representing the communication and creative industries, journalism, psychology, and the social sciences and humanities, then reviewed the list of selected databases and key terms.
What insights can the quantitative literature provide regarding the psychological implication of journalistic work?

**Research question**

**Databases**
EBSCOhost, Ovid, ProQuest Psychology Journals, SAGE, Science Direct, Taylor & Francis Online, Wiley Online

**Search terms**

**Group A**: camera*, videograph*, photographer*, news crew, TV crew, T.V. crew, television crew, reporter*, journalist*

**Group B**: anxiety, depression, stress, trauma, PTSD, posttraumatic stress disorder, posttraumatic stress disorder

**Practical screen**

*Wildcard character used in search queries to obtain various extensions upon the specified root word

In the second step, all studies obtained through step one were used as potential sources for further sampling. A hand search of reference lists was conducted, allowing the identification of pertinent earlier studies. In addition, the electronic database Scopus was used to search each author and study, to identify other studies by relevant authors,
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as well as more recent literature citing the studies found in step one. Finally, all authors were contacted and encouraged to suggest examples of their own work not identified through steps one and two.

A.1.2. Screening procedure

The literature was screened in two phases: a practical screen and a methodological screen (Fink, 2010). The practical screen is the initial appraisal of how useful a piece of literature might be to the overall review (Fink, 2010). This appraisal was based on a set of predetermined inclusion and exclusion criteria (Figure A.2.). No criterion was set for year of publication because the preliminary literature review suggested that the topic was a relatively young area of study, and because maximum coverage was desirable at this point in the SLR procedure. For each document identified through the sampling procedure, the abstract was examined to determine whether the focus was on the psychological implications of working as a journalist. Where documents did not include an abstract, an electronic key term search was conducted and relevant parts of the document were reviewed to establish the context and purpose of the document. Where sources did not include an abstract, nor was an electronic key term search possible, the entire document was reviewed to assess suitability. Where a mixed-methods design was adopted, relevant quantitative findings are reported. Two hundred and seventy-seven documents were assessed as suitable through the practical screen for further review.

The author conducted the database search and practical screen. As an indication of the reliability of the practical screening process, a second reviewer was provided a random sample of search results (n = 441) and asked to apply the practical screen according to the procedure described above. The aim was to represent each category of journalistic role (Group A terms, n = 9), psychological symptoms (Group B terms,
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$n = 7$), and databases ($n = 7$). As such, one document was randomly selected from the list of resulting documents from each of the potential combinations of search terms and databases ($9 \times 7 \times 7 = 441$). Cohen’s Kappa indicated an excellent level of agreement (0.98) between reviewers.

The methodological screen was then applied to each of the 277 documents, incorporating a second round of inclusion and exclusion criteria (see Figure A.2.). This phase of screening was primarily concerned with identifying empirical research studies that produced original quantitative data and described the research design and methods used. Whilst qualitative studies and anecdotal reports are highly relevant and useful in understanding the broader topic, the underlying assumptions differ, making the application of a single set of quality assessment criteria across methodologically diverse literature inappropriate. As shown in Figure A.1., 73 documents matched the methodological criteria for inclusion. Finally, the 73 documents that passed the methodological screen were sorted into one or more of five categories according to the psychological construct investigated: trauma exposure, trauma reactions, mood disorders, burnout, and substance use. Chapters 2–4 consist of SLRs synthesising the quantitative literature for three of these five key constructs identified through the review process: trauma exposure, trauma reactions, and mood disorders. The reviews for the constructs of burnout (MacDonald, Saliba, Hodgins, & Ovington, 2016) and substance use (MacDonald, Saliba, & Hodgins, 2016) were excluded from the present thesis, to ensure clarity of the research aims and focus.
### Inclusion criteria

**Practical screen**
- Focus on psychological implications for journalists
- English language

**Methodological screen**
- Original quantitative data reported

### Exclusion criteria

**Practical screen**
- Focus only on physical harm implications for journalists
- Book reviews

**Methodological screen**
- Qualitative data reported only
- Anecdotal reports
- ‘Expert’ review and discussion papers
- Original quantitative data reported without description of method or procedure

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*Figure A.2. Inclusion and exclusion criteria*

### A.1.3. Data extraction

A template was developed with a series of categories that were completed for each article sampled in this review (see Appendix A.1.). The template categories were tested against each article and evolved through the extraction process to reflect the content and specifics of this particular area of research. The completed series of templates constituted a database from which patterns in data could be identified, as well as areas that are yet to be explored.

### A.1.4. Potential limitations of the research

In this phase of the research the focus was on journalists in general, as there is currently no literature focusing specifically on TV news camera operators. This meant that research using journalist samples served as the foundation for the research questions and predictions to be addressed in the subsequent research phases. However, in the absence of more directly relevant literature, this approach was considered appropriate because the general journalist samples sometimes included camera operators, although they were not specifically investigated.
A number of mechanisms were also built into the research process with the intention of ensuring that the research design and questions would be suitable for investigating TV news camera operators: (1) a systematic review of the anecdotal literature detailing individual journalists’ trauma exposure and reactions was conducted, and this sample of literature included firsthand reports written by TV news camera operators; (2) a group of professionals in the news production industry, including camera operators, served as consultants throughout the research development stage; (3) the author spent a week at a TV news station shadowing various news crew members so as to become orientated with the professional context of the research; and (4) in-depth interviews with camera operators were implemented in Phase B of the research. These four mechanisms in conjunction served to minimise potential methodological issues that might have otherwise resulted from using general journalist literature as the foundation for research specifically focusing on camera operators.

A couple of other, more generic, limitations of the SLR method should be noted. First, conference papers and theses were not included in the present review; the rationale being that the aim of the SLR was to sample high quality research that has undergone peer-review. However, a potential implication of this is related to publication bias and the point that statistically non-significant findings are less likely than statistically significant findings to be accepted for publication. Second, research articles reported in languages other than English were excluded from sampling. Finally, since the time of sampling articles for this review there may have been research published that is not included. Although, authors of the articles sampled here were contacted, and more recent articles that have been published in peer review journals were included as a result. Not all authors who were contacted replied to the request for further research articles.
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Chapter 2. Journalists and trauma exposure

2.1. Introduction

Work within the journalism industry involves ongoing exposure to trauma in the attempt to meet the constant demand for up-to-date and instantaneous coverage of disaster, crises, and violence in society. Research has shown that this process of repeated exposure to trauma amongst journalists can result in adverse and varied psychological reactions. Such reactions can include altered world assumptions (Pyevich, Newman, & Daleiden, 2003), substance use (MacDonald, Saliba, & Hodgins, 2016), and symptoms of posttraumatic stress disorder (PTSD) and depression (MacDonald, Hodgins, & Saliba, 2015). There is also a range of organisational and industry implications that makes the issue of trauma exposure pertinent to managers and organisations; for example, journalists personally exposed to physical danger are less likely to perceive their employing organisation as supportive (Beam & Spratt, 2009).

A firm understanding of the kinds of potentially traumatic events (PTEs) that journalists are exposed to is required if we are to reduce the risks and costs associated with psychological distress in journalists. The fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM–5; American Psychiatric Association (APA), 2013) acknowledges that individuals may develop trauma reactions as a result of firsthand exposure, by witnessing a PTE as it happens to someone else, or from repeated exposure to details of a PTE. This makes journalists a population of interest

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4 The content of this chapter has undergone peer-review and was subsequently accepted for publication (MacDonald, Hodgins, & Saliba, 2017).

5 The conference proceedings by MacDonald, Hodgins, and Saliba (2015) are based on Chapters 2–4 of this thesis.
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because they are likely to be exposed to a range of PTEs both firsthand and vicariously through their occupation. Presumably, in addition to this work-related exposure, journalists have a similar rate of exposure to potentially stressful or traumatic life events as other members of the community. An understanding of personal exposure to PTEs in journalists alongside work-related exposure is theoretically important because previous exposure to trauma leads to reduced resilience in the face of future adversity. Individuals who have had previous exposure to trauma (whether in their personal or work life) are amongst those most likely to experience negative trauma reactions when exposed to subsequent PTEs (Breslau, Chilcoat, Kessler, & Davis, 1999).

In reference to relevant general population studies, Mills et al. (2011) state that prevalence rates of trauma exposure range from 16–90%. An Australian general population study reported a PTE prevalence rate of 74.9% (Mills et al., 2011). A U.S. study of college students reported a prevalence rate of 66%, with the average number of PTEs experienced by participants being 1.5 (Read, Ouimette, White, Colder, & Farrow, 2011). A general population sample from Sweden was found to have an exposure prevalence rate of 80.8% (Frans, Rimmö, Åberg, & Fredrikson, 2005). Differences in reported prevalence rates may occur because of the measure used—scales that have a greater number of PTEs listed generally produce higher prevalence rates (Mills et al., 2011). And those that include domestic violence and similar events are more likely to produce greater exposure prevalence rates for females than those that do not (Mills et al., 2011).

2.1.1. Rationale and aim

Understanding the kinds of PTEs journalists are exposed to is the first step in developing procedures and support structures to safeguard individuals against adverse
trauma reactions. This systematic literature review (SLR) aims to provide a concise, comprehensive, and systematic review of the quantitative literature relating to journalists’ exposure to PTEs. In order to achieve this aim, it maintains clear inclusion and exclusion criteria, as well as transparency regarding the manner in which quality of the studies sampled was assessed. In this way, the findings of the present review will provide a valuable synthesis of existing knowledge to inform future directions in psychological research and practice with journalists. The research question is: *What insights can the quantitative literature provide regarding journalists’ personal and work-related exposure to PTEs?* Reviews concerning psychology and journalism exist (Aoki, Malcolm, Yamaguchi, Thornicroft, & Henderson, 2012; MacDonald, Saliba, & Hodgins, 2016; MacDonald, Saliba, Hodgins, & Ovington, 2016) but have not discussed rates of trauma exposure and associated psychological theory.

### 2.2. Review

This review considers both work-related and personal exposure to PTEs amongst journalists. Prior personal life exposure to trauma is a predictor of negative trauma reactions that is well established within the broader trauma literature; however, it has only recently been considered within the journalism literature. This point is apparent in the present review in that the personal PTEs results section has greater brevity than the work-related exposure section. This review also considers journalists’ experiences of stalking victimisation. The experience of being stalked is considered a PTE, assessed in trauma exposure scales such as the Traumatic Life Events Questionnaire (TLEQ) and the Composite International Diagnostic Interview (WMH-CIDI)—yet only one study has explicitly assessed stalking of journalists. Journalists’ experiences of being stalked are not easily categorised as either work-related or personal and, as such, warrant a discrete discussion that should be considered in conjunction with the other two sections.
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A summary of the studies sampled in this review is provided in Table 2.1. The trauma exposure of journalists has been studied in a range of countries and across a range of media outlets. Response rates are provided for those studies that reported such information. However, two points are worth considering with respect to such figures: (1) it is not clear in each case whether the figure reported was the initial response rate, or the response rate after data screening had occurred (e.g., removing incomplete data); (2) In many cases, response rates are not reported, and this may be because it is not possible to accurately calculate response rates when sending research materials to a large online or organisational group of potential participants. Those studies with the highest response rates tended to be the studies that specifically targeted a set number of participants and contacted them directly.

2.2.1. Work-related exposure to PTEs

A series of self-report questionnaire studies have shown high levels of work-related exposure to PTEs amongst journalist samples. A number of studies are discussed here in relation to the scale used to measure work-related exposure. Studies that report work-related exposure to PTEs but did not use an established scale are also discussed. Table 2.2. provides an overview of the kinds of work-related PTEs journalists are exposed to, and the percentage of each sample exposed to each PTE. Comparisons are not easily made across studies because not all studies assessed exposure to the same PTEs or in the same time period; moreover, some did not provide descriptive information about endorsed items. In addition, some studies specifically asked whether exposure to these PTEs occurred on-site, whereas other studies did not. This means that in some cases coverage could be off-site; for example, from the newsroom.
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Table 2.1.  
*Summary of studies assessing trauma exposure in journalist samples*

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
</tr>
</thead>
<tbody>
<tr>
<td>McMahon (2001)</td>
<td>Australia</td>
<td>Paper-based survey</td>
<td>Journalists who had covered trauma (n = 32) and who had not (n = 25)</td>
<td>57</td>
<td>21.0</td>
<td>Newspaper</td>
</tr>
<tr>
<td>Pyevich et al. (2003)</td>
<td>U.S.</td>
<td>Online survey</td>
<td>News journalists</td>
<td>906</td>
<td>24.4</td>
<td>Newspaper</td>
</tr>
<tr>
<td>Feinstein &amp; Nicolson (2005)</td>
<td>International</td>
<td>Online survey</td>
<td>Various war journalists based in Iraq</td>
<td>85</td>
<td>85.0</td>
<td>One American and one British news organisation</td>
</tr>
<tr>
<td>Weidmann, Fehm, &amp; Fydrich (2008)</td>
<td>Germany, Austria, &amp; Switzerland</td>
<td>Online survey</td>
<td>Journalists</td>
<td>61</td>
<td>Unspecified</td>
<td>Newspaper, TV, magazines, radio</td>
</tr>
<tr>
<td>Gass, Martini, Witthöft, Bailar, &amp; Dressing (2009)</td>
<td>Germany</td>
<td>Online survey</td>
<td>Journalists</td>
<td>493</td>
<td>6.1</td>
<td>TV, radio, print, internet</td>
</tr>
<tr>
<td>Weidmann &amp; Papsdorf (2010)</td>
<td>Germany, Austria, &amp; Switzerland</td>
<td>Online survey</td>
<td>TV (n = 81) and radio (n = 65) newsroom staff</td>
<td>146</td>
<td>Unspecified</td>
<td>TV, radio</td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist (2012a)</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>493</td>
<td>Unspecified</td>
<td>Newspaper, TV, radio, internet</td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist (2012b)</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>407</td>
<td>Unspecified</td>
<td>Newspaper, TV, radio, other</td>
</tr>
</tbody>
</table>
Table 2.1. continued

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>(n)</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Browne, Evangeli, &amp; Greenberg (2012)</td>
<td>International</td>
<td>Online survey</td>
<td>News journalists</td>
<td>50</td>
<td>35.0(^a)</td>
<td>Unspecified</td>
</tr>
<tr>
<td>Feinstein (2012)</td>
<td>Mexico</td>
<td>Online survey</td>
<td>News journalists</td>
<td>104</td>
<td>80.6</td>
<td>Three national news organisations</td>
</tr>
<tr>
<td>Levaot, Sinyor, &amp; Feinstein (2013)</td>
<td>Israel &amp; International</td>
<td>Online survey</td>
<td>Israeli war journalists ((n = 38)) and Western war journalists ((n = 38); taken from Feinstein &amp; Nicolson, 2005)</td>
<td>76</td>
<td>66.0</td>
<td>TV, print</td>
</tr>
<tr>
<td>Feinstein (2013)</td>
<td>Mexico &amp; International</td>
<td>Online survey</td>
<td>Mexican journalists ((n = 104)) and war journalists ((n = 104))</td>
<td>208</td>
<td>80.6</td>
<td>Mexican and international news organisations</td>
</tr>
</tbody>
</table>

Note:

a. Browne, Evangeli, & Greenberg (2012) reported an initial response rate of 35.0\%, but a final response rate of 15.0\% when incomplete responses were removed from the sample.
Table 2.2.
*Percentage of journalists exposed to various work-related PTEs*

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Time Period</strong></td>
<td>Previous 6 months</td>
<td>Previous 3 years</td>
<td>Throughout career</td>
<td>Previous 12 months</td>
<td>Previous 12 months</td>
<td>Throughout career</td>
</tr>
<tr>
<td><strong>Scale</strong></td>
<td>Informal scale</td>
<td>Informal scale</td>
<td>JTES</td>
<td>JTES</td>
<td>JTES</td>
<td>Trauma-Related</td>
</tr>
<tr>
<td><strong>PTE</strong></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>Assignments Scale</td>
</tr>
<tr>
<td>Fire</td>
<td>74</td>
<td>50</td>
<td>58</td>
<td>20</td>
<td>93</td>
<td>20–93</td>
</tr>
<tr>
<td>Transport accidents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Road</td>
<td>66</td>
<td>53</td>
<td>81</td>
<td>37</td>
<td>95</td>
<td>37–95</td>
</tr>
<tr>
<td>Air</td>
<td>32</td>
<td>40</td>
<td>55</td>
<td>75</td>
<td>81</td>
<td>55–81</td>
</tr>
<tr>
<td>Murder</td>
<td>56</td>
<td>72</td>
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<td>65</td>
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<td>Violent assaults</td>
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<td>55</td>
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<td>29–49</td>
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<td>Within the family</td>
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<td>Outside of the family</td>
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<td>Natural disasters</td>
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<td>34</td>
<td>4</td>
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<td>34–41</td>
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<td>Many casualties</td>
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<td>47</td>
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<td>47</td>
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<td>47–62</td>
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<td>41</td>
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<td>29</td>
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<td>29–51</td>
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<td>50</td>
<td>50</td>
<td>28</td>
<td>28</td>
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Note:

a. PTE: Potentially traumatic event.
b. JTES: Journalist Trauma Exposure Scale
2.2.1.1. **Journalist Trauma Exposure Scale (JTES)**

The JTES is a 23-item self-report scale concerning journalists’ exposure to PTEs in the previous 12 months. It requires participants to indicate: (1) their range of exposure—i.e., whether or not they have been exposed to any of 14 different kinds of PTEs as part of a work assignment, (2) frequency of exposure—i.e., how many times they have been exposed to those kinds of events, and (3) intensity of exposure—i.e., whether or not they have been exposed to any of nine suggested intensity of exposure items such as being *verbally threatened on assignment* (Pyevich et al., 2003). Four studies have adopted the JTES to report journalists’ exposure to work-related PTEs. The percentage of participants exposed to various PTEs for three of these studies can be found in Table 2.2. Backholm & Björkqvist (2012a) used the JTES; however, they did not provide descriptive statistics for the overall sample or a narrative of the items endorsed.

Pyevich et al. (2003) sampled 906 U.S. daily newspaper journalists. On average, participants were exposed to 7.8 PTEs. Participants found the following kinds of stories to be the most stressful: injured/dead children (36.1%), murder (11.2%), and road accidents (8.1%). On average, participants experienced 3.4 intensity items ($SD = 1.9$) with 94% of the participants indicating that they experienced one or more items. Participants were most likely to have covered a PTE on site (78.7%), been verbally threatened on assignment (61.8%), covered the same assignment multiple times in a week (54.3%), and to have covered a gruesome scene (53.8%). Other items endorsed include: announced news of death to family/friends of the victim (36.1%), knew victim/perpetrator of assignment (22.4%), witnessed someone hurt/killed on assignment (20.2%), received personal injury on assignment (6.1%), and was physically attacked on
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assignment (5.3%). Backholm and Björkqvist (2012b) sampled 407 journalists from a range of media outlets in Finland and found that male journalists \((M = 2.24)\) were exposed to significantly more work-related PTEs than females \((M = 1.32)\). The overall mean for number of PTEs exposed to (1.71), was notably lower than that reported by Pyevich et al. (2003), but in common with that study, participants were most frequently exposed to traffic accidents. In a study of 50 British news workers, 25% of the sample had been verbally threatened or attacked while covering a story (Browne, Evangeli, & Greenberg, 2012)—the most endorsed PTE experience for the sample was war. This is notable, because if the category was experienced at all by the other groups, it is the least likely to have been endorsed.

2.2.1.2. Trauma History Questionnaire (THQ)

The THQ “consists of 24 yes/no questions addressing a range of trauma events in three unique areas: (a) crime-related events (e.g., robbery, mugging), (b) general disaster and trauma (e.g., injury, disaster, witnessing death), and (c) unwanted physical and sexual experiences. For each item, the subject indicates whether he or she experienced it and, if so, the number of times and approximate age(s) of occurrence” (Hooper, Stockton, Krupnick, & Green, 2011, p. 262). This scale is not specific to the experiences of journalists but has been used widely in the broader trauma literature. The journalism and trauma literature has two broad domains, one that focuses on domestic journalism and one that focuses on what is variously referred to as war, conflict, or combat journalism. Feinstein and colleagues have conducted several studies relating to war journalism and associated psychological sequelae. In the following three studies PTE exposure was measured using the THQ. Participants were also asked, ‘in the Iraq war were you ever in a situation in which you feared you might be killed or seriously injured?’ and ‘in the Iraq war have you seen someone seriously injured or killed?’ It is
noteworthy that the authors did not differentiate between personal and work-related exposure in these two studies.

Feinstein and Nicolson (2005) studied the differences between embedded and unilateral journalists covering the Iraq war. In times of overseas combat some journalists may be attached to military units, this is referred to as embedded journalism. Unilateral journalists are not associated with the military, and often work closely with local journalists or community members (often called fixers) to gain access to local information and locations in order to cover a story. Differences between the groups were expected because embedded journalists are more likely to be exposed to combat situations (Feinstein & Nicolson, 2005). However, embedded journalists were not exposed to a significantly greater number of PTEs in Iraq than the unilateral group ($M$: 3.2 and 2.6, respectively), nor did they witness more instances of someone being seriously injured or killed in Iraq ($M$: 2.3 and 1.8). Similarly, no differences were found between the two groups in terms of PTE exposure, either personal or work-related, prior to their coverage in Iraq ($M$: 21.9 and 22.5, respectively). Sinyor and Feinstein (2012) assessed gender differences in trauma history in war journalists. The study was based on previously collected data from journalists working in Iraq (Feinstein & Nicolson, 2005). No significant differences were found between males and females on the THQ (28.8 v. 20.4), or on the two Iraq war questions: frequency of exposure to events that were life threatening to self (2.93 v. 2.76) or to others (2.33 v. 1.18). Similarly, Levaot, Sinyor, and Feinstein (2013) found no significant difference between the number of PTEs to which Israeli war journalists have been exposed compared to Western war journalists (26.0 v. 25.3). Differences were expected given that the Israeli group lives and works in conflict zones, whereas the Western group travels in and out of conflict zones as part of their work (Levaot et al., 2013). The authors did not indicate the percentage of
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participants exposed to various PTEs, so comparisons cannot be made. The results indicate that journalists in these samples were exposed to a greater number of PTEs than in other domestic journalist samples; however, because personal and work-related PTE exposures were not considered discretely, it is difficult to assess the sources of the majority of exposures and therefore if they are exposed to greater frequencies of work-related PTEs than domestic journalists.

2.2.1.3. Informal assessment of work-related exposure

The studies discussed in this section did not use an established scale, nor provided sufficient information to identify the scale they adopted when assessing journalists’ work-related exposure to PTEs. In some instances authors have developed their own informal scale. Inadequate information is provided in most cases to establish whether the PTEs reported represent the complete list of questions, and whether or not participants were able to make suggestions or select only from a predefined list of PTEs. The findings are predominantly descriptive. Simpson and Boggs (1999) recruited 131 journalists from seven U.S. daily newspapers. The PTEs and sample percentages can be located in Table 2.2. “‘Other’ events covered by 21 percent of respondents included volcanic eruptions, tornadoes, drownings, train derailments, explosions, prison riots, executions, and an elephant charge” (Simpson & Boggs, p. 10). McMahon (2001) sampled Australian newspaper journalists in a pilot study to assess whether those who had covered trauma in the three years prior to the study had greater trauma symptomology than those who had not. The most frequently covered PTEs can also be found in Table 2.2. ‘Other’ PTEs in this study included “chemical explosion, critical illness, child abductions, victimisation of disabled [people], false reporting of rape, police and government harassment [of journalists]” (McMahon, 2001, p. 52).
Newman, Simpson, and Handschuh (2003) recruited 875 U.S. photojournalists from a range of media outlets. Work-related exposure to PTEs was measured using a scale created by the authors called the Trauma-Related Assignments Scale. The aim was to build on the study by Simpson and Boggs (1999). Participants were provided a list of 11 kinds of traumatic assignments and asked to indicate which kinds they had covered and which was the most stressful/upsetting. Table 2.2 shows the kinds of PTEs this sample had been exposed to in the course of their work. As in the previously discussed studies, participants were most likely to cover road accidents (95.4%). An interesting finding was that road accidents were considered to be the most stressful PTE to cover (Newman et al., 2003). Dimensions of work-related exposure were measured using 20 items assessing the frequency of potentially traumatic elements of assignments on a four-point Likert scale: 1 = never, 2 = rarely, 3 = sometimes, 4 = every day. The most frequently endorsed elements were covering a story that involved dead children (50.5%), family members of injured child (63.7%), equipment malfunction (54%), and having several similar assignments in a week (47%). Similar to the findings of Pyevich et al. (2003), approximately 20% of the sample had covered a PTE in which they knew the perpetrator or victim. This point is interesting as it raises trauma exposure and reaction issues relating to dual relationships. Journalists may experience and react differently to a PTE if they know an individual involved in a story. It is likely that location (or proximity) plays a role in this issue, whereby regionally based journalists may be more likely to know people and locations in the stories they cover than journalists working in metropolitan regions. Such issues have not been explored in the context of journalism, but are widely acknowledged in the human services professions. This combination of proximity, dual-relationships, and exposure to car accidents makes regional journalists a group of particular interest.
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Weidmann, Fehm, and Fydrich (2008) aimed to explore journalists’ psychological reactions to the tsunami in Southeast Asia in December 2004. Sixty-one journalists from a range of media outlets in Germany, Austria, and Switzerland participated in the study. Participants were presented with a list of PTEs developed by the authors and asked which they had been exposed to while covering the tsunami and how frequently. All participants indicated that they had frequently watched extremely destroyed areas and had also needed to contact victims who were in shock or very distressed (approx. 65% frequently, approx. 30% sometimes, and approx. 5% rarely). Participants were also likely to have smelled intense odours of decay (approx. 90%), seen dead bodies in close proximity (approx. 80%), and had contact with traumatised children (approx. 80%). This study is interesting because it considers sensory elements of exposure to PTEs. Often individuals experiencing negative post-trauma reactions will not only have intrusive visual memories but other sensory memories, such as sensations, smells, and sounds (Salyards, 2005). Whilst these elements are included in trauma reaction scales, they are rarely included in trauma exposure scales.

Weidmann and Papsdorf (2010) assessed TV newsroom staffers’ experiences of intrusive memories of video footage and other psychological symptoms, and compared these to a control group of radio newsroom staffers. To measure TV newsroom participants’ exposure to video footage they were asked six questions relating to the previous four weeks of work: “(1) to rate how much percent of their time at work they had spent with watching or processing video footage of any kind, (2) to provide a short description of the material, and to rate the percentage of video footage that (3) an average person not working in a newsroom, (4) the viewers, and (5) oneself would find distressing … Participants also gave an (6) overall rating of how distressing they found working with potentially unpleasant video footage on a scale from 1 (not at all) to
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6 (very much)” (Weidmann & Papsdorf, 2010, p. 265). Additionally, participants were required to indicate the extent to which the past four weeks was typical for them in terms of the amount of distressing footage they were exposed to.

The results of Weidmann and Papsdorf’s (2010) study indicated that an average of 61.2% of participants’ time was spent watching or processing video footage. “According to the participants’ descriptions the material was mostly related to the following topics: war/terrorist attacks/riots/crime (25.7%), politics/economy (18.1%), accidents/natural disasters (17.5%), entertainment/cultural events (14.2%), science/nature (11.6%), sports (5.8%), and others (7.1%)” (Weidmann & Papsdorf, 2010, p. 267). Participants indicated that an average of 10.5% (SD = 12.5) of the footage they are exposed to is distressing for them. Participants tended to indicate that people not working in a TV newsroom and viewers would find a greater proportion of the footage to be distressing (Weidmann & Papsdorf, 2010). In relation to overall levels of distress associated with video footage over the previous four weeks, 77.8% of participants indicated that they were not or were hardly distressed, 22.2% felt moderately distressed, and no participants indicated that they felt severely distressed. The majority of participants (58%) considered the previous four weeks to be typical in terms of the level of distressing content, the remainder of the sample indicated that the amount of distressing content experienced in the previous four weeks was lower or much lower than normal. This study is valuable in that in goes beyond assessing on-site coverage and considers the impact of technical roles such as editing footage. It may be that repetitive exposure to potentially traumatic footage increases the individual’s tendency to ruminate on an event and therefore experience increased negative post-trauma reactions. The two studies by Weidmann and colleagues are valuable in that they considered the level of distress associated with exposure.
Feinstein’s (2012) study of three groups of Mexican journalists found that one in four participants had stopped working on drug-related stories out of fear for their safety. Examples of drug-related violence experienced by the participants while on assignment include acquiring an injury from being attacked by drug traffickers (2.9%) and having a colleague injured (17.3%) or killed (49%) by drug cartels. For those who do report drug-related stories, half indicated that they had received threats from cartels and were significantly more likely to be threatened than those not covering drug-related stories. Feinstein (2013) compared 104 Mexican journalists to a matched control sample of 104 war journalists. The research was based on the idea that war journalists cover conflict for an intense but limited period of time, whereas local journalists covering conflict, such as Mexican journalists covering drug cartels, cannot take a break from their work or the potential danger of it. Feinstein (2013) reported that all war journalists sampled had been threatened due to their work, whereas 38.5% of the Mexican journalists sampled had been threatened. However, 10.6% of Mexican journalists had their family threatened, whereas this was not something experienced by any of the war journalists. This again raises the issue of location or proximity to events for journalists.

2.2.2. Personal exposure to PTEs

Outside of their profession, it is expected that journalists would be exposed to the same range of PTEs as other individuals. The studies discussed in this section highlight the range and nature of personal PTEs journalists might experience and suggest that the level of journalists’ personal PTE exposure can indicate the likelihood that they will develop PTSD symptoms. In a study of U.S. newspaper journalists by Simpson and Boggs (1999), participants were asked about their personal exposure to traumatic events and to common stressful life events. Thirty-eight percent of the sample had been exposed to personal traumatic events. Approximately half of these “had been in auto
crashes, 16 percent had been assaulted, and 16 percent had been victims of fires” (p. 10). The authors reported that 5% had been in combat. However, the nature of the combat as a personal PTE is unclear and so it is difficult to determine what is being assessed. It may be that the participant has been personally involved in war, or that they have been in an altercation with another person, or some other alternative. Seventy-nine percent of the sample reported experiencing at least one common life stressor. Participants were most likely to report having someone close to them be ill (31%) or die (28%), or to have financial problems (28%) in the previous six months. Three key limitations can be acknowledged when considering the interpretation of these findings. An established scale was not identified as being used for assessing stressful or traumatic life events. The distinction between ‘traumatic’ and ‘stressful’ events is not made explicitly. Finally, the authors do not provide details on which categories of events participants were asked about, or which types of events participants suggested themselves.

Pyevich et al. (2003, p. 326) measured personal exposure to PTEs via the Stressor Survey, described by the authors as follows: “consisting of nine dichotomous items, asked respondents whether they experienced potentially traumatic events (PTEs) including: natural disaster, accident, war zone, life-threatening illness/injury, traumatic death of family member/friend, kidnapping, physical assault, sexual assault, or other life-threatening event.” Seventy-seven percent indicated that they had been exposed to at least one of the stressor survey items. Participants were most likely to have been exposed to natural disasters (40.1%). Newman et al. (2003) stated that they developed 13 exposure items based on the Multiple Stressor Survey (MSS; Newman & Willard, 1996). The items included “natural disasters, transportation accidents, military stressors, homicide of a family member, unexpected deaths, kidnapping, and various forms of
family violence, sexual assault, and sexual harassment” (Newman et al., 2003, p. 8). This scale sounds like it may be the same as that used by Pyevich et al. (2003), although the studies report a different number of items. Newman et al. (2003) found that 90% of the 875 photojournalists they sampled had experienced personal trauma. Participants were most likely to have experienced a natural disaster (66.1%; similar to Pyevich et al., 2003), unexpected death of a close relative (39.8%), serious car or other accident (39.7%), and/or to witness family violence as a child (22.1%). Participants within the study who could be categorised as experiencing PTSD were significantly more likely to have been exposed to PTEs that were sexual in nature or related to domestic violence/abuse as a child. It is worthwhile noting that the sample in Newman et al. (2003) is described as consisting of photojournalists, but the demographics of the study indicate that 61% were still photographers, 34% were TV photographers and 5% were editors, educators, or students.

In Backholm and Björkqvist’s (2012b) study of 407 Finnish journalists, personal exposure to PTEs was measured via the TLEQ (Kubany et al., 2000). Males ($M = 4.27$) were exposed to significantly more personal PTEs than females ($M = 3.65$). The overall mean for number of exposures to PTEs was 3.92. Participants were most frequently exposed to the sudden death of a family member or friend (70%). The results indicated that personal exposure to events, including intense fear, helplessness, or horror, was a significant predictor of PTSD symptoms. These results mirrored those found through a similar regression analysis conducted by Backholm and Björkqvist (2012a) with their sample of Finnish journalists who covered the Jokela shooting. The TLEQ items are highly consistent with those described in the Stressor Surveys mentioned above. Weidmann et al. (2008) used the Post-traumatic Diagnostic Scale (PDS; Foa, Cashman, Jaycox, & Perry, 1997) to measure personal trauma in their sample. Of the journalists
who had covered a tsunami, approximately 90% of the sample had previously experienced at least one other PTE; just over half were personal PTEs such as childhood sexual abuse. The criteria for PTSD were fulfilled in the case of three participants. In this study, exposure to PTEs in personal life was found to be a more significant predictor of PTSD and depression symptoms than the work-related PTE exposure of the tsunami (Weidmann et al., 2008). This final point highlights the need for studies of trauma reactions in journalists to assess both personal and work-related exposure to PTEs. An SLR of trauma reactions in journalists (presented in Chapter 3) identified 21 studies that measured PTSD symptoms in journalists, yet only six articles in the present review have assessed levels of personal exposure to trauma.

2.2.3. Stalking victimisation

There is an element of irony in considering stalking victimisation in journalists. Anecdotal reports indicate that journalists are often treated as though they are vultures, perceived to be making a living off the misfortunes of others (e.g., Aiken, 1996; Caldwell, 1993). However, considering the experience amongst journalists of being stalked shifts the perspective to one of considering how journalists might be victimised by members of the broader community. Trauma exposure scales, such as the TLEQ, ask respondents about their experiences of being stalked. Whilst the TLEQ was adopted by two of the studies discussed in the personal exposure section, no discussion regarding the stalking item was provided for consideration here. Only one study has focused on stalking victimisation in journalists and will be the focus of this section.

Gass, Martini, Witthöft, Bailar, and Dressing (2009) sampled 493 German journalists with varying roles and media outlets, using an online survey to explore levels of stalking victimisation, associated levels of anxiety, and methods of coping. Gass et
al. (2009) provide little description of the items used to measure the three main concepts (stalking, anxiety, and coping), other than to say they used a modified version of Voß and Hoffmann’s (2002) stalking questionnaire. This makes interpretation and comparability of the findings to other studies difficult; nevertheless, this study by Gass et al. (2009) has been included in the present review, because it is the only research identified in the sampling process to study the stalking experiences of journalists and how this relates to psychological functioning. Therefore, the findings are best considered as exploratory and to be interpreted with caution. The following definition of stalking was adopted in the research: “the presence of multiple episodes of harassment that had to be present over a minimum of 2 weeks, involved more than one form of intrusive behavior, and provoked fear” (Gass et al., 2009, p. 165). A distinction was also made between common stalking and stalking specifically related to their role as a journalist.

Seventy participants (14.2%) indicated that they had been the victims of stalking. Of these, 11.4% were experiencing ongoing stalking whilst the remainder had experienced stalking in the past. Female journalists were more likely than males to be victims of stalking, accounting for 75.7% of those who experienced stalking. Participants were stalked by male (72.9%) and female (21.4%) perpetrators, and in some instances the sex of the stalker was unknown (5.7%). Common stalking was more prevalent than work-related stalking (15.7% of all cases). Females were significantly more likely to experience common stalking (84.8%), whilst males were significantly more likely to experience work-related stalking (72.8%). In the common stalking group, participants were most likely to be harassed by an ex-partner (49%). Those experiencing work-related stalking were most likely to be harassed by strangers (27%) and colleagues (27.7%). Participants in the work-related group were more likely than those in the
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common stalking group to suggest envy and revenge as motives for the stalking behaviour they experienced (Gass et al., 2009).

Journalists who experienced stalking were likely to have more than four years of journalistic experience. No significant differences were found between the work and common stalking groups in relation to the types of harassing behaviours they were exposed to, or the length of time they were stalked. However, it is noteworthy that those participants exposed to common stalking experienced significantly greater levels of anxiety than those exposed to work-related stalking. Females were more likely to make up the common stalking group. However, statistical analysis indicated that this was not likely to be the result of sex differences but rather due to the type of stalking (i.e., work-related compared to common stalking).

Participants specified a range of stress-related symptoms experienced as a result of their stalking (groups combined), such as restlessness (65.7%), sleep disturbances (44.3%), gastrointestinal complaints (27.1%), affective disturbances (20%), and headaches (17.1%). Approximately half of those who were exposed to stalking said that they started to have aggressive thoughts about their stalker. One in five participants who were victims of stalking had taken sick leave as a result. Half again indicated that they have become more suspicious of other people as a result of their stalking victimisation. This result is particularly interesting as it supports previous research indicating that PTE exposure can result in journalists, and others, acquiring altered perspectives about the world and people (Janoff-Bulman, 1989; Pyevich et al., 2003).

Participants were more likely to seek support from colleagues and superiors when their stalking was work-related (72.7% compared to 23.7%). Whilst 22.2% of those who
sought support from colleagues and superiors felt they received sufficient support, many felt they received insufficient support (33.3%) or none at all (44.4%). Approximately 80% of all those who experienced stalking victimisation indicated that they feel it is necessary to receive more information and support in relation to how to cope with work-related stalking (Gass et al., 2009). This suggests an area for further development within the journalism industry, whereby organisational policy and management might consider how to address stalking of their staff and what support should be offered.

2.3. Conclusions

The present SLR aimed to provide a concise, comprehensive, and systematic review of the quantitative literature relating to journalists’ exposure to PTEs. Trauma exposure has been studied in a range of countries and across a range of media outlets. The results of the review highlight key trends and areas for development in research relating to journalists’ work-related and personal exposure to trauma, as well as the experience of stalking victimisation. The thorough and structured process adopted in this review provides the ability to assert with some degree of confidence which areas within the journalist trauma exposure literature require further consideration.

For work-related exposure, journalists were found to have prevalence rates as high as 95%, exceeding rates of exposure reported for the general population studies discussed in the introduction. Some researchers have adopted established scales (JTES and THQ), whilst others have utilised informal methods of assessing work-related exposure to PTEs. Only those who adopted established scales provided descriptive statistics such as means and standard deviations. Even where such descriptive statistics are provided, comparison across studies is difficult because some report overall sample statistics and others report subgroup statistics only (e.g., males compared to females).
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Other studies have focused on providing narrative descriptions and percentages for endorsed items. Comparisons across studies is further complicated by the fact that different types of PTEs have been assessed over different periods of time, some asking if exposure was at the scene or off-site, whilst others did not.

There are benefits and disadvantages to weigh up when choosing between journalist specific trauma exposure scales (e.g., JTES) and other established trauma exposure scales (e.g., THQ). Scales tailored to the role of journalists are useful in that they are insightful to that occupation. The disadvantage is that it is then difficult to compare to other occupations and the general population. The THQ and the TLEQ are not specific to the experiences of journalists but have been used widely in the broader trauma literature; hence studies using these scales can be compared to broader literature and other professions when statistics are reported consistently.

As stated in the introduction of this chapter, trauma exposure prevalence rates in general population samples range from 16–90%; whereas, the prevalence of personal trauma exposure amongst journalists ranges from 38–90%. Some studies have not measured personal and work-related exposure discretely, or have not measured personal exposure at all. In such cases it is difficult to assess the source of the majority of exposure. This is a considerable theoretical shortcoming because research has shown prior personal life exposure to trauma to be a greater predictor of negative trauma reactions than work-related exposure. Despite this, fewer studies have considered personal exposure compared to studies on work-related exposure. As stated previously, an SLR of trauma reactions in journalists (presented in Chapter 3) identified 21 studies that measured PTSD symptoms in journalists, yet only six articles in the present review have assessed levels of personal exposure to trauma. Similar to the discussion of work-
related exposure, the personal exposure findings are also troubled by inconsistencies in reporting techniques across studies. Most of the studies include an overall prevalence rate of participants that have experienced at least one PTE. However, only Backholm and Bjorkqvist (2012b) report a comparison of means. The period of time assessed is unclear in many of the studies.

It is noteworthy that Simpson and Boggs (1999) reported that only 38% of their sample had experienced a PTE, but the percentage of those experiencing stressors was more congruent with the high PTE prevalence rates reported in other studies. This low PTE exposure rate could be due to a range of factors, such as the small sample size of the study, which might mean the sample was not as representative as in other cases. It may also be related to the fact that an established scale was not utilised. In many of the studies that did not use an established scale it is not clear if participants were presented with a list of items or if they offered their own experienced PTEs. When exposure studies rely on participant recall as opposed to recognition (asking them to suggest events compared to ticking from a list) lower prevalence rates of exposure are reported (Mills et al., 2011). Another influential factor may relate to a difference in how the researcher and the participant define ‘traumatic’. The contention over the difference between stressors and PTEs is a key issue in the area of psychological trauma; as the list of criteria for trauma exposure is widened, so are the kinds of events included in scales (Mills et al., 2011). Finally, there is the possibility that journalists might have a tendency to under-report exposure given the stoicism traditionally associated with the profession. This might be the case especially where they have lower than usual levels of PTE exposure but typical levels of stressors. The category associated with trauma carries the accompanying stigma whilst stress is a more acceptable and widespread phenomenon.
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Only one study has explicitly assessed stalking of journalists. Other studies have used scales such as the TLEQ that ask about stalking but have not discussed the findings associated with stalking. The findings by Gass et al. (2009) seem to suggest that stalking is an important issue resulting in stress symptoms and altered world assumptions in a subset of journalists. Journalists experienced work-related and personal stalking, and stalkers were found to be both strangers and colleagues. This latter point, coupled with the reported sick leave associated with stalking, highlights the need for organisations employing journalists to be aware of stalking as a potential issue, and have policies and procedures in place for supporting staff experiencing harassment from viewers and colleagues in their professional lives. The findings reported by Gass et al. (2009) are highly gendered in relation to the kinds of stalking journalists experience. Caution is required when considering gender differences in this population, as males tend to be overrepresented in journalist samples, sampling methods are rarely randomised or stratified, and population samples indicating actual gender splits are not currently available. Similarly, specific exposure items have been found to be associated with greater prevalence rates in females, such as domestic violence (Mills et al., 2011).

Methodologically, the Gass et al. (2009) study is problematic in that the authors provide little description of the items used to measure the three main concepts (stalking, anxiety, and coping). Future research should be explicit regarding definitions and use established scales. Additionally, future research could aim to establish prevalence rates of stalking amongst journalists in other countries and use qualitative methods to explore the kinds of support mechanisms that journalists who are experiencing stalking might find useful in organisations.

The area of research on journalists and trauma exposure lacks theoretical underpinning with a tendency to focus on practical applications as opposed to
contextualising within, or adding to, broader trauma research. Methodologically, future quantitative research should aim to use consistent criteria for events and time periods, and include descriptive statistics (frequencies, means, and standard deviations) as well as narrative descriptions and percentages of endorsed items, to enhance the capacity to compare across studies. There is also a need to consider both personal and work-related exposure discretely so as to best delineate and understand the trauma experiences and reactions of journalists. A potential avenue for future development that has become apparent through this review relates to the experience of trauma exposure in regional journalists. Journalists working regionally may experience an overlap of risk factors associated with PTEs to a greater extent (or in a unique way) when compared to their metropolitan counterparts; the combination of close proximity, dual-relationships from living and working in a small community, and greater exposure to car accidents, could increase the likelihood of adverse trauma reactions. This is likely to be exacerbated by the greater job demands and stressors that come with working out of a smaller media organisation (Cook & Banks, 1993; Cook, Banks, & Turner, 1993). To address this issue, quantitative methods could be used to establish whether there are differences in the rates of trauma exposure and related reactions in regional compared to metropolitan journalists. Qualitative methods could also be used to elucidate factors pertinent to working regionally and to establish the support required by those journalists.
Chapter 3. Journalists and trauma reactions

3.1. Introduction

The previous chapter (Chapter 2) established that journalists are exposed to a range of personal potentially traumatic events (PTEs), as are others in the general population. However, journalists are also frequently exposed to a wide range of work-related PTEs. These two kinds of PTE exposures amongst journalists make them a group of particular interest when considering subsequent trauma reactions. This chapter reports the findings of a systematic literature review (SLR) aiming to address the research question: What insights can the quantitative literature provide regarding journalists’ experience of trauma reactions? Sections 3.1.1. and 3.1.2. below, describe the clinical criteria and general population prevalence rates for relevant trauma- and stressor-related disorders and anxiety disorders as described in the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM–5; American Psychiatric Association (APA), 2013): posttraumatic stress disorder (PTSD), acute stress disorder (ASD), specific phobia, social anxiety disorder, panic disorder, and generalised anxiety disorder (GAD).

Before describing the clinical criteria for such disorders, it is important to acknowledge that trauma reactions are best understood in terms of a continuum based on individual differences in which, after experiencing a PTE, some people will experience little or no symptomology and others will have severe traumatic responses (Bonanno & Gupta, 2012). For example, the majority of individuals exposed to PTEs do

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6 The DSM–5 was developed by the APA (2013, p. xli) and “is intended to serve as a practical, functional, and flexible guide for organizing information that can aid in the accurate diagnosis and treatment of mental disorders.”
not experience psychopathology (Bonanno, Brewin, Kaniasty, & La Greca, 2010). On the other hand, comorbidity is common amongst those that do experience negative psychological symptoms in the wake of PTEs (McFarlane, 2004; McFarlane, Van Hooff, & Goodhew, 2012). Limitations of early understandings of environmental stressors and trauma reactions are increasingly coming to light. McFarlane et al. (2012) argue that increased awareness of comorbidity of PTSD and depression (Kar & Bastia, 2006; Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995), substance use (McFarlane, 1998; Mills, Teesson, Ross, & Peters, 2006) and anxiety (Kar and Bastia, 2006; Kessler et al., 1995), means that simplistic links between threat and anxiety or loss and depression are no longer appropriate. Therefore, the literature relating to journalists’ experiences of mood disorders is reviewed in Chapter 4.

There appear to be three review articles written regarding the psychological implications of journalistic work. The reviews by MacDonald and colleagues focus specifically on substance use and burnout (MacDonald, Saliba, & Hodgins, 2016; MacDonald, Saliba, Hodgins, & Ovington, 2016). Aoki, Malcolm, Yamaguchi, Thornicroft, and Henderson (2012) identify 15 studies that measure symptoms of PTSD; however, they report only prevalence rates of PTSD as described in 11 of the 15 identified studies, and a brief summary of trends in the area of journalists and PTSD research. Aoki et al. (2012) did not provide a discussion regarding trauma- and stress-related disorders, or anxiety disorders more broadly, amongst journalist samples. Consequently, the unique contributions of the present SLR include the increased sample size \((n = 21)\), in-depth discussion of all studies reviewed, and a specific argument regarding research relating to journalists’ experiences of trauma- and stress-related disorders, and anxiety disorders.
3.1.1. Trauma- and stressor-related disorders

A diagnosis of a trauma- or stressor-related disorder requires the individual to have experienced at least one PTE or stressful event. In this way, trauma- or stressor-related disorders are distinct from other disorders covered in the DSM–5, even though symptoms associated with other disorders are possible following PTE or stressor exposure. The two disorders of particular interest here are PTSD and ASD.7

The experience of PTSD is operationalised primarily via five criteria (APA, 2013). Criterion A requires individuals to have been exposed to a PTE. This exposure may be direct experience, witnessing the event as it happens to someone else, hearing about the event from someone who has experienced it and is close to the individual, or repeated work-related exposure to details of PTEs. Each of these kinds of PTE exposure is relevant when considering journalists’ trauma exposure. Criterion B requires individuals to experience intrusion symptoms, such as distressing memories, dreams, or flashbacks. Criterion C relates to the individuals experience of avoidance symptoms; that is, avoiding internal (e.g., memories and thoughts) and external (e.g., locations or people) cues associated with the PTE. Criterion D concerns the cognitive and affective changes associated with PTE exposure, such as altered world assumptions, memory problems, distorted beliefs about the PTE, experiencing negative emotions, and feeling detached. Finally, Criterion E relates to the individual’s experience of changes in arousal and reactivity, such as irritability, recklessness, and hypervigilance. A diagnosis of PTSD requires individuals to have been experiencing Criterion B–E symptoms for at least one month (APA, 2013).

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7 With respect to each psychological disorder described in this chapter, individuals are only considered to be experiencing a psychological disorder if their symptoms result in distress or impairment in functioning across a range of domains, such as in their work or relationships (APA, 2013).
Norris, Kaniasty, Conrad, Inman, & Murphy (2002, p. 211) performed a review of the disaster research conducted between 1981 and 2001 and found that PTSD was “the condition most often assessed and observed,” present in 68% of their 160 samples. In referring to research in the U.S. by Kessler and colleagues (2005a; 2005b), the DSM–5 indicates a PTSD lifetime prevalence of 8.7% and a 12-month prevalence rate of 3.5% (APA, 2013). PTSD prevalence in one literature review, defined as presence of at least one symptom cluster, was shown to be as low as 3% and as high as 70% (McFarlane et al., 2012). Exact prevalence figures vary due to methodological differences and the incident specific nature of much of the disaster research. As a body of literature, trauma research has considered a wide range of responses to an even wider range of PTEs, measured using many different methods (Norris et al., 2002). There are a number of challenges in terms of interpretation and generalisation of findings (McFarlane et al., 2012, p. 56):

Challenges revolve around different time periods having elapsed after the disaster [or PTE], the identification and recruitment of representative samples in the disrupted environment following disaster, and the use of different measures where the cut-offs are not cross-validated.

ASD may also present in individuals exposed to disaster (Norris et al., 2002). The clinical criteria for ASD are similar to those for PTSD (APA, 2013). As in Criterion A above, ASD results from exposure to at least one PTE. In addition to this, individuals experience nine or more symptoms associated with intrusion, negative affect, dissociation, avoidance, and arousal. Whilst a diagnosis of PTSD requires symptoms to last at least one month, ASD is characterised by symptom duration of at least 3 days and up to one month. The DSM–5 (APA, 2013) lists a number of studies, each focusing on different kinds of PTEs, in which ASD prevalence ranges from 6% to 50%. In citing example research (Classen, Koopman, Hales, & Spiegel, 1998; Elklit &
Christiansen, 2010) the DSM–5 highlights that prevalence rates over 20% are typically associated with man-made (interpersonal) violence, as opposed to non-interpersonal PTEs (APA, 2013).

3.1.2. Anxiety disorders

The DSM–5 (APA, 2013, p. 189) describes anxiety disorders as being characterised by “excessive fear and anxiety and related behavioral disturbances.” Four anxiety disorders are of interest to the present study, namely specific phobia, social anxiety disorder (social phobia), panic disorder, and GAD. Research indicates that individuals exposed to various kinds of PTEs are more likely than the general population to experience symptoms associated with one of these disorders (Önder, Tural, Aker, Kılıç, & Erdoğan, 2006; McFarlane et al., 2012; Norris et al., 2002).

According to the DSM–5 (APA, 2013, p. 197), an individual experiencing a specific phobia displays “fear or anxiety due to a specific object or situation,” such as needles, spiders, or enclosed spaces. The clinical criteria for specific phobia require that the particular stimulus of concern consistently causes anxiety or fear that is disproportionate to the actual threat posed, and that the individual aims to avoid associated stimuli. Diagnosis of a specific phobia requires symptom duration of at least 6-months and also requires the symptoms experienced to result in distress or impairment in functioning across a range of domains, such as in an individual’s work or relationships. The DSM–5 cites a number of studies indicating that the 12-month prevalence rate of specific phobia internationally, ranges from approximately 2% to 9% (Kessler et al., 2005b; Kessler, Petukhova, Sampson, Zaslavsky, & Wittchen, 2012; Lewis-Fernández et al., 2010; Stinson et al., 2007).
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For those with social anxiety disorder (social phobia), social situations are the cause of fear or anxiety as the individual is “exposed to possible scrutiny by others. Examples include social interactions (e.g., having a conversation, meeting unfamiliar people), being observed (e.g., eating or drinking), and performing in front of others (e.g., giving a speech)” (APA, 2013, p. 202). The primary concern for such individuals is that they will do something that causes others to have a negative attitude towards them—this includes the ability of others to notice their anxiety symptoms. Similar to specific phobia, the clinical criteria for social anxiety disorder require that social situations consistently cause anxiety or fear that is disproportionate to the actual threat posed, and that the individual aims to avoid such situations. A diagnosis of social anxiety disorder requires symptom duration of at least 6-months and also requires the symptoms experienced to result in distress or impairment in functioning across a range of domains, such as in the individual’s work or relationships. The DSM–5 cites a number of studies indicating that the 12-month prevalence rate of social anxiety disorder internationally, ranges from approximately 0.5% to 7.0% (Kessler et al., 2005b; 2012; Lewis-Fernández et al., 2010; Ruscio et al., 2008; Wittchen & Jacobi, 2005).

Panic disorder is characterised by “recurrent unexpected panic attacks,” that is, “an abrupt surge of intense fear or intense discomfort that reaches a peak within minutes” (APA, 2013, p. 208). The DSM–5 specifies that panic attacks may occur at a time when the individual is either anxious or calm. The clinical criteria for panic disorder require individuals to experience at least four panic attack related symptoms, including palpitations, sweating, shaking, chest pain, and nausea. Finally, diagnosis of

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8 Individuals may experience panic disorder symptoms as a response to specific situations, such as being in a crowd of people or using public transport; this is referred to as agoraphobia (APA, 2013).
panic disorder requires that for at least one-month after a panic attack the individual experiences concern or worry that they will have another panic attack and that the individual displays a clear change in behaviour intended to avoid having another panic attack. The DSM–5 cites a number of studies indicating that the 12-month prevalence rate of panic disorder internationally, ranges from approximately 0.1% to 3.0% (Goodwin et al., 2005; Kessler et al., 2005b; 2012; Lewis-Fernández et al., 2010).

GAD is characterised by “excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance)” (APA, 2013, p. 222). Individuals experiencing GAD have at least three of the following symptoms: restlessness, fatigue, reduced concentration, irritability, tension, and sleep related problems. The clinical criteria for GAD require that individuals have reduced capacity to control their anxiety. The DSM–5 cites research indicating that the 12-month prevalence rate of GAD internationally, ranges from approximately 0.4% to 3.6% (Kessler et al., 2012; Lewis-Fernández et al., 2010).

3.2. Review

Of the 73 documents that passed the methodological screen,9 21 documents concerned trauma-related, stressor-related, and anxiety disorders in journalists. A number of possible trauma-related, stressor-related, and anxiety disorders that journalists might experience as a result of various factors, such as their personal and work-related exposure to trauma, was discussed in the introduction section above. However, the

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9 The SLR method is described in detail in the introductory section of Phase A.
findings of the present SLR indicate that only PTSD has been assessed in journalist samples. It is important to note that while terms such as *PTSD prevalence* and *probable PTSD* are used in the reviewed articles, what is actually being assessed is not diagnosis prevalence, but symptoms. A diagnostic interview is required to determine an appropriate diagnosis, and therefore prevalence within a given population; whereas the present findings represent the symptom cluster typically associated with PTSD.

Table 3.1. provides an overview of the 21 studies that have measured PTSD symptoms in journalist samples. The table indicates that PTSD has been studied across the world and amongst various journalism mediums for the last 20 years. Both domestic and war journalism have been considered. Response rates are provided for those studies that reported such information. However, two points are worth considering with respect to such figures: (1) it is not clear in each case whether the figure reported was the initial response rate, or the response rate after data screening had occurred (e.g., removing incomplete data); (2) In many cases, response rates are not reported, and this may be because it is not possible to accurately calculate response rates when sending research materials to a large online or organisational group of potential participants. Those studies with the highest response rates tended to be the studies that specifically targeted a set number of participants and contacted them directly.

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10 Through the review process studies were identified that measured stress and general psychological distress amongst journalist samples. Because neither kind of finding fits within the clinical criteria for trauma-related, stressor-related, and anxiety disorders, they have not been included in the present thesis.
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Table 3.1.  
*Summary of studies assessing PTSD in journalist samples*

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freinkel, Koopman &amp; Spiegel (1994)</td>
<td>U.S.</td>
<td>Paper-based survey</td>
<td>Journalists present at a prisoner execution</td>
<td>18</td>
<td>83.0</td>
<td>TV, newspaper, radio</td>
<td>Stanford Acute Stress Reaction Questionnaire</td>
</tr>
<tr>
<td>McMahon (2001)</td>
<td>Australia</td>
<td>Paper-based survey</td>
<td>Journalists who had covered trauma (<em>n</em> = 32) and who had not (25)</td>
<td>57</td>
<td>21.0</td>
<td>Newspaper</td>
<td>IES</td>
</tr>
<tr>
<td>Feinstein &amp; Owen (2002a)</td>
<td>International</td>
<td>Online survey</td>
<td>War journalists</td>
<td>140</td>
<td>82.2</td>
<td>Unspecified</td>
<td>IES–R</td>
</tr>
<tr>
<td>Feinstein, Owen, &amp; Blair (2002)</td>
<td>International</td>
<td>Online survey</td>
<td>War (<em>n</em> = 140) and domestic journalists (n = 107)</td>
<td>247</td>
<td>82.8</td>
<td>International news organisations</td>
<td>IES–R</td>
</tr>
</tbody>
</table>
Table 3.1. continued

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weidmann, Fehm, &amp; Fydrich (2008)</td>
<td>Germany, Austria, &amp; Switzerland</td>
<td>Online survey</td>
<td>Journalists</td>
<td>61</td>
<td>Unspecified</td>
<td>TV, newspaper, magazines, radio</td>
<td>PDS</td>
</tr>
<tr>
<td>Hatanaka et al. (2010)</td>
<td>Japan</td>
<td>Paper-based survey</td>
<td>Broadcast journalists</td>
<td>270</td>
<td>86.0</td>
<td>TV</td>
<td>IES–R</td>
</tr>
<tr>
<td>Weidmann &amp; Papsdorf (2010)</td>
<td>Germany, Austria, &amp; Switzerland</td>
<td>Online survey</td>
<td>TV (n = 81) and radio (n = 65) newsroom staff</td>
<td>146</td>
<td>Unspecified</td>
<td>TV, radio</td>
<td>Intrusions interview</td>
</tr>
<tr>
<td>Dworzynik (2011)</td>
<td>U.S.</td>
<td>Online survey</td>
<td>Camera operators, reporters, live truck engineers</td>
<td>280</td>
<td>Unspecified</td>
<td>Television</td>
<td>PCL–C</td>
</tr>
<tr>
<td>Buchanan &amp; Keats (2011)</td>
<td>Canada</td>
<td>Interview survey</td>
<td>Journalists</td>
<td>31</td>
<td>Unspecified</td>
<td>TV, newspaper</td>
<td>IES–R</td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist (2012a)</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>493</td>
<td>Unspecified</td>
<td>TV, newspaper, radio, internet</td>
<td>PCL–C</td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist (2012b)</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>407</td>
<td>Unspecified</td>
<td>TV, newspaper, radio, other</td>
<td>PCL–C</td>
</tr>
</tbody>
</table>
### Table 3.1. continued

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Browne, Evangeli, &amp; Greenberg (2012)</td>
<td>International</td>
<td>Online survey</td>
<td>Journalists</td>
<td>50</td>
<td>35.0&lt;sup&gt;a&lt;/sup&gt;</td>
<td>British media organisation</td>
<td>PCL–C</td>
</tr>
<tr>
<td>Feinstein (2013)</td>
<td>Mexico and International</td>
<td>Online survey</td>
<td>Mexican journalists (&lt;i&gt;n = 104&lt;/i&gt;) and war journalists (&lt;i&gt;n = 104&lt;/i&gt;)</td>
<td>208</td>
<td>80.6</td>
<td>Mexican and international news organisations</td>
<td>IES–R</td>
</tr>
</tbody>
</table>

**Note:**

a. Browne, Evangeli, & Greenberg (2012) reported an initial response rate of 35.0%, but a final response rate of 15.0% when incomplete responses were removed from the sample.

b. PDS: Post-traumatic Diagnostic Scale
c. IES: Impact of Event Scale
d. IES–R: Impact of Event Scale – Revised
e. PCL: PTSD Checklist
f. PCL–C: PTSD Checklist – Civilian Version
3.2.1. Measurements of PTSD in journalists

Prevalence rates of PTSD amongst journalist samples have been reported as ranging from 4.3% to 19.7% (Backholm & Björkqvist, 2012a; Dworznik, 2011; Feinstein & Owen, 2002a; Hatanaka et al., 2010; Newman, Simpson, & Handschuh, 2003; Pyevich, Newman, & Daleiden, 2003; Weidmann, Fehm, & Fydrich, 2008). Studies were most likely to have used the Impact of Event Scale – Revised (IES–R) or the PTSD Checklist to assess PTSD symptoms. Each study is discussed in this section and grouped according to the scale adopted; although, Ghaffar and Feinstein (2005) will be discussed first. Applications of the findings from this study are limited in that key methodological information is unspecified (e.g., sample, measures, and analysis); however, given the limited research in the area comparing domestic and war journalists, the results are included here. The authors briefly outline their findings from a sample (n; unspecified) of domestic news journalists based in New York who were required to cover the September 11, 2001, World Trade Center attack. The data for war and domestic journalists comes from a previous study, likely to be that of Feinstein, Owen, and Blair (2002), but the source of the data is not described in the article. Ghaffar and Feinstein (2005) report that levels of intrusion, avoidance, and hyperarousal in journalists three months after covering the events of September 11, 2001, matched those of a sample of war journalists. However, by the 12-month point, levels on these three scales had returned to baseline for domestic journalists who had not covered the events of September 11, 2001. It is likely that the IES–R was used in this study given that the article refers to intrusion, avoidance, and hyperarousal subscales, and because Feinstein and colleagues have typically used the IES–R.
3.2.1.1. Impact of Event Scale (IES)

The IES is a 15-item scale that aims to assess subjective distress as the result of a single PTE (Horowitz, Wilner, & Alvarez, 1979). The IES contains two subscales, one assessing intrusive thoughts and the other assessing avoidance reactions. Responses to items are based on the frequency at which the participant has experienced the symptom over a given period of time (not at all = 0, rarely = 1, sometimes = 3, and often = 5). A higher score indicates an increased level of PTSD symptoms. It is important to note that the IES was developed before PTSD became a DSM diagnosis, and so does not assess other symptom clusters such as hyperasoual (Thoresen et al., 2010). Two studies were found to have assessed trauma reactions in journalists, using the IES.

Simpson and Boggs (1999) used the IES; however, they changed the tense of the questions and did not require participants to focus on a single event. On the avoidance scale, the percentage of participants endorsing each item ranged from 34.4% (I feel as if these things haven’t happened or aren’t real) to 80.2% (When I think about things I don’t mean to, I try not to get upset). For the overall avoidance scale, the mean score was 12.6 (SD = 7.3). On the intrusion scale, the percentage of participants endorsing each item ranged from 69.8% (I have dreams about these things) to 90% (I find myself thinking about things when I don’t mean to). For the overall intrusion scale, the mean score was 12.0 (SD = 6.9). Simpson and Boggs (1999) compared these overall means for avoidance and intrusion to a range of other studies to contextualise their findings. For both scales, the mean values were higher after four months than for military avalanche victims (Johnsen, Eid, Lovstad, & Michelsen, 1997) and firefighters (McFarlane, 1992), but lower than those of stress clinic patients (Horowitz et al., 1979) and people with Vietnam combat exposure (McFall, Smith, Roszell, Tarver, & Malas,
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1990). It is noteworthy that these comparisons are based on reported means, as opposed to statistical analysis, and therefore serve a descriptive comparative function.

McMahon (2001) assessed whether those who had covered trauma in the three years prior to the study experienced greater trauma symptomology than those who had not. The IES was completed in relation to two time points: the time the event was covered and the current time. McMahon (2001) hypothesised that participant IES scores would decrease over time. The results of the study indicate that this was the case with mean scores on both the intrusion and avoidance subscales decreasing over time.

3.2.1.2. Impact of Event Scale – Revised (IES–R)

The IES-R is a 22-item scale that aims to assess subjective distress as the result of exposure to trauma (Weiss, 2004). The IES–R contains three subscales: intrusion, avoidance, and hyperarousal. Responses are based on the severity of symptom frequency (0 = not at all, 1 = a little bit, 2 = moderately, 3 = quite a bit, and 4 = extremely), as in the IES. A higher score indicates a greater level of PTSD symptoms; however, there are no specific cut-offs for the IES–R (Motlagh, 2010). Despite this, three studies reported findings in terms of severity categories. None of the three studies explain the cut-offs applied in order to ascertain these categories, making comparisons across studies difficult. Marais and Stuart (2005) divided their participants into three groups: minor reactions (20%), moderate reactions (48%), and severe reactions of clinical importance (32%). Buchanan and Keats (2011) reported that 16% of their sample were categorised as experiencing substantive PTSD related distress, and 32% were categorised as moderately distressed. Feinstein and Nicolson (2005, p. 130) reported categories specific to the three subscales: “intrusion—not at all distressing, 58%; a little bit distressing, 27%; moderately distressing, 14%; quite a bit distressing,
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1%; and extremely distressing, 0%. The respective percentages for avoidance were 68, 30, 4, 0, and 0% and for arousal were 69, 22, 9, 0, and 0%.”

Two studies reported PTSD prevalence rates for their samples. Feinstein and Owen (2002a) applied the DSM–IV criteria (minimum of one intrusion symptom, three avoidance symptoms, and two hyperarousal symptoms) and determined that 19.7% of the war journalists sampled could be diagnosed with probable PTSD. Whereas, Hatanaka et al. (2010) applied a cut-off of 24/25 to determine a PTSD prevalence rate of 6%, 14 out of the 16 participants in this group covered the PTE from the field as opposed to the newsroom. As discussed above, these findings are best considered to be an indication of participants at-risk of PTSD. The most common approach to reporting findings on the IES–R is to report mean and standard deviation scores for the total scale or for each of the three subscales. The following studies have done so, and the mean and standard deviation figures for each are shown in Table 3.2.
Table 3.2.
*Mean scores on the Impact of Event Scale – Revised (IES–R)*

<table>
<thead>
<tr>
<th>Study</th>
<th>Sample</th>
<th>Intrusion M (SD)</th>
<th>Avoidance M (SD)</th>
<th>Hyperarousal M (SD)</th>
<th>IES–R Total M (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feinstein &amp; Owen (2002a)</td>
<td>War journalists</td>
<td>9.2 (7.1)</td>
<td>6.7 (6.2)</td>
<td>4.7 (4.9)</td>
<td>20.2 (16.0)</td>
</tr>
<tr>
<td>Feinstein et al. (2002)†</td>
<td>War journalists†</td>
<td>9.2 (7.1)</td>
<td>6.7 (6.2)</td>
<td>4.7 (4.9)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Domestic journalists†</td>
<td>4.3 (4.4)</td>
<td>3.1 (4.0)</td>
<td>2.0 (2.8)</td>
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<tr>
<td>Feinstein &amp; Nicolson (2005)</td>
<td>Embedded war journalists</td>
<td>7.3 (6.9)</td>
<td>5.3 (5.0)</td>
<td>3.8 (4.3)</td>
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</tr>
<tr>
<td></td>
<td>Unilateral war journalists</td>
<td>7.1 (6.4)</td>
<td>5.8 (5.8)</td>
<td>4.2 (4.2)</td>
<td></td>
</tr>
<tr>
<td>Weidmann &amp; Papsdorf (2010)²üs</td>
<td>TV journalists</td>
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<td>8.2 (8.1)</td>
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</tr>
<tr>
<td>Hatanaka et al. (2010)³</td>
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<td></td>
<td></td>
<td>8.3 (10.3)³</td>
</tr>
<tr>
<td></td>
<td>TV journalists newsroom</td>
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<td></td>
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<td>5.4 (6.2)³</td>
</tr>
<tr>
<td>Feinstein (2012)</td>
<td>Mexican – threatened and stopped</td>
<td>1.7 (1.1)³wu</td>
<td>1.7 (1.1)³vy</td>
<td>1.7 (1.2)³</td>
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<tr>
<td></td>
<td>Mexican – threatened and continued</td>
<td>1.1 (1.0)³v</td>
<td>1.0 (0.8)³x</td>
<td>1.2 (0.8)³</td>
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</tr>
<tr>
<td></td>
<td>Mexican – never threatened</td>
<td>1.1 (1.1)³w</td>
<td>1.11 (1.0)³y</td>
<td>1.0 (1.1)³</td>
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Table 3.2. continued

<table>
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<th>Study</th>
<th>Sample</th>
<th>Intrusion M (SD)</th>
<th>Avoidance M (SD)</th>
<th>Hyperarousal M (SD)</th>
<th>IES–R Total M (SD)</th>
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<td></td>
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<td>8.1 (6.9)</td>
<td>6.0 (5.7)</td>
<td>4.3 (4.5)</td>
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<tr>
<td>Feinstein (2013)</td>
<td>Mexican journalists(^h)</td>
<td>1.2 (1.0)</td>
<td>1.2 (0.9)</td>
<td>1.3 (1.0)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>War journalists(^h)</td>
<td>1.1 (0.8)</td>
<td>0.8 (0.8)</td>
<td>0.8 (0.8)</td>
<td></td>
</tr>
</tbody>
</table>

Note:

a. The war journalist sample reported in Feinstein et al. (2002) is the same sample as in Feinstein and Owen (2002a), hence the subscale means are identical.
c. Compared journalists who had covered PTEs from on-site to those who had covered PTEs from the newsroom or office.
d. All figures are rounded to one decimal place for consistency.
e. Where two samples are denoted with the same letter, the mean scores on each subscale are significantly different.
f. Where two means are denoted with the same letter, those means are statistically different.
g. Mexican – threatened and stopped: Mexican journalists who had been threatened because of their job and subsequently stopped reporting drug-related stories.
h. Mexican – never stopped: Mexican journalists who had never been threatened because of their job.
i. Mexican – threatened and continued: Mexican journalists who had been threatened because of their job and continued reporting drug-related stories.
In the study by Feinstein and Owen (2002a) each avoidance and hyperarousal item was endorsed by 10.0–37.3% of participants, whereas two intrusion items were endorsed by half of the respondents: ‘Any reminder brought back feelings about it’ (47.8%), and ‘Pictures about it popped into my mind’ (49.3%). Such findings are congruent with those obtained in a qualitative study of trauma symptomology by Buchanan and Keats (2011), in which journalists were shown to be more likely to experience intrusion symptoms than avoidance and arousal symptoms. It is not surprising that journalists are likely to be those most impacted by intrusion and less by avoidance and hyperarousal, given the nature of their profession with its requirement for continuous exposure and in telling the story of various PTEs to their audience (Feinstein & Owen, 2002a). Furthermore, Feinstein and Owen (2002a) highlight that this prevalence is greater than that for Canadian general population levels of probable PTSD. Feinstein et al. (2002) compared the war journalists sampled in the previous study (Feinstein & Owen, 2002a) to domestic journalists who had not covered war. Because of the range of work-related stressors, such as deadlines and long hours, the authors reasoned that comparing war journalists’ scores to those of domestic journalists would better show the unique experiences of war journalists. The groups were matched for gender, age, and years of experience. War journalists scored significantly higher on all three IES–R subscales when compared to the domestic group, as shown in Table 3.2.

Weidmann and Papsdorf (2010) measured intrusion and avoidance symptoms in TV journalists relating to the video footage participants had been exposed to at work over the previous four weeks. The German version of the IES-R (Maercker & Schützwohl, 1998) was used. Items on the German version (0, 1, 3, 5) of the IES–R are scored differently compared to the English version (0, 1, 2, 3, 4). In referring to Maercker and Schützwohl (1998), the authors suggest that their participants experienced
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mild intrusion and avoidance symptoms (see Table 3.2.) compared to populations directly affected by trauma (Weidmann & Papsdorf, 2010). Approximately 60% of the sample indicated that they had experienced repetitive intrusive memories related to their exposure to video footage (Weidmann & Papsdorf, 2010). Hatanaka et al. (2010) recruited broadcast journalists from across Japan who had covered at least one PTE in their career. The authors were interested in whether those who cover PTEs from the field experience greater symptomology than those who cover PTEs from the newsroom/office. “At the time of the traumatic event 66% of the participants had field jobs, such as field reporters and field camera operators and 34% had nonfield jobs, such as news desk, announcers, and newscasters” (Hatanaka, et al., 2010, p. 175). PTSD symptoms were measured using the Japanese version of the IES–R. Participants who covered PTEs in the field scored significantly higher than those who worked from the newsroom/office.

Sinyor and Feinstein (2012) assessed gender differences in symptoms of PTSD and psychological distress in war journalists. The study was based on the combined samples from two previous studies of war journalists (Feinstein & Nicolson, 2005; Feinstein et al., 2002). However, seven of the participants were involved in both studies, so only their first recorded data was used. The overall sample consisted of 47 female and 171 male participants. No significant differences were found between genders in the combined sample on any of the three subscales, but females did tend to score higher than males on all three subscales. In Feinstein’s (2012) study of three groups of Mexican journalists, those who were threatened and subsequently stopped reporting drug-related stories had higher means on all three subscales than those who were threatened but continued reporting, and those never threatened. For intrusion and avoidance, participants who had been threatened and stopped reporting scored
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significantly higher than the other two groups. For hyperarousal, each group was significantly different from the others. It is interesting to note that participants who had never been threatened scored higher than those who were threatened but continued to report, on the avoidance subscale only. Feinstein (2013) utilised both the English and Spanish versions of the IES–R and found that Mexican journalists scored significantly higher on each of the three subscales than war journalists. Feinstein and Nicolson (2005) found no significant differences between the mean scores for the embedded and unilateral war journalists on the three IES–R subscales.

3.2.1.3. PTSD Checklist (PCL) and PTSD Checklist – Civilian Version (PCL–C)

The PCL is a 17-item self-report scale that assesses the presence and intensity of various trauma-related symptoms (Weathers, Litz, Herman, Huska, & Keane, 1993). Participants indicate how much they have been bothered by each symptom over the last month and respond on a 5-point Likert scale: 1 = not at all, 2 = a little bit, 3 = moderately, 4 = quite a bit, and 5 = extremely (Weathers et al., 1993). Whereas other versions of the PCL refer to military experiences (PCL–M) or to a specific traumatic experience (PCL–S), the PCL–C is concerned with past stressful experiences in general (Norris & Hamblen, 2004). However, each version contains the same questions. The PCL can be used as a continuous variable in which higher scores indicate greater intensity of PTSD related symptoms. Because the items and response values are the same, and because the samples are all concerned with journalists, studies using both versions of the PCL (PCL and PCL–C) are discussed in this section.

Only two studies reported the mean and standard deviation on the PCL for their sample. Pyevich et al. (2003) recruited newspaper journalists and reported a mean of 24.7 (SD = 8.6). In Backholm and Björkqvist’s (2012b) study of Finnish journalists,
female journalists scored significantly higher than males. Both studies reported comparable mean values. The majority of studies used the PCL to suggest the prevalence of PTSD within their sample. As previously stated, these kinds of findings are best considered as an indicator of participants at-risk of PTSD. In Newman et al. (2003) study of photojournalists, the authors adopted a cut-off score of 44 and reported that 6.7% of the sample could be considered at-risk. Intrusive symptoms were found to be the most commonly experienced. Pyevich et al. (2003) used the same cut-off and suggested an at-risk rate of 4.3%.

In 2007 there was a shooting at Jokela high school in Southern Finland, in which an 18-year-old student killed eight people and then died by suicide.\textsuperscript{11} Backholm and Björkqvist (2012a) aimed to study the emotional reactions experienced by journalists who covered the shooting. Some participants in the sample did not cover the shooting and so were used as a control group. A cutoff score of \( \geq 38 \) was used to indicate those journalists ‘at risk’ of PTSD. Twelve percent of journalists who had covered the shooting were found to be at risk, compared to 9% of those in the control group, but no significant differences were found. Even those who did not cover the shooting directly would have been aware of the event, and perhaps its impact on their colleagues and extended social networks, which may have resulted in the non-significant difference. Those journalists in Backholm and Björkqvist’s (2012a) study who covered the shooting were asked whether they experienced distress (fear, helplessness, or horror) because of the event (\( n = 192 \) responses). Thirty-three percent indicated they experienced no distress, 40% experienced a little distress, 25% experienced some

\textsuperscript{11} Terms such as commit(ted) suicide are historically associated with religious beliefs and criminality (Beaton, Forster, & Maple, 2013). The term die(d) by suicide is adopted in the present research so as to avoid the use of value-laden and potentially stigmatising language.
distress, and 2% indicated they did experience distress because of the event. No significant difference was found between those who worked directly/indirectly with the Jokela shooting. The experience of fear, helplessness, or horror at the time of exposure is no longer a clinical criterion of PTSD (APA, 2013).

In the study of TV news workers by Dworznik (2011), participants responded to each question in relation to a previous work-related stressful experience. Dworznik measured PTSD symptomology in two ways. The first was to sum the scores for each participant and to use a score of ≥44 as the indicator of PTSD risk, which accounted for 9.2% of the sample. The second approach considered a participant to be at risk of PTSD if they “answered a 3 or above on at least one item from the first subscale, at least 3 items from the second subscale, and at least 2 items from the third subscale,” which also accounted for 9.2% of the sample (Dworznik, 2011, p. 26). Dworznik (2011) cites Weathers et al. (1993) in suggesting that a closer approximation of the number of participants experiencing significant PTSD symptoms is obtained by combining both methods, which accounted for 7.1% of the sample (n = 20). Nineteen of these participants indicated that the symptoms impacted them day-to-day, and 13 indicated that their PTSD symptoms have caused them to consider leaving their job.

3.2.1.4. Post-traumatic Diagnostic Scale (PDS)

In a study by Weidmann et al. (2008), PTSD symptoms were measured using the German version of the Post-traumatic Diagnostic Scale (PDS; unpublished scale by Ehlers, Steil, Winter, & Foa, 1996). The PDS was first completed in relation to the participants’ coverage of the tsunami. The participants then indicated from a list, which other kinds of PTEs they had experienced and rated the most distressing of these on the
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PDS. The overall sample mean score was 3.4 \((SD = 3.6, \text{ range: } 0–15)\).\(^\text{12}\) When completing the PDS in relation to the tsunami coverage, four participants (6.6%) met the criteria for mild to moderate PTSD. It was interesting that 17 (27.9%) participants scored zero on the PDS. In relation to other PTE exposure, approximately 90% of the sample had experienced one or more such PTEs. Of these, almost half were work-related PTEs; for example, covering a terrorist attack. However, the criteria for PTSD was not fulfilled in the case of any of the other work-related PTEs.

3.2.1.5. **Stanford Acute Stress Reaction Questionnaire (SASRQ)**

The SASRQ is a 30-item measure of trauma reaction symptoms of dissociation, re-experiencing, avoidance, anxiety, hyperarousal, and impairment in functioning (Cardeña, Koopman, Classen, Waelde, & Spiegel, 2000). Freinkel, Koopman and Spiegel (1994) studied the levels of anxiety and dissociation in 15 of the 18 journalists present at the execution of a San Quentin prisoner. Participants endorsed an average of five dissociative items (17 in total), and an average of approximately four anxiety items (13 in total) adapted from the SASRQ. Participants were most likely to indicate that they “felt estranged or detached from other people” following the event, as found in 60% of the sample (p. 1337).

3.2.1.6. **Intrusions interview**

Weidmann and Papsdorf (2010) utilised a modified version of Hackmann, Ehlers, Speckens, and Clark’s (2004) intrusions interview to assess TV newsroom participants’ intrusive memories of video footage. Participants were provided the following definition of intrusive memories: “involuntary memories popping into one’s mind, for example, images, sounds, thoughts, or feelings that had been present while...”

\(^{12}\)The standard deviation reported by Weidmann et al. (2008) is large and might suggest that the data is bimodal.
watching the video footage” (Weidmann & Papsdorf, 2010, p. 266). Participants were then asked if they had experienced intrusive memories as a result of the video footage they were exposed to through their work and 77.8% indicated that they had. To assess recurring memories they were also asked if they had experienced the same intrusive memory three or more times and 59.3% indicated that they had. According to the categories provided by the authors, participants were most likely to experience their intrusive memory as being like a film scene (37.8%). Other modalities included several unrelated images (16.2%), an image (13.5%), feeling or bodily sensation (13.5%), a thought (5.4%), and a sound ($n = 0$). According to the categories provided, participants indicated that their intrusive memories were most likely to be triggered by similar video footage (51.4%), certain activities, objects or persons (21.6%), occurring out of the blue (18.9%), and other (8.1%). Weidmann and Papsdorf (2010) assessed how vivid the memory was on a six-point Likert scale from not at all to very much ($M = 4.22$, $SD = 1.47$). Participants were asked how frequently in a given week they experienced the intrusive memory for two points in time: during the most troublesome time ($M = 2.97$, $SD = 5.64$, range: 1–35), and during the previous four weeks ($M = 3.10$, $SD = 2.59$, range: 1–10). Finally, participants were asked how distressing the intrusive memory was for two points in time on a six-point Likert scale from not at all to very much: during the most troublesome time ($M = 4.14$, $SD = 1.34$), and during the previous four weeks ($M = 3.45$, $SD = 1.13$).

3.2.2. Predictors of PTSD in journalists

A range of variables has been considered in terms of its correlation with measures of PTSD and also its ability to predict PTSD symptoms. In research concerning journalists, the following variables have been explored: demographics (e.g., ethnicity, gender, education, and age), years of journalism experience, peri- and post-trauma
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factors, work-related and personal exposure to PTEs, social support, and personality factors. Each variable and its relationship with PTSD symptoms is considered briefly. Note that predictor variables are not causal but rather they are associated with higher levels of PTSD symptoms.

3.2.2.1. Demographics

Demographic variables such as ethnicity, gender, education, and age have been considered in only a few studies. Newman et al. (2003) assessed the predictive ability of a number of variables on PTSD symptomology; however, ethnicity was not found to be a significant predictor. Feinstein (2013) found education to be a significant predictor of intrusion symptoms, and McMahon (2001) reported that older age is associated with increased severity of symptoms of intrusiveness and avoidance. In relation to gender, there are conflicting findings. Newman et al. (2003) found that gender was not a significant predictor of PTSD symptoms, whereas Feinstein (2013) reported that it was. This difference may be due to the difference in scales and samples used; it may be that gender is a more prominent factor for war journalists than for domestic photojournalists.

3.2.2.2. Years of journalism experience

Simpson and Boggs (1999) reported that when personal exposure to PTEs was controlled for, the greater the number of years of experience in the industry the more likely participants were to experience avoidance and intrusion symptoms. McMahon (2001) reported the same trend. However, Newman et al. (2003) used multiple regression to assess the predictive ability of different variables regarding PTSD symptoms. Although the overall model accounted for approximately 20% of the variation in symptoms, years of experience was not found to be significantly associated with PTSD symptoms.
3.2.2.3. **Peri- and Post-trauma variables**

Hatanaka et al. (2010) used multiple regression to assess association between a range of peri- and post-trauma variables. Peri-trauma variables included stress reaction during the coverage, problems pertaining to the assignment, workplace issues, and social support from supervisor, peers, and family/friends. The post-trauma variables were achievements of coverage and stress after 2–3 months. Regression analyses were performed separately for those in the field and those in the newsroom/office. For journalists in the field only problems pertaining to the assignment and stress after 2–3 months were found to be significantly associated with PTSD symptom scores. The authors also assessed which variables were associated with experiencing stress after 2–3 months as a way of establishing indirect predictors of PTSD symptoms. Stress reaction during the coverage and workplace issues were found to be significantly associated with experiencing stress after 2–3 weeks for journalists in the field. For journalists not in the field only stress after 2–3 weeks was significantly associated with PTSD symptoms. Stress reactions during the coverage and support from family/friends were found to be significantly associated with experiencing stress after 2–3 weeks for journalists in the field.

In the study by Browne, Evangeli, and Greenberg (2012), higher levels of work-related PTE exposure were not only associated with increased PTSD, but also associated with increased guilt cognitions (measured using the Trauma-Related Guilt Inventory; Kubany et al., 1996). It was of interest that personal PTE exposure was not found to be associated with PTSD symptoms; however, an established exposure scale was not used. A hierarchical multiple regression analysis was conducted. Work-related PTE exposure was entered at the first step and accounted for 13% of the variance in PTSD symptoms. Adding guilt cognitions to the model increased the predictive ability
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to 25% and partially mediated the relationship between work-related exposure and PTSD symptoms. These results suggest that post-trauma appraisals, such as increased levels of guilt cognitions, are positively associated with increased levels of PTSD symptoms (Browne, Evangeli, & Greenberg, 2012).

3.2.2.4. Work-related exposure to PTEs

Journalists’ work-related exposure to PTEs was considered in detail in Chapter 2. Correlational studies suggest that the more frequently journalists are exposed to PTEs at work, the greater the PTSD symptomology (Dworznik, 2011; Weidmann et al., 2008). Dworznik (2011) found that participants who had covered war and those who had been threatened, hurt, or seen others hurt on a story were significantly more likely to experience PTSD symptoms. Regression analyses have extended these findings. Newman et al. (2003) reported that the number of work-related PTEs and specific elements of the work-related PTEs were significant predictors of PTSD.

Notably, Weidmann et al. (2008) reported that the strength of the relationship between PTSD symptoms and work-related PTE exposure reduced when controlling for depression. Backholm and Björkqvist (2012b) conducted a series of regression analyses, in which they controlled for gender. Work-related PTEs were found to account for a significant degree of variation in PTSD symptoms. Similar to the findings of Weidmann et al. (2008), a mediational model was supported whereby depression symptoms indirectly affected the relationship with PTSD symptoms. Once depression symptoms were included in the regression analysis, the predictive ability of work-related PTEs for PTSD symptoms reduced and was no longer significant. Such findings suggest that a holistic understanding of journalists’ trauma reactions in the wake of PTE exposure requires the consideration of mood disorders such as depression, which is the focus of
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Chapter 4. Cognitive beliefs have also been found to mediate the relationship between work-related PTEs and PTSD symptoms (Pyevich et al., 2003).

Other research suggests that it might be the number of different kinds of work-related PTEs covered that is associated with greater levels of PTSD symptoms. Simpson and Boggs (1999) reported that the number of PTEs covered at the scene and the amount of time spent covering PTEs on the scene were not found to be significantly related to either intrusion or avoidance symptoms. However, the greater the number of different kinds of PTEs covered, the more likely participants were to experience intrusive symptoms when personal exposure to PTEs was controlled for. In particular, participants who had covered a car accident on the scene had significantly higher intrusion scores than those who had not. Following on from the previous variable, it seems intuitive that a specific kind of PTE at work may be a trigger for PTSD symptoms. Feinstein (2013) found that having a family member threatened was a significant predictor for all three IES–R subscale scores. Another variable relating to PTSD symptoms is the magnitude of the worst work-related PTE to which an individual has been exposed. Weidmann et al. (2008) reported that the more distressing the exposure had been, the higher the PDS score. Similarly, Backholm and Björkqvist (2010) found that the magnitude of the worst work-related PTE was a significant predictor of PTSD symptoms.

Marais and Stuart (2005) broke participants up into three groups based on their IES–R scores: minor reactions, moderate reactions, and severe reactions of clinical importance. ANOVA was used to compare the three PTSD symptom groups based on the kinds of work-related PTEs they were exposed to. Exposure to work-related PTEs was measured using the Trauma Questionnaire (Marais, 2003), a 55-item questionnaire
that assesses exposure to four kinds of PTEs: extreme-intense, people-centred, general, and emotional. Significant differences were found for the people-centred and emotional subscales. Participants with minor PTSD reactions were exposed to significantly fewer people-centred PTEs than those with severe reactions. Frequency of exposure to emotional PTEs increased with severity of PTSD reaction. The minor reaction group experienced significantly fewer emotional PTEs than the moderate reaction and severe reaction groups. Correspondingly, the moderate reaction group experienced significantly fewer emotional PTEs than the severe reaction group.

Weidmann & Papsdorf (2010) assessed the ability of a range of variables to predict levels of avoidance and intrusion as a result of exposure to work-related video footage in TV newsroom staffers. For avoidance, only the variable assessing overall distress associated with video footage was found to be a significant predictor. The following variables were not found to have a significant predictive value: previous exposure to a traumatic event, percentage of time at work spent with video footage, and percentage of video footage considered personally distressing. For the intrusion regression, none of the entered variables were found to have a significant unique predictive value. The variables included work stress composite score, percentage of time at work spent with video footage, percentage of video footage considered personally distressing, and overall distress associated with video footage.

3.2.2.5. **Personal exposure to PTEs**

The personal exposure of journalists to PTEs was considered in detail in Chapter 2. Greater frequency of exposure to personal PTEs has been associated with higher levels of PTSD symptoms (Newman et al., 2003; Pyevich et al., 2003; Simpson & Boggs, 1999). In particular, participants who have experienced interpersonal conflict,
separation, or rejection tend to have significantly higher avoidance and intrusion scores than those who have not (Simpson & Boggs, 1999). Backholm and Björkqvist (2012b) found that personal PTEs account for a significant amount of variation in PTSD symptoms. As for work-related exposure, a mediational model was supported for personal PTEs wherein depression symptoms indirectly affected the relationship with PTSD symptoms. When depression symptoms were included the amount of variance accounted for was reduced but remained significant.

Backholm and Björkqvist (2010) performed a regression analysis using the following variables: personal exposure to potentially traumatic events, and personal exposure to events, including reactions of intense fear, helplessness, or horror. Both were measured using a modified version of the Traumatic Life Events Questionnaire (TLEQ; Kubany, et al., 2000). The results indicated that personal exposure to events, including intense fear, helplessness, or horror was a significant predictor of PTSD symptoms. These results mirrored those found through a similar analysis conducted by Backholm and Björkqvist (2012a). Exposure to previous personal PTEs was found to significantly predict distress as a result of the Jokela shooting, whilst exposure to prior work-related PTEs was not. Backholm and Björkqvist (2010) showed a significant interaction effect between personal and work-related PTE exposure and suggest two potential interpretations of this moderating effect. First, journalists who have experienced a range of personal PTEs are more likely to experience PTSD symptoms when exposed to a work-related PTE. Second, journalists with greater personal exposure to PTEs and associated PTSD symptoms are more likely to describe their worst work-related PTE in greater detail and emphasis. In either case, it seems that both personal and work-related exposure need to be taken into consideration.
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3.2.2.6. **Social support**

Newman et al. (2003) found that a lack of perceived social support was a significant predictor of PTSD symptoms. Similarly, Hatanaka et al. (2010) found that support from family/friends was significantly associated with having stress after 2–3 weeks for journalists in the field. Weidmann et al. (2008) assessed the relative significance of four social support variables in determining PTSD symptomology: workplace and friend social support, family social support, trauma peer social support, and social acknowledgement. Correlation analysis indicated that, of the four variables, only social acknowledgement was significantly negatively associated with PTSD symptoms. However, when depression symptoms were controlled for, the association was no longer significant.

It is interesting that Feinstein and Owen (2002a) found only 46.4% of the 140 war journalists they sampled were married. This figure is low compared to the 80–90% of individuals in the Canadian (country of authors) general population who are married. This is problematic because war journalists have greater exposure to violence, are often isolated from their colleagues and family, and seem to have a less secure social support structure—in that they are less likely to have a spouse who might serve an informal debriefing function. In Feinstein et al.’s (2002) study comparing journalists currently covering war with domestic journalists, war journalists were more likely to be single (43.6% compared to 26.2%) or divorced (10.7% compared to 9.3%) compared to the domestic group who were more likely to be married (64.5% compared to 45.7%).

3.2.2.7. **Personality**

In the broader trauma literature, individuals experiencing PTSD have been found to have higher neuroticism scores than those who are not experiencing PTSD (Borja,
Callahan, & Rambo, 2009; Kelly, et al., 1998; McFarlane, 1992). An interesting finding reported by Henningham (1997) was that journalists in his Australian sample had lower neuroticism scores than the general population. Marais and Stuart (2005) used the Zuckerman-Kuhlman Personality Questionnaire-III (ZKPQ-III; Zuckerman, Kuhlman, Joireman, Teta, & Kraft, 1993) to measure the following six personality traits: impulsiveness (Imp), sensation seeking (SS), neuroticism-anxiety (N-Anx), aggression-hostility (Agg-Host), activity (Act), and sociability (Sy). Participants with minor PTSD reactions scored significantly lower on N-Anx than those with severe reactions. Levels of Agg-Host increased with severity of PTSD reaction. Both the minor and moderate reaction group had significantly lower levels of Agg-Host than the severe reaction groups. However, considering the cross-sectional nature of much of the trauma reactions literature, it is not clear whether individuals experiencing severe PTSD post-exposure could be classified as neurotic prior to exposure or whether they demonstrate neurotic tendencies as a result of the exposure (Bonanno, 2012).

Marais and Stuart (2005) considered the association between sense of coherence and PTSD symptoms. Antonovsky developed a sociological approach to conceptualising and researching the health of individuals, as opposed to pathology, and referred to this approach as the salutogenic model of health (Antonovsky, 1983; Mittelmark & Bull, 2013). In paraphrasing the original work by Antonovsky (1979), Eriksson and Lindström (2005) describe sense of coherence “as a global orientation to view the world and the individual environment as comprehensible, manageable, and meaningful, claiming that the way people view their life has a positive influence on their health.” Marais and Stuart (2005, p. 91) describe sense of coherence as an indicator of resilience, as well as a “stable temperament trait” that has been “found to be a moderator of the stress response. Resilience determines the manner in which an
individual deals with stressful situations, and acts as a buffer against burnout (Strumpfer, 2003).” Marais and Stuart measured sense of coherence using the Sense of Coherence Questionnaire (Antonovsky, 1983), which contains three subscales: comprehensibility, manageability, and meaningfulness. Significant differences were found for the comprehensibility and manageability subscales. Both the minor and moderate reaction group scored significantly higher than the severe reaction groups on the comprehensibility subscale. Similarly, the minor and moderate reaction groups scored significantly higher than the severe reaction group on the manageability subscale.

3.3. Conclusions

The research question for the present SLR was: *What insights can the quantitative literature provide regarding journalists’ experience of trauma reactions?* The findings indicate that PTSD has been the only trauma- and stressor-related disorder considered in journalist samples to date. Other trauma- and stressor-related disorders and anxiety disorders, such as ASD, specific phobia, social anxiety disorder, panic disorder, and GAD are seemingly absent from the quantitative research concerning psychological implications of journalistic work. Based on the findings of the present review, a preliminary profile of the kind of journalist most likely to be at risk of experiencing PTSD symptoms can be constructed.13 Journalists most at-risk tend to be female, older, to have lower levels of education, greater years of experience in the journalism industry, to experience increased work-related and personal exposure to PTEs, reduced levels of

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13 It is noteworthy that the word ‘profile’ can have specific meanings when applied in other areas of psychological research and practice. The word ‘profile’ is used here to indicate the demographic and psychological characteristics that have been considered most likely to be associated with increased levels of trauma reaction symptoms.
social support and sense of coherence, and increased levels of neuroticism and guilt cognitions.

The findings of this review indicate that PTSD symptoms are present in journalist samples. According to the studies reviewed, prevalence rates of PTSD amongst journalist samples range from 4.3% to 19.7%, although these figures are best considered as an indication of those individuals likely to be at risk of developing PTSD. There is a need to move beyond identification and prevalence of symptoms to establishing proportions of journalist samples that may have a diagnosable trauma- and stressor-related disorder and/or anxiety disorder. However, this cannot be achieved through online survey methods. Rather, future research requires the inclusion of diagnostic interviews. It is noteworthy that some of the studies discussed raise a number of methodological issues in trauma research; for example, the ability of participants to accurately recall their symptomology up to three years ago, the varying nature of PTEs they were exposed to, and the variation in time since exposure are potential limitations of the studies. However, the literature indicates that most trauma researchers grapple with these limitations.

In addition, the research is piecemeal in nature, in that more recent research has not built upon the previous research. A number of factors have been shown to be associated with increased PTSD symptoms in the broader literature, but not yet considered in journalist samples, including personal and family history of mental illness, being personally injured during the PTE exposure, not being married or not in a relationship, and general childhood adversity (Breslau, 2002; Brewin, Andrews, & Valentine, 2000; Stevens, et al., 2013). Future research with journalist samples may consider including such factors. In comparison to the other psychological constructs
considered across Chapters 2–4, however, research considering journalists’ experiences of PTSD has more adequately considered well-established predictors, such as age, education, previous exposure to PTEs, and ethnicity (Brewin et al., 2000). Other issues include altering scales in relation to time or tense of items, and for some scales introducing cut-offs that have not been clearly justified.

The mean scores of journalist samples should be discussed in relation to the mean scores of other reference groups, such as the general population or similar high-stress professions; not used without context, such as that of general levels of trauma reactions. There is also a need to conceptualise journalists and their experiences within the framework of a broader social environment, as opposed to considering them and their levels of PTSD symptoms in isolation. A pertinent example is seen in the work of Freinkel et al. (1994, p. 1336), which aimed to assess the reactions of journalists as “simply being an uninvolved, unthreatened, witness to violence.” Unfortunately, this is an example of the thinking at the time presenting journalists as detached, unhindered, and uninvolved by the PTEs they are exposed to. Aside from a range of individual differences being variables that may mean journalists would have a negative psychological reaction to covering the execution, there is also a range of work-related variables that was not considered. For example, it may be the case that the participants had previous involvement in the story, whether by interviewing the families of victims, the prisoner to be executed, or the prisoner’s family. Furthermore, it might be the case that the participants lived in close proximity to where the murders were committed. Therefore, it is not correct to assert that the participants were uninvolved and unthreatened. The issues discussed here relate to the assumptions made by Freinkel et al. (1994) about journalism practice; they are not intended to challenge the appropriateness of general reductionist approaches.
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It is striking that as many as 95% of participants in journalist samples have been exposed to work-related exposure to trauma (see Chapter 2), yet the percentage of journalists at risk of developing PTSD is comparatively low. When stating that approximately 4% to 20% of journalists are at risk, we must also be mindful that this means 80% to 96% are not at risk. In broader psychological research and practice, the push to get PTSD recognised as a disorder meant the adoption of a deficit-based approach. Because it is now acknowledged in the literature that certain subsets of the population will experience PTSD this no longer needs to be proven. There is also greater acknowledgement of the range of trajectories for people exposed to PTEs. For example, research by Bonanno (2005) indicates that resilience (35–55% of participants) and recovery (15–35%) are more likely outcomes for those who have experienced loss or exposure to PTEs; delayed (5–10%) and chronic (10–30%) disruption to normal function and disorders are less likely. The psychological research concerning journalists’ trauma reactions is lacking in the sense that it is still pushing to acknowledge PTSD and other disorders. There is now also a need to consider how the majority of journalists can be resilient in the face of adversity; some may even experience posttraumatic growth (Aldwin & Levenson, 2004).
Chapter 4. Journalists and mood disorders

4.1. Introduction

Psychological research focusing on journalists has largely tended to give precedence to establishing rates of trauma exposure and measuring symptoms of posttraumatic stress disorder (PTSD). Phase A of the present thesis demonstrates this point quantitatively; the number of studies identified through this systematic literature review (SLR) method that focus on PTSD symptoms ($n = 21$) was approximately double the number of studies focusing on the other psychological constructs reviewed in this chapter and in existing reviews regarding burnout (MacDonald, Saliba, Hodgins, & Ovington, 2016) and substance use (MacDonald, Saliba, & Hodgins, 2016; $n$ range for SLR samples across the three: 10–12). Chapters 2 and 3 established that journalists experience considerable trauma exposure and are an at-risk group in terms of PTSD symptoms. However, there is a range of other possible psychological implications of trauma exposure. So, limiting the discussion of trauma exposure in journalists to associated rates of PTSD is to consider only one part of a more complex story.

Research has shown that trauma exposure is not only associated with symptoms of PTSD, but also with symptoms associated with a range of mood disorders. For example, mood disorders such as major depressive disorder (MDD; defined below) are possible outcomes for individuals exposed to potentially traumatic events (PTEs), particularly for those who have had previous experiences of psychopathology (Maguen, Neria, Conoscenti, & Litz, 2012). In addition to depressive symptoms co-occurring with those of PTSD, exposure to PTEs can result in depression without the presence of PTSD (Schnyder, Moergeli, Trentz, Klaghofer, & Buddeberg, 2001; Shalev et al.,
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1998). This seems to suggest “depression and PTSD are independent sequelae of traumatic events” (McFarlane, 2004, p. 879). In their review of disaster literature, Norris et al. (2002) found that depression was measured in 36% of the samples reviewed. Specifically, MDD, suicidal ideation, and remorse have been found to be higher in groups exposed to disaster, compared to control and unexposed groups (Norris et al., 2002). In terms of MDD, individuals exposed to an earthquake experienced greater levels of the disorder compared to the baseline mental health statistics for the area prior to the disaster (Önder, Tural, Aker, Kılıç, & Erdoğan, 2006). PTSD and depression have both been associated with increased prevalence of suicide, attempted suicide, and suicidal ideation (Andrews, Henderson, & Hall, 2001; Davidson, Hughes, Blazer, & George, 1991). It is worthwhile noting that sadness is a natural response to PTEs, and not all individuals who experience mood changes as a result of exposure will experience clinically significant symptoms or impaired functioning (Maguen et al., 2012).

Journalists have high levels of work-related trauma exposure and PTSD symptomology. As the research above suggests, they may also be experiencing a comorbid mood disorder. Moreover, those who do not trigger measures of PTSD may still be experiencing symptoms associated with mood disorders. There are a number of other occupational factors that make journalists a group of particular interest in assessing mood disorders. Journalists find themselves in an industry and organisational context of increased competitiveness, ongoing changes in technology and job roles, resource constraints, and constant deadlines (Reinardy, 2011). The result of these demands on journalists is that they have reduced capacity to perform basic self-care and achieve work-life balance (i.e., maintaining relationships and a healthy diet, getting a good night’s sleep, and exercising), further exacerbating the psychological implications
of their work (Maskaly, 2008). Another issue is that recent graduates can quickly become disillusioned when they find that the values they were taught are not always fostered in real world practice (Pihl-Thingvad, 2014).

It may also be the case that individuals who are attracted to journalism as a profession share common personality traits that increase their likelihood of experiencing mood disorders. In addition to these occupational factors, journalists are, of course, a part of the broader population, and so are similarly at risk of developing symptoms associated with mood disorders as a result of a range of factors, including “gender, prior depression, being divorced or separated, low socioeconomic status, psychiatric comorbidity, medical illness, being abused or tortured and adverse life events [as distinct from work-related exposure]” (Dobson & Dozois, 2008, p. XVIII). The remainder of this introductory section serves to provide background information regarding clinical classifications for a number of relevant mood disorders, namely: MDD, persistent depressive disorder, bipolar disorders I and II, and cyclothymic disorder.

### 4.1.1. Mood disorders

Mood disorders are primarily characterised by affective or mood disturbances (APA, 2013). Individuals with a mood disorder may experience periods of depressed mood and a loss of interest in things they usually enjoy. Alternatively, they may experience manic episodes or periods of “abnormally and persistently elevated, expansive, or irritable mood” (APA, 2013, p. 124). Traditionally, mood disorders were considered to fall under one of two groupings of depression: unipolar or bipolar.

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14 With respect to each psychological disorder described in this chapter, individuals are only considered to be experiencing a psychological disorder if their symptoms result in distress or impairment in functioning across a range of domains, such as in their work or relationships (APA, 2013).
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(Ghaemi, 2009). Unipolar depression denotes those cases in which individuals experience only depressive episodes, without the experience of mania (definitions provided below). Bipolar refers to those cases in which individuals experience both depressive and manic episodes. In accordance with this kind of categorisation, the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM–IV) covered depressive disorders and bipolar disorders conjointly under the heading Mood Disorders (APA, 2000). However, in the most recent edition of the manual (DSM–5; APA, 2013) Depressive Disorders and Bipolar and Related Disorders are considered separately. This change in classification was intended to reflect research and practice indicating that bipolar and related disorders function “as a bridge between the two diagnostic classes” of depressive disorders, and schizophrenia spectrum and other psychotic disorders (p. 123).

4.1.1.1. Depressive disorders

In the present research, two depressive disorders are of particular interest. The first is major depressive disorder (MDD). There are nine symptoms associated with MDD (APA, 2013): (1) depressed mood, (2) loss of interest or pleasure in activities, (3) changes in weight and/or appetite, (4) changes in sleeping patterns, (5) psychomotor agitation or retardation, (6) fatigue or loss of energy, (7) feelings of worthlessness or guilt, (8) reduced concentration, and (9) thoughts of death or suicide. A diagnosis of MDD requires that the individual experience at least five of the nine symptoms within a two-week period. Additionally, one of the five symptoms experienced must be depressed mood, or loss of interest or pleasure in activities. General population studies in the U.S. and Canada report MDD lifetime prevalence rates of 12.2–16.2% (Hasin, Goodwin, Stinson, & Grant, 2005; Kessler et al., 2003; Patten et al., 2006). The same studies reported MDD 12-month prevalence rates of 4.8–6.6%.
Persistent depressive disorder is the second depressive disorder of interest in the present research. This disorder is described as a unification of two disorders previously included in the DSM–IV; namely, chronic major depressive disorder and dysthymic disorder (APA, 2013). The merger of these previously discrete disorders was based on the lack of research supporting a distinction between the two, as well as a shift in focus that emphasises the role of chronicity in treatment and prognosis (Zupanick, 2013). Accordingly, a diagnosis of persistent depressive disorder in adults requires that individual to experience depressed mood for at least two years. They must also have experienced two or more of the following six symptoms: (1) poor appetite or overeating, (2) insomnia or hypersomnia, (3) low energy or fatigue, (4) low self-esteem, (5) poor concentration or difficulty making decisions, and (6) feelings of hopelessness (APA, 2013). In citing Blanco et al. (2010), the DSM–5 reports that the 12-month prevalence rate of persistent depressive disorder in the U.S. is approximately 0.5%, and that the 12-month prevalence for chronic major depressive disorder is approximately 1.5%.

4.1.1.2. Bipolar and related disorders

Three bipolar and related disorders are of particular interest here: bipolar I disorder, bipolar II disorder, and cyclothymic disorder. Understanding the distinction between these three disorders requires an appreciation of the differences between three kinds of mood-related episodes: manic, hypomanic, and major depressive. Hence, the characteristics of these three kinds of episodes are elucidated and then the clinical criteria for the three disorders are described.

A manic episode is a period of at least one week in which the individual experiences an “abnormally and persistently elevated, expansive, or irritable mood”
In addition, diagnosis requires that the individual experience three or more of the following seven symptoms: (1) inflated sense of self-esteem or grandiosity, (2) reduced need for sleep, (3) increased levels of talkativeness, (4) sense of racing thoughts, (5) distractibility, (6) increase in goal-directed activity, and (7) excessive involvement in activities that have a high potential for painful consequences. The manic episode is also required to result in social or occupational impairment, or to result in hospitalisation to avoid harm to the individual or others. A hypomanic episode is characterised by the same symptomology as a manic episode but lasts at least four days, as opposed to at least one week, and is not severe enough to result in social or occupational impairment or hospitalisation. A major depressive episode has the same criteria as those stated for MDD above. A diagnosis of bipolar I disorder requires the individual to have experienced at least one manic episode. They may or may not have also experienced hypomanic or major depressive episodes. In citing Merikangas et al. (2007), the DSM–5 reports that the 12-month prevalence rate of bipolar I disorder across a range of countries is approximately 0–0.6%. A diagnosis of bipolar II disorder requires the individual to have experienced at least one hypomanic episode, as well as having experienced at least one major depressive episode. In contrast to bipolar I, a diagnosis of bipolar II requires that the individual has not experienced a manic episode. In citing Merikangas et al. (2011), the DSM–5 reports the 12-month prevalence rate of bipolar II disorder is 0.3% internationally and 0.8% in the U.S. A diagnosis of cyclothymic disorder requires the individual to have experienced hypomania and major depressive symptoms, but to have never met the criteria for a manic, hypomanic, or major depressive episode. In cyclothymic disorder, individuals
experience these symptoms at least half of the time over at least a two-year period. Although there may be periods of time when they experience no symptoms, these periods are less than two months in duration. In citing Regeer et al. (2004), the DSM–5 reports a lifetime prevalence rate of cyclothymic disorder of 0.4% to 1% in the Netherlands (APA, 2013).

4.1.2. Rationale and aim

Broader trauma research indicates that individuals exposed to PTEs are not only at risk of developing PTSD; they may also experience a mood disorder as a result of their exposure. Although PTSD has been more widely researched within journalist samples, there is a need to develop our understanding of journalists’ experiences of mood disorders as a potential outcome of trauma exposure. A more holistic understanding of the trauma experiences of, and required support for, journalists may be achieved by doing so.

The present SLR aims to provide a concise, comprehensive, and systematic review of the quantitative literature relating to journalists’ experiences of mood disorders. It does so by maintaining clear inclusion and exclusion criteria, as well as transparency regarding the manner in which quality of the studies sampled was assessed. In this way, the findings provide a valuable synthesis of existing knowledge to inform future directions in mood disorder research and practice in journalists. It also has the capacity to raise issues and make suggestions for research and practice in other specific occupational groups. The research question is: What insights can the quantitative literature provide regarding mood disorders as an implication of journalistic work?
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There appear to be three review articles written regarding the psychological implications of journalistic work. The reviews by MacDonald and colleagues focus specifically on substance use and burnout (MacDonald, Saliba, & Hodgins, 2016; MacDonald, Saliba, Hodgins, & Ovington, 2016). Aoki, Malcolm, Yamaguchi, Thornicroft, and Henderson (2012) identify four studies that measure symptoms of depression; however, they report only prevalence rates of depression as presented in two of the four identified studies, and do not provide a discussion regarding depression or mood disorders more broadly amongst journalist samples. Hence, the unique contributions of the present SLR include the increased sample size ($n = 10$), in-depth discussion of all studies reviewed, and a specific argument regarding research relating to journalists’ experiences of mood disorders more broadly.

4.2. Review

Of the 77 documents that passed the methodological screen, only 10 documents related to mood disorders in journalists. A number of possible mood disorders that journalists might experience as a result of various factors, such as their personal and work-related exposure to trauma, were discussed in the introduction section above. However, the findings of this SLR indicate that only depression has been assessed in journalist samples. It is important to note that while terms such as depression are used in the reviewed articles, what is actually being assessed are symptoms and not diagnosis prevalence. A diagnostic interview is required to determine an appropriate diagnosis and therefore prevalence within a given population. Hence the findings represent the symptoms cluster typically associated with depression.

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15 The SLR method is described in detail in the introduction to Phase A.
Table 4.1 provides an overview of the 10 studies that assessed depression in journalist samples. Research in this area started in 2002 and each study has adopted a cross-sectional design. The range of countries that participants have been sampled from suggests that depression is an international concern for journalists in a range of media outlets. Response rates are provided for those studies that reported such information. However, two points are worth considering with respect to such figures: (1) it is not clear in each case whether the figure reported was the initial response rate, or the response rate after data screening had occurred (e.g., removing incomplete data); (2) In many cases, response rates are not reported, and this may be because it is not possible to accurately calculate response rates when sending research materials to a large online or organisational group of potential participants. Those studies with the highest response rates tended to be the studies that specifically targeted a set number of participants and contacted them directly.

4.2.1. Measurement of depressive symptoms in journalists

As shown in Table 4.1, three different depression scales have been used to assess depression in journalists. Five used the Beck Depression Inventory second edition (BDI–II), three used the 13-item Beck Depression Inventory (BDI–13), and one study used the Center for Epidemiological Studies Depression Scale (CES–D). Each of these studies will be discussed in the following three sections according to the scale adopted. However, one study provided a description of depression symptoms but no details of the scale used or of the descriptive data obtained. Ghaffar and Feinstein (2005) sampled New York journalists who covered the September 11 attack on the World Trade Center in 2001. They reported that three months after the World Trade Centre attack the trauma symptoms in the sample were elevated compared to those of a domestic sample of
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journalists from before the attack, but no difference in depression symptoms was identified. MacDonald, Saliba, and Hodgins (2016, p. 408) suggest that:

Caution should be taken when considering the findings of studies that focus on extreme cases such as September 11 as there is much about the context that is likely to have impacted the reaction amongst journalists in this sample when compared to other journalist groups. These include increased focus on psychological and physical health in times of widespread crisis in a city. Whilst such studies are important, like other studies focusing on a single PTE, it is difficult to compare them to other single events or to accumulated symptoms resulting from exposure to multiple PTEs through domestic or war journalism.
Table 4.1. Summary of studies assessing depression symptoms in journalist samples

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feinstein, Owen, &amp; Blair (2002)</td>
<td>International</td>
<td>Online survey</td>
<td>War ($n = 140$) and domestic journalists ($n = 107$)</td>
<td>247</td>
<td>82.8</td>
<td>International news organisations</td>
<td>BDI–II</td>
</tr>
<tr>
<td>Feinstein &amp; Nicolson (2005)</td>
<td>International</td>
<td>Online survey</td>
<td>Various war journalists based in Iraq</td>
<td>85</td>
<td>85.0</td>
<td>One American and one British news organisation</td>
<td>BDI–II</td>
</tr>
<tr>
<td>Weidmann, Fehm, &amp; Fydrich (2008)</td>
<td>Germany, Austria, &amp; Switzerland</td>
<td>Online survey</td>
<td>Journalists</td>
<td>61</td>
<td>Unspecified</td>
<td>TV, newspaper, radio, and magazines</td>
<td>CES–D</td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist (2010)</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists, photographers, and camera operators ($n = 503$), and a control group of non-news journalists ($n = 68$)</td>
<td>571</td>
<td>20.3 and 17.5 respectively</td>
<td>TV, newspapers, radio, and internet</td>
<td>BDI–13</td>
</tr>
<tr>
<td>Feinstein (2012)</td>
<td>Mexico</td>
<td>Online survey</td>
<td>News journalists</td>
<td>104</td>
<td>80.6</td>
<td>Three national news organisations</td>
<td>BDI–II</td>
</tr>
</tbody>
</table>
### Table 4.1. continued

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Data collection</th>
<th>Sample</th>
<th>n</th>
<th>Response rate (%)</th>
<th>Media outlet</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Backholm &amp; Björkqvist</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>493</td>
<td>Unspecified</td>
<td>TV, newspaper, radio, and internet</td>
<td>BDI–13</td>
</tr>
<tr>
<td>(2012a)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backholm &amp; Björkqvist</td>
<td>Finland</td>
<td>Online survey</td>
<td>News journalists</td>
<td>407</td>
<td>Unspecified</td>
<td>TV, newspaper, radio, and other</td>
<td>BDI–13</td>
</tr>
<tr>
<td>(2012b)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feinstein (2013)</td>
<td>Mexico</td>
<td>Online survey</td>
<td>Mexican journalists</td>
<td>208</td>
<td>80.6</td>
<td>Mexican and international news organisations</td>
<td>BDI–II</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(n = 104) and war journalists</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(n = 104)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**

a. BDI–II: Beck Depression Inventory – Second edition  
  b. BDI–13: 13-item Beck Depression Inventory  
  c. CES–D: Center for Epidemiological Studies Depression Scale
4.2.1.1. **Beck Depression Inventory – Second Edition (BDI–II)**

The BDI–II is a 21-item scale used to assess severity of depression symptoms. Respondents reply to each item on a four-point Likert scale, ranging from 0 to 3. Scores are then summed and assessed according to the following severity cut-offs: minimal 0–13, mild 14–19, moderate 20–28, and severe 29–63 (Beck, Steer, & Brown, 1996).

Feinstein, Owen, and Blair (2002) compared journalists currently covering war with domestic journalists. War journalists scored significantly higher than the domestic group. Feinstein and Nicolson (2005) found no significant differences between mean scores for embedded and unilateral journalists covering conflict in Iraq. In Feinstein’s (2012) study of Mexican journalists, those who were threatened and subsequently stopped reporting drug-related stories had a higher score than those who were threatened but continued reporting, and those never threatened. It is interesting to note that participants who have never been threatened scored higher than those who were threatened but continued to report.

Sinyor and Feinstein (2012) assessed gender differences in depression symptoms in war journalists. The study was based on the combined samples from two previous studies of war journalists (Feinstein & Nicolson, 2005; Feinstein et al., 2002). No significant difference in depression symptoms was found between males and females in the combined sample. Depression symptoms were then compared across genders for the two samples individually. In both cases, females tended to score higher than males; however, no significant differences were identified. Finally, Feinstein (2013) found that Mexican journalists reported significantly higher levels of depression symptoms than war journalists. Feinstein (2013) also reported that significantly more Mexican
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Journalists classified as experiencing moderate–severe depression when compared to the war journalist group.

Only one of these studies reported the percentage of their sample falling into each of the four symptom severity categories prescribed by Beck et al. (1996). Feinstein and Nicolson (2005) combined the scores for embedded and unilateral journalists and reported the following severity percentages: 79% minimal, 14% mild, 6% moderate, and 1% severe. Table 4.2. was developed in order to place the means reported in this section in the context of all studies using the BDI–II, and in relation to the suggested symptom severity cut-offs. Mexican journalists have the highest BDI–II scores, falling in the mild–moderate range. War journalists tend to fall within the minimal range, with means ranging from 7.8 to 10.1 and females scoring slightly higher than males. Domestic journalists appear to have the lowest levels of depression symptoms, also falling within the minimal range of severity.

4.2.1.2. Beck Depression Inventory – 13-items (BDI–13)

The BDI–13 is a shortened version of the BDI containing 13-items. Respondents reply to each item on a four-point Likert scale, ranging from 0 to 3. Scores are then summed and assessed according to the following severity cut-offs: minimal 0–4, mild 5–7, moderate 8–15, and severe 16+ (Beck & Beck, 1972). Backholm and Björkqvist (2010) used the BDI–13 but reported only a predictive model (see Section 4.2.3.) and so provided no descriptive data that can be discussed here. Backholm and Björkqvist’s (2012b) study of 407 Finnish journalists indicated no significant difference between male and female BDI–13 scores, similar to the findings reported by Sinyor and Feinstein (2012). Backholm and Björkqvist (2012a) also measured depression symptoms amongst a sample of Finnish journalists who had covered the Jokela school
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shooting and a control group. The mean scores for those who covered the shooting, those who had not, and the total sample were comparable. Each of the reported means fall in the minimal symptom category. Backholm and Björkqvist (2012a) used a score of >8 to indicate ‘at-risk’ individuals (moderate–severe), accounting for 5% \((n = 9)\) of those who covered the shooting and 8% \((n = 23)\) of the control group. No differences were found between the two groups.

Table 4.2.
*Mean BDI–II scores and symptom severity categories for various journalist samples*

<table>
<thead>
<tr>
<th>Symptom severity</th>
<th>Type of journalist</th>
<th>(M)</th>
<th>(SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moderate</td>
<td>Mexican – threatened and stopped</td>
<td>20.0</td>
<td>12.2</td>
</tr>
<tr>
<td>Mild</td>
<td>Mexican journalists</td>
<td>15.1(^a)</td>
<td>8.3</td>
</tr>
<tr>
<td></td>
<td>Mexican – never threatened</td>
<td>14.7</td>
<td>7.4</td>
</tr>
<tr>
<td></td>
<td>Mexican – threatened and continued</td>
<td>13.2</td>
<td>5.4</td>
</tr>
<tr>
<td>Minimal</td>
<td>War journalists</td>
<td>10.1(^{x,y})</td>
<td>7.8</td>
</tr>
<tr>
<td></td>
<td>Female war journalists</td>
<td>9.8</td>
<td>8.8</td>
</tr>
<tr>
<td></td>
<td>Male war journalists</td>
<td>9.3</td>
<td>7.2</td>
</tr>
<tr>
<td></td>
<td>Unilateral journalists in Iraq</td>
<td>8.6</td>
<td>6.8</td>
</tr>
<tr>
<td></td>
<td>Embedded journalists in Iraq</td>
<td>7.8</td>
<td>7.5</td>
</tr>
<tr>
<td></td>
<td>Domestic journalists</td>
<td>6.4(^y)</td>
<td>6.1</td>
</tr>
</tbody>
</table>

Note:

a. Symptom severity is based on that prescribed by Beck et al. (1996).
b. Means denoted with the same letter (either \(^a\) or \(^y\)) were found to be significantly different.
c. Mexican – threatened and stopped: Mexican journalists who had been threatened because of their job and subsequently stopped reporting drug-related stories.
d. Mexican – never threatened: Mexican journalists who had never been threatened because of their job.
e. Mexican – threatened and continued: Mexican journalists who had been threatened because of their job and continued reporting drug-related stories.
f. The female and male war journalists groups were from a different study than the overall war journalists group.
4.2.1.3. *Center for Epidemiological Studies Depression Scale (CES–D)*

The CES–D (Radloff, 1977) is a 20-item scale used to assess depression symptoms in the general population. Respondents reply to each item on a four-point scale indicating how frequently they have experienced that symptom in the previous week: rarely or none of the time (less than one day; scored as 1), some or a little of the time (1–2 days; 2), occasionally or a moderate amount of time (3–4 days; 3), and most or all of the time (5–7 days; 4). A higher total score on the CES–D indicates a greater level of depression symptoms. Weidmann, Fehm, and Fydrich (2008) explored journalists’ depression reaction to a tsunami using the German version of the CES–D (Hauzinger & Bailer, 1993). Weidmann et al. (2008) identify 17 as the cut-off indicating the presence of depression. Only one participant scored higher than 17, the overall mean for the sample was 7.1 ($SD = 5.5$). The authors use the findings of Hauzinger and Bailer (1993) to suggest that their findings are comparable to the general population.

4.2.2. *Constructs found to correlate with depression symptoms in journalist samples*

As noted previously, depression has been found to be comorbid with other disorders such as PTSD. Considering this, it would be expected that measures of depression would correlate with measures of PTSD. Two of the studies sampled reported correlation values obtained when comparing the BDI–II to other measures. Feinstein and Nicolson (2005) found that the revised BDI–II was significantly positively correlated with the Impact of Event Scale (IES)\(^{16}\) and with the General Health

\(^{16}\)The IES is a 15-item measure of PTSD symptoms that aims to assess subjective distress as the result of a single event (Horowitz, Wilner, & Alvarez, 1979). The IES contains two subscales, one assessing intrusive thoughts and the other assessing avoidance reactions.
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Questionnaire (GHQ). In Feinstein’s (2012) study, BDI–II scores were significantly positively correlated with symptoms of intrusion, avoidance, and the total score on the GHQ. Such findings support the idea that reactions to trauma are diverse and often comorbid.

4.2.3. Predictors of depression in journalists

Four studies used regression analyses to assess variables that may predict depression symptoms. Predictor variables are not causal; rather they are associated with higher levels of depression symptoms. In the study by Weidmann et al. (2008) correlation analysis indicated that the relationship between participant depression scores and total number of PTEs approached significance. However, depression was not found to be associated with the level of distress related to PTE exposure. Depression symptoms were significantly negatively associated with family social support, trauma peer social support, and social acknowledgement. The latter two remained significant even when controlling for PTSD symptoms. The three variables that were significantly associated with depression symptoms before controlling for PTSD symptoms were entered into a multiple regression analysis with depression as the dependent variable. The overall model accounted for 23.3% of the variance in depression; however, only social acknowledgement was a significant predictor. In the study of Mexican journalists and war journalists, Feinstein (2013) found that having family threatened, being personally threatened, and level of education were significant predictors of depression.

Backholm and Björkqvist (2010) used the data from 503 Finnish news journalists, photographers, and camera operators working in a range of media outlets to conduct a

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17 The GHQ–28 is a shortened version of the 60-item General Health Questionnaire, which is a “self-administered screening questionnaire designed for use in consulting settings aimed at detecting those with a diagnosable psychiatric disorder” (Goldberg & Hillier, 1979, p. 139). The GHQ–28 contains four subscales: somatic complaints, anxiety, social dysfunction, and depression.
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stepwise linear regression to assess the ability of a range of variables to predict depression symptoms (measured using the Beck Depression Inventory, BDI–13). Only personal exposure to events including intense fear, helplessness or horror, and the magnitude of the worst work-related PTE, were significant predictors. This means that experiencing “one especially distressing crisis had a larger impact on journalists’ well-being than the amount of crises the journalists worked with, and that the amount of crises journalists had been exposed to in their personal lives affected well-being more than the amount of crises journalists had experienced as part of their work” (p. 148). In terms of the relationship between depression symptoms and PTE exposure, Backholm and Björkqvist (2012b) found that work-related and personals PTEs both accounted for a significant variation in depression.

4.3. Conclusions

The research question for the present SLR was: What insights can the quantitative literature provide regarding mood disorders as an implication of journalistic work? The findings indicate that depression has been the only mood disorder considered amongst journalist samples to date, and even the research on this construct requires considerable development in future research, as the focus has been on depressive symptoms, as opposed to prevalence, or experiences of MDD, or persistent depressive disorder. Other mood disorders, such as cyclothymic disorder and bipolar disorders I and II are seemingly absent from the quantitative research concerning psychological implications of journalistic work. The findings of correlation analyses showed BDI–II scores to be significantly positively associated with measures of PTSD and psychological distress, hence supporting the idea that the psychological symptoms experienced by journalists are diverse and often comorbid. Based on the findings of the present review, a preliminary profile of the kind of journalist most likely to be at risk of
experiencing depressive symptoms can be constructed.\textsuperscript{18} Journalists most at risk had greater exposure to work-related and personal PTEs, have experienced threats to themselves or their family, and have reduced levels of family and peer support, social acknowledgement, and education.

The consideration of depressive symptoms within the literature has mainly focused on mean comparisons between war and domestic journalists, unilateral and embedded journalists, and male and female journalists. As described previously, Mexican journalists were shown to have the highest BDI scores, falling in the mild–moderate range. War journalists tend to fall within the minimal range, with females scoring slightly higher than males. Domestic journalists appear to have the lowest levels of depression symptoms, also falling in the minimal range of severity. Only two sets of groups compared were found to be significantly different; war journalists were found to score lower than Mexican journalists, and higher than domestic journalists. Perhaps more interesting is the finding of no statistically significant difference between males and females, and whether or not journalists are embedded or working unilaterally. The standardised cut-offs for the BDI–II and BDI–13 were developed in relation to clinically depressed groups. So the fact that most of the journalist sample means were categorised as minimal is not surprising. Future research should report the percentage of the sample finding themselves in high-risk categories according to recommended cut-offs. The only sampled study to do so was that of Feinstein and Nicolson (2005).

\textsuperscript{18}It is noteworthy that the word ‘profile’ can have specific meanings when applied in other areas of psychological research and practice. The word ‘profile’ is used here to indicate the demographic and psychological characteristics that have been considered most likely to be associated with increased levels of depressive symptoms.
The mean scores of journalist samples for depressive symptoms should be discussed in relation to the mean scores of other reference groups, such as the general population or similar high-stress professions, and not presented outside of the context of general levels of depression. The only study in the present review that made reference to general population symptoms when discussing findings was that by Weidmann et al. (2008). It is also worthwhile noting that the standard deviations reported in Sections 4.2.1.1. to 4.2.1.3. are large, suggesting that the data might be bimodal, with some journalists experiencing high levels of symptoms and others experiencing very low levels. Significant differences are not commonly found in bimodal datasets. For this reason, reporting means and standard deviations may not be the best approach as there is the potential to present an inaccurate account of the findings. It would be useful if authors were to include the range of scores reported by participants.

The domain of mood disorders amongst journalists appears to be in its infancy and will gradually become more nuanced. Similarly, early clinical research on PTSD in various populations, such as veterans and sexual assault victims, first had to establish the presence of symptoms before moving on to establish prevalence of a diagnosable disorder. This process of developing research in the area of journalism and mood disorders may be temporarily stunted by cultural factors, however. Journalism as a profession has historically been characterised as one that is stoic and promotes maladaptive coping mechanisms such as substance use (MacDonald, Saliba, & Hodgins, 2015). This may mean that it is difficult to acknowledge depressive disorders within the cultural context of the journalism industry—another parallel with PTSD research in veteran populations. Additionally, there is a crucial link between PTSD symptoms and at least one PTE; many PTSD symptoms are physiological in nature and associated with the flight or fight response. Because of these factors and the
groundwork that has already been done in the area of PTSD research, journalists may consider their PTE exposure and associated PTSD symptomology to be a kind of badge of honour associated with greater industry experience, and therefore professional credibility. Hence the industry may be more open to research regarding PTSD and individual participants may be more likely to endorse PTSD-related symptoms as opposed to mood symptoms. This is a potential area for future consideration.

The findings of this review indicate that depressive symptoms are present in journalist samples. However, there are a number of theoretical and methodological issues that can be addressed in future research. First, there is a need to move beyond identification and prevalence of symptoms to establishing proportions of journalist samples that may have a diagnosable mood disorder. However, as explained in Section 4.2., this cannot be achieved through online survey methods. Rather, future research requires the inclusion of diagnostic interviews. Second, research in this area to date has included measures of depression as supplementary information in studies primarily concerning trauma exposure. As stated in the introduction, journalists may experience mood disorders (not just depression) as a result of a myriad of other personal and occupational factors outside of their exposure to trauma. Participants in the interview study (Phase B) also suggested that the nature of the TV news industry in particular may attract some individuals predisposed to fluctuations in mood, and maintains such mood fluctuations because it can be an industry of extreme highs and lows. Some interview participants also indicated that they have previously been diagnosed with a bipolar related disorder.

Finally, a number of factors associated with the development of depression, which are established within the broader psychological literature, have yet to be considered in
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journalist samples. One example is the difference between endogenous and exogenous depression, and the associated differences in treatment and implementation of the biopsychosocial approach. Endogenous depression is often referred to as melancholic depression and is considered to be associated with biological causes (Paykel, 2008). By contrast, exogenous depression is often referred to as reactive depression and is considered to be associated with environmental causes, such as a one specific stressor, or a series of stressors (Paykel, 2008). This conceptual difference may be particularly relevant in the context of studying journalists’ depression symptoms alongside other trauma reaction symptoms. Other factors include: (1) demographic variables, such as personality, marital status, socioeconomic status, and psychiatric and medical history, and (2) occupational factors shown to influence other psychological constructs, such as media outlet, circulation size, years of experience within the journalism industry, and role (see Chapter 3; MacDonald, Saliba, & Hodgins, 2016; and MacDonald, Saliba, Hodgins, & Ovington, 2016). Future research with journalist samples may consider including such factors.

The present SLR provides a valuable synthesis of existing knowledge to inform future directions in journalism practice and mood disorder research. The thorough, structured process adopted to identify articles means that all articles within the scope of this study were reviewed; hence it is possible to assert with some degree of certainty the areas within the literature that require further consideration. Relative to the only other review considering depression in journalists (Aoki et al., 2012) the unique contributions of the present SLR include the increased sample size, in-depth discussion of all studies reviewed, and a specific argument regarding journalists’ experiences of mood disorders more broadly.
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Phase B. In-depth interviews

Phase B involved conducting semi-structured in-depth interviews with 21 TV news camera operators and reporters. The aim was to explore individual subjective experiences as well as the processes associated with exposure to PTEs, psychopathology, and role differences. As explained in Chapter 3, there are some common limitations to quantitative cross-sectional trauma research.19 The qualitative method adopted here does not intend to correct such limitations; rather, it provides valuable findings complementary to current deductive trends in the literature, which focuses primarily on psychometric scales (Newman, Shapiro, & Nelson, 2012). The findings reported and discussed in Phase B (Chapters 5 and 6) provide a greater overall understanding of the topic and offer insights regarding the experience of trauma exposure and reactions amongst those working within the TV news industry.

B.1. Method

B.1.1. Research aims and questions

Phase B addresses the second, third, and fourth overall aims of the present research:

2. Explore the kinds of potentially traumatic events (PTEs) camera operators and other news workers are exposed to.

3. Explore a range of factors that are associated with greater psychological distress in camera operators and other news workers.

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19 As a body of literature, trauma research has considered a wide range of responses to an even wider range of PTEs, measured using many different methods (Norris et al., 2002). There are a number of challenges in terms of interpretation and generalisation of findings (McFarlane, Van Hooft, & Goodhew, 2012, p. 56): “Challenges revolve around different time periods having elapsed after the disaster [or PTE], the identification and recruitment of representative samples in the disrupted environment following disaster, and the use of different measures where the cut-offs are not cross-validated.”
4. Explore potential differences in trauma exposure and reactions, between camera operators and other news workers.

The following research questions (RQs) were devised in order to achieve these research aims:

1. What kinds of PTEs are TV news camera operators and reporters exposed to through their work?
2. When covering work-related PTEs, what are the factors that camera operators and reporters suggest result in greater psychological distress?
3. How do TV news camera operators and reporters perceive their experiences to be different to those of one another in terms of exposure to PTEs and psychopathology?

B.1.2. Methodological framework

This section outlines the theoretical framework from within which the research was conducted and the data analysed. The present research was informed by social constructivism (Matthews & Ross, 2010). Essentially, the research aims were exploratory and emphasised the participants’ subjective experiences of their work and the associated trauma exposure and reactions. From such a perspective, participants’ perceptions and attitudes relating to the research area are prioritised, and viewed as socially constructed. It seems reasonable to assert that the perceptions and attitudes about their work and trauma exposure will vary between news workers. This is expected to be the case even where individuals are exposed to the same traumatic events. In addition to this, research within a social constructivism perspective views individual attitudes and perceptions regarding trauma exposure and reactions as “continually being
reviewed and reworked by those involved in them (the social actors) through social interaction and reflection” (Matthews & Ross, 2010, p. 25).

The social constructivist approach adopted in the present research should be clearly distinguished from the approach of social constructionism. The latter would similarly hold that participant attitudes and perceptions regarding trauma are socially constructed; however, the key point of differentiation is that social constructionism prioritises the role of macro level discourses in the retelling and understanding of their own trauma exposure and reactions by participants (Hepburn, 2006). In other words, the focus of the present research is on how individuals perceive their experiences, as opposed to how these perceptions are constructed and maintained through discourse.

In terms of the assumptions underlying the data collection and analysis, interpretivism informed the present study (Matthews & Ross, 2010). Research primed by interpretivist tenets focuses on interpretations and understandings, and permits the exploration of a range of attitudes and perceptions across participants. The researcher aims to adopt an empathic and curious standpoint during the interview process so as to develop an understanding of the participants’ experiences from their own perspectives. This approach is congruent with social constructivism as it emphasises subjective experiences and suggests that the data obtained is specific to the context in which it was collected. Both social constructivism and interpretivism call for data collection methods that are capable of producing data that is rich in depth and detail, such as in-depth semi-structured interviews (Matthews & Ross, 2010).

Analysis of the data was conducted according to the thematic analysis (TA) method prescribed by Braun and Clarke (2006). This method of analysis was adopted
because it is systematic and transparent in nature, and has been specifically developed for use within the context of psychological research. The step-by-step approach to analysis is elucidated in Section B.1.5. Data Analysis. However, TA is not theoretically aligned, so it was necessary to explicitly state the methodological assumptions that underpin the research process and therefore the reported findings and conclusions (see above). It has been noted that there are two potential risks to research integrity when implementing TA. The first occurs when the kind of data produced is not made apparent, and a list of themes is simply presented as speaking for itself (Willig, 2013). This is circumvented in the present research by clearly outlining the methodological framework of the research and by discussing the findings in a way that is authentic in terms of the assumptions associated with the framework. The second risk is restricting the analysis to a priori themes already apparent in the literature (Willig, 2013). As suggested in Section B.1.5. Data Analysis, open-ended questioning and responsive probing were used; equal weight was given to each section of data in order to identify novel and nuanced findings. In this way, the findings reflect both manifest and latent codes and themes.

B.1.3. Participants and sampling

B.1.3.1. Sampling criteria

Participants were required to be over 18 years of age, and to be currently working or to have previously worked as a TV news camera operator or reporter. The study aimed to explore experiences in greater detail, particularly role differences. By allowing current and past news camera operators and reporters to be involved, the study was able to explore experiences of people who have for whatever reason left the job, and also to

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20 Participants were not provided standard definitions of relevant terms. Because they were considered to be domain experts, participants were encouraged to provide their own definitions and understandings of terms. The author then used probing questions to ensure understanding of the definitions.
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assess potential differences over time in this constantly developing industry. This latter point is pertinent because participants in the present research indicated that changes in organisational policies and telecommunications have resulted in changes in role responsibilities. It was considered important to sample both staffers (individuals employed full-time through a news organisation) and freelancers; increasingly, individuals are pushed towards freelance work with full-time organisation-based roles becoming more competitive and lower in number. Participants were also sought from each Australian state and territory, covering both regional and metropolitan newsrooms in both public and commercial broadcasters. Considering these criteria, the sampling method adopted is best characterised as maximum variation purposeful sampling. Patton (1990, p. 172) aptly describes the appeal of adopting maximum variation purposeful sampling:

This strategy for purposeful sampling aims at capturing and describing the central themes or principal outcomes that cut across a great deal of participant or program variation. For small samples a great deal of heterogeneity can be a problem because individual cases are so different from each other. The maximum variation sampling strategy turns that apparent weakness into a strength by applying the following logic: Any common patterns that emerge from great variation are of particular interest and value in capturing the core experiences and central, shared aspects or impacts of a program.

B.1.3.2. Sampling process

The first round of interviews involved sampling TV news camera operators. The research enquiry originally focused solely on camera operators due to the lack of empirical research considering this role. Fifteen camera operators were recruited and interviewed before sampling for this role group ceased due to what is variably referred to as saturation (Corbin & Strauss, 2008) or redundancy (Lincoln & Guba, 1985). That is, data is collected until no new information (codes or themes) relating to the research focus arises. In research contexts such as this, there is a trade-off between breadth and
depth whilst concurrently balancing the need to achieve diversity and variation within the data (Patton, 1990). It was found that 15 in-depth interviews with an average length of 1.5 hours produced a large amount of rich, quality data capable of addressing the research questions, whilst simultaneously allowing for the identification of case uniqueness (Patton, 1990).

Throughout the interviews in the first round of sampling, camera operators emphasised the importance of their relationships with reporters in times of trauma exposure, as opposed to their own individual experiences. There was much discussion relating to the similarities and differences apparent between the two roles and how these related to the present research focus (examined in detail in Chapter 6). A reflective approach was embraced, so it was possible, and considered necessary, to incorporate the attitudes and perceptions of TV news reporters. The ability to adjust the research focus to better understand the phenomenon in question is one of the benefits of implementing qualitative methods. As a result, a second round of sampling began targeting TV news reporters. By the sixth interview saturation was reached and sampling ceased. The aim of the second round of sampling was to improve the researcher’s understanding of the research area by including reporters, not to match the roles in terms of group size. It was found that the attitudes and perceptions of reporters could be attributed to existing codes and themes developed from the first round of sampling. Moreover, the findings indicate that this round of sampling considerably enhanced the results by adding unique perspectives and experiences of reporters, thus increasing the variation of experiences within themes.
B.1.3.3. Recruitment

In order to recruit participants, contact was made with a range of journalistic organisations, including unions and representative bodies for both reporters (and journalists more broadly) and camera operators (and production crew more broadly). Each of the Australian regional and metropolitan commercial news networks, as well as the Australian Broadcasting Corporation (ABC) and Special Broadcasting Service (SBS), were contacted. In addition, journalism and TV production departments of various Australian universities were contacted. Each of the listed outlets was sent information about the research, encouraged to ask questions, and asked if they might be willing to promote the research to their staff and industry contacts. These organisations did not play a role in data collection; consequently, only the author knew the identities of those interviewed. Social networking sites were useful in the recruitment phase as a range of profession and role-based groups and mailing lists are accessible online. An example of an initial invitation to participate can be located in Appendix B.1.

B.1.3.4. Participants

In summary, the overall sample included 21 Australian TV news workers (15 camera operators and 6 reporters). Eighteen of the participants were currently working in the TV news industry, whilst three had worked in the TV news industry in the past. Thirteen participants were (or had been) employed as a staffer, and the remaining eight participants were working (or had worked) as freelancers. It is worthwhile noting that before moving in to freelance work a majority of the freelancers had experienced working within news organisations, some as staffers, and some as causal or part-time staff. Participants ranged in age from 25–72 years. The average age was 43.7 years; almost half of the participants recruited were in their forties ($n = 9$). Each of the decades covered by the age range was represented in the sample.
All 15 camera operators that participated were male, and four of the six reporters were female. As previously explained, the present study did not aim to obtain a representative sample, which might be the focus in positivist quantitative research designs. Additionally, issues associated with gender were not the direct focus of the present study. However, because maximum variation was sought, it is meaningful to point out that, anecdotally, journalism (encompassing both camera operators and reporters) has a high male presence. Male majority sampling has been defended in survey research in this area by claims that males make up the majority of journalists. This argument is problematic in that no population samples or data appear to have been made public for comparison in terms of a representative gender split. It is also likely that gender splits would vary by journalistic role and over time. Therefore, even if a representative gender split was desirable, it is not possible to be sure that the gender ratio sampled would accurately reflect the demographics of camera operators and reporters in TV news. In the endeavour to achieve maximum variation in the present research both male and female participants were encouraged to participate.

**B.1.4. Data collection**

Data collection and analysis were carried out concurrently; however, the two are described separately in order to promote a clear understanding of the research process. In-depth semi-structured interviews were conducted with 21 participants. The length of the interviews ranged from 1–3 hours, with an average length of 1.5 hours. The interview schedule contained topics for exploration relating to participants’ exposure to various PTEs, the kind of exposure, psychological impacts of the work, and perceived differences in exposure as a result of news crew role. Probing questions varied depending on participant responses and experiences. Questions were posed in an open-ended fashion to encourage participants to provide insights and novel comments that the
interviewer would not otherwise know to ask about. Pseudonyms and codes were used
to de-identify the transcripts prior to analysis.

Interviews were conducted in a range of ways, including face-to-face, on the
phone, and via Skype. Flexibility in the way interviews were conducted was beneficial
to the research in that it provided access to valuable and experienced individuals who
otherwise might not have participated. It also served to make the research experience as
comfortable and convenient as possible for participants. The nature of news production
means that there was potential for participants to be traveling or have little time to meet
face-to-face. Some participants felt that a Skype or phone interview suited them better
for other personal reasons, such as family obligations. The flexibility also meant that
participants could be recruited from regional and metropolitan networks from each state
and territory in Australia. There are research contexts in which the use of phone or
Skype interviews, and the use of audio recording, might influence the data collected.
Fortunately, the target population for the present research is highly familiar with the use
of various communications technologies and audio recording from performing their
roles in TV news production and journalism.

Prior to interviews, the interviewer and participant used email and/or phone calls
to talk about the aims and details of the research and to negotiate an appropriate time
and means to conduct the interview. Before each interview participants were also
provided with an information statement outlining the nature of the research
(Appendix B.2.). Specifically, the information statement provided details regarding the
research team, a description of why the study was being conducted, and who was
eligible to participate. The information statement indicated that participants would be
asked about their experiences of PTEs at work, and the psychological impact of their
work, also that the interview would be audio recorded. Participation in the present study was entirely voluntary, so participants were advised that they could withdraw from the research at any time without being subject to any penalty or discriminatory treatment. It was also made clear that participant details would remain confidential. The information statement suggested that participation might result in some level of discomfort due to recalling and discussing potentially upsetting experiences. Participants were assured that their well-being would be the primary concern of the researcher and would be put above the goals of the research project. A list of support services and contact details was provided for personal use after the interview if necessary. It was ensured that participants had the opportunity to ask questions before providing informed consent.

Because news workers are a professional population with constant time constraints, each participant was offered a $10 gift card as a modest form of compensation and symbol of appreciation for their time and efforts. Considering the time required to participate in the research, it was not considered likely that a $10 incentive would encourage participation by individuals who were otherwise unwilling to contribute. Participants attending a face-to-face interview were offered reimbursement for their travel to and from the interview. Travel meant not only a potential cost for participants, but also that they might have less time at work with the associated loss of income. This is particularly relevant considering the move toward freelance work in news production, and that it was considered important to sample both staffers and freelancers. Therefore, it was considered necessary to recompense participants for their travel costs.
B.1.5. Data analysis

The present author and two trained research assistants transcribed the interview audio recordings verbatim. Each completed transcript was then proof read and quality checked by the author, serving as a process of initial familiarisation with the data (aside from the original interviews themselves). The author used Braun and Clarke’s (2006) prescribed method of TA to analyse the interview data, within an interpretive social constructivist framework (see Section B.1.2. Methodological framework).

The data was initially coded by hand. As unique topics were recognised within the data a list of codes was developed. This was achieved by working through each transcript individually and line-by-line, considering each section of the data to be of equal value. Any time a new topic was noticed it would be added to the list of codes, and noted with it was the corresponding participant pseudonym. Any time a participant’s data matched an already listed code, the appropriate pseudonym was noted alongside that code. The data was then imported to NVivo 10 in order to electronically store and organise codes and associated segments of data. As in other studies, such as that of Klunklin and Greenwood (2006), it was found that the use of computer programs is useful for ease of storage and retrieval of coded data, but computer programs cannot perform the analysis for the researcher. The “creativity and intuitive nature of qualitative research” demands that the researcher not be dependent upon the use of such computer programs (Klunklin & Greenwood, 2006, p. 36).

In instances where a transcriber was unsure what the interviewee had said, all three transcribers reviewed that specific audio excerpt and discussed the possible responses. In cases of disagreement in this process, the author made the final decision. This was considered the most appropriate approach because the author conducted the interviews, after which transcription occurred promptly, so the discussions were typically easily recalled. In instances where none of the three transcribers was able to discern the response, the appropriate transcript section was replaced with ‘Inaudible’, and the duration of missing audio was recorded.
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The complete list of codes was then worked through and visual representations of the codes were created, mapping them relative to one another. This was often done on a large smart board so that arrows could link various themes to one another and notes could be added to the map regarding the relationships between codes (Braun & Clarke, 2006). Clarke (2005) also promotes the use of visual representations of qualitative data and thematic mapping, albeit from a differing methodological standpoint. Higher-level themes were constructed, as relationships were made amongst codes. Here the aim was to define and refine the themes (Braun & Clarke, 2006), to ensure that they had both internal homogeneity and external heterogeneity (Patton, 1990). For clarity, internal homogeneity refers to the sameness of the overall theme topic, not sameness in participant attitudes regarding the topic. In order to minimise potential theoretical or other presets in analysis it is important to consider negative cases, or otherwise termed deviant responses.

A theme-by-theme trawl through the raw data was then conducted. The aim of this trawl was to look for supporting evidence, as well as negative cases, to build upon the dimensions of each theme. Throughout this process, the focus was on indicators of context, interactions, and consequences in order to (1) build upon and test the definition of each theme, (2) identify constituent sub-themes, and (3) consider each theme’s overall relevance to the sample as a whole. At this stage, themes and codes with little relevance to the overall sample and research objectives were removed from the analysis. Proponents of grounded theory use a method called constant comparisons (Corbin & Strauss, 2008; Glaser & Strauss, 1967). Although the present research was not conducted according to the tenets of grounded theory, it is worthwhile noting that the constant comparisons technique was adopted in the present TA. Comparative thinking is essential in TA, and happens at each level of the analysis, from line-by-line coding
through to mapping and defining higher-level themes, and finally in writing-up research findings. Thus, the constant comparisons technique was found to enhance the quality of the analysis.

A research journal was kept, and the memo and annotation functions of NVivo 10 were applied for a number of purposes. These tools were used to (1) record early ideas about relationships between data and codes, and between codes and themes, (2) explore theoretical ideas and points that required follow-up later in the analysis process, (3) note connections made between the present research and other theoretical approaches, and empirical findings, within the literature, and (4) to promote and aid reflexivity throughout the analytical process.

The selection of codes to be discussed throughout the qualitative findings sections was not based on one inclusion criterion alone; for example, including only those codes most frequently mentioned. Rather, codes were included for a range of practical and theoretical reasons, such as frequency within the data set, relevance to the research aims and questions, topics previously unconsidered within the empirical literature (novel findings), and uniqueness compared to other participant responses. This results in a greater understanding of the research area as a whole by considering areas of shared concerns and experiences, and areas of individual nuance. These benefits are attributable to the adoption of a methodological framework and design such as in the present research.

**B.1.6. Potential limitations of the research**

Interviews were conducted in a range of ways, including face-to-face, on the phone, and via Skype. Ideally all interviews would have been conducted face-to-face;
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there is the concern that using telephone interviews reduces access to non-verbal cues, such as body language, which may “compromise rapport, probing, and interpretation of responses” (Novick, 2008, p. 391). However, a review by Novick (2008) indicates there is currently little empirical evidence to suggest that the quality of data obtained through telephone interviews is of poorer quality than those conducted in person. In light of this finding, and for a number of pragmatic reasons, a number of interview mediums were used in this research:

1. This flexible approach provided greater access to valuable and experienced individuals who otherwise might not have participated. The nature of news production means that there was potential for participants to be traveling or have little time to meet face-to-face. The flexibility also meant that participants could be recruited from regional and metropolitan networks from each state and territory in Australia.

2. The range of mediums also served to make the research experience as comfortable and convenient as possible for participants. Some participants felt that a Skype or phone interview suited them better for personal reasons, such as family obligations. Furthermore, it can be that some individuals find telephone interviews less confronting when discussing personal topics (Novick, 2008), particularly in the context of trauma research.

3. Due to travel time and other resources required to conduct only face-to-face interviews, there would likely be a trade-off whereby fewer participants would have been sampled if only face-to-face interviews were conducted.
There are research contexts in which the use of phone or Skype interviews, and the use of audio recording, could influence the data collected. Fortunately, the target population for this research tends to be highly familiar with the use of communications technologies and audio recording in the performance of their roles in TV news production and journalism.
Chapter 5. Over exposure: The trauma exposure of TV news camera operators and reporters

5.1. Introduction

The present chapter aimed to explore individual subjective experiences of, as well as the processes associated with, exposure to potentially traumatic events (PTEs). The findings reported here relate to the second and third research aims, and address the following research questions:

1. What kinds of PTEs are TV news camera operators and reporters exposed to through their work?

2. When covering work-related PTEs, what are the factors that camera operators and reporters suggest result in greater psychological distress?

Participants were asked to tell the author about some of the stories they had covered during their career that could be considered potentially traumatic or stressful. However, participants were encouraged to share only stories and details that they felt comfortable recounting in the interview setting. Research in this area has predominantly focused on quantifying exposure to trauma and has typically included qualitative methods in the form of open-ended questions at the end of a survey. Greater context and understanding of the processes associated with trauma exposure in news workers is achieved in the present chapter through in-depth exploration of the rich content associated with each theme of the findings. Understanding the kinds of PTEs journalists are exposed to, and the nature of the exposure, is the first step in developing procedures and support structures to safeguard individuals against adverse trauma reactions.
5.2. Findings and discussion

The work-related PTEs experienced by participants have been grouped into six themes and are presented in alphabetical order in Figure 5.1. The experiences and associated perceptions within each theme are discussed below. The order in which the themes are discussed is also alphabetical.

Figure 5.1. Kinds of PTEs to which participants have been exposed

Whilst frequency of exposure to various PTEs is not the focus of this chapter, every participant indicated that they had experienced multiple PTEs. This high level of exposure is notable for two reasons. First, in reference to relevant general population studies, Mills et al. (2011, p. 407) state that trauma exposure prevalence rates range from 16–90%. In relation to work-related exposure, journalists were found to have prevalence rates as high as 95%, exceeding rates of exposure reported for the general population studies (see Chapter 2). Second, in trauma exposure studies relying on participant recall, as opposed to recognition (asking them to suggest events, compared to ticking from a list), the prevalence rates of exposure are lower (Mills et al., 2011).
5.2.1. Accidental or other death-related events

Due to the violent and fear-driven nature of TV news (Dworzniak, 2006; Furedi, 2006), crews find themselves covering a range of accidental death or other death-related events. This theme does not include man-made violence resulting in death (e.g., murder), which is explored below in Section 5.2.3. Participant experiences of PTEs included within this theme of accidental or other death-related events comprise, incidents such as drowning, funerals and memorials, building or house fires, mining disasters, suicide, and seeing dead bodies. The remainder of this section focuses on participants’ exposure to dead bodies and to stories of suicide. Both of these kinds of PTE are elaborated on for two distinct reasons. Because participants frequently mentioned seeing dead bodies, it is considered as a kind of exposure. Stories associated with suicide are considered in detail because they were also frequently mentioned, but more importantly, because journalists’ exposure to this kind of PTE is sparsely reported in the trauma literature.

5.2.1.1. Dead bodies

There are times when news crews are exposed to dead bodies, either firsthand or in images. It was made clear by many of the participants that this kind of experience is not something they actively seek out:

*It probably wasn’t the first dead body I’d seen, but it was, it was certainly confronting. I mean, you didn’t obviously stand around and you know, stare at what you could see, and you never do in those situations, but it was certainly ah, a shock to the system.* Evan

There is arguably little investigative gain from seeing a body when the cause of death is known and because images of dead bodies would never be included in a final story. Rather, participants were most likely to see a dead body when they arrived
quickly at a scene that had not been cordoned off by police and unwittingly started to look around without knowing what had occurred or precisely where:

_We were fairly close because there was no police tape at the time and I was in an unmarked car ... So I just drove right up to the police to ask them “Ok, what’s happening here?” I didn’t know where the crime scene was at that point, and I realised that the guy was right there on the ground. And he was sort of, his face was sort of missing in a sense. So he’d shot himself in the face._ Jack

Responses such as the one provided by Jack are telling in regards to news workers preparedness for trauma exposure. As Jack states, he was not informed about the incident that had taken place and was caught by surprise when he found himself in close proximity to the dead body on scene. The author has had similar conversations with other news workers indicating that this is not an uncommon experience. Such experiences are crucial to consider for two reasons. The first reason is that this kind of exposure has the potential to result in distress for news workers. The second reason is that often news workers exposure to potentially stressful stimuli is considered to be secondary. Such perceptions minimise the possible psychological impact of news work. However, it may be that there is limited consideration of the PTEs news workers experience because the footage shown to viewers is censored; many of the things they witness firsthand never go to air.

5.2.1.2. _Suicide_

There are industry guidelines associated with the ethical and responsible coverage of stories concerning suicide in the media; broadly they aim to minimise sensational and potentially harmful reporting (Australian Press Council, 2011; Mindframe, 2014). In general, participants indicated that suicide is not typically covered in TV news. Despite this, participants still had their own experiences of covering a story relating to suicide, particularly in situations involving arrival at a scene before the cause of death is known.
A FOCUS ON EXPOSURE

Jack conceded that there are occasions when you might cover suicide, but typically you would only do so if there were some reason that it would be important for the community to know of the individual’s passing:

*I covered a suicide that was a, a guy jumped in front of a train ... And I was there sort of right after it happened with no, cos no real idea of what was happening cos if they knew it was a suicide they wouldn’t have sent me out to shoot it. But he was sort of a prominent community member so we sort of had to cover it, just by the nature of who he was.* Jack

A number of the participants in the present research had been working in the TV news industry for a long time, predating any formal industry guidelines for media professionals reporting suicide. This is noteworthy because news organisations are now more likely than ever in the past to provide post-trauma support and training for their staff; hence it might be assumed that the psychological risk of the work is likely to be reduced. Assumptions such as these, whilst accurate in some instances, run the risk of trivialising the previous experiences of seasoned camera operators and reporters still actively engaged in the industry, and how these events might continue to shape their attitudes and perceptions, not only of subsequent trauma exposure, but also of organisational changes regarding what is acceptable to cover and how to cover it:

*There’s a couple of things that are vivid in my memory and one of them would’ve happened over 25 years ago, and that was someone who committed suicide by jumping off a building. And we filmed them falling because we were there because [the newsroom] were hoping it was going to be a happy story and they got talked out of it. And they were on the edge and um, you know, talking to the you know, police and everything, and then all of a sudden, and you know, we’re on the ground, and they’re about 20 floors up, they just you know, pushed backwards like this, and tumbled all the way down. So I shot them all the way down to the footpath and hitting the ground. Um, we never got any sort of debrief, or any talk, all we got at that stage was the newsroom rang up and said “Awesome, we wanna run the pictures tonight on the news” ... and we both said to them “You’re kidding, someone’s committed suicide, you can’t you know. Just because they committed suicide, isn’t a news story” ... but they wanted to run it. But then when they saw the pictures they were like “Uh shit no, it’s a bit graphic, we can’t run it.”* Robert
Robert’s story also highlights a common theme amongst participants and ties in with the section above regarding dead bodies. Specifically, they frequently bear witness to tragic or gruesome events or elements of a story that never make it to air. Feinstein and Owen (2002b) also describe experiences of combat photographers who document atrocities knowing that the images will never make it to publication or be shown on TV, but nevertheless felt an obligation to bear witness to them. This is especially pertinent in the light of research which shows that adult viewers of negatively valenced news stories experience increased anxiety, sad mood, and generalised worry about personal concerns (Johnston & Davey, 1997). Similarly, negative footage in news stories can result in the experience of negative emotions and increased arousal (Lang, Newhagen, & Reeves, 1996).

5.2.2. Direct involvement in events

Typically when journalistic exposure to PTEs is considered, the focus is on bearing witness to the aftermath of an event. However, as the trauma exposure review in Chapter 2 demonstrates, there are many instances in which journalists experience firsthand exposure to PTEs. Similarly, participants in the present study provided a number of personal examples: one participant was in a coma for some months after being in a car accident whilst working. Yet another participant had been involved in multiple helicopter crashes while working, noting that despite the descriptive appropriateness of the word ‘crash’ it is rarely used within the industry:

*Heavy landings they call them, if they call it a heavy landing it doesn’t have to be investigated. If it’s a crash then we’ve gotta investigate it.* Robert

In addition to this, five participants had covered war/conflict and through covering such events had experienced very serious danger to their lives, including being threatened with a weapon, car-jacked, taken hostage, and being shot at:
I was driving our car and um, we were overtaken by another car ah, and the fixer\textsuperscript{22} ... She told me not to overtake it and she was obviously, her radar was up about it, that car. And I did, and then it overtook me, so I may have that wrong, so yeah I initially was driving behind it, I overtook it ah, and we slowed down and it overtook us, stopped further up the road ... And as we approached it there were a couple of people getting out like they were dropping some people off, anyway they flagged us down, um, up to the car, you know, gun in the head, out of the car ... they grabbed me and took me to the ditch by the side of the road, and I thought “Ah, this is where Hugh’s finished.” Um, but he just let me go and walked back to the car, grabbed everybody else out. The producer actually was sitting in the middle of the backseat, he froze, so we had to drag him out cos he was just like terrified. Dragged him out, they took our car, gone, which is probably the best thing that could have happened. You know, and there was other stuff after that, you know, we got shot at and what not. Hugh

These individual experiences serve to highlight the potential for physical danger in journalistic work. They are less frequent in nature than other kinds of PTEs, yet they undoubtedly have a significant impact on those involved. The focus of the remainder of this section is on two kinds of events that were more widely experienced and discussed: verbal and physical harassment during a story’s coverage, and involvement in ‘death knocks’.

5.2.2.1. **Harassment**

A clear example of first-hand exposure to PTEs is the harassment participants in the present study have received not only from people directly involved in a story they are working on, but also from bystanders. More often than not the harassment is verbal in nature:

\begin{quote}
I know people get in to news and get snarls and all that sort of stuff over the years, you get snarled and abused. Ian
\end{quote}

\textsuperscript{22} Fixer is a term used by foreign correspondents usually referring to local journalists or other individuals who are employed ad hoc for their local knowledge and to provide support in various aspects of the news production process (Bossone, 2014).
A FOCUS ON EXPOSURE

Oh it’s part of the job, um, yeah I mean basically you get called maggots and dogs and um, just you get people calling out at court, they’ll call you everything under the sun. Simon

However, participants in the present research have also experienced physical harassment whilst on the job. Examples include being spat on, having objects thrown at them, people pushing or shoving them or their equipment, and being punched. Interestingly, many of the examples of abusive exchanges occur whilst they are covering court:

I’ve had physical altercations outside court and stuff like that so it’s um, not, not fun ... But what is more interesting I think is um, you know this notion that as a cameraman you might get sent to cover a court story where someone might smack you in the face [laughing]. Apart from policemen, I dunno how many professional roles there are where that’s a possibility when you go to work, ... as far as I’m concerned I’ve never had one second of training on how to deal with that, and I don’t think anybody else has either. Evan

You certainly get abuse on the road, you know, people hit the camera and tell me to get out of the way you know, I’ve got friends that have been knocked over and um, you know, some of them hurt, ... I’ve been pretty lucky, I haven’t been really put out of action or anything. Nick

Similarly, there have been a number of reported assaults against news crews in recent years in the media (ABC News, 2014; Ralston & Davies, 2012). Correspondingly, the anecdotal literature contains news workers’ stories of being attacked (Trotter, 2000), robbed at gunpoint (International Alliance of Theatrical Stage Employees, 2015), kidnapped (Castaldo, 2012), or sexually assaulted (Cacho, 2010) while working. Perhaps as interesting as the actual experience of harassment amongst the participants in the present research is their general reaction to such abuse. Generally, responses to abuse could be grouped into two types. The first demonstrates considerable empathy, and attributes their abuse to being an easy target at a time when the aggressor(s) are experiencing shock or immense emotion and simply need to vent:
If you’re at someone’s funeral and people don’t want you there and you know, to a degree they’re gonna be right, they’re just venting at you because you’re the easiest one to vent ... I guess you don’t take it personally at all, not even, it’s kinda aimed at you, but it’s more aimed at their situation that they’re in, um, actually they don’t know you, so how can they be really saying too much that’s at you? Simon

One of the more detailed and remarkable stories in relation to taking an empathic stance during a time of personal threat was told by Adam. Now a seasoned camera operator, Adam reflected on an early career experience that has stayed prominent in his mind:

A little kid went missing next to one of the big irrigation channels ... they thought he was in the channel but they weren’t sure so they were there for, I dunno, it was a long long time, many, many hours, umm police divers the whole lot, were searching the channel, and I was there shooting for the whole time, and the little kid’s grandfather came up and he was cool ... he was like “Oh I dunno where he is, he might have just taken off” and you know, he was still full of hope and all that sort of stuff, and we got talking about him, and as the night went on he got a bit more worried and bit more worried, but he was still pretty cool, we’d formed a bit of a bond, in a very small town, everyone sort of knew me because I was the camera guy in town and you know, the only one and that sort of stuff, and then they found his body. And he was terminal, he was absolutely terminal, his whole demeanour changed, and he just wanted to kill me, because I was there. So that sort of put things in perspective a fair bit ... I was the only one there not helping, um, and, I was being, in his mind, invasive you know, that’s something people think ... he needed to take his grief out on somebody and I understand that. I got it, you know, I was only 18 years old, but I got it. Adam

Adam’s story demonstrates some important points. One is that news workers can have involvement in a story as it unfolds over a long period of time. They are also very likely to be highly visible to others due to their camera or other equipment (explored in detail in Chapter 6). Despite building positive rapport with the grandfather of the missing young person, Adam quickly became the enemy when the body was found. Although Adam was quite young at the time, he was nonetheless capable of taking the perspective of the grandfather and understanding his hostility. The second grouping of participants’ responses to abuse attributes the negative reactions of individuals to the
symbol of the media and associated dislike, rather than to them personally or to their own professional actions:

*They can tell me I’m a vulture and a scumbag all they like but it’s just like ... a lot of that you can just shrug off, but I do think there’s a general cynicism about journalists and the media generally, and I understand where that’s from. Brooke*

*When they’re hitting ... they’re not attacking me you know, it’s the camera, it’s the whole, the lights and the boom and the journalist and all that sort of stuff, it’s just the TV that they’re attacking I guess. Nick*

*Never me personally, you know, like maybe if I stand in a group of journalists outside a court house, or you know, in some sort of media scrum situation where we’re gonna, you know, follow someone down a pavement or something hideous, um, then it might be just general kind of negative kind of calling out or something, at the pack rather than me. Emma*

Whilst the majority of participants could be grouped into one of these two kinds of responses, there were a few exceptions within the group. A small number of participants indicated that they found verbal harassment threatening, especially when there is a crowd and the news worker is covering the story alone, such as in Will’s description of covering the funeral of a well-known personality:

*There were just thousands and thousands of people so I was trying to make my way through the crowd, and as I was making my way through, the crowd was getting more and more angry that I was there, and I made it to the door at the church and almost got inside, before people started chanting at me, um, it was getting quite, I was getting quite intimidated by it and I just thought they don’t want me to be here, I don’t wanna be here, this isn’t worth it, I’m going back [to the newsroom] and I just got back in the car and went back, and I remember the chief of staff saying “What are you doing?” I said “I couldn’t get in, they didn’t want me there.” Will*

Overall, reporters and camera operators in the present study tended to not take physical or verbal abuse personally. Despite broader perceptions that the journalism industry produces stoic and cynical news veterans (Cozma & Hamilton, 2009; Di Giovanni, 2009; Vorenberg, 2012), participants’ reactions to their abuse demonstrated critical insight.
5.2.2.2. Death knocks

In the wake of a tragedy or disaster, news crews are at times encouraged to obtain comment from the family and friends of victims:

*If there was a big fatality or something, they have what they call a death knock ... when someone dies, it doesn’t matter how they die, but they’ll get you to go and see the family and get their reaction.* Cameron

There are a range of anecdotal reports chronicling the guilt and stress associated with performing ‘death knocks’ (Germer, 1995). At times this guilt comes from not being able to help people in the stories they have been assigned to (Cooper, 1999) or unintentionally adding to the stress experienced by those they are writing stories about (Ricchiardi, 2002). Some journalists have even been in the undesirable situation of unknowingly breaking the news of the death of a loved one to family members they are seeking to interview (Johnson, 1999; Pyevich, Newman, & Daleiden, 2003). This aspect of the work involves a layering of potential trauma. The first, and most obvious, is the trauma of the initial event (the tragedy or disaster itself). In addition to this, the process of seeking out and engaging bereaved individuals is in itself a PTE for the crew, because they may cause distress in the people they interview. Despite this complex layering of potential trauma and references to the difficulty of covering death knocks, in the anecdotal literature, studies of journalists’ trauma exposure have not adequately considered exposure to death knocks and the psychological consequences.

The general consensus across participants discussing death knocks was that it is not currently as common as it has been in the past. Regardless, they do still occur and are generally the kind of experience that sticks in the minds of those who have been unfortunate enough to have to partake in the process:
This doesn’t happen as often as it used to, possibly a sign that the media industry’s matured … That’s [death knock] never pleasurable for anybody, you know, even the hardest journos find that hard to do. Evan

I don’t like death knocks, I never have, you know, they’re not pleasant stories to do so um, there was a sort of sense of resentment, it’s like “fuck, fuck, fuck, fuck, hate this shit, hate this shit” … I still feel a bit of kind of guilt I guess about that it’s just like oh, cos those stories are just not fun, you know, they’re really unpleasant, they’re really hard to deal with um, and very often you get so little out of it. Brooke

Part of the reason that death knocks are challenging relates to the perceived cost/benefit analysis of the exchange. The benefit of getting a compelling sound bite or visual grab for your 60–90 second news story just does not seem to outweigh the cost of putting bereaved individuals through more stress:

They were always a bit tough when you just have to go, because it’s your job to just get someone crying, that was all they [management] wanted, and the first thing the office would say to you is “Oh did you get tears?” That’s all they wanted. Robert

Does that really make for a better story? You know, to watch someone in their utmost hour of grief, mate, you know the old story, yeah tears rate, but are we really benefitting the human race by doing this? ... Are we really changing anyone’s life or are we just feeding on someone else’s grief? Owen

Another reason that death knocks are challenging relates to the early stage of grief that the person being interviewed is usually in. Camera operators and reporters often feel a sense of unease and intrusion as they try to obtain comments from individuals who may not yet have fully come to terms with their loss:

It’s an interesting experience, like some people, cos it’s just happened, the family, it might have happened the day before or something, someone’s died. And I remember we went and did this death knock and this father, just it was like he was in denial that his son had been killed ... he was sort of like “Yep, I bloody told him this would happen. I told him, you know. Bloody stupid kids, think they’re invincible.” It’s like “Mate he’s actually not coming back” ... Yeah it’s like I’m not sure this guy realises. Cameron
Notwithstanding industry developments in trauma awareness and the unfavourable experiences of news crews, death knocks do still happen for a range of reasons. There are two interrelated issues when it comes to death knocks. The TV journalism industry is highly competitive with fewer jobs available than can accommodate the large supply of willing applicants. This can mean that young and inexperienced individuals feel the pressure to stand out from the crowd. Although not specifically referring to death knocks, Will’s response below indicates that news workers are very conscious of the competitive climate they are working in, and that there is a real risk of losing your job if you do not agree to assignments that may be distressing:

*There’s so many people who want to work in television, they’ll do anything to work in television and so now you find, it’s come about where contract producers get paid so low rates, to work 10 hour shifts to produce news services, because there’s so many of them and if you don’t like it, [snaps/clicks fingers], get someone else in.* Will

Adding to this pressure, Cameron concedes that in his experience the complicated and changing structure of news organisations within the industry, particularly in regional settings, can mean that one body might officially employ a news crew that occasionally operates under the management of another organisation. Whilst an employing body is reluctant to pressure its own staff to perform death knocks, news crews often receive pressure to do so from the body temporarily managing them. Even though employing bodies are usually more mindful of the well-being of their staff, Cameron suggests that this is only the case when adhering to the well-being of staff does not threaten the ratings of the network.

*They say you know, “You gotta go and do a death knock because that’s what you gotta do.” You don’t. You do whatever you feel comfortable doing. And um, I went to a couple, only because you know, the journo was just trying to impress, she was only young and I felt really uneasy about it, ... this girl was determined to do it*
because she wanted to impress people in [the managing office], so went and did this death knock and it was a really strange experience ... If the opposition do a death knock and they get it and it’s really good, well good as in compelling, then you get your arse kicked, you know, that’s the shit thing about being in commercial television. It’s all about ratings. Cameron

You’ve got to do it as part of your job, if you go back to the station, and say, and your Chief of Staff or your boss rings you up to say “Did you try and talk to the family?” And you have to say “Nup, nah I didn’t want to. I was worried about it, I was scared about it.” They’ll go “Get back out there and talk to them.” Like it’s no excuse until they slam the door in your face or they tell you to go and get f’d, like that’s, you’ve got to get that answer before you can go home. Daniel

Similarly, Berrington and Jemphrey (2003) found that journalists covering the Dunblane School shooting in Scotland were conflicted between the organisational demands in covering such a story and not wanting to intrude on bereaved individuals. One participant in the present study indicated that when they are assigned a death knock story, they hope the person they are going to interview simply does not open the door. Not surprisingly then, many news workers actively try to avoid having to do death knocks. There are two strategies participants in the present study use in attempting to avoid death knocks. The first strategy is more transparent and involves talking to their manager and refusing the assignment:

I tried very hard not to be that type of person, I didn’t do death knocks and, I just refused. Emma

I won’t do the death knock, you know. If the journo wants to go and do that, that’s fine, but don’t ask me to do it, cos that’s not, you know, I’ll do whatever I can to get the story, but yeah no, there’s, I will draw a line and you know, I’m not completely morally bankrupt. Owen

Overall, the findings tend to indicate that crew members with a greater deal of experience or seniority might get away with refusing to do death knocks, but this is a more difficult task for those earlier in their career who are still trying to earn their stripes. Hence, the second strategy for avoiding death knocks is more surreptitious and involves accepting the assignment whilst having no intention of trying to get comments
from the family:

_Sometimes all the reporters and the camera guys would all get together and you’d say, say it was a child or something [that had died], and before anyone knocked on the door ... everyone would just get together and say “Right, we’re not gonna do this.” Um, but no one could actually tell the office, so everyone would just say “Right the deal is, we all knocked on the door, and they wouldn’t talk”... so we’d wait or go off and have coffee or you know, kill an hour just so the newsroom knew that we were doing something, thought that we were doing something._

Robert

This approach was dubbed _knocking on the grass_ and is particularly interesting because it highlights a functional aspect of crew solidarity within a news organisation. It also illustrates the capacity for solidarity _across_ crews. It is an encouraging finding that suggests individuals across networks who feel they do not have the agency to refuse uncomfortable assignments have developed strategies to support themselves and others in the same situation. Although, this is a fragile enterprise, as Robert admits that egocentric individuals have undermined the arrangement in the past by agreeing to knock on the grass but returning later to get an exclusive comment from the family.

Whilst it is positive that news workers are able to find a way to avoid death knocks, a critical assessment of the situation would place greater imperative on the industry and organisations. News workers cover a range of PTEs, such as murder and transport accidents. But these kinds of exposures have a subtle difference in that the act of asking someone about the death of a friend or relative is inherently stressful for news workers and is encouraged by management because such stories rate well with viewers. In this way, news organisations and consumers are responsible for news workers’ exposure to death knocks.

5.2.3. **Man-made violence**

Man-made (or interpersonal) PTEs can be distinguished from non-interpersonal events such as natural disasters and medical illness. Trauma research indicates that non-
interpersonal trauma exposure is more common, but man-made trauma is more likely to result in adverse psychological reactions (Classen, Koopman, Hales, & Spiegel, 1998; Elklit & Christiansen, 2010; Lim, Adams, & Lilly, 2012). Events involving man-made violence were the most frequently mentioned kinds of PTEs in the present research. Participants had covered a broad range of such events: bombings and bomb threats, cruelty to animals, domestic violence, kidnapping, motorcycle gang violence, murder (single, multiple, and serial), riots, robberies, sexual assault, shootings and associated police sieges, stabbings, and war/conflict coverage. Covering court was also considered to be particularly stressful for both camera operators and reporters. However, court coverage is an example of how exposure to PTEs can be different across roles and, as such, it is discussed in detail in Chapter 6. Five participants had covered war/conflict throughout their career, in addition to domestic coverage. During their war/conflict coverage they were exposed to violent events such as villages being burnt down, massacres, mortar explosions, car bombs, political coups, genocide, and famine, as well as the injury, suffering, and death of people of all ages.

This section specifically discusses two main kinds of man-made violence PTEs in detail: harm to a colleague and harm to children. The reason for this narrow focus is that quantitative research concerning journalists’ trauma exposure has given much attention to man-made violence, such as those examples listed above. However, the two areas of particular interest here stood out as exceptionally important to participants in the present research, and have not been studied as extensively as the other kinds of man-made violence detailed by participants.
5.2.3.1. Harm to a colleague

News workers understandably consider harm to their colleagues to be a PTE. Participants in the present study frequently discussed how a colleague being harmed was in itself distressing and, usually, was a factor that added to an already stressful situation. To the author’s knowledge, this is not a kind of work-related PTE that has been empirically studied to date. Although it has been a prominent topic within the anecdotal literature (Aiken, 1996; Cacho, 2010; Lorch, 2001). Hence, this theme stands out, in that, unlike many of the other themes discussed in this chapter, harm to a colleague does not correspond with items used in scales developed to assess trauma exposure in general (e.g. Trauma History Questionnaire (THQ); Hooper, Stockton, Krupnick, & Green, 2011) and in journalists specifically (e.g., Journalist Trauma Exposure Scale (JTES); Pyevich et al., 2003).

Participants mentioned various injuries and physical threats to their colleagues. For example, Daniel recalled an incident in which a fellow camera operator was car-jacked at gun point by a criminal fleeing police custody:

*I watched the news and I saw the ticket on the bottom “Local cameraman gets car stolen from fugitive” or something. “Oh okay, could it be my, could it be up here, could it be one of my guys up here?” And then, so you don’t really know all that information and that’s, information starts to trickle through ... I think I was on edit and I didn’t start till 10 o’clock but I was in at work at 8:30. They were sending the raw vision and you just know this guy is gonna stick the gun in the cameraman’s face, you know he’s gonna try and drive the car ... but you don’t know when, it’s the anticipation of watching the raw vision and going “Ok when, where does it all go wrong, where does it happen?” Daniel*

Events such as this raise concerns and anxieties about the colleague’s well-being and can simultaneously lead news workers to challenge their assumptions of their own separation from the violence and tragedies they cover. The result can be an increased sense of personal risk as it becomes increasingly plausible that they might be put in a
similar situation; their sense of immunity to danger is eroded. This is acutely relevant in regional settings, such as the one Daniel is located in, because there are fewer news workers covering a large area, so the probability of being the news worker involved in a dangerous scenario seems heightened:

[It’s] where your worse nightmare comes true I suppose. Like you don’t go to work thinking your car’s going to be stolen or you’re gonna get a gun pointed in your face. But like, I could get a phone call now to go to a hold-up at a shop and I’ll turn up and for some reason the criminal is still hanging around and decides he wants to take my car to escape the situation, which is a silly idea but it happens, stuff like this happens. So, just don’t know what you’re walking into I suppose. Daniel

Some participants also had colleagues who had been murdered whilst working in the news industry. Typically, these murders occurred during coverage of war/conflict outside of Australia. In some instances, the participants were present at the time, and other times they heard news of their colleagues death after the fact. The following two excerpts poignantly portray this kind of experience for news workers:

[I] really started to wind it back in terms of war zone stuff about five years ago because a lot of my friends were getting knocked off, either IEDs or just targeted, you know, shot. ... I had ah, one of my colleagues Tom ... And now, Tom was supposed to come to our house, he was supposed to fly and be arriving the next morning. And so it was about 6pm they went out and did this drive. Um, and he’d actually phoned my wife and said “Yeah I don’t particularly wanna do this but I’m just going out on one last shoot.” And they went out there and they got ambushed on the street ... they shot him in the head and that was it, that’s the end of Tom. Um, and so we got phone calls that next morning and yeah, so that was, you know, a bit of a rough old week or two. ... You know, one of the cameramen ... what happened to him? He got ambushed in ah, Sierra Leone. He was travelling with an army convoy and they got ambushed and he was ahead. So yeah, we went to a lot of funerals. Hugh

[I was] holding my cameraman who got shot in crossfire ... we were just literally crossing the street, um, when it all went down and he took seven hours to die, and I was in a street gutter with his dying body in and out of consciousness and that’s traumatic and that comes back all the time, and I haven’t been able to, upload that, um, I haven’t been able to, I don’t necessarily want to, but to get out of it, um, you know, because it’s, it’s shit house, but it’s precious to me. Sophie
A FOCUS ON EXPOSURE

Like Daniel, Hugh and Sophie reflected an increased sense of personal risk due to the harm of a colleague. However, there are noteworthy nuances in their experiences. The participants in the present study who had worked in conflict zones were chiefly motivated by their ability to effect meaningful change through their work. The pool of journalists covering international conflict is relatively small. In addition to this, there was a perception amongst many of the participants that other people who have not covered these kinds of events could not possibly understand what they have experienced; this sentiment is echoed in the anecdotal literature chronicling the experiences of journalists in various roles who have been exposed to PTEs (Aiken, 1996; Brayne, 2008). While working overseas the crew live and work together with little respite. Consequently, this group of journalists shares a close sense of community and has developed its own culture. This unique culture can be protective because it means they share a support network. However, a potential hazard is that there is a chance of desensitisation to danger, because each individual journalist in the group and their close friends have lived through severe and adverse circumstances. The exposure to PTEs and associated symptomology becomes normal. Often it is not until something extreme happens, such as the death of a colleague, that their personal sense of mortality is reinvigorated.

Although not as common as some of the other experiences highlighted in this section of findings, it would be remiss not to include participant’s experiences of having a colleague die by suicide. Participants often commented on how everyone seems to know each other in the industry. This was made apparent when multiple participants, from diverse parts of the country, told the author about the same news reporter who had died by suicide. Such a small industry community is undoubtedly going to feel the impact of the sudden and unexpected death of a colleague. It is not considered necessary
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or appropriate to go into detail here regarding the nature of the events; such a discussion might lead to the identification of one or more participants. However, it is vital that the impact of this kind of event, on individuals and the newsroom, be considered in future quantitative research and within news organisations.

The small and interconnected nature of the news industry was again made apparent when participants discussed journalism tragedies such as the Balibo Five. The Balibo Five refers to five Australian-based journalists (of varying roles and nationalities) that were killed in 1975 in the town of Balibo whilst covering the Indonesian invasion of East Timor (National Archives of Australia, NA). Multiple participants in the present study were somehow connected to journalists who lost their lives at Balibo. There was a sense that the news industry has not historically been apt in supporting news workers when they lose one of their own:

A friend of mine who was a, a close colleague of um, several of the journalists that were killed in Balibo ... I'm almost certain that um, the deaths of those guys in Timor was never really dealt with internally, you know. For guys that have lost their mates and they were doing their job after all, so were killed, ... it was a confronting event for the Australian media you know, 40 years ago, and still is on the conscience of the Australian media. So you know, I'm not sure in those days it was dealt with at all, um, whereas these days I think there's a little bit more sensitivity. Evan

A key and novel contribution of the present research to the area of trauma research in TV news workers is highlighting the potential impact on an individual, as well as to the industry, as a result of harm to, or death of a colleague. In each instance where injury or murder of a colleague was raised as a PTE by participants, the harm was a direct result of the colleague’s work in the journalism industry. Similarly, where participants had colleagues who had died by suicide, they felt there were work-related issues that intensified their colleagues’ situation. As this section has shown, the
consideration of this theme is imperative to understanding the psychological implications of working in TV news.

5.2.3.2. Harm to children

Participants relayed stories of covering events involving various kinds of harm to children, including abduction, accidental deaths such as drowning, missing children, murder, as well as sexual and physical abuse. These kinds of events are largely man-made violence but the impacts on participants, and the way participants told stories about these events, were unique when compared to other kinds of man-made events. Therefore, they warranted specific attention in analysis. Participants’ stories relating to the harm of children were more likely than other kinds of PTE stories to be prefaced or summarised with a comment suggesting that the story was particularly memorable or stressful for the individual:

One of the sad, one of the ones that affected me a lot was um, this woman who um, was playing in a park with her daughter, a tree branch had just randomly come down and killed her four-year-old daughter. Alice

There was a case recently where a woman killed seven or eight children, stabbed them all to death, and, and that was the, that was by far the saddest thing I’ve ever had to report on. Kyle

These two kids were found and we followed them up to their village um, and they um, ah, they gave us their story which is pretty horrifying, it’s one of the few times I’ve sort of, you know, I found a quiet corner and had a bit of a cry after doing that, filming it. Hugh

A number of the participants felt that having children of their own made covering stories involving the harm of children especially challenging, compared to earlier in their career when they did not have children of their own:

Now that I have two boys, two young boys it is harder for me to cover incidents like that, it’s harder to remain beyond it or disassociated from it because I just think when I report on a child that has been killed by it’s Mum or Dad or stepdad or whatever, I can’t help but think of my little boys and cuddling them and
reading to them and putting them into bed and feeding them, making them breakfast that sort of thing and playing with them ... As my circumstances have changed so has my outlook on these events and as I said it really makes it a lot harder to cover these things ... the biggest fear a parent has is something happening to their children. Kyle

Kyle’s comments demonstrate an inability to accommodate the actions of other parents because of his own experience of love for, and desire to protect, his children. This dissonance causes anxiety because there is a simultaneous threat to his personal beliefs about the inherent attributes of parents and an increased sense of insecurity about the welfare of his children. Although many parents would experience a similar kind of dissonance, journalists (like police and other first responders) are more likely than others in the general population to see and hear facts about child abuse. Assignments in which journalists covered harm to children were also more likely to result in behavioural change in their personal lives, as demonstrated by the following response from Simon:

We were talking to her because her son had drowned ... he had drowned the year before, he was the same age as my son, and the thing that she could remember was, the last thing she said to him because he wanted some Cornflakes “No you can’t have them” and he went away, and then he slipped into the pool. ... Cos I had a son the same age, it was like “My kids are doing lots of swimming lessons now” um, just that um, it can happen in a split second of life, can be gone, um, no one knows um, so that, those sort of things stay. Simon

Similarly, Berrington and Jemphrey (2003) reported that journalists with children of their own found the Dunblane School shooting in Scotland more difficult to cover than journalists who did not have children. Not only were stories relating to child harm more challenging for participants in the present study, but participants with children indicated that they felt they took fewer personal risks through their work than they had previously, and had lost the sense of carefreeness or invincibility that came with being younger and not having a family that they were responsible for:
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You change once you have children anyway, like generally, cos like, pre that I think you know, you’re a bit of a superman, you’re a bit nothing can hurt you until you have something that you really care about and then I think you kinda tie that in a bit, and I think you kinda slow down on what you’re doing. Simon

I suppose having kids you become um, a bit more aware of what’s going on, a bit less carefree I suppose I became, after I had the kids. Cameron

One participant recommended that management could support their staff by being mindful that some individuals with children of their own will find stories of harm to children distressing. Whilst there are certainly instances where it is inappropriate to disregard a news worker for a story solely because they have children, Kyle’s experience below suggests that there is at least some room for dialogue around the kinds of stories individuals might rather not cover, for a range of reasons, if there is a viable alternative for obtaining the story:

A mother and father starved their twins to death um, and they’d been, the babies, the bodies had been found and they were starting to appear in court. And at that stage of my life I didn’t have children so I was saying to the producers, send me to court … because there was two women who were gonna cover it, don’t send them, they’ve got children and I don’t, and I think I’ll be able to handle it a lot better so he um, you know, for basic reasons such as because I had started early and I was scheduled to finish early he said “No, no, nup, you know, you can finish up as normal.” So those two women in the court hearing were just absolutely distraught um, because they had children it really, really upset them, and took them a long time to compose themselves to be able to cover or you know to provide any stories for the network and you know, I just thought that that was not so much inconsiderate but a real oversight by the executive producer. Kyle

Another perspective, not necessarily in conflict with those already presented here, is that having children can help someone to do a better job when working stories related to harm to children, and parental grief:

I don’t find children’s stories that sad because I don’t have children and I worry that maybe when I’m older I’ll probably look back and go “Whoa, like that was actually really sad, you probably should have been a little bit more sensitive with that story.” Alice
If you’ve got kids it’s always easier cos you go you know, especially like, I had to do that a few weeks ago, well a couple of months ago, you know, grandparents who’d just lost their, their grandchild through SIDS like a week earlier, um, but you’ve got that thing with the bloke that we’re both dads, you know, and all you can say there is “I can’t even begin to imagine your grief” you know, and it’s not sympathy, it’s empathy, and I think if you can show empathy with people, um, that really helps. Owen

The findings reported in this section indicate that participants were most likely to designate stories of harm to children as the most memorable or stressful. In addition, many participants stated that these kinds of stories become more difficult when you have a family of your own, and can result in changes in behaviour, and threaten assumptions about the inherent qualities of parents in general.

5.2.4. Medical events

Participants were exposed to a range of medical PTEs through their work. The kinds of PTEs comprising this theme include covering stories about fatal and non-fatal heart attacks, drug use, individuals living with physical and intellectual disabilities (and related family struggles), psychological disorders such as hoarding, sudden infant death syndrome (SIDS), and rare illnesses. Participants largely described the events in this theme as involving intimate sit-down interviews with individuals and families in their homes. This means there is little to no adrenaline and covering the story is not technically challenging. In general, individuals can find it difficult relating to victims of violence or large-scale disasters, unless they or someone close to them has had similar experiences in the past. But in stories such as in this theme, the potential for discomfort in news crews is increased because the focus of the story tends to be on everyday people, or on issues that they could empathise with. These stories can also be challenging because, in most cases, they seem to happen without any obvious fault or misjudgement by the individual experiencing some kind of hardship, in contrast to such
cases as drink driving, speeding, associating with dangerous groups, or taking unnecessary risks:

_I shot a story over a couple of days with a woman who was extremely sick, um, and she was hospitalised and she had some um, rare form of, I think it was um, meningococcal, um and basically it was, you know it’s kinda eating away at her insides but also she was losing um you know fingers and her nose was gone and um, she was only young, she might have only been in her early 30s and it was just really quite tragic, she had quite a spritely personality, so we spent two or three days with her and she had photos in her hospital room of before she was sick and she was, you know, a very attractive woman and all this sort of stuff so it was pretty confronting to spend time with her._ Evan

_A few weeks ago I did a story about um, like people who have disabilities and they’re a lot older and their parents are you know, in their 60s, 70s, 80s. And their parents are worried that their children will end up in nursing homes and they’re sort of in their 40s and 50s at the moment, and the cameraman who is probably the most stoic out of them all was like “Oh, that was so sad” and he was actually quite emotionally affected by it which surprised me._ Alice

These kinds of events can be sudden or unexpected, causing the crew to question their own presumptions about mortality. However, reactions are varied, often depending on a range of personal factors. Owen covered a story about sudden loss of life; unpredictably, it helped him reflect on his own health issues and concerns regarding death:

_Another guy had a heart attack out surfing at my local beach and I got called out to shoot that, and I was like wow that guy, and his wife was on the beach too you know. It was kinda pretty awful um, and I was like here’s a bloke who just got up in the morning and went for a surf and now he’s dead, you know. Oddly, it had an oddly therapeutic effect on me [laughing] … it actually helped me put some things in perspective going “Wow, ok yeah I’m going through some shit at the moment but um, yeah here’s some people that just woke up and are now dead.”_ Owen

Conversely, in a large-scale tragic story news crews are often more concerned with getting the story and capturing the magnitude of the event adequately for TV, which requires focus on a range of technical and journalistic aspects. In addition, the
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news worker is often concurrently assessing the scene for potential dangers to themselves:

> Picture a sort of a scene, and um, yeah like you look around and you try and, the only time you’re aware of your scenario, your surroundings is more just probably you’re own personal safety, like, you know, especially if you go to a crime, like a car accident, um, you know, there still might be cars travelling around and you know, also being aware of where the friends are, related to the victims and stuff like that because they tend to, if, they can be aggressive, you know, so you wanna just be, just aware where they are, where the cops are, like put yourself in a position where you can get what you need, but you have a bit of a back up plan, you’re near your car in case there’s lots of traffic around, you can hide behind your car so, cos there tends to be accidents when there’s been an accident cos everyone looks at the crash and don’t focus on what’s in front of them or whatever, so another crash can happen. ... I just usually try and think about that when I’m setting up a shot ... it’s just that self awareness I guess of what’s safe for me, then it’s just work you know, it’s not, you know, not too focused on what’s laying on the ground. Nick

This focus often means that camera operators are somewhat removed from what they are covering (discussed in detail in Chapter 6). The findings of this section highlight a range of potentially stressful events that news crews cover, which have been relatively overlooked in previous research, where the focus is mostly on journalists’ exposure to man-made violence and large-scale events. However, it is perhaps the fact that the events explored in this theme are not violent or large-scale that makes them challenging for crews.

5.2.5. Natural disasters

Participants had covered a range of natural disasters as part of their work in the TV news industry, including bushfires, cyclones, earthquakes, floods, tornados, and tsunamis. Experiences spanned a range of domestic and international disasters, taking them to locations such as Burma, Japan, New Zealand, the Philippines, and Thailand. It was perceived that natural disasters could happen to anyone, and raised questions amongst news workers about their own safety and what they would do if they were...
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personally affected by such an event. This concern is heightened by the fact that natural disasters typically occur for longer than events covered in other stories, and crews are often sent on scene to cover the disaster as it is happening:

_The natural ones you kinda think, yeah that could happen at any time, you’ve just got no control, yeah you do think about that._ Paul

_It’s windy, it’s raining, so some of the times you would actually put yourself in danger, in experiencing the same danger that these people, that your subjects have gotten themselves into. Um, that very same danger, and so a lot of the time, or bushfires, stuff like that, you would have the added stress of actually, actually having to be in the event to cover the event, and I guess they were the most traumatic, dangerous, worrying things to be in, because they were stuff that you couldn’t control._ Will

Covering natural disasters often involves a trying combination of physical exhaustion and reduced access to resources. The sudden and unpredictable quality of natural disasters also means that news workers have little chance to prepare themselves. In particular, it is the reduced sense of control or agency in times of natural disasters that makes them especially stressful and difficult to cover in a practical sense:

_When you’re over in the tsunamis and stuff like that, we tend to, we haven’t had much sleep, we haven’t eaten much, you know, like your body’s physically exhausted and you’re in, you’re really pushing the limits of your body. Um, it can be, sometimes you can get emotional, but I wouldn’t say it’s necessarily because of the situation, it’s more just because you’re exhausted, and I don’t see too many people break down when you’re on the job, because your mind is constantly thinking about the job, and that seems to keep you going and, distracts you from the reality of what’s happening in front of you._ Nick

A number of participants echoed Nick’s sentiment, emphasising that often it is not until you have a quiet moment alone some time after covering a stressful story that the gravity of the situation hits you. This kind of delayed impact is also evident in the anecdotal literature of journalists’ trauma exposure and reactions, and in trauma research more broadly (Andrews, Brewin, Philpott, & Stewart, 2007). Natural disasters are undoubtedly stressful, but for some participants this stress is also mingled with a
sense of excitement. Events such as bushfires not only provide a test of character and skill through the technical challenge of producing a captivating story at a fast pace in less than ideal conditions, they can also be exhilarating and a welcome escape from the daily routine and prosaic stories:

Natural disasters, even though they're a negative thing, it's still exciting to go film a big fire or a flood or something like that. Almost like the person watching a news story, when you watch a news story and there's something huge and destructive happening, it's kind of exciting in its own sense, if you don't have any real connection to it. And it's almost like you're watching an action movie or something. ... If you can detach yourself enough from it you can just hey, I'm filming this amazing huge fire and sure it's destroying some livestock and things but you know, for me it's a council meeting I'm not filming. I get to drive around and chase flames [laughs], try not to get burnt ... And there's the element of danger there too. Driving through really really thick smoke and you don't know if you're going to crash in to a car going the other way. Jack

One of the scariest times that I've had where I've actually been in a bushfire, and it was a great shot and I had the journo in the car with the motor running and the tail gate up and I wanted this shot of the fire truck coming through the wall of flames kinda thing, and I knew it was coming towards me, and as it'd come past me they're just screaming “Go, go, go!” and I literally just threw the gear and myself in the back of the tailgate, put it down and said to the journo “Drive!” And she was only about 19, it was her first job in televising. I remember driving away and just seeing the flames engulf the spot I'd just been standing in, like seconds earlier, and you kinda go “Wow, that was a close one.” Owen

Whilst many of the stories participants relayed about covering natural disasters included being on scene as the event unfolded, some talked about what it was like to cover the devastation of a natural disaster days or weeks later, and how this was impactful in a different way. In such circumstances, the urgency has passed but there remains a strange landscape and surprising normality amongst locals that is somewhat jarring to an outsider. Similarly, Keats (2010) found that photojournalists often used metaphors associated with a sense of bewilderment in describing their work-related trauma exposure. This kind of experience is exemplified by Evan’s account of covering the aftermath of a tsunami in the Philippines:
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I only spent a couple of days there, and it was actually two weeks after the event, but it was still it was incredibly dramatic, you know, there was the smell of death in the air, and you know, people trying to get on with their lives, but um, pretty remarkable scene that’s for sure ... it was completely surreal, it was almost like you were on a movie set, it was kinda like it couldn’t really be as bad as it looks. And particularly, one of the surreal things about the Philippines was it was two weeks later so people were trying to get back on with their lives and the kids were out in the street playing happily and all that kinda stuff, so it was literally surreal. Evan

As introduced in Section 5.2.3, research indicates that non-interpersonal trauma exposure such as natural disasters are more common, but man-made trauma is more likely to result in adverse psychological reactions (Lim et al., 2012). Considering this widely asserted finding, it was considered pertinent to explore participants’ perceptions of the differences between covering these two kinds of PTEs. Broadly, participants indicated that violent events willingly orchestrated by people were more shocking and impactful to cover:

The evil that people can do has no boundaries on occasion, that’s how it seems. ... Murderers, drug dealers, crooks, gangland members, bikies, whatever, they can kill as many of each other as they want and it wouldn’t bother me, but the one, as I mentioned before the one thing that is upsetting is the innocent victim, the kids who get murdered by um, by their mothers and fathers or step dads or whatever, so there’s a massive difference in that, and I have recently on occasion felt emotional about things that I’ve reported on. Kyle

Despite initially emphasising the weight that human suffering has in determining whether a story is difficult to cover, Evan’s response nonetheless echoes Kyle’s sentiment that man-made violence is more challenging:

At the end of the day you still, you’re still dealing with human suffering. I mean, you know, certainly with [the conflict in] East Timor there was a case of, you know, this really didn’t have to happen, which is something that was, you know, everyone was aware of at the time and um, I mean the level of destruction that happened there when the Indonesians left had to be seen to be believed. You know, even though we all saw it on television every night, when I actually got there and drove around the country I was just staggered at the um, systematic destruction. And um, you know, given that that was basically politics, I, yeah, there’s a level of despair that comes with that, I guess different to a natural disaster, which is just
something that's possibly unavoidable. But yeah, I dunno, they both probably carry the same weight when you're actually doing it. Evan

However, Evan’s response is particularly interesting for two reasons. Evan notes that the scale of the event can be associated with an increase in stress, but typically a large-scale event can only be fully fathomable when it is experienced firsthand. In addition to the scale of the event, Evan highlights the notion of meaninglessness. For him it was difficult to cover an event in which many powerless individuals suffered because of the decisions made by a powerful few. The idea that the events could have been avoided is key to Evan’s perception of this event as a difficult one to cover.

With regards to large-scale disasters, a couple of participants indicated that their faith in humanity was galvanised as they witnessed great community spirit and resilience:

In relation to what I’ve seen in both Timor and the Philippines, without a doubt one of the highlights is seeing humanity at work in those situations. Like it’s not all doom and gloom, because inevitably when you go to those scenarios you’ve got a lot of aid workers, you’ve got a lot of people who were giving, and you’ve got a lot of humanity on display, so you, you see a lot of very powerful positive stuff too. Evan

A striking characteristic of news workers is their ability to see the positives of their work in the face of extreme stress and other psychological, physical, and pragmatic adversities. As stated above, sometimes news workers focus on the excitement of covering certain stories; at other times they focus on the chance to tell the stories of people who might otherwise go unheard.

5.2.6. Transport-related accidents

The kinds of transport-related accidents that participants had covered through their work involved bicycles, boats, cars, helicopters, jet skis, trains, and trucks. Whilst
some of these events are covered after the fact, there are instances where news workers arrive on scene rather quickly and find themselves amidst an unfolding drama:

*I remember going down to um, ah, where is it? In [Regional NSW], it’s one of those things where you turn up and it was just, everywhere you look something horrible had happened, a truck had been hit by a cattle, no a cattle truck had been hit by a train. You know, and um, the cattle were all injured, they were trying to move around, the truck had caught fire, the guy in the truck was trapped, the train had derailed um, but the fire was spreading, so you had fire, wounded animals, um, people trying to get this guy out of the truck. It’s just one of those things, you turn up and it was 360 degrees of shit, wherever you looked.*

Hugh

The most frequently discussed theme was man-made violence. But without a doubt, the most commonly discussed specific PTE in the present study was that of car accidents. For this reason, car accidents are considered in great detail. Further justification for such a specific focus comes from research findings that car accidents are amongst the most frequently experienced, and most stressful work-related PTEs for news workers (Newman, Simpson, & Handschuh, 2003; Pyevich et al., 2003).

5.2.6.1. **Car accidents**

It was not necessary for car accidents to involve fatalities to be considered stressful, but many of the most distressing experiences for participants did involve the loss of life. This is likely to be associated with the pragmatic factor that non-fatal accidents, or accidents without serious injury, are less likely to be covered by news networks. However, Paul indicated that on a slow news day a car accident has a high probability of being covered, because the angle of the story can be shifted if the focus is not on the loss of life. This is an easy option because car accidents are so frequent, a sentiment echoed by many participants:

*You know every week, you’d be out there filming someone getting dragged out of a car either you know dead, or almost dead.*

Hugh
So you see them a lot, and cos they’re mostly the things that you’re sent out to cover because they’re so frequent … [Broadcasters] will send out a chopper for a bad car crash, and we’ll get the pictures live streamed back in and they’ll play them out saying there’s a live car crash. If people aren’t injured they’ll then switch the story and it’ll become “This is how it’s gonna affect your traffic.” So they, car crashes are always big news. Paul

Participants suggested a range of reasons why car accidents were so memorable and stress inducing. One such reason was that there are frequent reminders of car accidents, particularly in regional areas, because you inevitably find yourself driving along the same roads where you have covered an accident:

I won’t not drive somewhere because there was a car crash there, but I do get reminded of stuff when you drive past it … in the sort of days or weeks afterwards that you might think, driving around you might feel a little bit of anxiety thinking “Oh shit this is, it’s so dangerous to be in the car” or um, it’s quite stressful being behind the wheel because you think “Oh that happened to that person.” Alice

You do identify roads as “Oh, I filmed a crash on that” or “I remember going to a crash here” or you know, “The last crash I did here, the person died.” Daniel

You might be driving along that same road and go “Oh Jesus, poor bastard died there yesterday.” Cameron

These findings are congruent with those obtained in a study of trauma symptomology by Buchanan and Keats (2011), in which journalists were shown to be more likely to experience intrusion symptoms than avoidance and arousal symptoms. Given that journalism as a profession requires ongoing exposure to trauma, thus reducing the capacity to actively avoid stressful stimuli, it is not surprising that journalists are more likely to experience intrusion symptoms (Feinstein & Owen, 2002a). Similar to responses regarding natural disasters above, another common response was that car accidents are difficult to cover because they can happen to anyone at any time. Compounding this feeling was the concern that a majority of the people who are injured or die in serious car accidents are innocent people who have not done anything to put themselves at undue risk or danger:
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It could happen at any moment, you know. You see that many dead people and they’re just normal people you know … they’re not necessarily doing anything wrong. Some of them you know, they were speeding or drink driving or whatever, or falling asleep, that’s always a killer, but most of them were innocent, just passengers. Cameron

I think it’s cos it can happen to anyone at any time, anywhere, and it doesn’t have to be your fault. There was one the other day that I remember and it was in America. It was for, a group of girls on their hens. … A drunk driver ploughed into their limo and killed the four hens and the bride is in hospital, and they weren’t doing anything wrong. It was another driver at fault and it’s, they are sticking in mind, because most of the time it isn’t the people that are injured or killed who are at fault. Paul

And although the people injured are usually not at fault, there typically is someone to blame in each car accident. This seems to both heighten and polarise emotions:

What’s even more traumatic is the fact that there is always someone you blame in a car accident. It is always somebody’s fault, it’s never nobody’s fault. Regardless of whether it’s intentional or not, there is always somebody who’s a drunk driver who takes out another car and kills a kid. You know, there is always someone that falls asleep at the wheel and kills his family. You know, there’s always somebody to blame. So, that’s probably the, why car accidents do hit people the hardest. Adam

Another reason that car accidents are so memorable and impactful is that they are quite striking visually. Like in the situation described by Hugh in the beginning of this section, participants differentiated car accidents from other kinds of PTEs because there are not only emotional elements but also vivid sensory aspects. Descriptions of covering car accidents often involved the graphic combination of metal machines and human bodies:

Just probably because they are so umm dramatic ya know … like broken glass and people trapped in cars and sirens and all the lights and it's just visually really sort of dramatic. Luke

So when it’s a car accident, it’s anywhere at any time that kind of, and it’s so messy, it’s, yeah you know, you always have your tolls over the long weekend um, and yeah, it’s, they’re always there, and the pictures are always there and they’re never pretty. Paul
The whole inside of the car was just red, there was a little boot just jammed in-between like the twisted, the metal. Jack

At first you feel like you shouldn’t be shooting stuff, like, you know, a car, police car halfway up a tree that’s come off the road, you know, and they’re obviously doing huge speeds to get somewhere and, or you can’t even recognise if it’s a Falcon or a Commodore, it’s you know, there’s just a ball of metal, and you know two people have died in that car. Simon

As I walked past his car to go to the scene, people say you can smell death, I never believed it, but I did, I smelt it ah, and for something you’ve never smelt before, it was instantly recognisable as that smells like death. It’s just like nothing else, you can’t even describe it, it’s more a sense of, anyway, and I didn’t even know there was a body in the car at that stage. Adam

In discussing various PTEs with Sophie, the question was raised of whether foreign coverage of combat or disasters is necessarily more traumatic or difficult to cover than domestic violence and disasters. Sophie’s response highlights just how stressful covering car accidents can be for news workers:

Oh god no, um, and in fact you know, like I spent 20 months in Beirut and 30 in Lebanon ... and 30 in the Philippines ... and together they mean less to me today. I mean internationally and CV-wise they’re great, but they mean less to me trauma-wise than the shit on the road. Um, the children in the arms of the dead parent um, the severed heads, and not just one. Ah, a man who had been cut in half, a truck driver not wearing a belt, um, and the, I forget what it’s called now, but part of the engine had just sliced him, um, and there’s muck and gore and everything all over the road and bystander vehicles and people, um, and there’s just, you know, there’s not any down time from that. Sophie

Alice raised a unique perspective on why covering fatal car accidents is impactful. Although it was not a perspective that was widely shared amongst participants, it was considered to be quite a profound and interesting experience deserving consideration here. As stated above, news crews often find themselves at the scene of car accidents rather quickly when compared to other kinds of PTEs. Alice describes the unusual and uncomfortable experience of being present at a scene where someone has lost their life, and being amongst the first few individuals who know the person has died; even before anyone close to the deceased knows something has gone wrong:
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And it’s also sad because at the time no one knows about their death, their family don’t know, we’re first on the scene so, and standing from a distance unable to assist um, or first on the scene in the way of media anyway. So it’s quite yeah, I think that’s why it affects you so much. Alice

When considering news workers’ experiences of car accidents, the nature of the impact on participants is of interest, not just the reasons why car accidents are so impactful. For a number of participants, covering car accidents led them to consider their own and their loved ones’ levels of risk, and increased their personal sense of mortality, something that few occupational experiences might lead you to consider:

What if it was my family member or friend that happened to? It’s just so, such a helpless situation. Alice

That’s a situation you could, and maybe will be in one day. It’s not like a, ok your house might never catch fire, you might never sky dive, you might never be in a plane accident because you might not go in a plane, but everyone drives a car. You know, so it’s because you can put yourself in that situation, you know. Every time you get behind the wheel, you know, you could end up being the next piece of meat lying on the road ... everybody can be in that situation, and that’s why it’s the hardest one for most journos and camos. Adam

I went through the scene and shot everything and got back in the car and drove home very slowly, it took me a lot longer to get home than it took to get there, and that was a real eye opener and I think, I think it really gave me um, as an 18 year old, or however old I was, a sense that these things can be over really quickly, and sometimes it’s out of your control. Will

Other impacts included being more cautious in your own driving, being highly critical of family members when they are driving, and having a strong personal conviction that individuals who cause car accidents through their own disregard should be subject to harsher penalties:

I hate drunk drivers, anyone that’s responsible, irresponsible behind the wheel of a car um, should be locked up, you know, you get done for drink driving once, bang, you never get a license again. That’s it, you can’t be trusted, there’s just no reason for it, there is no excuse for it. Driving a car is a privilege, it’s a huge privilege, you are driving a weapon. Adam
When participants were asked to tell the author about some of the stories they have covered that were potentially traumatic or stressful, the first thing they mentioned in almost all cases was car accidents. Similarly, quantitative studies have shown that news workers are most likely to cover road accidents compared to other PTEs and that car accidents are amongst the most stressful stories to cover (Newman et al., 2003; Pyevich et al., 2003). However, to the author’s knowledge no previous studies have explored in detail the reasons why news workers find car accidents to be particularly stressful. Therefore, this section has provided a valuable explanation of the phenomenon of covering car accidents as a news worker.

5.3. General discussion and conclusions

In-depth interviews were conducted with 21 TV news camera operators and reporters, with the preliminary intention of exploring their individual subjective experiences of, as well as the processes associated with, exposure to PTEs. The first research question was: What kinds of PTEs are TV news camera operators and reporters exposed to through their work? The findings and discussion in this chapter provide a rich and insightful answer to the research question in the form of six key themes, or kinds of PTE exposure, experienced by those interviewed. Participants’ exposure to PTEs could broadly be classified into one or more of the following themes: accidental or other death-related events, direct involvement in events, man-made violence, medical events, natural disasters, and transport-related accidents. Participants indicated that they are most likely to be exposed to man-made violence and car accidents. The events reported to be the most distressing included car accidents, harm to colleagues, and harm to children. It is striking that the kinds of PTEs the participants have been exposed to would not be expected amongst the general population, at least not as frequently as news workers experience them. The discussion above has endeavoured to explain each
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individual theme and its associated relevance. Further, the intention of this conclusion section is to provide an answer to the second research question by highlighting key findings and trends that have become apparent across the six themes.

The second research question was: *When covering work-related PTEs, what are the factors that camera operators and reporters suggest result in greater psychological distress?* Across PTE themes, participants believed that a number of factors made a PTE impactful. The most central of these factors includes the individual news worker’s ability to relate to the circumstances of the PTE, and to imagine him or herself being subjected to the same violence or tragedy. The ability to relate to a PTE sometimes hinged on personal circumstances, such as the age or gender of a victim, having children of your own when covering stories of harm to children, or having a colleague harmed. Participants found it more personally threatening when covering stories in which the negative consequences seem to be indiscriminate and cannot be attributed to any fault of the victim(s). These kinds of events reduce the news worker’s perception of separation from the trauma they cover, and typically result in increased anxiety relating to their own mortality and the safety of those they care about. Reactions to such events appear to be particularly pervasive, because they are more likely than other kinds of events to threaten participants’ fundamental attitudes and world beliefs, such as the inherent characteristics of parents or the idea that bad things can happen unexpectedly regardless of the actions you take to avoid risk (Janoff-Bulman, 1989).

Other factors contributing to how impactful a PTE is on an individual news worker include: (1) their level of preparedness, both in relation to the specifics of the story and training in managing stressful situations, (2) arriving on scene before emergency personnel have taken control of the situation and minimised access to
upsetting stimuli, (3) performing tasks that conflict with their moral code or that seem to be only for the benefit of network ratings, (4) experiencing a personal sense of conflict in finding PTEs exciting or interesting, (5) perceptions of senselessness or meaningfulness in the actions of others that result in avoidable tragedy, and (6) events which are simultaneously visually striking and the news worker is frequently reminded of them, such as car accidents. Conversely, participants found it is easier to manage PTEs in which their own negative evaluation or mistreatment at the hands of others could be externally attributed, as opposed to being the result of some immoral or unprofessional action they have performed.

The findings also highlight three common fallacies that seem to be unconsciously adopted and perpetuated through research focusing on journalists’ trauma exposure. First, research concerning journalists’ exposure to trauma has typically assumed that they are only exposed to PTEs indirectly and after the event has occurred. However, journalists’ experiences of PTEs are more accurately represented as a complex layering of trauma, including first-hand exposure, exposure following the event, and vicarious exposure to trauma. It is likely that the perception of journalists only experiencing PTEs indirectly is implicitly sustained due to the fact that much of the graphic stimuli news workers experience first-hand, such as dead bodies, is not published or televised. Rather than being exposed to each new PTE once, as journalists’ exposure to PTEs has been conceptualised in the past, news workers frequently experience ongoing exposure to various PTEs and their implications for individuals and communities. Second, trauma exposure is typically considered to be less significant in journalist samples now because of wider industry acknowledgement and initiatives. Certainly, there have been positive changes within the TV news industry that have affected meaningful outcomes in terms of journalists’ trauma exposure and reactions. However, this sometimes undermines the
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experiences of seasoned camera operators and reporters still actively engaged in the industry, and how these events might continue to shape their attitudes and perceptions of not only subsequent trauma exposure, but also organisational changes regarding what is acceptable to cover and how to cover it. Finally, an artificial distinction between combat/conflict journalists and those working domestically is often asserted. This approach is suitable in some circumstances, although there should be greater recognition of the overlap between the two because many domestic journalists have previously covered combat/conflict, and will do so again in the future. Artificial distinctions such as this can potentially result in considerable methodological and theoretical shortcomings that distort the understanding of differences between various groups.

Research concerning journalists’ exposure to trauma has predominantly focused on quantifying exposure to trauma, and has typically included qualitative methods in the form of open-ended questions at the end of a quantitative survey. Greater context and understanding of the processes associated with trauma exposure in news workers is achieved in the present study through in-depth exploration of the rich content associated with each theme of findings. Through this approach, the present findings have spotlighted numerous experiences and processes that have previously gone unconsidered or been under-considered, and hence insufficiently legitimised. Such nuanced and novel findings can be attributed to the qualitative method adopted, and can be easily assessed quantitatively in the future. A holistic understanding of the kinds of PTEs journalists are exposed to, and the nature of the exposure, is the first step in developing procedures and support structures to safeguard individuals against adverse trauma reactions. The next step is to consider potential role differences in trauma exposure, which is the focus of Chapter 6.
Chapter 6. Role differences between camera operators and reporters: Disparities in industry culture and trauma exposure

6.1. Introduction

Past research indicates that TV news journalists’ ongoing exposure to trauma can result in psychopathology. However, we currently know little about potential differences in trauma exposure between journalistic roles, such as between camera operators and reporters. This chapter relates to the fourth research aim and addresses the research question: *How do TV news camera operators and reporters perceive their experiences to be different to those of one another in terms of exposure to PTEs and psychopathology?* By considering differences in experiences based on role, as opposed to grouping all roles under the term ‘journalist,’ it becomes clearer what is necessary in the way of resources and support, as well as how to best implement these to meet the needs of specific news crew roles. Such research has the potential to make news organisations more aware of news crew dynamics and areas of concern for particular roles. There is also the potential to increase general public awareness of otherwise socially invisible groups, such as camera operators, that serve a central role in contemporary society by meeting the demands of news consumers.

6.2. Findings and discussion

The findings are broken into two key areas representing role differences between camera operators and reporters. First, this chapter considers perceived role differences as they relate to journalism industry culture and associated role expectations, agency, and efficacy. The discussion of cultural differences in the industry emphasises the organisational hierarchy that news workers find themselves operating within. Second,
the focus shifts to a consideration of perceived differences in exposure to PTEs as a result of role. Three key role differences are explored: physical proximity, social visibility, and the ‘viewfinder effect.’

6.2.1. Differences due to industry culture: Struggles of agency and efficacy

This section focuses on factors of organisational and industry culture that serve to differentiate between crewmembers. Despite individual role differences in trauma exposure (discussed in Section 6.2.2.), there are industry cultural factors that seem to impact crewmembers of various roles in a similar way. The theme of focus in this section relates to participants perceptions of an organisational hierarchy. This theme is relevant because it provides a more holistic understanding of trauma exposure, contributing newsroom stressors, and news crew dynamics.

6.2.1.1. Perceptions of an organisational hierarchy

Throughout the interviews and associated analysis, themes related to a social hierarchy within the newsroom began to develop. Camera operators were particularly mindful of the pecking order that seems to them to be firmly established within the newsroom. An important place to start before examining participants’ perceptions of the organisational hierarchy is to explain the physical layout of the typical TV news station and to introduce key roles in news production. Admittedly there is some degree of variation across broadcasters, and even between regional and metropolitan stations, but broadly there are some basic elements that make up the TV news station. It is valuable to acknowledge that the following description is not intended to constitute an expert portrayal of the functioning of a TV news station. Rather the aim is to highlight some

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23 The author initially developed the description provided after spending a week shadowing a TV news crew, and the assessment of basic newsroom elements and layout was then discussed and confirmed with the interview participants.
common elements across stations that are relevant to the present study to contextualise the findings for uninitiated readers.

The first key element of a TV news station is the newsroom. This is typically where the Chief of Staff (CoS) is located; however, they may have their own office just off the newsroom. The CoS is essentially the manager of the news team, which predominantly consists of reporters and camera operators, and in some stations other research, technical, and editing staff (e.g., sound recordist). The CoS is most likely to have a reporting background, although it is possible for CoS positions to be filled by individuals with a camera background. In fact, some metropolitan stations have two CoS positions, one with a reporting background and one with a camera background. The reporters are also based within the newsroom. Of particular interest here is the fact that camera operators are not based in the newsroom but rather occupy another space called the edit suite. The edit suite contains the technical equipment required to import and edit footage, as well as being the storage site for previously recorded generic file footage that can be used in future stories.24 The edit suite is also likely to have adjacent audio recording booths where reporters, with support from technical staff, record voice-overs for a given story.

For some participants this physical separation within the TV station between the journalists (CoS and reporters) and the camera operators was not something they had personally questioned. Such participants offered pragmatic reasons for why this layout is adopted and customary. While some camera operators fell in to this category, this kind of response was most common amongst reporters. Reporters providing this kind of

24 An example of file footage may be landscape shots of local landmarks used semi-frequently to visually orientate the viewer to the key location of a story; e.g., council chambers or courthouse.
response were also more likely to admit that they had not considered the psychological impact of the work on camera operators:

They have to deal with just as much as what we do so. Um, I’ve never, aside from saying “Oh, this is just bloody awful” and a cameraman will probably say “Oh yeah, well you know, reminds me of this job or that job” or whatever. But um, you know, when we get back to the newsroom we sit in different sections of the building and I’ve never um, I’ve never sat down with a camera person and said “Hey, how do you feel about that?” ... But see I wouldn’t know if there was any services or anything, I wouldn’t know if our, if our camera people had um, had access to support services or whatever, and I’ve never considered it because I just didn’t think that, you know, I wasn’t really sure it was such a major issue I guess and yeah I, as I said, I’ve never heard a camera person say anything beyond you know, “This was an awful story.” Kyle

The key point here is that due to the physical separation between the roles there is a reduced understanding and appreciation of how various crewmembers are impacted by the work they do, particularly in the office, post-trauma. Although on one hand reporters, such as Kyle, acknowledge that camera operators see and hear the same kinds of things that they see, hear, and personally appraise as potentially traumatic; there is little acknowledgement that these exposures are potentially traumatic for camera operators. This may be due to perceptions associated with the relative responsibilities of the roles and accompanying levels of stress, discussed below. Crucially, these kinds of responses were never callous in nature. For example, in particular, Kyle was a reporter very open to discussing his own stressful experiences with colleagues and supporting others in the newsroom. Of particular interest is Kyle’s comment about being unclear regarding what services are available to other crewmembers, especially in light of acknowledging that camera operators are exposed to as much as reporters.

Some did not question or give relevance to the physical separation of the news crew within the station. Others considered this division to be not only physical, but also
to represent a social division with inherent expectations and rules that influenced their
day-to-day experience of working in TV news, and ultimately their sense of efficacy
when covering trauma:

When I was in [News Program], god the camera room was in the basement. Yeah,
a 20-storey building, and it was in the basement car park, a room off the car park,
and that’s where the camera crew lived. And if you wanted to sit upstairs, you
would sit away from the journos, and again you’d be told what to do, and that is
ah, potentially the way it is, um, until you say, you get to the point where you are
Chief of Staff ... maybe that's the point where the camera guy gets to go and sit
with the journos. Hugh

Camera operators were considerably more deterred by the physical separation in
the newsroom when individuals in management positions reinforced this separation
based on role:

When I first started at [Regional Broadcaster] there was a Chief of Staff there that
was very much “us and them”, very much ok, the journos can stick together, and
the camos can stick together. Um, they really didn’t like us mixing together until
we had to go out on a job or whatever, and there just became certain tensions
within that group that certain people didn’t like other people and then just, there
was this disharmony, and disunity, between the two factions. Daniel

There is an issue there, there’s an issue for the industry in terms of um, the divide
between the journalists and the cameramen which doesn’t tend to exist so much
one-on-one but exists between the groups ... And cameramen get very frustrated
with it as they feel like they’re not being given a fair run or they’re not being as
informed as they could be, and all the power’s out of their hands. Evan

In addition to the physical separation between camera operators and reporters in
the station, there are a number of industry conventions adopted across networks that
sustain the perception of differences in status and agency across roles:

We have this sort of whiteboard at work and the way you go out on a job is the
journo will go up and put your name, ya know, 10:30 umm and then go and sit
down again. And I just kept thinking ya know like “I'm watching you do it, just
come over and tell me what it is” [laughing], cos that might give me some time to
think about some shots we could get and what are ya, what is this story?” Like
why, like if they, if they spoke to you a whole lot more, umm it would be better for
sure. Luke
This may seem like a trivial issue, but what it signifies to many camera operators is that reporters think camera operators do not need to know where they are going or what the story is, because their job is straightforward and as simple as getting the pictures. Essentially, there is a feeling amongst camera operators that their ability to contribute to the overall journalistic product is undermined. Some even felt that reporters have greater opportunities for career progression than camera operators. The consequence of these perceptions is that it places the reporter in a position of inherent authority, as they are assigned the story by the CoS or develop their own idea for a story:

*I never felt like they treated us any lesser but I sort of felt like, I mean in a sense they're the ones that are telling us what to do, it's their job to pick out the story and take us there and tell us essentially what shots they want ... Even if they're not technically the boss of us, it sort of feels like they are because it's their story, it's almost like we're helping them out with something they need to do when you go on a story.*

Jack

*The journo probably is the more high-ranking person because it's their story and they, they answer to the bosses at the end of the day. Like I can, as long as I shoot the job well, I can go away and no one's ever gonna complain about me. But the journo has to get the story to air and do it well and be better than the opposition. So they have a lot more responsibility, so you sort of, I dunno, I respect it, and I guess. I don't care, you know, that they might think they're better or more important and whatever.*

Nick

These quotes demonstrate a number of points. There is a clear imbalance between the two roles that is likely to impact the ability to seek and accept support from one another in times of trauma exposure, especially where only one individual in a camera operator/reporter pairing finds the events distressing. Jack’s comments highlight that camera operators are less likely to have vital information going in to the field, leading to reduced preparedness. The findings of Chapter 5 indicate that a reduced sense of preparedness is likely to increase the chance of negative reactions to PTEs. Finally,
Nick suggests that reporters are likely to experience a number of additional organisational stressors that may exacerbate their trauma reactions.

Typically, camera operators emphasised a sense of reporters being in charge or being the talent. There were also notions of reporters being in a position of greater power with an increased ability to effect change, usually attributed to their journalistic training and the long associated drive for social change:

> Journalists perhaps have more of a bit of sense of social conscience perhaps because when you enter journalism you often do, you know, idealistically thinking you can make some change and things like that. I don’t know that cameramen are necessarily in power to the same extent. Evan

Some of the organisational and industry cultural factors explored here can at times be covert and result in an implied sense of hierarchy through organisational and industry practices. On the other hand, there were explicit examples where reporters in the present study felt it was natural that they have a kind of authority or higher standing over the camera operators they work alongside:

> Um, most of the time in the car, like when you’re at the scene or you’re on a job you’re sort of liaising with them which shots they’re getting and you’re saying “Get this, get that um, make sure that goes there,” or they’ll be like “I haven’t got enough of this angle, so I’ll need to go get that.” Um, or you’ll be saying “I need to do my stand up soon so hurry up” ... it can get a bit annoying when they do try to tell you what to put in your story or if they tell you what not to put in your story. Um, I have had a go at one one day and I said “Do you have a journalism degree?” and they’re like “No,” and I said “Well that’s why I’m doing it” [laughing], give them a bit of a stir. Alice

A possible interpretation of Alice’s response is that there may also be issues of gender associated with crew dynamics and organisational hierarchy. Through the interview process and liaising with industry experts, especially in regional areas, it would appear that reporters tend to be younger females recently graduated from university and camera operators tend to be middle aged males who might have a considerable amount of industry experience but may not be tertiary trained. This kind of analysis falls outside of the scope of the present thesis. However, it would be remiss to not draw attention to this point briefly. Issues of crew dynamics due to gender, and how these relate to trauma reactions, are potentially fruitful avenues for future research.
These kinds of attitudes were less common in reporters with greater experience, and even those who readily accepted this positioning could identify at least one camera operator who they respected and would accept advice from due to their level of experience. Each of the perceived inequalities across roles explored in this section can serve as a potential point of conflict, and serve to undermine the effective functioning of the news crew. Some camera operators begrudgingly accept this positioning, but others have developed strategies for minimising these inequalities and, in doing so, have found their collaboration with reporters, and their work in general, to be more fulfilling:

*I make a very conscious effort to um, have a presence in the newsroom. So, um, that’s where I hang out more so than in the camera department, not because I don’t get on with the cameramen, I do famously, but it’s important for me to be across um, what’s going on editorially um, because I do a better job if I do that. I would much rather be fully informed on a story when I get in the car to go, than to be figuring it out when I’m actually at the story. Um, so I pay a, quite a specific attention to almost um, fighting that counter culture element a little bit and um, the net result of that is you get a lot more respect from your journalists. Evan*

Understandably, this kind of active resistance to physical separation and the status quo of organisational hierarchy is likely to be more challenging for younger camera operators, and for those who have less experience. In Evan’s case, he is a well established and respected freelancer who has the discretion to choose which news organisations he works with. Staffers might find this kind of approach more difficult, particularly if they are working under a CoS who actively encourages role distinctions and separation. However, it is likely that those who resist the status quo by making themselves known in the newsroom will have their well-being prominent in the minds of management and hence have a more fulfilling career. In addition to role differences in trauma exposure, participants also indicated that there are factors associated with organisational setting and industry culture that serve to differentiate between
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crewmembers. Such factors were explored in this section and found to be predominantly associated with crewmembers’ perceived sense of agency and efficacy relative to crewmembers in different roles.

6.2.2. Differences in exposure to trauma: A spectrum of perceived separation

Descriptions of covering trauma from reporters and camera operators accentuated a spectrum of perceived separation from trauma. Participants provided varying experiences on a continuum from professional involvement to professional separation from trauma, typically differing due to their respective roles. Three phenomena identified within participant responses about perceived separation are explored here: physical proximity, social visibility, and the viewfinder effect.

6.2.2.1. Physical proximity

Due to respective role differences, reporters and camera operators tend to experience different levels of physical proximity to work-related trauma. The focus of this section is to consider the disparity between roles in physical proximity to PTEs. When camera operators and reporters cover a PTE together in the field, the reporter is typically on scene considering the overall angle of the story and working towards obtaining interviews with key individuals, whilst the camera operator is charged with the role of capturing the traumatic scene on film. Both groups of participants tended to indicate that it is the camera operator who is required to get closer to the traumatic scene and to be exposed for longer:

*Sometimes they [camera operators] might have a closer insight into the more gory details than what I do, because I’m running around looking at people going “Right I’m gonna interview them, I’m gonna interview them,” more looking at the big picture of things. Alice*

*I think that for cameramen though that they do get to then see things very close up, I mean, because they’ve got a zoom lens and all sorts of things, I think that they probably get to see stuff that the reporter just doesn’t see ... you might be standing*
there conducting an interview or doing, talking to someone for some background, and in the meantime they’re wandering off getting all these images while um, so very often you know, I wouldn’t have seen half of what, or even a third of what the camera operator had seen, so yeah I mean they must be exposed to more. Emma

If they’re [the reporter] not needed, they won’t be there, you know, they’ll go to the car and cool down or you know, try and focus on what they need to write and stuff like that, where you’ll say, go out and shoot more and you know, I guess there’s your extended exposure from what they would have. Nick

TV as a news medium is reliant on visual content. As many camera operators and reporters stated in the present research, no pictures means no story:

Well there’s no story without pictures, that’s for sure. Evan

You’ve gotta get the pictures first because if you don’t get the pictures, it didn’t happen. Robert

You can’t tell a television story without pictures. Emma

Therefore, the lowest common denominator in TV news coverage is a single-person crew consisting of only a camera operator. This is possible because reporters can write the dialogue to accompany the images later, either from the newsroom or in the field at a later time when more information is known and people of interest become available for comments. Hence, a key example of role differences and physical proximity is that camera operators are more likely than other crewmembers to cover a PTE from the scene, and to do so alone. Each camera operator in the present study provided multiple examples of covering traumatic scenes alone, such an experience was far less common amongst reporters in the present study. Robert points out that arriving before other crewmembers means that camera operators are often exposed to more graphic and chaotic scenes than others:

Generally the reporters aren’t there when things are happening. Sometimes they are, but most of the time they’re not, they’ll swan in an hour later or half an hour later ... if something happened you’d get there first, shoot it, and by the time the
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reporter got there everything had defused or it had all settled down, or you know, bodies were covered, whatever, and then the reporters turn up, is a general rule ... So I think they don’t get exposed anywhere near as much. Robert

The prevailing industry trend of economic rationalism has led to cost cutting being held paramount, this provides further incentive for news organisations to send single-person camera crews into the field. Consequently, camera operators are the ones on-call after hours to cover unexpected stories and rostered on to cover weekend news events alone:

You’d sometimes be sent out on these jobs by yourself because there wasn’t a journalist available or just sometimes it was just cost cutting ... the overnight cameraman was part of this pool arrangement where all the networks would take it in turns at having an overnight cameraman and you’d pool the vision so everyone would be able to have access to that vision if the event happened between 10:30 and 6 in the morning, it was a lot cheaper for the stations to do because they didn’t have to pay everyone penalties, just one person. Will

So there are other times like umm, which were tougher times, quite often when the main news cameraman went on leave I was the cameraman on-call, so that meant 24/7. That meant if at 2 o’clock in the morning if you got a call, which often you did... [Big breath in and out] umm, you had to go out. Mark

Mark’s comments are particularly interesting because they highlight the tendency for camera operators to be on-call, the need to cover PTEs alone at any hour of the day, and how this can be challenging for some individuals.

Perhaps surprisingly to industry outsiders, there are occasions where camera operators are injected in to the event by emergency personnel. Participants indicated that covering stories alone, principally car accidents in the middle of the night, is a given for TV news camera operators. However, they tended to indicate that this is more common for those working in regional areas. Adam told a story of covering a car accident in which an elderly couple collided with another car. Both the elderly man and the driver of the other vehicle were killed. Adam was approached by state emergency service (SES)
workers and asked to use the light on his camera to help them remove the elderly woman from the car, as it was getting dark. Adam’s retelling of the experience highlights his discomfort in being asked to do something outside of his designated role, and being so close at a time of such intimacy:

*It was really heartbreaking at the time ... SES came up to me and said “We have not got enough light, can you come down?” I said “Yep, but I’m not gonna shoot this, don’t ask me to come in and shoot” and um they said “Nah, nah that’s fine, you can shoot if you want, but you know, you know how it is, what you’re allowed to shoot and what you’re not” and I said “Nah, I’ll leave the gear here and just come down with the light and help you out” ... They were cutting her out, and he was sitting in the passengers seat dead. And ah, they’ve cut her out, the whole time they’ve had, um, she was like lying back, the seat had collapsed and she was in the back seat um, sort of lying across. So they got her out and they got her onto the stretcher and she said to them “Sit me up” and they’re going “No, no, no, you don’t wanna sit up.” She goes “Sit me up, I want to see my husband” and ah yeah they sat her up, and she just sat there for, they just all walked away and just her left her there, just sitting there staring, from you to me away from him, and I couldn’t turn the light off because she wouldn’t have been able to see, you know, so um, yeah that, that gave me grief for a while, seeing that. Adam*

These situations really nudge the news worker up the spectrum, reducing their professional separation from trauma. Adam’s story is pertinent because it demonstrates how camera operators can be injected in to a potentially upsetting scene in a way that reporters would be less likely to experience. The kind of involvement in the scene is also important. Adam’s story reveals more of a personal level involvement in the scene and demonstrates just how far from professional involvement news work can become. Rather than involvement as a media professional, Adam was asked to participate as an emergency responder; he was not filming for the news at the time. Participants indicated that this kind of personal injection into a story is more likely to result in adverse emotional reactions.

Conversely, there are situations in which physical proximity to potentially traumatic content is limited for camera operators, and heightened for reporters. A
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striking example of this is the difference in the way reporters and camera operators experience court coverage. As mentioned in Chapter 5, news crews are exposed to an array of abusive behaviour outside courthouses. However, media cameras are not typically permitted inside courtrooms, so reporters have a higher degree of exposure to the graphic and potentially upsetting details of violent crimes and tragedies compared to camera operators:

*Being a court reporter is probably the worst thing you could possibly do cos you’re just dwelling in the worst possible things, and murders, and you know, children rapes and all that sort of stuff on a daily basis, like, it is the worst thing in the world.* Simon

Participants indicated that hearing about the violent and tragic things that occur within society on a daily basis results in negative emotional states. In addition, Brooke’s quote below highlights the potential for individual differences and past experiences to factor into the vicarious trauma reactions some news workers might experience. An example is a female reporter feeling more vulnerable within a community where a woman has recently been the victim of a violent assault:

*Go and sit in a couple of court cases and hear very specific details about how a man plotted and schemed to you know, abduct and rape a young woman and understand that that’s a legal process but it’s still a very personal um, difficult thing to sit through. So um, or you know, heading up to some kind of a scene where a young woman is missing and the kind of um, triggers that might have as well … If you’re a specialist reporter in courts or police, you know, that’s your day to day everything, it’s just shitfulness, so um, you know, that kind of stuff has to be managed as well, whether you rotate reporters through those kinds of rounds, where they are being constantly, you know, having to deal with um, you know, intimate and intricate details of murders and rapes and violent crime, um, because we’re doing so much more of it than we ever did.* Brooke

The second part of Brooke’s quote is important because she proposes a means by which newsroom management can reduce the psychological stress and potential burnout of reporters. Rotating reporters in and out of specific beats, and allowing them to do
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generalist reporting where they can see a spectrum of human behaviour, is likely to increase their resilience and lead to a more balanced world view. This in turn is likely to produce better journalistic content.

For camera operators and reporters, covering court is difficult for different reasons. Camera operators are less exposed to the gory or upsetting content of the trial than reporters; whereas covering court is challenging for them because it requires long periods of waiting and repetitive tasks, often out in the elements, in addition to the increased potential for harassment from those attending court. An aspect of covering court that was highlighted by reporters as challenging, was hearing victim impact statements (VIS). Participants found the VIS difficult to hear because they go beyond the court facts of the crime, making the human element of the crime apparent:

*The one thing that really is difficult to hear um, are the victim impact statements ... that detail how relatives, sisters and brothers and all that are affected by this crime, and you know, you hear how some, some aunty has separated from her husband because she can never trust men again for what happened to her niece. Um, and you know, you hear how you know, Mum and Dad have split up because of the murder or whatever, you know. It’s virtually impossible to remain impassionate in situations like that ... they’re much worse than the details of the crime itself and you know I’ve covered murder cases where the victim impact statement has left people in the public gallery in absolute tears as well as the murderer and I remember thinking, how can the prosecutor read these out without breaking down himself? So, but there’s nothing, you just can’t prepare yourself for the impact of those, so you can get through 95% of a murder trial without a problem and then the victim impact statements is outpouring of grief. Kyle*

Participants such as Kyle indicated that they find the technical and factual aspects of the case easier to handle because, although they are graphic and often horrendous, they are presented in a legal and dispassionate manner. Thus, it is easier to maintain objectivity and emotional distance from the content. However, the VIS puts the facts in

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26 Individuals impacted by a crime have the opportunity to provide a VIS “once an offender has been convicted and is to be sentenced,” in order to give the court a greater understanding of exactly how the crime has affected them (Office of the Director of Public Prosecutions, 2013).
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to social context and reminds those listening that the actions have real repercussions for real people. It is this humanising that makes VIS potentially stressful as news workers have an increased likelihood of relating or empathising with those affected. Kyle stated that the first VIS he ever heard was totally unexpected and the emotional element caught him off-guard.

Another significant difference in the physical proximity of reporters compared to other crewmembers is that ultimately they are the ones who have to do the talking. Specifically, reporters are the ones who are expected to ask the questions and have direct involvement with victims, and the family and friends of victims when covering PTEs. The shift in focus here is crucial, PTE exposure itself is not the only way in which news workers are impacted by their work, they are also impacted through the process of interacting with those who have been the victims of violence and tragedy:

*It was the journalist that took the lead, it was the journalist that introduced themselves, and introduced you ah, so you relied on them to set up that connection and that bond with that person almost immediately, and a lot of the time, the information that they wanted to get out of that subject, was something that the subject didn’t wanna give, and so that’s a real skill.*  
Will

This is not to say that camera operators never ask questions or that reporters never shoot footage. However, when reporters and camera operators go in to the field together, it is the reporter who is most likely to be the one asking questions and clarifying facts with those involved in the story. Even camera operators conceded that this is likely to be a factor making reporters jobs more difficult at times and that they do not envy the fact that reporters have to do the talking:

*Well personally I'm sort of happy I don’t need to be going around asking questions and like talking to everyone so that's a lot easier for me in a way to just concentrate on the shots I need to get. Whereas they go door knocking and you know, interact with all the people.*  
Luke
I know there are certain aspects of the journos job that I would hate ... One of the worst things I can think of for a journalist to do is go and talk, go up to a family that’s just lost a child or lost someone and try and talk to them and, cause that’s, you’re the last person they want to talk to but you’ve got to do it as part of your job. Daniel

Being the one asking the questions brings with it a different kind of challenge. First there is the potential for vicarious trauma through hearing individuals’ stories. Although, as Kyle notes, this is a likely concern for camera operators as well:

So they’re not asking the questions but you know, just cos you don’t ask a question doesn’t mean the answer isn’t as difficult as it is for the person who asked. Kyle

Additionally, there is the personal experience of engaging bereaved or distressed individuals in a respectful way whilst simultaneously achieving professional objectives in the interview. This was discussed in detail in Chapter 5 with reference to death knocks. This section adds to our overall understanding of the unique experiences of trauma exposure in the journalistic role. Some trauma exposure research focusing on journalist samples has differentiated between on scene and off scene exposure to PTEs (see trauma exposure SLR; Chapter 2). However, potential differences in physical proximity to PTEs between various roles groups have not previously been considered.

6.2.2.2. Social visibility

This section discusses the extent to which camera operators and reporters are socially visible whilst performing their role. It considers social visibility from the perspectives of the home viewer, bystanders on location, and policy makers. Greater levels of social visibility can be associated with increased physical and psychological risk, as discussed below. The previous section established that camera operators often find themselves covering PTEs alone. However, even where camera operators are working within a news crew, they are potentially at greater physical risk than others,
such as reporters and producers. Their role necessitates that they carry equipment, making them noticeable in a crowd and often attracting unwanted attention. This issue arises in a range of contexts, from covering seemingly benign events such as music festivals, to stressful domestic coverage of perpetrators of violence, on scene or at court:

In those dangerous situations, or in those situations where the media is not welcome, you can be a group of four, and it's usually the soundo and the cameraman that become the object of attention because they are touching gear, or they are holding a camera up. Where as the producer you’re just sitting there, usually, and melting into the crowd ... They are the public face in any kind of tense situation, they are the public face of the group. Whereas the reporter, while he or she is standing up in front of the camera doing the stand up, they’re sitting back as well, and so not quite as exposed or upfront. So there is an important difference in these highly tense situations between the roles. Bryan

This increased risk for camera operators is inevitably heightened when working on a story relating to a bigger issue, or where there are high stakes for those who are the focus of the story, such as stories associated with government corruption and mass violence:

I was thinking then “Oh ok, this is a bikie shooting, the cops are now calling it a crime scene, I’ve done enough news to know what happens there and I don’t really wanna be seen with a camera, with a whole lot of angry bikies.” We’re never usually their best friends at the best of times. Owen

In the contemporary globalised world where broadcast mediums are champion, a crew with no pictures has no story. This means that there is less pressure for other role groups to be as visible on location:

The reporter can sort of slip away whereas I’m the idiot magnet you know, I’ve got the camera. Cameron

The potential risk that TV news crews pose to criminals in terms of exposing their actions means that crews, especially camera operators, are often targeted and violently silenced. Hugh’s story of his friend Tom who was ambushed and killed while
working, was mentioned in Chapter 5, under the theme *harm to colleagues*. To elaborate on the story, Tom was working with a reporter referred to here as Steve. Hugh relayed his frustration with the fact that reporters are often the ones that make the decision to go in to risky locations, but when things go wrong the camera operator is often the one at greater risk:

_They went out there and they got ambushed on the street. Tom ran ah, Steve was shot and they left him for dead. Um, Tom ran, he ran with his fucking camera. He didn’t drop his camera so, ok, so I’m gonna add 12 kilograms, or 10 kilograms, to my running weight by taking my camera with me, um and they shot him in the head and that was it, that’s the end of Tom ... they shot Steve a couple of times and he, he can’t walk, and, but then again it was his decision to go there ... which wasn’t the particularly cleverest thing he could have been doing. Um, and ah, um, he um, yeah he paid the price for it and so did Tom. Hugh_

Hugh’s comments are powerful and demonstrate the reality of role differences regarding social visibility, and the potential for serious and tragic outcomes. These role differences ultimately lead to a range of psychological reactions, including grief over the loss of a friend and colleague, and fear for your own safety when in similar circumstances. This response raises issues of crew dynamics and decision-making rights, and the sometimes-associated frustration with individuals occupying different roles due to differences in experiences. Notwithstanding the various physical markers that attract unwanted attention to camera operators, Daniel suggests that reporters face social visibility problems that are unique to them:

_The journalist is the face so they’re the person that people see at home, that’s doing the story. We’re the guys behind the camera, our faces don’t get shown but we’re the ones that, I spose, I spose a way to look at it, we have different targets on our back. They have the target as far as the personality, people know their name, people know them in the street. Whereas with the cameramen, we drive around in a car that’s branded, we have a big camera on our shoulder that’s a bit hard to be inconspicuous ... It’s not like you can walk down the main street with a camera in your hand and people don’t look at you and wonder what the hell you’re doing there. Daniel_
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In a similar vein, findings by Gass, Martini, Witthöft, Bailer, and Dressing (2009; detailed in Chapter 2) suggest that stalking is an important issue resulting in stress symptoms and altered world assumptions in a subset of journalists. Because of their increased broadcast visibility, reporters are also those most likely to have professional social media profiles that have the potential to increase unwanted interactions.

6.2.2.3. The viewfinder effect

Camera operators experience what is referred to in the present study as the viewfinder effect, a seemingly unconscious perceptual mechanism serving to separate them in some sense from the reality of what they are filming. Some participants found this phenomenon particularly difficult to articulate, alluding to the viewfinder effect by saying they see the events they cover as a big picture or mosaic. However, many in the study explicitly stated that the camera acts as a physical barrier for them that shields them from emotional involvement in the events they cover:

You’ve got one eye closed and you’re in the viewfinder, right, um, you, there’s a separation there, the camera gives you a physical separation ... I mean even through a colour viewfinder, it’s still, it’s a you know, a 5cm by 5cm frame that you’re looking at, it’s not real. Um, so I think it’s not like you have full peripheral vision. Owen

Looking through the viewfinder, you can remove yourself to a certain extent from what you’re seeing, I mean you’re still at the event, and you’ll experience it I guess in a way that a normal person would when you put the camera down, but by looking through the viewfinder in those days black and white, it gave you that one step of removal too. I think that was a bit of a coping mechanism ... You can close one eye and you’re watching television, and so you don’t really need to be there in the same way that you might, you know, experience a horror film or something on television that you’re not quite ready to ingest, you can kinda do the same looking through a camera. Will

When I’m looking through that viewfinder, it’s like watching it on television at home. It looks horrible but you’re not there so you know, like when you’re watching it at home, it’s bad but because you’re not there, it’s not as, like when you’re there, that sense of, I dunno, it’s quite heavy and intense there but when you put your eye through the viewfinder, it just becomes like you’re watching it at home ... I’m just thinking about the shots, and like you know, I guess maybe that viewfinder kind of keeps that separation between reality and um, you know, and
what you’re doing I guess … When I put my eye on the viewfinder it’s like “Ok I’m working” … It’s more just probably our way that helps us from getting affected by it but I’m not thinking about that when I’m doing it … Yeah it’s a tunnel vision. Nick

Within responses related to the viewfinder effect there are references to a narrowing of vision through viewing PTEs with one eye only. Participants indicate that this narrowing of vision influences their sense of reality through the perception of being physically and psychologically disconnected from what they are filming. Participant responses indicated that there are two instances in particular when camera operators become aware of just how pervasive the viewfinder effect is. The first is when they review their footage later and become conscious of just how shocking or potentially stressful the PTE they covered was:

But I have been to ones where they’ve let me right up in there and you can see ya know, blood stained cars and things like that. There was one that the whole side of the car got taken out. I think two kids, two kids got killed and a lady. And when the, I didn’t realise until I got back, because you’re looking through a black and white viewfinder and I sort of zoomed in, I didn’t realise how gruesome it was until I got back and checked my own footage. Jack

Sometimes you only actually realise it when you’re actually sitting, watch the pictures back on a real tele and you see it and go “Wow, didn’t look like that when I shot it.” [Laughing] You’re just so busy with the process. Owen

Jack and Owen’s comments highlight the potential for a delayed reaction in camera operators to the things they are exposed to. A potential problem with this delayed reaction is that individuals may feel as though they only have legitimacy in discussing their experiences as stressful directly after on the scene exposure. They may feel less legitimacy in raising their feelings some time after the first-hand exposure. The above responses also raise concerns regarding the potentially traumatic nature of newsroom exposure to graphic footage and other content. This is particularly pertinent considering that many news organisations roster their camera staff so that there are
individuals filming and individuals editing incoming content. Although there are instances where camera operators film and edit their own footage, it is more likely that someone else will edit their footage into story format. This means that some newsroom staff are exposed to potentially traumatic footage with little context and often no expectations or preparedness for what they might see.

The second instance where camera operators became aware of the pervasiveness of the viewfinder effect relates to times when they are covering a PTE and have to put their camera down. Typically, this includes times where they are waiting for something on scene or when police have asked them not to film something in particular. In these situations, the protective function of the camera is inaccessible and they find themselves experiencing emotional reactions that they would not have if they were looking through their viewfinder:

*It’s not until you might have a bit of a lull where the police wanna come and say “Oh look we’ll come and talk to you in a minute,” so you’ve probably got everything you need to shoot so you sort of take your, take your eye away from the viewfinder, and sort of see what’s actually going on. Cos before that point you’re just looking at it through a little mini TV screen basically. You know what I mean? In a viewfinder you’re just seeing it like everyone else would. And then when you step back you go “Oh shit, hang on, what’s going on, you know, like this is serious.”* Cameron

*We had a guy go missing on the weekend ... the police divers were turning up yesterday and I went down in the afternoon and um, and I get there and everything’s kind of, they’re all packed up ready to go and the head detective comes over to me and says “We’ve just pulled him from the dam, he was on the bottom of the dam.” And um, we kinda have a good relationship, so you don’t wanna really piss them off, but he’s like “Do you mind not filming, we’re just about to have the next of kin, the fiancée, go and identify him?” So that’s fine, and you respect that but so much different for us when we’re looking through a camera, it’s kinda like watching it on TV so you kinda feel like you’ve distanced yourself from it. But because I wasn’t filming that, and you, we were, oh, we were a distance away but you could still see what was going on and all you could hear was the girlfriend wailing, like the fiancée wailing, and that to me probably affected me more than actually filming it up close because you can see with your own two eyes, you’re thinking about it, as opposed to thinking about what your next shots gonna be ... I was in that moment, and I had to watch properly.* Daniel
By putting the camera down the individual is suddenly injected in to the scene, viewing with both eyes and full peripheral vision. A further contributor to the increased sense of discomfort is likely to be related to social roles. Keats (2010) suggests that the camera is symbolic in that it designates the reason for the photojournalist to be present at the time of tragedy or disaster. Once the camera operator puts down their camera the sense of justification and legitimacy for their presence at a time of tragedy or disaster is compromised; they may feel an increased sense that their actions are intrusive, as they are no longer clearly performing a professional role. The role of media worker is associated with an objective and detached approach. Once the camera is down the individual has a reduced ability to act in such a role-specific way. They are likely to feel social pressure to react to the situation with empathy. Simply put, an emotional media worker would stand out as a concern, just as an unaffected bystander might also be the target of social scrutiny. Finally, because they are viewing the scene with their own two eyes and because they are not distracted by the manual procedures of their work, they have an increased opportunity to consider the meaning of what they are exposed to. However, a number of participants aptly noted that this kind of protective mechanism is not available to other crewmembers such as reporters:

*I suspect that um, it must be quite weird being a camera operator and seeing all of the events through a lens, um, that it does give them this extra distance I guess, which maybe that’s easier ... but I mean there is a difference, because they physically have a machine and a frame, you know, literally to view things through, that must objectify it for them, in some way, at least temporarily, um, which a reporter has a mindset to do that, but doesn’t have the physical, you know, um, hurdle, or barrier through which to do that.* Emma

As Emma suggests, it may be the case that journalistic training enables reporters to separate themselves. However, the concern overall was that because camera operators have the benefit of the viewfinder effect, reporters are more likely to have to be present in the moment, so in that sense are perhaps at greater psychological risk:
I suppose that’s, in a lot of cases, why sometimes things affect the journo a little bit more because it’s not as if they’ve got that distance of the camera, looking through the lens. It’s, they’re in it, they’re feeling it, right then and there at the site. Daniel

I do remember one more where I went out to um, and a train had run into a bike and it killed a child and I had a journalist with me that day ... I was able to kinda remove myself from it a little bit, one cos I was so busy, but two because I’m looking through a viewfinder, whereas the journalist was just standing there experiencing the event, as a normal person would, and it’s funny I haven’t given that much thought, or even her welfare, until this moment. Will

This striking difference in experiences of trauma exposure for camera operators that derives from whether or not they are able to view the event through a viewfinder is interesting for two reasons. The first reason is that it provides greater insight in to the trauma experiences for camera operators as a specific group of news workers. The second reason relates to the theoretical implications of the viewfinder effect in terms of trauma exposure in reporters. Previously, the identification of the camera lens serving a protective function for photographers has not been theoretically connected to the research on reporters’ trauma exposure. Demonstrating that camera operators are somewhat shielded from the things they are exposed to opens up a novel way of looking at trauma exposure in reporters. In other words, the new findings reported in this section provide another way to look at previous findings on potential psychological risks to reporters. Reporters are not shielded by a camera, so they are always experiencing PTEs from the perspective of professional involvement that camera operators described as uncomfortable when they have to put their camera down. In this way, reporters may experience less professional separation from trauma in their work because they are their own toolkit; their occupation does not prescribe tangible equipment that might serve to remind them of their professional status or physically distance or shield them.
Locating the viewfinder effect within broader psychological theory

It was expected that camera operators would experience greater psychological impact than reporters when covering PTEs, because they are required to get closer to the event for longer. However, a number of the camera operators within the present study indicated that they feel shielded by their camera, so they do not find themselves experiencing an emotional reaction to the stories they cover while viewing the events through one eye through the viewfinder on their camera. Although, they do concede that when they are required to view PTEs with their own two eyes, whether in person or when reviewing footage on a monitor, they become increasingly aware of the emotional valence and impact of the event. As previously suggested, this may in part relate to social roles and expectations. However, the fact that the emotional awareness of the event can occur when reviewing footage alone in the edit suite suggests that perhaps greater theoretical emphasis should be placed on the perceptual experience of viewing trauma through one eye, in terms of understanding the viewfinder effect.

Considering these findings, the author contacted each of the camera operators with a follow-up question. Each was asked which of their eyes they predominantly use with the viewfinder on their camera. Twelve of the 15 camera operators sampled in the present study had replied to this follow-up question by the time this chapter was prepared. Each of the 12 camera operators who responded indicated that they use their right eye when using the camera viewfinder. The use of one eye is necessitated by the decreased ability to focus the image with both eyes open. Without prompting, some participants reiterated that only one eye was used, and that closing the left eye helped them to disconnect from the situation emotionally:

27 Each interview participant indicated that they were willing to answer any follow-up questions that might arise.
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I used only my right eye, closing my left one. This helped with focusing and exposure, but also helped to remove myself a step from the situation if I felt I needed to. Will

Right eye on the viewfinder. All professional cameras are set for this. ... From my own experience it is both a blessing and a curse. Close the left eye and you can live through the lens and to a degree ignore everything around you. Hugh

Participants specified that electronic news gathering (ENG) cameras used by broadcasters and freelancers are designed and manufactured in such a way that crucial controls and the viewfinder are on the left-hand side of the camera, and that this strongly influences camera operators to use their right eye. Some participants indicated that it is theoretically possible to use your left eye despite the viewfinder being placed on the left side of the camera, although a range of reasons was provided explaining why this is not ideal:

I've always tended to use one eye (the right). It is possible to extend the viewfinder to use the left eye and over the years I've seen one or two operators do that, but it means twisting the neck a little bit and isn't very ergonomical. Evan

The viewfinder is on the left side of the camera so I use my right eye only to look into it. Don't know if you can swap it over. The viewfinder is a detachable part so I guess it's possible. Wouldn't work well though as the little monitor and all other controls are on the right side as well (audio input level, filter selector, etc.). Luke

The strength of this influence is emphasised by how few camera operators elect to use their left eye; furthermore, those who do use their left eye have serious deficits in their right eye, making use of their left eye when using the viewfinder essential:

All news cameramen use their right eye because of camera design and they all sit on your right shoulder. I only knew one cameraman who used his left eye because he was blind in his right eye. Robert

Most news cameras have the viewfinder on the left hand side of the camera body with the cameraman using only their right eye. I did know a guy once who use to look through his left eye. However it’s rare and in my opinion dangerous. You lose the use of your peripheral out of your left eye to see what is around you when working. I have never seen a viewfinder on the right side of the camera body. Nick
The follow-up responses from participants indicating that, for a range of reasons, they solely use their right eye with the camera viewfinder lead the author to question what (if any) difference there might be in the perception of potentially traumatic or threatening stimuli through the right eye compared to the left. The first step in addressing this question is appreciating that the human brain is characterised by lateralisation, meaning that there is “asymmetry of the brain and behaviour” (Rogers, Vallortigara, & Andrew, 2013) or “hemispheric specialisation” (Csermely, 2013, p. 2). Studies of other vertebrates, and some invertebrates, also demonstrate the presence of lateralisation (Rogers et al., 2013). Lateralisation is of interest in the present study in relation to the visual sensory system, and the relative roles that the left and right hemispheres play in the control and experience of emotions and behavioural motivations, such as fear and avoidance (Csermely, 2013; Rogers et al., 2013). The visual system is anatomically structured such that visual stimuli perceived by the right eye are processed in the left hemisphere of the brain. Conversely, visual stimuli perceived by the left eye are processed in the right hemisphere of the brain. Csermely (2013, p. 6) aptly describes the relative significance of the two hemispheres: “The left hemisphere, for instance, controls focussed attention, routine behaviour and learning between categories of objects, while the right hemisphere is activated in situations where it is necessary to express intense emotions, such as fear or aggression.”

Research indicates that the right eye and left hemisphere are functionally employed to “sustain a response once it has been initiated and to avoid distraction by stimuli that might evoke other responses” (Rogers et al., 2013, p. 70). Utilisation of the right eye activates structures in the left hemisphere that are associated with sustaining attention, inhibition (including emotions such as fear) and approach behaviours (Rogers et al., 2013). It has been argued “an evolutionary precursor of this was probably the use
of inputs to left hemisphere structures (e.g., the right eye) to allow sustained inspection of predators and other potential sources of danger, instead of fleeing” (Rogers et al., 2013, p. 140).

Conversely, the right hemisphere of the brain (specifically, the right amygdala) is associated with the experience and expression of intense emotions, including fear (Rogers et al., 2013). A range of studies has shown that animals are more likely to display fear related behaviours when they perceive a threatening stimulus with their left eye than when the stimulus is perceived by the right eye (Rogers et al., 2013). Similarly, Dimond, Farrington, and Johnson (1976) conducted a study with human participants to establish the extent to which “the two hemispheres can differ in their vision of the world and that each in some respects formulates its own separate and distinct emotional vision of what it sees.” They found that participants had a greater emotional reaction to horror films when they perceived them through the left eye (and right hemisphere), than when they were perceived through the right eye (and left hemisphere). Where the left hemisphere (and right eye) is associated with approach, the right hemisphere (and left eye) is typically associated with avoidance of threatening stimuli (Rogers et al., 2013).

Therefore, this biological and sensory/perceptual distinction between the left and right eye when exposed to threatening stimuli may be a contributing factor when camera operators experience the viewfinder effect. They are consciously aware of what they are shooting as they perceive it through their right eye, but they are not attributing an emotional value to the stimulus because the left eye is closed. Hence, they are not emotionally impacted by the event until required to put their camera down and view the event or their footage with both eyes simultaneously. The likelihood that visual lateralisation is involved in the viewfinder effect is bolstered by comments from
participants within the present research regarding their tendency to continue covering dangerous and distressing events whilst members of the general public are likely to run away. Such comments suggest that the avoidance mechanisms within the brain are not activated because exposure to the PTE is restricted to the right eye and left hemisphere of the brain.

However, there are some caveats to this argument that require consideration in future research. Reportedly, not all camera operators experience the viewfinder effect. Two participants in particular indicated that, although they use their right eye in the viewfinder, they endeavoured to use their left eye as much as possible to increase awareness of what is happening around them. This could be why they did not report any perceived separation through the viewfinder:

*Really good cameramen like myself would always work with one eye in the eyepiece and the other open watching what was going on around you especially in places where lots is going on.* Mark

*Yeah always with my right eye [in the viewfinder] as your left eye is used to see what is coming at you.* Simon

Interestingly, these two participants were the camera operators most consistently indicating that they found their work in TV news to be distressing and to have lasting effects on them. Theoretically, this may be because they were more likely than other participants to scan the scene with their left eye and hence acquire emotional evaluations of events. Other issues for deliberation when considering visual lateralisation in camera operators are: (1) which of their eyes is dominant and therefore given priority in processing stimuli, and (2) the ability to use their eyes interchangeably depending on the context of the story and the orientation of the camera:
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I guess you could use a plug in monitor, but these can be hard to use for sharp focus. Owen

I personally use both eyes. When I use the camera on my shoulder I use my RIGHT eye but when the camera is on the tripod I use both. Sometimes I feel that my LEFT eye at times is more dominant. It’s just a case of getting used to it. Daniel

It is also worth speculating that touch sensation might be a contributing factor in the distancing of camera operators from the emotional aspects of the events they cover. It is possible that the familiar and predictable feeling of holding and operating the camera with both hands and the associated touch sensation on the face from the viewfinder serves a calming effect. While the events they cover may be distressing and somewhat unpredictable, the physical presence and touch sensation of the camera is familiar, somewhat like a psychological crutch. This sensation of touch may also take precedence in the right hemisphere of the amygdala, even when the left eye is open, because the left hand is responsible for operating the controls of the camera.

6.3. General discussion and conclusions

This chapter aimed to answer the question: How do TV news camera operators and reporters perceive their experiences to be different to those of one another in terms of exposure to PTEs and psychopathology? The findings and discussion in the present chapter provide a comprehensive answer to the research question through a detailed analysis of two key areas relating to role differences between camera operators and reporters. First, this chapter considered perceived role differences as they relate to the culture of the journalism industry and associated role expectations, agency, and efficacy. The discussion of industry cultural differences emphasised the organisational hierarchy that news workers find themselves operating within. Second, three differences in exposure to PTEs as a result of role were detailed: physical proximity, social
visibility, and the viewfinder effect. This conclusion section provides a summary and some final insights regarding each of these five themes and their implications.

The findings of the present study indicate that there is an organisational hierarchy within news organisations that has important implications for the social dynamics of news workers and in particular, the psychological well-being of camera operators. At the most fundamental level, camera operators are physically separated from other members of the news team (CoS and reporters). Despite many reporters agreeing that camera operators are exposed to as much or more trauma than themselves, this physical separation means that camera operators are not present in the newsroom; consequently, their well-being and concerns are not at the forefront to be recognised and addressed by management. It seems apparent that the needs and attitudes of staffers in closer proximity to the CoS are more readily recognised, even if this is not a conscious bias, simply due to accessibility and exposure. In this instance, reporters are not only in closer physical proximity than camera operators, they are also more likely to share values and a body of knowledge with the CoS based on professional role through their journalism training. This makes their concerns potentially more accessible to CoS and perhaps more aligned with the perceptions and goals of the CoS. Physical separation also results in social division between camera operators and reporters based on explicit and implicit organisational norms, expectations, and procedures. The consequence is a pervasive sense of disharmony, disunity, and fracturing of the news team based on role. Camera operators often feel they have less status and power compared to reporters, who they frequently view as the talent, or in charge. The effects of these processes on camera operators is more pronounced when management openly reinforce separation based on role. Camera operators who appeared to function best in this kind of organisational climate were those willing to challenge the industry culture by making themselves
known and respected within the newsroom, although this is likely to be more difficult for those who are younger or less experienced.

As the trauma exposure review in Chapter 2 indicated, journalists have high levels of work-related exposure to PTEs. Potential role differences in the news crew in terms of trauma exposure have not previously been researched. However, the few trauma reactions studies that have considered role differences in journalists suggest that differences in exposure are likely. Indeed, the findings of the present chapter indicate that reporters and camera operators working in TV news do experience varying levels of physical proximity to traumatic stimuli, depending on a number of factors. Camera operators are more likely than reporters to go into the field alone, to get closer to traumatic stimuli, and to be exposed to traumatic stimuli for longer. This is most likely the result of TV news being a medium that is dependent on visual content, as well as market changes meaning that cost-cutting is held paramount, hence the reduced size of news crews. Camera operators are also more likely than reporters to find themselves personally injected into traumatic scenes. On the other hand, reporters do experience closer proximity to trauma in situations where camera operators are restricted, such as court coverage and the need to engage victims of tragedy and violence. Participants in the present study suggest that management should be aware of these factors and allow news workers to rotate between assignment types to avoid the build up of stress that comes with continuous exposure to traumatic content.

In addition to role differences in physical proximity to trauma, the findings also suggest that there are significant differences between the social visibility of roles, with both physical and psychological risk implications. Reporters are socially more visible to viewers and hence are more likely to receive unwanted negative attention. However,
reporters are more capable of blending in and going unnoticed when covering PTEs on scene. There appears to be a fundamental paradox in the social visibility of technical crew, such as camera operators. Whilst they are seemingly more conspicuous in the field as a result of their equipment (hence at greater risk), they are almost entirely socially invisible to news viewers because they are behind the camera and hence not perceived as present in news segments. They are also socially invisible to management and policy makers as a result of the various organisational factors explored previously in this chapter. This kind of social invisibility is as detrimental as PTE exposure because it means that neither news consumers nor policy makers are cognisant of camera operators and the issues they face. This can be evidenced by the relatively sparse amount of trauma research that focuses on technical crew compared to more visible journalism roles, such as reporters. A number of times the present author has noted the surprise and interest other researchers and members of the general public show on hearing about this research aiming to elucidate the differences in experiences of trauma for camera operators compared to other journalistic roles. Many hearing about this research for the first time, including reporters, admit they have not previously considered what it is like for camera operators.

The identification of the viewfinder effect is not novel to this research; however, earlier considerations of the experience of viewing PTEs through a camera have, to the author’s knowledge, remained descriptive (Keats, 2010). Seemingly, no effort has been made, thus far, to link what is presently referred to as the viewfinder effect to broader trauma literature, or psychological theory more generally. Hence, contributions of the present study have been: (1) giving a designation to the phenomenon, (2) exploring the phenomenon in greater detail and elucidating instances where the pervasiveness of the viewfinder effect might be minimised, (3) considering what the viewfinder effect
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amongst camera-operators implies for the PTE exposure of reporters, and (4) tentatively linking the viewfinder effect to biological and sensory/perceptual research and theory (specifically visual and emotional lateralisation) in order to propose potential contributing factors at play when TV news camera-operators experience this phenomenon. The findings and discussion presented in this chapter serve as a preliminary, and somewhat rudimentary, argument in an attempt to move beyond the mere description that currently characterises the writing on this topic. Thus, this discussion is in no way intended to imply that the data has produced conclusive findings, but rather to promote further exploration and experimental testing by suggesting future areas of consideration.

In an attempt to draw an overarching connection across the themes, it appears that the organisational differences explained in this chapter may be the foundation of all other role differences. Cultural norms are internalised by news workers and ultimately impact the way they interact with one another and how they are impacted by PTEs. It seems that research in the area of journalism and trauma exposure reflects and perpetuates disparities across roles, in that camera operators are physically separated from the rest of the news team within organisations and are largely socially invisible in the news broadcast. Therefore, they have become socially invisible and overlooked in the psychological research regarding trauma and journalism. Perhaps the most intriguing aspect of this process is that it is perpetuated over the years and through organisational ranks—as reporters become CoS they reinforce the focus on reporters and separation between roles as they were socialised to. This occurs despite the fact that reporters spend much of their career in the field with camera operators and have the opportunity to become aware of the issues they face.
By considering differences in experiences based on role, this chapter has elucidated the kinds of resources and support that are necessary for both reporters and camera operators. It is anticipated that the findings will be of use to news organisations aiming to provide informed support for their staff, and that news consumers will become more aware of the circumstances under which news workers perform their roles. This chapter has presented a strong case for the idea that trauma exposure is different for news workers in different roles. It follows that there is also likely to be a difference in the trauma reactions across different roles. Role differences in trauma exposure and trauma reactions are explored quantitatively in Chapter 7. Both themes of role differences (industry culture and trauma exposure) are potential points of conflict between TV news crewmembers. The findings also suggest that relationships between crewmembers might be an important factor requiring deeper consideration when the intention is to obtain a holistic understanding of trauma exposure and reactions amongst news workers; such factors should be considered in future research.
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Phase C. Online questionnaire

Phase C involved the use of an online quantitative questionnaire sampling both camera operators and other news workers. The study aimed to (1) establish role differences in trauma exposure and reactions between TV news camera operators and other TV news workers, (2) explore the psychological implications for camera operators within the TV news industry as a result of their exposure to PTEs, and (3) highlight the role of individual differences amongst camera operators in their responses to PTEs. The questionnaire included measures assessing demographics, professional and personal trauma exposure, and trauma reactions (PTSD, depression, anxiety, and stress). The measures selected allow for comparison to the general population; furthermore, the recruitment of a range of news worker roles enhances the capacity to establish potential differences between journalistic roles.

C.1. Research aims

Phase C addresses the second, third, and fourth overall aims of the present research:

2. Explore the kinds of potentially traumatic events (PTEs) camera operators and other news workers are exposed to.

3. Explore a range of factors that are associated with greater psychological distress in camera operators and other news workers.

4. Explore potential differences in trauma exposure and reactions between camera operators and other news workers.

The research questions and predictions for Phase C are identified in Chapter 7.
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Chapter 7. A focus on exposure: Potentially traumatic events and the psychological implications for TV news camera operators

7.1. Introduction

This chapter describes the final data collection phase of the thesis, a quantitative online questionnaire. The reviews detailed in Phase A demonstrate that journalists are exposed to a wide variety of potentially traumatic events (PTEs), and that this exposure can result in a range of psychological implications. In addition to this, the reviews indicate a number of personal and workplace factors that serve to reduce the well-being of journalists. However, the quantitative literature concerning the psychological well-being of journalists has not considered the potential differences in trauma exposure and reactions according to role. The only research to consider psychological differences across journalistic roles has been in the areas of burnout (for a review see MacDonald, Saliba, Hodgins, & Ovington, 2016) and substance use (for a review see MacDonald, Saliba, & Hodgins, 2016). Trauma research across journalist samples has tended to focus on comparisons such as whether participants cover international conflict or domestic news, or whether or not they have covered a specific PTE (e.g., World Trade Centre attack or Jokela School shooting). As outlined in the introduction to this thesis (Chapter 1), there are a number of factors that suggest the trauma exposure and reactions of camera operators may be unique in relation to journalists in other roles, and worth thoughtful measurement and comparison. The findings of the in-depth interviews (Phase B) support the assertion that there may be fundamental differences between camera operators and reporters that equate to differences in trauma exposure.
The results of this chapter are presented in two studies. The aim of Study 1 was to describe levels of trauma exposure and reactions amongst TV news workers, and to assess potential differences across groups (i.e., age, gender, and role). Study 2 focused specifically on further analyses performed to elucidate the relationship between participant role groups and trauma reactions, and to contextualise the findings within the broader literature of clinical and non-clinical samples.

7.2. Study 1

Study 1 was designed to answer four research questions (RQs), listed below. Table 7.1. displays the predictions associated with each of the research questions:

1. What kinds of work-related PTEs are news crewmembers exposed to?
2. Are there differences between news crew roles in terms of work-related PTE exposure?
3. What kinds of personal PTEs are news crewmembers exposed to?
4. Are there differences in trauma reactions due to news crew role?

Table 7.1.
Research predictions

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Predictions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>2</td>
<td>Camera operators will report significantly greater levels of work-related PTE exposure than other news workers.</td>
</tr>
<tr>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>4</td>
<td>Camera operators will report significantly greater levels of PTSD, depression, anxiety, and stress symptoms than other news workers.</td>
</tr>
</tbody>
</table>
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7.2.1. Method

7.2.1.1. Participants

The participants were 134 TV news workers from various countries around the world. Participants had a wide range of experience levels in the TV news industry, the lowest level of experience being two months, and the highest being 54 years. The mean industry experience was 17.4 years \((SE = 1.0)\). In relation to personal demographics, participants ranged in age from 19–72 years, and the mean age for the overall sample was 42 years \((SE = 1.0)\). The sample consisted of 115 male (85.8%) and 19 female (14.2%) participants. In relation to marital status, participants were more likely to be married (51.5%) compared to the other categories (single = 15.7%, in a relationship = 15.7%, de facto = 11.2%, separated = 3.7%, and divorced = 2.2%).

Rather than being asked to indicate a single discrete role they were employed in, participants provided percentages for each of the following roles they perform in their work: camera operator, sound-recordist, reporter, and other. Participants were divided into two role groups. Participants spending some or all of their time as a camera operator were assigned to the camera operator group \((n = 117, 87.3\%)\). Those participants spending none of their time as a camera operator were assigned to the other TV news worker group \((n = 17, 12.7\%)\). This approach to role categorisation was considered an appropriate starting point for analysis in the absence of industry or theoretical standards for determining role classification, and without precedent in the empirical literature.²⁸

²⁸ It is important to note that \textit{a priori} power analyses indicated that mean comparisons across two groups would require approximately: (1) 88 participants in each group in order to reduce the risk of Type 2 error when employing an alpha of .05, (2) 128 participants in each group when employing an alpha of .01.
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**Participant sampling**

Participants were required to be over 18 years of age, and to be currently working as a TV news camera operator, reporter, or sound-recordist. Both staffers (individuals employed full-time through a news organisation) and freelancers were targeted—individuals are increasingly pushed towards freelance work with full-time organisation-based roles becoming more competitive and fewer in numbers. Participants were also sought from both public and commercial broadcasters. Of the 117 camera operators recruited in this study, 85 were working in Australia. No interaction effects were found between the Australian and non-Australian groups in relation to any of the trauma exposure or trauma reaction variables. Hence, it was considered appropriate to group participants of various countries to test the predictions of this research. Ideally, the findings of this research will be applied to inform research and practice settings of camera operators internationally. However, assertions of representativeness can only be made tentatively. No population samples or data appear to have been made public for comparison in terms of the number of individuals employed as TV news workers or in specific roles. Similarly, there is the issue of gender representativeness (as described in Section B.1.3.4.). Sampling methods adopted in this area of research historically have not been randomised or stratified.

**Recruitment**

In order to recruit participants, contact was made with a number of national and international (1) journalistic organisations, such as unions and representative bodies for both reporters (and journalists more broadly) and camera operators (and production crew more broadly; \( n = 23 \) organisations), (2) commercial and government-funded news networks (\( n = 65 \)), and (3) journalism and TV production departments of various universities and training facilities (\( n = 20 \)). Each of the listed outlets was sent
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information about the research, encouraged to ask questions, and asked if they would be willing to promote the research to their staff and industry contacts. These organisations did not play a role in data collection. Social networking sites were useful in the recruitment phase, as a range of professional and role-based groups and mailing lists are accessible online. Using such sources, a database of 235 potential participants (freelance camera operators, journalists, and sound recordists) was developed and each individual on this list was emailed the information regarding the study. Finally, participants in the interview study were asked to participate in the online survey and to consider sharing the information for the study with their colleagues.

7.2.1.2. Materials

Participants responded to an online questionnaire (Appendix 7.1.). The questionnaire included a demographics section and a series of pre-existing trauma exposure and reaction scales. This section briefly describes the scales used. An in-depth discussion of psychometric properties and other choice factors for each scale can be located in Appendix 7.2.

Trauma exposure scales

The Traumatic Life Events Questionnaire (TLEQ) is a measure of prior personal exposure to trauma (Kubany et al., 2000). Participants indicate how frequently they have been exposed to 22 different PTEs on a seven-point Likert scale (ranging from ‘never’ to ‘five times or more’), and whether or not the exposure caused them to experience intense fear, helplessness, or horror (Norris & Hamblen, 2004; Orsillo, 2001). In relation to time frames, participants in the present study were asked to respond to each item with all their life experiences in mind.
The Journalist Trauma Exposure Scale (JTES) is a 23-item self-report scale concerning journalists’ work-related exposure to PTEs. It requires participants to indicate their (1) range of exposure—whether or not they have been exposed to 14 different kinds of PTEs as part of a work assignment, (2) frequency of exposure—how many times they have been exposed to those kinds of events, and (3) intensity of exposure—participants are required to indicate whether or not they have been exposed to any of nine suggested intensity of exposure items (Pyevich, Newman, & Daleiden, 2003). The Cronbach’s alpha coefficients for each of the scales in the present study and that of Pyevich et al. were, respectively, frequency of exposure scale: .85 and .77; range of exposure scale: .81 and .84; and intensity of exposure scale: .67 and .63. In contrast to the study by Pyevich et al., participants in the present study were also asked about the frequency of their exposure to each of the nine intensity items; Cronbach’s alpha coefficient = .70. In relation to time frames, participants in the present study were asked to respond to each item with their entire career experiences in mind, whereas Pyevich at al. requested that participants respond with reference to a specific one-year period.

Trauma reaction scales

The PTSD Checklist – Civilian Version (PCL–C) is a 17-item self-report scale that assesses the presence and intensity of various trauma-related symptoms (Weathers, Litz, Herman, Huska, & Keane, 1993). Participants indicate how much they have been bothered by each symptom over the last month and respond on a five-point Likert scale: 1 = not at all, 2 = a little bit, 3 = moderately, 4 = quite a bit, and 5 = extremely (Weathers et al., 1993). While other versions of the PCL refer to military experiences (PCL–M), or to a specific traumatic experience (PCL–S), the PCL–C is concerned with past stressful experiences in general (Norris & Hamblen, 2004). The PCL–C has been used within journalist samples, and has shown internal reliability scores of .91
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(Backholm & Björkqvist, 2010) and .95 (Newman, Simpson, & Handschuh, 2003). The Cronbach’s alpha coefficient for the PCL–C in the present study was .94. The PCL–C is also considered to contain three subscales associated with the DSM–IV criteria for PTSD diagnosis: intrusion, avoidance, and hyperarousal (American Psychiatric Association, 2000). The subscale reliability scores range from .92 to .93 (Weathers et al., 1993). The Cronbach’s alpha coefficients in the present study were: intrusion = .89, avoidance = .89, and hyperarousal = .84.

Previously suggested cut-offs for potential PTSD diagnosis using the PCL range from 44 in civilian samples to 50 in veteran samples (Andrykowski, Cordova, Studts, & Miller, 1998; Blanchard, Jones-Alexander, Buckley, & Forneris, 1996; Weathers et al., 1993). However, it is important to note that cut-off scores are inextricably linked to the purposes of using a certain measure (screening compared to indicating potential diagnosis) and the population under consideration (McDonald & Calhoun, 2010). The lower the expected rate of PTSD within the population, the lower the cut-off adopted (McDonald & Calhoun, 2010). For example, the National Center for Posttraumatic Stress Disorder (2014) recommends adopting a cut-off of 30–35 when screening for PTSD symptoms in civilian primary care settings, within which the prevalence rate of PTSD is below 15%. As stated in Chapter 3, prevalence rates of PTSD amongst journalist samples have reportedly ranged from 4.3% to 19.7% (Backholm & Björkqvist, 2012a; Dworznik, 2011; Feinstein & Owen, 2002a; Hatanaka et al., 2010; Newman, Simpson, & Handschuh, 2003; Pyevich, Newman, & Daleiden, 2003; Weidmann, Fehm, & Fydrich, 2008). Therefore, a cut-off of 30 is used to indicate clinical significance in this chapter, and to indicate the proportion of the sample that may be experiencing diagnosable PTSD. Research has assessed the efficiency of the PCL–C and the cut-off of 30, by first having participants complete the measure and then
undergo a clinical diagnostic interview; the findings indicate that 74–80% of individuals who reach this cut-off are ultimately diagnosed with PTSD (Andrykowski et al., 1998; Lang, Laffaye, Satz, Dresselhaus, & Steain, 2003).

The Depression Anxiety Stress Scales (DASS–42) is a 42-item self-report measure of depression, anxiety, and stress symptoms, with 14 items in each subscale (Lovibond & Lovibond, 2004). Participants respond to various first person statements on a four-point Likert scale: 0 = Did not apply to me at all, 1 = Applied to me to some degree, or some of the time, 2 = Applied to me to a considerable degree, or a good part of time, and 3 = Applied to me very much, or most of the time (Lovibond & Lovibond, 2004). The higher a participant’s score, the more likely they are experiencing psychological distress. Lovibond and Lovibond report internal reliability scores of .91 for the depression subscale, .84 for the anxiety subscale, and .90 for the stress subscale. The Cronbach’s alpha coefficients in the present study were: .97 for depression, .91 for anxiety, and .91 for stress. Cut-off scores are also provided, allowing for classification into normal, mild, moderate, severe, and extremely severe groups (Lovibond & Lovibond, 2004); the prescribed cut-offs are presented in Table 7.2.
Table 7.2.  
Clinical categories for each of the trauma reaction scales

<table>
<thead>
<tr>
<th>Clinical categories</th>
<th>Score range</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PTSD</strong></td>
<td></td>
</tr>
<tr>
<td>≤ 29</td>
<td></td>
</tr>
<tr>
<td>≥ 30</td>
<td></td>
</tr>
<tr>
<td><strong>Depression</strong></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>(≤ 9)</td>
</tr>
<tr>
<td>Mild</td>
<td>(10–13)</td>
</tr>
<tr>
<td>Moderate</td>
<td>(14–20)</td>
</tr>
<tr>
<td>Severe</td>
<td>(21–27)</td>
</tr>
<tr>
<td>Extremely severe</td>
<td>(≥ 28)</td>
</tr>
<tr>
<td><strong>Anxiety</strong></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>(≤ 7)</td>
</tr>
<tr>
<td>Mild</td>
<td>(8–9)</td>
</tr>
<tr>
<td>Moderate</td>
<td>(10–14)</td>
</tr>
<tr>
<td>Severe</td>
<td>(15–19)</td>
</tr>
<tr>
<td>Extremely severe</td>
<td>(≥ 20)</td>
</tr>
<tr>
<td><strong>Stress</strong></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>(≤ 14)</td>
</tr>
<tr>
<td>Mild</td>
<td>(15–18)</td>
</tr>
<tr>
<td>Moderate</td>
<td>(19–25)</td>
</tr>
<tr>
<td>Severe</td>
<td>(26–33)</td>
</tr>
<tr>
<td>Extremely severe</td>
<td>(≥ 34)</td>
</tr>
</tbody>
</table>

7.2.1.3. Procedure

Potential participants accessed the research website via a URL distributed through the outlets described in the recruitment section above. The first page of the website accessible to potential participants was the participant information statement (see Appendix B.2.), containing: (1) who was conducting the research, (2) a clear description of the purpose of the research, (3) a description of what participation in the study involved, (4) an explanation of how the data would be used, (5) who was eligible to participate, and (5) a description of the likely benefits and potential risks associated with participation.
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Consenting participants who met the selection criteria were forwarded to the questionnaire. Participants then completed questionnaire sections relating to demographics, previous experiences of trauma both at work and in their personal life, and trauma reactions. The questionnaire took approximately 15–25 minutes to complete. The final page of the questionnaire invited participants to provide feedback regarding the questionnaire experience. A link to community support contacts was also provided before and after completing the questionnaire, so that participants with any emotional concerns could contact an appropriate service.

TV news workers are a professional population under continual time constraints. Hence, each Australian participant was offered a $10 gift card as a modest form of compensation and symbol of appreciation for their time and efforts. Participants not based in Australia were given the option to have $10 donated to charity. Considering the time required to participate in the research, it was not considered likely that a $10 incentive would encourage participation by individuals who were otherwise unwilling to contribute.

7.2.2. Results

The data were analysed via descriptive statistics, and analysis of variance. SPSS Statistics package version 23 was used to analyse the data in both Study 1 and Study 2. The data was screened and preliminary analysis was used to assess the suitability of the data for various kinds of analyses; see Appendix 7.3.
7.2.2.1. Trauma exposure

Work-related exposure to trauma

Work-related trauma exposure was measured using the JTES. The first section of Table 7.3. displays the frequencies and associated percentages of the overall sample that have been exposed to the 14 PTEs assessed in the JTES; the items are presented in descending order in terms of endorsement. The most commonly experienced PTEs were exposure to injured/dead children, fire, motor vehicle accidents, and murder. The prevalence rate of exposure across the sample was 99.3%; only one participant indicated they had not been exposed to any of the 14 PTEs. The range of endorsed items from the list of 14 PTEs was 0–13, with participants endorsing a mean of 9.1 PTEs ($SE = 0.3$).

In relation to the intensity of exposure items, frequencies and associated percentage of the overall sample endorsing each of the nine items can be located in the second section of Table 7.3. Each of the nine items was endorsed by at least 14.9% of participants. The most commonly endorsed items were: been at the scene of a traumatic assignment, been verbally threatened on assignment, covered a gruesome scene, and covered the same assignment multiple times in the same week.
## Table 7.3.
Frequency of exposure to PTEs

<table>
<thead>
<tr>
<th>Scale items</th>
<th>Exposed</th>
<th></th>
<th></th>
<th>Not exposed</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work-related exposure – kinds of PTEs (JTES)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injured/dead child</td>
<td>118</td>
<td>88.1</td>
<td>16</td>
<td>11.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire</td>
<td>118</td>
<td>88.1</td>
<td>16</td>
<td>11.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motor vehicle accident</td>
<td>117</td>
<td>87.3</td>
<td>17</td>
<td>12.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Murder</td>
<td>116</td>
<td>86.6</td>
<td>18</td>
<td>13.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Natural disaster</td>
<td>112</td>
<td>83.6</td>
<td>22</td>
<td>16.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Many casualties</td>
<td>101</td>
<td>75.4</td>
<td>33</td>
<td>24.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault outside of the family unit</td>
<td>99</td>
<td>73.9</td>
<td>35</td>
<td>26.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life threatening illness</td>
<td>99</td>
<td>73.9</td>
<td>35</td>
<td>26.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Airplane accident</td>
<td>84</td>
<td>62.7</td>
<td>50</td>
<td>37.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual assault</td>
<td>78</td>
<td>58.2</td>
<td>56</td>
<td>41.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault within the family unit</td>
<td>60</td>
<td>44.8</td>
<td>74</td>
<td>55.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Torture/kidnapping</td>
<td>55</td>
<td>41.0</td>
<td>79</td>
<td>59.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>War</td>
<td>51</td>
<td>38.1</td>
<td>83</td>
<td>61.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>6</td>
<td>4.5</td>
<td>128</td>
<td>95.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work-related exposure – intensity of exposure (JTES)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Been at the scene of a traumatic assignment</td>
<td>126</td>
<td>94.0</td>
<td>8</td>
<td>6.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Been verbally threatened on assignment</td>
<td>125</td>
<td>93.3</td>
<td>9</td>
<td>6.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Covered a gruesome scene</td>
<td>115</td>
<td>85.8</td>
<td>19</td>
<td>14.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Covered the same assignment multiple times in the same week</td>
<td>114</td>
<td>85.1</td>
<td>20</td>
<td>14.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Been physically attacked on assignments</td>
<td>70</td>
<td>52.2</td>
<td>64</td>
<td>47.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Witnessed someone hurt or killed on assignment</td>
<td>62</td>
<td>46.3</td>
<td>72</td>
<td>53.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Known the victim/perpetrator of an assignment</td>
<td>47</td>
<td>35.1</td>
<td>87</td>
<td>64.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Received personal injury on assignment</td>
<td>41</td>
<td>30.6</td>
<td>93</td>
<td>69.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Announced news of death to family/friends of a victim</td>
<td>20</td>
<td>14.9</td>
<td>114</td>
<td>85.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal exposure (TLEQ)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motor vehicle accident</td>
<td>84</td>
<td>62.7</td>
<td>50</td>
<td>37.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sudden death of a close friend or loved one</td>
<td>74</td>
<td>55.2</td>
<td>60</td>
<td>44.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Natural disaster</td>
<td>58</td>
<td>43.3</td>
<td>76</td>
<td>56.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threat of death or serious bodily harm</td>
<td>36</td>
<td>26.9</td>
<td>98</td>
<td>73.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other accident</td>
<td>34</td>
<td>25.4</td>
<td>100</td>
<td>74.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life-threatening or permanently disabling event for loved one</td>
<td>29</td>
<td>21.6</td>
<td>105</td>
<td>78.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Witness to severe assault of acquaintance or stranger</td>
<td>28</td>
<td>20.9</td>
<td>106</td>
<td>79.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life-threatening illness</td>
<td>26</td>
<td>19.4</td>
<td>108</td>
<td>80.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Warfare or combat</td>
<td>25</td>
<td>18.7</td>
<td>109</td>
<td>81.3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 7.3. continued

<table>
<thead>
<tr>
<th>Personal exposure (TLEQ), continued</th>
<th>Exposed</th>
<th>Not exposed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Witness to family violence</td>
<td>23</td>
<td>17.2</td>
</tr>
<tr>
<td>Robbery involving a weapon</td>
<td>21</td>
<td>15.7</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>15</td>
<td>11.2</td>
</tr>
<tr>
<td>Childhood physical abuse</td>
<td>13</td>
<td>9.7</td>
</tr>
<tr>
<td>Abortion</td>
<td>13</td>
<td>9.7</td>
</tr>
<tr>
<td>Severe assault by acquaintance or stranger</td>
<td>12</td>
<td>9.0</td>
</tr>
<tr>
<td>Sexual abuse before age 13 by someone at least 5 years older</td>
<td>11</td>
<td>8.2</td>
</tr>
<tr>
<td>Stalking</td>
<td>9</td>
<td>6.7</td>
</tr>
<tr>
<td>Sexual abuse as an adult</td>
<td>7</td>
<td>5.2</td>
</tr>
<tr>
<td>Physical abuse by an intimate partner</td>
<td>6</td>
<td>4.5</td>
</tr>
<tr>
<td>Sexual abuse before age 13 by someone close in age</td>
<td>4</td>
<td>3.0</td>
</tr>
<tr>
<td>Sexual abuse during adolescence</td>
<td>3</td>
<td>2.2</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>2.2</td>
</tr>
</tbody>
</table>

No significant differences were identified between camera operators and other news workers with respect to level of TV news experience (measured in years and months, and converted to months for analysis: $F(1, 132) = .71, p = .68, \eta^2 = .00$). Hence, level of experience was not included in further analyses. This research also considered differences between camera operators and other news workers in relation to their (1) total number of exposures across the 14 kinds of PTEs assessed by the JTES (frequency of exposure), and (2) total number of exposures across the 9 intensity items on the JTES (intensity of exposure). Figure 7.1. visually represents the means and standard errors for each of the two participant groups across the two dependent variables. The two groups were found to have similar means on the intensity of exposure variable (camera operators: $M = 132.0, SE = 15.8$; other news workers: $M = 130.9, SE = 43.3$). There was a difference in means for the frequency of exposure variable in which other news workers ($M = 320.4, SE = 98.6$) scored higher than camera operators ($M = 247.0, SE = 29.3$). One-way ANOVA was used to compare mean differences for camera operators and other news workers on only the frequency of
exposure variable. The difference in mean scores was not found to be significantly different: $F(1, 132) = .74, p = .39$, eta squared = .01.

![Graph showing mean number of work-related trauma exposures by role]

Note: Error bars denote standard error.

**Figure 7.1.** Mean number of work-related trauma exposures by role

**Personal exposure to trauma**

Personal trauma exposure was measured using the TLEQ. The third section of Table 7.3. displays the frequencies and associated percentages of the overall sample that have been exposed to the 22 PTEs assessed in the TLEQ; the items are presented in descending order in terms of endorsement. The most commonly experienced personal PTEs were motor vehicle accident, sudden death of a close friend or loved one, and natural disasters. The prevalence rate of personal exposure for the overall sample was 94.0%; eight participants indicated they had not been exposed to any of the 22 PTE items. The range of endorsed items from the list of 22 PTEs was 0–16, with participants endorsing a mean of 4.0 PTEs ($SE = 0.3$). No significant differences were identified between camera operators and other news workers with respect to level of personal exposure.
trauma exposure: $F(1, 132) = .08, p = .77$, eta squared = .00. Hence, personal exposure to trauma was not included in further analyses.

7.2.2.2. Trauma reactions

Descriptive analysis

The present study assessed trauma reaction symptoms on four variables: PTSD, depression, anxiety, and stress. Descriptive statistics and mean differences for all participant groups of interest across the four trauma reaction variables are presented in Table 7.4. The overall sample mean on the PTSD scale was 30.4 ($SE = 1.1$), which is above the clinical cut-off of 30 (National Center for Posttraumatic Stress Disorder, 2014). When applying the cut-off across the sample, 40.3% of participants ($n = 54$) could be considered at risk of PTSD. The overall sample mean scores on each of the three DASS subscales (depression: $M = 6.8, SE = 0.7$; anxiety: $M = 4.2, SE = 0.5$; stress: $M = 9.3, SE = 0.6$) fell within the normal range of the severity ratings provided for the scale (Lovibond & Lovibond, 2004). The overall sample percentages for each of the DASS subscale severity ratings can be found in Table 7.5.
## Table 7.4.
Descriptive statistics and mean differences for the trauma reaction variables

<table>
<thead>
<tr>
<th>Overall</th>
<th>PTSD</th>
<th>Depression</th>
<th>Anxiety</th>
<th>Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M (SE)</td>
<td>M (SE)</td>
<td>M (SE)</td>
<td>M (SE)</td>
</tr>
<tr>
<td>Overall</td>
<td>30.43 ± 1.10</td>
<td>6.78 ± 0.74</td>
<td>4.22 ± 0.50</td>
<td>9.34 ± 0.64</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>32.50 ± 3.43</td>
<td>5.50 ± 1.68</td>
<td>5.88 ± 2.21</td>
<td>8.38 ± 2.08</td>
</tr>
<tr>
<td>25–34</td>
<td>33.39 ± 2.60</td>
<td>7.00 ± 1.62</td>
<td>4.58 ± 1.19</td>
<td>10.10 ± 1.46</td>
</tr>
<tr>
<td>35–44</td>
<td>27.57 ± 2.19</td>
<td>5.97 ± 1.40</td>
<td>3.73 ± 0.96</td>
<td>8.03 ± 1.05</td>
</tr>
<tr>
<td>45–54</td>
<td>30.98 ± 2.02</td>
<td>8.39 ± 1.54</td>
<td>4.50 ± 0.95</td>
<td>9.91 ± 1.19</td>
</tr>
<tr>
<td>55–69</td>
<td>29.16 ± 2.35</td>
<td>5.21 ± 1.34</td>
<td>3.53 ± 0.91</td>
<td>10.21 ± 1.81</td>
</tr>
<tr>
<td>70+</td>
<td>19.00 ± 2.00</td>
<td>0.00 ± 0.00</td>
<td>0.00 ± 0.00</td>
<td>0.00 ± 0.00</td>
</tr>
<tr>
<td>Mean differences</td>
<td>$F(4, 116) = 2.03, p = .10$</td>
<td>$F(4, 116) = 1.08, p = .37$</td>
<td>$F(4, 116) = 1.45, p = .22$</td>
<td>$F(4, 116) = 1.47, p = .22$</td>
</tr>
<tr>
<td>Partial eta squared</td>
<td>.07</td>
<td>.04</td>
<td>.05</td>
<td>.05</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>33.16 ± 3.19</td>
<td>5.89 ± 2.04</td>
<td>4.58 ± 1.46</td>
<td>10.26 ± 1.88</td>
</tr>
<tr>
<td>Male</td>
<td>29.97 ± 1.17</td>
<td>6.92 ± 0.79</td>
<td>4.17 ± 0.53</td>
<td>9.18 ± 0.68</td>
</tr>
<tr>
<td>Mean differences</td>
<td>$F(1, 116) = 2.54, p = .11$</td>
<td>$F(1, 116) = 0.16, p = .69$</td>
<td>$F(1, 116) = 0.05, p = .82$</td>
<td>$F(1, 116) = 1.45, p = .23$</td>
</tr>
<tr>
<td>Partial eta squared</td>
<td>.02</td>
<td>.00</td>
<td>.00</td>
<td>.01</td>
</tr>
<tr>
<td>Role</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camera operator</td>
<td>30.33 ± 1.17</td>
<td>6.93 ± 0.80</td>
<td>4.04 ± 0.52</td>
<td>9.34 ± 0.68</td>
</tr>
<tr>
<td>Other</td>
<td>31.06 ± 3.27</td>
<td>5.71 ± 1.99</td>
<td>5.47 ± 1.63</td>
<td>9.29 ± 1.85</td>
</tr>
<tr>
<td>Mean differences</td>
<td>$F(1, 116) = 0.21, p = .65$</td>
<td>$F(1, 116) = 0.21, p = .64$</td>
<td>$F(1, 116) = 1.13, p = .29$</td>
<td>$F(1, 116) = 0.01, p = .94$</td>
</tr>
<tr>
<td>Partial eta squared</td>
<td>.00</td>
<td>.00</td>
<td>.01</td>
<td>.00</td>
</tr>
</tbody>
</table>

Note:

a. The mean score is numerically larger than the prescribed clinical cut-off.
b. The age categories adopted were based on Australian Bureau of Statistics standard age groups.
Table 7.5.  
*Overall sample proportions for each DASS subscale severity rating*

<table>
<thead>
<tr>
<th>Severity ratings</th>
<th>Proportion of overall sample (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Depression</td>
</tr>
<tr>
<td>Normal</td>
<td>74.6</td>
</tr>
<tr>
<td>Mild</td>
<td>6.0</td>
</tr>
<tr>
<td>Moderate</td>
<td>8.2</td>
</tr>
<tr>
<td>Severe</td>
<td>6.7</td>
</tr>
<tr>
<td>Extremely severe</td>
<td>4.5</td>
</tr>
</tbody>
</table>

Note: Percent values are rounded to one decimal place. Hence, the sum of percentage values provided for each DASS subscale may not equal exactly 100%.

**Mean differences across groups**

Three-way MANOVA was used to assess potential mean differences across groups. The independent variables were age, gender, and role. The dependent variables included the total score variables for each of the PTSD, depression, anxiety, and stress scales. Statistical findings for mean comparisons are displayed in Table 7.4.

**Age comparisons**

The mean scores for each age category on the PTSD, depression, anxiety, and stress variables are plotted in Figures 7.2. and 7.3. The relationship between age and total PTSD symptoms was nonlinear, although participants in the first two age categories did reported higher levels of PTSD symptoms than in any of the other four categories. Additionally, those in the oldest age category reported the lowest levels of PTSD symptoms. Means for the first, second, and fourth age groups were above the cut-off of 30 for potential PTSD screening.

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29 The scores for the three DASS subscales are not standardised. Figures 7.3., 7.5., and 7.6. are therefore indicative of the patterns in scores across groups, but are not indicative of patterns across subscales.
A FOCUS ON EXPOSURE

Figure 7.2. Mean PTSD scores by age category

Similar to the scores for overall PTSD symptoms, the relationship between age and total stress and depression symptoms was nonlinear. Scores for the anxiety measure approximate a curve-linear trend, decreasing with increasing age. Means for all age categories fell within the normal range for the depression, anxiety, and stress scales. Analysis indicated no significant differences by age category on any of the four trauma reaction measures, and small to medium effect sizes using partial eta squared.

Note:

a. Error bars denote standard error.
b. The dotted line indicates the clinical cut-off applied (30).

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30 The sixth age category had too few participants relative to the number of dependent variables included in the MANOVA. Therefore, the fifth and sixth age category were merged in the analysis, and the first degrees of freedom value is four and not five.
A FOCUS ON EXPOSURE

Note: Error bars denote standard error.

Figure 7.3. Mean depression, anxiety, and stress scores by age category
Gender comparisons

The mean scores for males and females on the PTSD scale are plotted in Figure 7.4. For the overall measure of PTSD symptoms, the mean for female participants was above the PTSD screening cut-off of 30, whereas the mean for male participants fell just below this cut-off. Gender comparisons were also made for the three PTSD subscales; mean scores are shown in Table 7.6. The mean scores for males and females on the depression, anxiety, and stress scales are plotted in Figure 7.5; means for both groups fell within the normal range for each of the three scales. Analysis indicated no significant differences by gender on any of the four trauma reaction measures, and effect sizes were all small.

![Figure 7.4. Mean PTSD scores by role and gender](image)

Note:

a. Error bars denote standard error.
b. The dotted line indicates the clinical cut-off applied (30).
Table 7.6.
*Gender comparisons for PTSD subscales*

<table>
<thead>
<tr>
<th>Construct</th>
<th>Male</th>
<th>Female</th>
<th>ANOVA</th>
<th>Eta squared</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M (SE)</td>
<td>M (SE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intrusion</td>
<td>7.95 (0.34)</td>
<td>9.63 (1.26)</td>
<td>W-F (1, 20.63) = 1.66, p = .21</td>
<td>.02</td>
</tr>
<tr>
<td>Avoidance</td>
<td>12.48 (0.57)</td>
<td>13.42 (1.53)</td>
<td>F (1, 132) = 0.38, p = .54</td>
<td>.00</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>9.62 (0.42)</td>
<td>10.11 (0.88)</td>
<td>F (1, 132) = 0.20, p = .66</td>
<td>.00</td>
</tr>
</tbody>
</table>

Note: The assumption of the homogeneity of variance was violated in the case of the gender comparison for intrusion; therefore, the Welch statistic (W-F) is reported (Pallant, 2007).

Figure 7.5. Mean depression, anxiety, and stress scores by gender

*Role comparisons*

The mean scores for both role groups on the PTSD, depression, anxiety, and stress variables are plotted in Figures 7.4. (above) and 7.6. Means for both role groups on the PTSD scale were above the cut-off of 30 for clinically significant levels of PTSD.
A FOCUS ON EXPOSURE

symptoms. Means for both groups fell within the normal range for the depression, anxiety, and stress scales. Analysis indicated no significant differences by role on any of the four trauma reaction measures, and small effect sizes.

Note: Error bars denote standard error.

Figure 7.6. Mean depression, anxiety, and stress scores by role

7.2.3. Discussion

The aim of Study 1 was to describe levels of trauma exposure and reactions amongst TV news workers, and to assess potential differences across groups. In this section, the research findings will be discussed in relation to each of the RQs and predictions of Study 1. RQs 1–3 concerned trauma exposure variables, whereas RQ 4 concerned trauma reactions.

7.2.3.1. Work-related trauma exposure

The first research question was: What kinds of work-related PTEs are news crewmembers exposed to? Each of the work-related PTE exposure items on the JTES
was endorsed by at least 4.5% of the participants. This indicates a wide range of trauma exposure experiences across the sample. The most frequently endorsed PTEs were exposure to injured/dead children, fire, motor vehicle accidents, and murder. These kinds of events were amongst the most frequently experienced in other studies using the JTES (Backholm & Björkqvist, 2012b; Brown, Evangel, & Greenberg, 2012; Pyevich et al., 2003). Additionally, Backholm and Björkqvist reported that these kinds of PTEs, with the exception of fire, were found to be the most stressful for the participants they sampled. The most commonly endorsed intensity of exposure items in this study were: been at the scene of a traumatic assignment, been verbally threatened on assignment, covered a gruesome scene, and covered the same assignment multiple times in the same week. These findings are congruent with those reported by Pyevich et al. Prevalence rates of exposure to these PTEs for both kinds of PTEs and intensity items were higher in the present study than has been reported in previous research. Although, direct comparisons across studies is challenging because differing time periods for exposure have been applied, and some studies have not reported descriptive information for each JTES item.

In the trauma exposure SLR (Chapter 2), journalists were found to have work-related exposure prevalence rates as high as 95.0%, exceeding rates of exposure reported for the general population studies discussed in the introduction section of that chapter. In the present study, the prevalence rate of work-related exposure to PTEs was found to be 99.3%. The mean number of JTES items endorsed and the mean number of work-related exposures to trauma was greater in this study than has been reported in previous studies. Again, direct comparisons across studies are challenging because differing time periods for exposure have been applied, and different trauma exposure scales adopted. Applying a career-long timeframe may be more useful when
considering the cumulative nature of trauma exposure and reactions, whereas using a 12-month timeframe might mean more accurate numeric recall of experiences, and potentially standardise cross-sectional comparisons of participants by reducing the impact of time within the industry. Regardless of the timeframe adopted, the use of trauma exposure scales, such as the JTES and TLEQ, to indicate the number of PTE exposures introduces concerns associated with the limitations of participant recall. However, all trauma researchers grapple with this limitation.

The second research question was: *Are there differences between news crew roles in terms of work-related PTE exposure?* It was predicted that camera operators would report significantly greater levels of work-related PTE exposure than other news workers. However, analysis indicated no significant differences between camera operators and other news workers with respect to their frequency or intensity of trauma exposure. Previous research has indicated that journalists, in general, and more specifically reporters, have increased levels of trauma exposure as a result of their work, but no previous study has reported trauma exposure analyses based on role. Therefore, a key contribution of this study is the finding that TV news camera operators have equivalent work-related trauma exposure compared to other TV news workers, such as reporters. Similar to reporters, camera operators experience increased rates of trauma exposure as a result of their work.

### 7.2.3.2. Personal trauma exposure

The third research question was: *What kinds of personal PTEs are news crewmembers exposed to?* The most commonly experienced personal PTEs in this study were: motor vehicle accident, sudden death of a close friend or loved one, and natural disasters. These findings are comparable to some of the journalist personal exposure
findings reported elsewhere in the literature. As stated in the introduction of Chapter 2, trauma exposure prevalence rates in general population samples range from 16–90%, whereas the prevalence of personal trauma exposure amongst journalists ranges from 38–90%. The prevalence rate of personal exposure for the overall sample in the present study was 94%. Previous studies that included TV and other broadcast mediums were amongst those reporting the highest prevalence of personal exposure for journalists. However, analysis indicated no significant differences between camera operators and other news workers with respect to their personal trauma exposure. The findings indicate that camera operators and other news workers in the present study experienced elevated levels of personal trauma exposure compared to the general population, and that this personal exposure is coupled with elevated work-related exposure.

7.2.3.3. Trauma reactions

The findings of the present study indicate that trauma reactions amongst TV news workers do not differ based on age or gender. Only one other study has considered age in relation to journalists’ trauma reactions: McMahon (2001) reported that older age is associated with increased severity of PTSD symptoms. Similarly, a range of other trauma reaction and burnout studies focusing on journalist samples has indicated that gender is not significantly associated with psychological distress (Cook & Banks, 1993; Newman et al., 2003; Sinyor & Feinstein, 2012). General population research indicates that gender is significantly associated with psychological distress; for example, women tend to report higher levels of mood disorder symptoms. However, it may be that gender differences in trauma reactions are more pronounced in the general population because women are over-represented in a number of PTEs, whereas trauma exposure in occupational settings is less likely to be gender biased (Hodgins, Creamer, & Bell, 2001).
The mean score for the overall sample on the PTSD scale exceeded the clinical cut-off of 30. Using this cut-off, 40.3% of the sample could be considered at risk of developing PTSD. Applying the more stringent cut-off of 44, 16.4% could be considered at risk. Even when applying the higher cut-off, the numbers of journalists considered at risk within this study are greater than has been reported in previous studies also using the PCL (4.30–6.70%; Newman et al., 2003; Pyevich et al., 2003).

Comparisons of probable PTSD prevalence across studies are difficult. As stated in Chapter 3, research in this area has used various measures of PTSD symptoms, for which cut-offs are rarely explained and have not been cross-validated. A cut-off of 30 appears to be a useful indicator for PTSD screening of news workers, whereas a cut-off of 44 may be more appropriate when aiming to identify probable PTSD prevalence. However, diagnostic interviewing would be an ideal addition to future research to provide some indication of the most appropriate cut-off for researching samples of TV news workers.

For the depression, anxiety, and stress scales, the mean scores for the overall sample fell within the normal range. The clinical categories most represented in each of the three scales were the normal categories, accounting for 64.6–83.6% of the sample. This trend in DASS scores compared to PCL–C scores is noteworthy because comorbidity is expected across trauma reactions, such that triggering the PTSD scale would make the sample more likely to trigger the DASS measures. However, this is not supported by the mean values (shown in Table 7.4.) or by the proportions of the sample above the PTSD cut-off when compared to the DASS subscale cut-offs.
Previous research considering trauma reactions amongst journalist samples has not considered potential role differences. Psychological assessment of role differences in journalist samples has only been considered in the area of burnout and substance use; for example, reporters and editors are those considered most at risk of burnout (MacDonald, Saliba, Hodgins, & Ovington, 2016). However, all but one of these previous studies sampled newspaper journalists, and the study that sampled TV journalists compared only producers, anchors, and reporters (Reinardy, 2013). This means that the present study is the first to explicitly assess potential role differences in the psychological well-being of camera operators and other news workers. In Chapter 1, a number of factors were identified as potential reasons why camera operators may experience greater exposure to trauma, and may also experience greater levels of trauma-related symptoms, compared to other TV news workers. Additionally, the findings of the in-depth interview study (Phase B, Chapters 5 and 6) support the assertion that there may be fundamental differences between camera operators and other news workers, such as reporters, that correspond to differences in trauma exposure and reactions.

It was predicted that camera operators would report significantly greater levels of PTSD, depression, anxiety, and stress symptoms than other news workers. However, analysis indicated no significant differences by role on any of the four trauma reaction measures. The mean PTSD scores for both role groups were above the clinical cut-off of 30, but the mean scores for both role groups in each of the DASS subscales were all within the normal range. The present findings support previous research that has indicated TV broadcast journalists, as a group, are at risk of developing PTSD. More pertinent to the focus of this thesis, the findings of Study 1 are a crucial addition to the journalist trauma literature as they are the first to indicate that TV news camera
operators experience elevated levels of PTSD symptoms, which are equivalent to those experienced by other TV news workers, such as reporters.

7.3. Study 2

The findings of the qualitative study reported in Phase B suggested that there might be important differences in trauma exposure and psychological well-being between camera operators and other news workers, such as reporters. However, the quantitative role comparison findings of the MANOVA reported in Study 1 (small mean differences, no statistically significant differences in means, and small effect sizes) seemed to be inconsistent with the findings reported in Phase B. In order not to prematurely dismiss the potential for differences in trauma reactions based on role, further analysis was undertaken. Study 2 details the steps in analysis that were performed to better understand whether or not camera operators in the present sample have unique experiences of trauma reactions compared to other news workers. Study 2 was designed to answer two research questions:

1. Are there differences in trauma reactions due to news crew role?
2. Do TV news workers experience greater levels of psychopathology than the general population?

As in Study 1, it was predicted that camera operators would report significantly greater levels of PTSD, depression, anxiety, and stress symptoms than other news workers. It was also expected that camera operators and other news workers would both report greater levels of PTSD, depression, anxiety, and stress symptoms than the general population.
7.3.1. Method

Study 2 describes extended analysis based on the same data collection method, participants, materials, and procedure outlined in Study 1.

7.3.1.1. Participants

In light of the unexpected findings of the MANOVA in Study 1, a second approach to role categorisation was adopted. Inspection of the score distribution of the role variable indicated that the data was bimodal: the most frequently endorsed participant scores for percentage of their work as a camera operator were 0% and 100%. The scores in-between these two modal extremes were sparse and highly varied, making it difficult to ascertain whom this middle group represented. Because of these points, continuous analysis was considered inappropriate, as was categorising roles based on a mean or median split. It was considered most appropriate to compare the two extreme modal groups as they would be most likely to demonstrate role differences should they exist in this sample. Therefore, the participants were divided into three groups with only two of these groups to be included in further analysis: ‘camera-operation only’ \( n = 66 \) and ‘no camera-operation’ \( n = 17 \).

7.3.2. Results

The results are reported in three steps: (1) mean differences based on role, (2) statistical similarity across roles, and (3) association between role and clinical categorisation. Comparisons are then made to other clinical and non-clinical studies. Data was evaluated via analysis of variance, correlation, and Chi-square for independence tests to assess relationships and differences amongst variables.
A FOCUS ON EXPOSURE

7.3.2.1. Step 1: Mean differences based on role

No significant differences were identified between the camera-operation only group and the no camera-operation group with respect to level of TV news experience: $F(1, 81) = 2.01, p = .16$, eta squared = .03. Hence, level of experience was not included in further analyses. A series of one-way ANOVAs were conducted to compare means for the camera-operation only group to those of the no camera-operation group, on each of the four trauma reaction variables. The findings are presented in Table 7.7. Mean differences were small and not found to be significantly different; small effect sizes were also found. The means for depression, anxiety, and stress fell within the normal range for both role groups. Whilst the mean PTSD score for the no camera-operation group was the only score to exceed the suggested clinical cut-offs, the PTSD means for both role groups are equivalent when standard error is taken into account. Increasing both role groups’ PTSD means by one standard error places both groups above the clinical cut-off, whereas decreasing both role groups’ PTSD means by one standard error places both groups below the clinical cut-off.
A FOCUS ON EXPOSURE

Table 7.7.
*Mean role differences in trauma reactions*

<table>
<thead>
<tr>
<th>Trauma reactions</th>
<th>No camera-operation M (SE)</th>
<th>Camera-operation only M (SE)</th>
<th>ANOVA</th>
<th>Eta squared</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTSD</td>
<td>31.10± (3.49)</td>
<td>29.48 (1.46)</td>
<td>$F (1, 81) = 0.22, p = .64$</td>
<td>.00</td>
</tr>
<tr>
<td>Intrusion</td>
<td>7.67 (1.12)</td>
<td>7.74 (0.39)</td>
<td>$F (1, 79) = 0.01, p = .94$</td>
<td>.00</td>
</tr>
<tr>
<td>Avoidance</td>
<td>12.93 (1.73)</td>
<td>12.59 (0.74)</td>
<td>$F (1, 79) = 0.04, p = .85$</td>
<td>.00</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>9.60 (1.16)</td>
<td>9.20 (0.52)</td>
<td>$F (1, 79) = 0.11, p = .74$</td>
<td>.00</td>
</tr>
<tr>
<td>Depression</td>
<td>5.71 (2.12)</td>
<td>6.94 (1.11)</td>
<td>$F (1, 81) = 0.26, p = .61$</td>
<td>.00</td>
</tr>
<tr>
<td>Anxiety</td>
<td>5.47 (1.74)</td>
<td>4.00 (0.71)</td>
<td>$F (1, 81) = 0.82, p = .38$</td>
<td>.01</td>
</tr>
<tr>
<td>Stress</td>
<td>9.29 (1.97)</td>
<td>8.12 (0.85)</td>
<td>$F (1, 81) = 0.37, p = .54$</td>
<td>.00</td>
</tr>
</tbody>
</table>

Note:
a. The mean score is numerically larger than the prescribed clinical cut-off.

7.3.2.2. **Step 2: Statistical similarity across roles**

In the absence of statistical mean differences between the two role groups, it was considered necessary to assess the extent to which they were statistically similar. In order to assess for statistical similarity, correlation analysis was performed. However, correlation analyses require some extra consideration when comparing groups of unequal sizes, as compared to the MANOVA tests reported above. The size of the no camera-operation group ($n = 15$) was considerably smaller than the camera-operation only group ($n = 66$). Running correlations based on these two sample sizes without adjustment would result in SPSS comparing the $n = 15$ in one group to only the first 15 in the second group. To minimise the unnecessary influence of order effects on the analysis, each of the $n = 15$ participants in the no camera-operation group was randomly paired with a participant in the camera-operation only group, and only the scores of these two groups of 15 were correlated. For each of the four trauma exposure
constructs, two new variables were created, containing the total scores for each participant in the camera-operation only group and the no camera-operation group.

The results of the correlation analyses are summarised in Table 7.8. A statistically significant large\(^{31}\) positive correlation was found between the total depression scores of the camera-operation only group and the no camera-operation group (\(r = .68, n = 15, p = .006\)); high levels of depression symptoms in one role group were associated with high levels in the other group. For anxiety, a non-significant small negative correlation was indicated (\(r = -.28, n = 15, p = .31\)).\(^{32}\) For stress, a non-significant small positive correlation was indicated (\(r = .25, n = 15, p = .37\)). A large negative correlation was found between the total PTSD scores of the camera-operation only group and the no camera-operation group: this correlation approached statistical significance (\(r = -.51, n = 15, p = .05\)).

Table 7.8.
Correlation matrix for the camera-operation only group and the no camera-operation group on each of the trauma reaction scales

<table>
<thead>
<tr>
<th></th>
<th>No camera-operation</th>
<th>Camera-operation only</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTSD</td>
<td>-.51</td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>.68**</td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>-.28</td>
<td></td>
</tr>
<tr>
<td>Stress</td>
<td>.25</td>
<td></td>
</tr>
</tbody>
</table>

Note: *\(p < .05\); **\(p < .01\)

\(^{31}\)The guidelines provided by Cohen (1988) were used to determine the strength of the relationship between variables (small: \(r = .10–.29\); medium: \(r = .30–.49\); large: \(r = .50–1.0\)).

\(^{32}\)As described in Appendix 7.3., preliminary analysis indicated that Skewness and Kurtosis were a concern with respect to the anxiety sub-scale; therefore, caution should be taken in interpreting the results of the correlation analysis.
7.3.2.3. **Step 3: Association between role and clinical categorisation**

A series of Chi-square for independence tests were performed to assess whether either of the two role groups was significantly more likely than the other to score above or below the clinical cut-off for each of the four trauma reaction scales. This kind of analysis requires two categorical variables. The first variable in each of the four tests was role, with the two categories being camera-operation only and no camera-operation. The second variable included two groups of scores on the trauma reaction scales, those above the clinical cut-off and those below it.

The camera-operation only group had approximately 15% more participants above the depression clinical cut-off than the no camera-operation group. Conversely, the no camera-operation group had approximately 10% more participants above the anxiety clinical cut-off than the camera-operation only group. Similar to the proportions for PTSD, the proportions for the two role groups on the stress scale were equivalent. The results of the Chi-square for independence analyses are displayed in Table 7.9. The Chi-square test for independence (with Yates Continuity Correction) indicated no significant association between role and PTSD clinical categorisation, and a very small effect size; the proportions for the two role groups were equivalent. The Chi-square tests for independence assessing depression, anxiety, and stress categorisation each utilised Fisher’s exact probability, and indicated no significant associations between role and clinical categorisation; small and very small effect sizes were determined.
Table 7.9.
Association between role group and clinical categorisation for trauma reaction scales

<table>
<thead>
<tr>
<th>Construct</th>
<th>Role group</th>
<th>Proportion (%)</th>
<th>Chi-square</th>
<th>Phi</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Below clinical cut-off</td>
<td>Above clinical cut-off</td>
<td></td>
</tr>
<tr>
<td>PTSD</td>
<td>Camera-operation only</td>
<td>62.1</td>
<td>37.9</td>
<td>$\chi^2 (1, n = 81) = 0.00, p = 1.00$</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>60.0</td>
<td>40.0</td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>Camera-operation only</td>
<td>72.7</td>
<td>27.3</td>
<td>$\chi^2 (1, n = 81) = 1.42, p = 0.34$</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>86.7</td>
<td>13.3</td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>Camera-operation only</td>
<td>84.8</td>
<td>15.2</td>
<td>$\chi^2 (1, n = 81) = 1.04, p = 0.28$</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>73.3</td>
<td>26.7</td>
<td></td>
</tr>
<tr>
<td>Stress</td>
<td>Camera-operation only</td>
<td>78.8</td>
<td>21.2</td>
<td>$\chi^2 (1, n = 81) = 0.01, p = 1.00$</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>80.0</td>
<td>20.0</td>
<td></td>
</tr>
</tbody>
</table>
7.3.2.4. **Comparisons to clinical and non-clinical samples**

This section aims to contextualise the present findings within the broader literature of clinical and non-clinical samples that have used the same scales adopted in this study. The PTSD mean scores for this study are displayed in Table 7.10., alongside a number of studies that have sampled a range of clinical and non-clinical groups. Mean scores are displayed in descending order. Using 30 as a cut-off, the samples can be broken into two groups: those at risk of developing PTSD and those considered to be within the sub-clinical range. As can be seen, studies with means below 30 were of students and occupational groups who might be considered to have increased exposure to PTEs, such as police, firefighters, news journalists, and this study—representing the camera-operation only group. The samples with means above 30 were the no camera-operation group and overall sample from this study, as well as samples in which participants were exposed to a specific PTE, and samples in which participants have a clinical diagnosis.

The DASS mean scores for depression, anxiety, and stress in this study are displayed in Tables 7.11. and 7.12., together with those scores from a number of studies that sampled a range of clinical and non-clinical groups. The relative positioning of means for various samples across the three DASS subscales conform to the same kind of trend. Clinical samples (with the exception of simple phobia), those where participants had been exposed to a specific PTE (i.e., war, natural disasters, and workplace violence), and police, populated the mild to extremely severe categories. Whereas, the three means reported in this study, the simple phobia sample, and the three normative samples all fell within the normal range of scores.
### Table 7.10.
*Means and standard errors of clinical and non-clinical studies using the PCL*

<table>
<thead>
<tr>
<th>Clinical category</th>
<th>Sample</th>
<th>Reference</th>
<th>PCL total Mean (SE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>At risk</td>
<td>Vietnam veterans diagnosed with PTSD</td>
<td>Forbes, Creamer, &amp; Biddle (2001)</td>
<td>66.2 (1.0)</td>
</tr>
<tr>
<td></td>
<td>Individuals diagnosed with PTSD</td>
<td>Ventureyra, Yao, Cottraux, Note, &amp; Mey-Guillard (2002)</td>
<td>60.2 (0.9)</td>
</tr>
<tr>
<td></td>
<td>Motor vehicle accident and sexual assault victims</td>
<td>Blanchard, Jones-Alexander, Buckley, &amp; Forneris (1996)</td>
<td>45.8 (2.6)</td>
</tr>
<tr>
<td></td>
<td>HIV-seropositive individuals with a diagnosis of substance abuse</td>
<td>Bollinger, Cuevas, Vielhauer, Morgan, &amp; Keane (2008)</td>
<td>42.1 (2.1)</td>
</tr>
<tr>
<td></td>
<td>Hurricane Katrina survivors</td>
<td>Hirschel &amp; Schulenberg (2009)</td>
<td>33.9 (0.8)</td>
</tr>
<tr>
<td>Normal</td>
<td>No camera-operation</td>
<td>Current study</td>
<td>31.1 (3.5)</td>
</tr>
<tr>
<td></td>
<td>TV news workers</td>
<td>Current study</td>
<td>30.4 (1.1)</td>
</tr>
<tr>
<td></td>
<td>Camera-operation only</td>
<td>Current study</td>
<td>29.5 (1.5)</td>
</tr>
<tr>
<td></td>
<td>Students</td>
<td>Ruggiero, Ben, Scotti, &amp; Rabalais (2003)</td>
<td>29.4 (0.7)</td>
</tr>
<tr>
<td></td>
<td>Students</td>
<td>Conybeare, Behar, Solomon, Mewman, &amp; Borkovec (2012)</td>
<td>29.1 (0.6)</td>
</tr>
<tr>
<td></td>
<td>News journalists</td>
<td>Pyevich, Newman, &amp; Daleiden (2003)</td>
<td>24.7 (0.3)</td>
</tr>
<tr>
<td></td>
<td>Firefighters</td>
<td>Ben, Scotti, Chen, &amp; Fortson (2006)</td>
<td>23.8 (1.0)</td>
</tr>
<tr>
<td></td>
<td>Police</td>
<td>Hodgins, Creamer, &amp; Bell (2001)</td>
<td>21.7 (0.4)</td>
</tr>
</tbody>
</table>

Note: In Tables 7.9–7.11, all means and standard errors have been rounded to one decimal place for consistency across studies.
Table 7.11.
Means and standard errors of clinical and non-clinical studies using the DASS depression subscale

<table>
<thead>
<tr>
<th>Clinical category</th>
<th>Sample</th>
<th>Reference</th>
<th>Depression M (SE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe</td>
<td>Mood disorder</td>
<td>Brown, Chorpita, Korotitsch, &amp; Barlow (1997)</td>
<td>25.3 (0.5)</td>
</tr>
<tr>
<td></td>
<td>War veterans</td>
<td>Devilly (2002)</td>
<td>23.7 (1.1)</td>
</tr>
<tr>
<td></td>
<td>Police</td>
<td>Husain, Sajjad, &amp; Rehman (2014)</td>
<td>22.0 (0.4)</td>
</tr>
<tr>
<td>Moderate</td>
<td>Earthquake</td>
<td>Aslam &amp; Tariq (2010)</td>
<td>17.8 (1.5)</td>
</tr>
<tr>
<td></td>
<td>Obsessive-compulsive disorder</td>
<td>Brown et al. (1997)</td>
<td>16.5 (2.7)</td>
</tr>
<tr>
<td></td>
<td>Generalised anxiety disorder</td>
<td>Brown et al. (1997)</td>
<td>14.3 (1.2)</td>
</tr>
<tr>
<td></td>
<td>Social phobia</td>
<td>Brown et al. (1997)</td>
<td>13.2 (1.3)</td>
</tr>
<tr>
<td>Mild</td>
<td>Panic disorder</td>
<td>Brown et al. (1997)</td>
<td>11.6 (0.9)</td>
</tr>
<tr>
<td></td>
<td>Workplace violence</td>
<td>Ayte et al. (2011)</td>
<td>11.0 (0.2)</td>
</tr>
<tr>
<td></td>
<td>Flood</td>
<td>Riaz, Riaz, &amp; Batool (2014)</td>
<td>9.8 (0.4)</td>
</tr>
<tr>
<td>Normal</td>
<td>Camera-operation only</td>
<td>Current study</td>
<td>6.9 (1.1)</td>
</tr>
<tr>
<td></td>
<td>TV news workers</td>
<td>Current study</td>
<td>6.8 (0.7)</td>
</tr>
<tr>
<td></td>
<td>Australian&lt;sup&gt;b&lt;/sup&gt;</td>
<td>Lovibond &amp; Lovibond (2004)</td>
<td>6.3 (0.1)</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>Current study</td>
<td>5.7 (2.1)</td>
</tr>
<tr>
<td></td>
<td>Australian&lt;sup&gt;c&lt;/sup&gt;</td>
<td>Crawford, Cayley, Lovibond, Wilson, &amp; Hartley (2011)</td>
<td>5.0 (0.3)</td>
</tr>
<tr>
<td></td>
<td>Simple phobia</td>
<td>Brown et al. (1997)</td>
<td>5.0 (1.2)</td>
</tr>
<tr>
<td></td>
<td>UK</td>
<td>Crawford et al. (2009)</td>
<td>3.6 (0.1)</td>
</tr>
</tbody>
</table>

Note:

a. The same studies are compared in Tables 7.10 and 7.11—references have only been included in Table 7.10.
b. The Australian sample from the study by Lovibond and Lovibond (2004) is denoted with the letter <sup>b</sup> in Tables 7.10 and 7.11.
c. The Australian sample from the study by Crawford et al. (2011) is denoted with the letter <sup>c</sup> in Tables 7.10 and 7.11.
d. Each study included in Tables 7.10 and 7.11 used the DASS–42.
### Table 7.12.
*Means and standard errors of clinical and non-clinical studies using the DASS anxiety and stress subscales*

<table>
<thead>
<tr>
<th>Clinical category</th>
<th>Sample</th>
<th>Anxiety $M$ (SE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely severe</td>
<td>Police</td>
<td>23.3 (0.4)</td>
</tr>
<tr>
<td>Severe</td>
<td>War veterans</td>
<td>19.6 (1.0)</td>
</tr>
<tr>
<td></td>
<td>Earthquake</td>
<td>16.6 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Panic disorder</td>
<td>15.5 (0.7)</td>
</tr>
<tr>
<td>Moderate</td>
<td>Social phobia</td>
<td>11.7 (1.1)</td>
</tr>
<tr>
<td></td>
<td>Generalised anxiety disorder</td>
<td>11.3 (1.0)</td>
</tr>
<tr>
<td></td>
<td>Mood disorder</td>
<td>11.0 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Flood</td>
<td>10.1 (0.4)</td>
</tr>
<tr>
<td>Mild</td>
<td>Obsessive-compulsive disorder</td>
<td>9.7 (1.7)</td>
</tr>
<tr>
<td></td>
<td>Workplace violence</td>
<td>9.7 (0.2)</td>
</tr>
<tr>
<td>Normal</td>
<td>UK</td>
<td>5.6 (0.2)</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>5.5 (1.7)</td>
</tr>
<tr>
<td></td>
<td>Simple phobia</td>
<td>5.3 (1.4)</td>
</tr>
<tr>
<td></td>
<td>Australian$^b$</td>
<td>4.7 (0.1)</td>
</tr>
<tr>
<td></td>
<td>TV news workers</td>
<td>4.2 (0.5)</td>
</tr>
<tr>
<td></td>
<td>Camera-operation only</td>
<td>4.0 (0.7)</td>
</tr>
<tr>
<td></td>
<td>Australian$^c$</td>
<td>3.4 (0.2)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical category</th>
<th>Sample</th>
<th>Stress $M$ (SE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe</td>
<td>War veterans</td>
<td>30.8 (0.9)</td>
</tr>
<tr>
<td></td>
<td>Police</td>
<td>23.3 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Mood disorder</td>
<td>22.6 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Generalised anxiety disorder</td>
<td>22.4 (1.2)</td>
</tr>
<tr>
<td></td>
<td>Earthquake</td>
<td>19.6 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Flood</td>
<td>18.8 (0.5)</td>
</tr>
<tr>
<td></td>
<td>Obsessive-compulsive disorder</td>
<td>18.6 (1.7)</td>
</tr>
<tr>
<td></td>
<td>Panic disorder</td>
<td>18.3 (0.8)</td>
</tr>
<tr>
<td>Moderate</td>
<td>Social phobia</td>
<td>17.7 (1.4)</td>
</tr>
<tr>
<td></td>
<td>Workplace violence</td>
<td>15.4 (0.2)</td>
</tr>
<tr>
<td>Mild</td>
<td>Simple phobia</td>
<td>12.3 (2.0)</td>
</tr>
<tr>
<td></td>
<td>Australian$^b$</td>
<td>10.1 (0.2)</td>
</tr>
<tr>
<td></td>
<td>UK</td>
<td>9.3 (0.2)</td>
</tr>
<tr>
<td></td>
<td>No camera-operation</td>
<td>9.3 (2.0)</td>
</tr>
<tr>
<td></td>
<td>TV news workers</td>
<td>9.3 (0.6)</td>
</tr>
<tr>
<td></td>
<td>Australian$^c$</td>
<td>8.1 (0.4)</td>
</tr>
<tr>
<td></td>
<td>Camera-operation only</td>
<td>8.1 (0.9)</td>
</tr>
</tbody>
</table>

See notes for Table 7.10., above.

#### 7.3.3. Discussion

The aim of Study 2 was to extend upon Study 1 by (1) further exploring potential differences in trauma reactions as a result of role group, and (2) contextualising the trauma reaction scores found in this study with those reported in clinical and non-clinical studies of other populations that have used the same scales. Hence, the discussion is divided accordingly.
7.3.3.1. Exploration of role differences

The first RQ was: Are there differences in trauma reactions due to news crew role? It was predicted that camera operators would report significantly greater levels of PTSD, depression, anxiety, and stress symptoms than other news workers. Mean depression, anxiety and stress scores for both role groups (camera operators and other news workers) fell within the normal range, and no significant differences were identified. In relation to the PTSD scale, the role groups had comparable means that were on the cusp of clinical significance, and again, the mean difference was non-significant. Hence, the findings indicate that TV news camera operators experience elevated levels of PTSD symptoms, which are equivalent to those of other TV news workers.

However, the absence of statistical difference between camera operators and other news workers is not equivalent to statistical similarity. It is possible that participants in one group tended to score higher on the trauma reaction scales, whilst the other group tended to score lower. Analyses of mean differences, as reported in Step 1, would be unlikely to detect such a role difference in this case because the actual difference in means between the two groups was small. However, correlation would be more likely to detect this kind of role difference. The results indicate that the scores of the two role groups were statistically similar in the case of depression symptoms. The results also indicate a negative association, approaching statistical significance, between the two role groups in relation to PTSD symptoms. In referring back to Chapter 6 and the discussion of the viewfinder effect therein, it may be the case that camera operators perceive their exposure to trauma uniquely through the viewfinder of their video camera. Having a physical barrier between them and the stimulus, as well as the implications of viewing the stimulus through only one eye, may reduce their physical
arousal and stress response in the moment. This is a potential explanation for why a negative association was identified for PTSD symptoms, but not for depression symptoms. Caution is required when comparing the findings of the tests of similarity to the findings of the ANOVAs discussed above, because the samples used were not equivalent; only 15 of the possible 66 participants in the camera-operation only group were included in the correlation analyses.

The findings also showed that the camera operator group had a smaller proportion of individuals reaching the clinically significant cut-off scores for PTSD, anxiety, and stress than other news workers. However, they were more likely than other news workers to reach the clinical cut-off for the depression scale. It was considered possible that participants in one role group might tend to score above the clinical cut-offs for the trauma reaction scales, whilst the other group tends to score below the cut-offs. The findings indicated no significant role differences in clinical categorisation on any of the four trauma reaction scales. The findings of this study do not support the prediction that TV news camera operators experience greater psychopathology than other TV news workers, rather camera operators appear to experience equivalent levels of psychopathology.

7.3.3.2. Comparisons to clinical and non-clinical samples

The second RQ was: Do TV news workers experience greater levels of psychopathology than the general population? It was expected that camera operators and other news workers would both report greater levels of PTSD, depression, anxiety, and stress symptoms than the general population. This prediction was based on previous research that has reported high levels of work-related and personal trauma exposure in journalist samples (Chapter 2). Research has also indicated that journalist samples have
notable levels of PTSD and depression symptoms (Chapters 3 and 4); however, such findings are rarely considered in relation to other clinical and non-clinical samples.

In relation to PTSD symptoms, all three means reported in the present study (for camera-operation only, no camera-operation, and the overall sample of TV news workers) were clustered around the clinical cut-off of 30. The camera-operation only group fell just within the normal range, and so was grouped with student samples and other professions experiencing trauma exposure, such as police. In contrast, the overall mean and the mean for the no camera-operation group in this study both fell within the at-risk category, along with studies of clinical and trauma exposed groups. In relation to the DASS, the three means reported in the present study all fell within the normal range on each of three subscales, alongside the normative samples obtained in Australia and the UK. As was the case for PTSD symptoms, the at-risk category was populated by a range of studies with clinical and trauma-exposed participants. Taking the relative positioning of means at face value, it would appear that camera operators and other news workers experience greater levels of PTSD symptoms than the general population; however, they do not experience greater levels of depression, anxiety, or stress symptoms than are reported in the general population.

7.4. General discussion
This section summarises the key findings of both studies, suggests future directions for research and practice with TV news camera operators, outlines some caveats and limitations of the reported findings, and highlights the contributions this chapter has made toward understanding trauma exposure and reactions amongst camera operators.
In relation to trauma exposure, a wide range of trauma exposure experiences were endorsed across the sample, and prevalence rates of exposure were higher in the present study than has been reported in previous research. However, no significant differences were found between the two TV news role groups. These findings are valuable in that they indicate that TV news camera operators experience equivalent work-related trauma exposure compared to other TV news workers, such as reporters. It could be that the difference between camera operators and other roles is not in the frequency of exposure to PTEs, but rather the way in which camera operators are exposed to trauma compared to those in other news production roles. The argument put forward here to explain these findings is based on the perceptual differences experienced by TV news camera operators when they are exposed to trauma compared to other news workers. In this thesis, the perceptual difference has been referred to as the viewfinder effect, and is discussed in detail in Chapter 6. At this stage, the theory of differences between roles is tentative, and hence requires further consideration and experimental testing. However, to do so is likely to involve a considerable amount of careful planning and ingenuity, as there are apparent ethical dilemmas associated with experimentally testing perceptual variations in exposure to potentially traumatic stimuli. Such experimental testing is outside of the scope of this thesis.

As stated in the materials section, 74–80% of individuals that reach the cut-off of 30 are ultimately diagnosed with PTSD (Andrykowski et al., 1998; Lang et al., 2003). By applying these efficiency findings to the present study, as many as 28–30% of camera operators (n = 18.5–20.0) and 33–36% of reporters (n = 3.7–4.0) might be experiencing diagnosable PTSD. For the overall sample, the proportion may be as high as 29–32% (n = 40.0–43.2). These percentages are high considering previous research indicating that a cut-off of 30 on the PCL–C is associated with a 16% prevalence of
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PTSD in a range of professional settings (National Center for Posttraumatic Stress Disorder, 2014). Comparisons across journalist, normative, and clinical samples would be valuable, but is difficult because (1) reporting is not standardised and many studies do not report clinical cut-offs or categories, and (2) those that do, adopt differing cut-offs without providing a rationale for why a given cut-off was selected. In the absence of large representative studies assessing trauma reactions in journalist samples, there is a need for research implementing structured diagnostic interviews to establish (1) diagnosis prevalence amongst various journalistic role groups, (2) presence of comorbidity, and (3) the most appropriate cut-offs to apply to TV news journalist samples.

In combination, the findings of Studies 1 and 2 support rejection of the prediction that camera operators experience greater psychopathology than other news workers. As discussed in the introduction section for Phase A of this thesis, previous research concerning trauma exposure and reactions in journalist samples has tended to predominantly sample individuals working within a reporting capacity. Additionally, this previous research has (1) firmly established journalism, and news production more specifically, as an occupational setting involving high levels of trauma exposure and adverse psychological implications, and (2) contributed to industry changes aimed at supporting staffers who might be experiencing adverse psychological reactions. In a research context that has not considered potential differences across journalistic roles in TV news, the absence of significant differences between camera operators and other news workers, such as reporters, is an important contribution. Research in this area posits reporters as an at-risk population and worthy of increased industry support and further research. Hence, the findings of Studies 1 and 2, which indicate that camera operators and other news workers have comparable levels of trauma exposure and
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trauma reactions, makes camera operators a noteworthy population by association. This means that camera operators are equally as deserving of acknowledgement in terms of the potential psychological risks and implications of their work, along with the accompanying support and research interest.

The quantitative findings that TV news camera operators and other TV news workers experience equivalent levels of trauma exposure and trauma reaction symptoms are also important when considered in light of the qualitative findings reported in this thesis. The qualitative findings indicate that TV news workers hold pervasive perceptions of clear differences existing between the roles of camera operators and reporters. Even in the absence of quantitative trauma exposure and reaction differences between roles, these perceptions are still capable of adversely impacting the well-being of TV news camera operators.

In considering the findings and conclusions drawn within the present research, there are some caveats to acknowledge. In any trauma research, self-report responses raise concerns regarding the ability of participants to accurately recall the kinds of PTEs they have been exposed to, as well as their frequency of exposure over a particular period of time. Similarly, there are concerns of response bias to trauma reaction scales, and the lack of a standardised time and location in which participants completed the measures. The scales adopted within the present study were chosen because they have been widely used within psychology research and demonstrated strong psychometric properties in previous research, as well as in this research. Beyond selecting well-established and reliable measures, future research in the area of TV news workers’ trauma exposure and reactions might consider adopting a range of complementary
research methods and data that could be triangulated, possibly including diagnostic interviews, medical history, and/or experience-sampling methods.

Other potential limitations of the questionnaire study relate to the sample recruited. Originally, the research plan was to recruit approximately 200 camera operators and 200 reporters from TV news stations worldwide. However, the final sample included 134 participants, the majority of which were from Australia and performed camera operations duties as part of their role. Due to the constant time constraints on individual news workers, as well as the decision of some news organisations not to promote this research amongst their staff, the researchers’ access to the research population was limited. In an attempt to increase participant numbers, the author (1) primed recruitment as much as was ethical and plausible, (2) left the online questionnaire open for completion for as long as possible (the survey was accessible between June 2015 and March 2016), and (3) incorporated into the research plan a considerable period of time for rapport building with key stakeholders in the recruitment phase. A key subsidiary finding of the present thesis is that participant recruitment for quantitative research with this population group is challenging and time consuming.

The group sizes for role comparisons were small, and hence limited the ability to perform further analyses, such as multiple regression, to develop a predictive model of factors associated with trauma reactions in TV news camera operators. The likelihood of a Type 2 error increases with small sample sizes (< 20), as a result of insufficient power (Pallant, 2007). One recommended method of addressing this issue is to adjust the alpha level to .10 (Pallant, 2007). However, applying this less stringent alpha level (1) would impact the interpretation of only one of the reported tests (the correlation
between the total PTSD scores of the camera-operation only group and the no camera-operation group; $r = -.51, n = 15, p = .05$), and (2) would fail to take in to account the need for a more stringent alpha because of multiple comparisons being performed. The likelihood of Type 2 error was also increased in this study as a result of insufficient power associated with mean comparisons conducted where one or more of the groups is too small to apply an alpha of .05. The increased risk of Type 2 error may mean that significant differences exist across the groups, but the present study was unable to detect those differences. However, the overall sample was large and in line with previous research using online survey methods to measure trauma exposure and reactions amongst journalist samples.33

There may also be issues of ecological validity when categorising TV news workers based on role. The qualitative data reported in this thesis suggests that in some areas (such as in small news organisations) the journalism industry might be moving away from role specialisation. Finally, in relation to the manner in which the variables have been used in analysis, grouping participant scores into clinical categories suggests that each discrete category is meaningfully different. This also suggests a meaningful difference between the highest score in one category and the lowest score in the adjacent category, even where the actual difference in scores is small. However, continuous analysis of such variables has the converse limitation of assuming meaningful difference between each interval on the scale. Both approaches have been adopted where appropriate within the present study, and so these points should be kept in mind when considering the reported findings and their practical application. A final consideration is that all participants interviewed in Phase B of the research that met the

33 Each systematic literature review chapter in Phase A contains a table displaying the sample sizes that were used in previous research.
eligibility criteria, indicated that they had completed the online questionnaire in Phase C, or would go on to do so. Due to the anonymous nature of the questionnaire, it cannot be established how many of those interviewed completed the questionnaire. If all eligible interviewees did go to complete the survey, they would have accounted for a small number of the overall sample and so the variation in responses would be large.

This chapter has provided a number of valuable contributions that have added to our developing understanding of trauma exposure and reactions within the context of journalistic work. One such contribution has been the combined use of measures assessing symptoms of PTSD and depression, anxiety, and stress. Doing so has provided a broader understanding of the kinds of trauma reactions that are apparent within the sample. Extending upon this point, this research has been the first application of the DASS within research spanning the nexus of journalism and psychology. The benefits of adopting the DASS include: (1) its empirically validated clinical categories, (2) the accessibility to normative data and clinical studies that have used the DASS—increasing the ability to contextualise findings within the broader trauma research, (3) that it is freely accessible, and (4) the ability to administer the DASS is not contingent on professional registration (e.g., registration as a psychologist). This research has also presented an assessment of the relative severity of symptoms in this sample compared to clinical and non-clinical samples. Finally, and most central to the purpose of this thesis, this study is the first to consider the trauma exposure and reactions of TV news camera operators, as a unique role group within the journalism industry, who experience elevated levels of personal and work-related trauma exposure, as well as clinically significant trauma reactions.
Chapter 8. General discussion and conclusion

8.1. Introduction

Considered in isolation, each of the findings chapters within this thesis contributes to an understanding of the research problem from a specific methodological approach, and presents conclusions and unique implications. The intended outcome of this chapter is a coherent proposed solution to the research problem and aims outlined in the introductory chapter, which is achievable only by applying diverse methods and considering how the qualitative and quantitative findings combine to depict a richer, more informed, and nuanced account of trauma exposure, and the psychological implications for TV news camera operators. Each of the chapters constituting the research Phases A–C (Chapters 2–7) provides its own important contributions to research and for news practice settings. Rather than restating those contributions in this chapter, a summary for each research phase can be located in Appendices 8.1–8.3. This chapter includes an overview of key findings and a discussion of the implications of the research.

8.2. Primary findings

8.2.1. Existing trauma research amongst journalist samples

8.2.1.1. Summary of key findings

Phase A consisted of a series of systematic literature reviews (SLRs) developed in order to address the first research aim. During the development phase of this research, a preliminary assessment of the empirical literature spanning the nexus of TV news work and psychology was undertaken. This initial review suggested that there had previously
been no research considering the specific psychological implications for TV news camera operators. The findings of the SLRs that constitute Phase A confirmed the preliminary finding that camera operators have been grouped with other journalistic roles in previous research, but have not been researched individually. To inform the interview and questionnaire studies (Phases B and C), in the absence of camera operator specific literature, the SLR included research articles that had recruited general journalist samples.

In conducting the SLR study, it became apparent that research concerning the psychological implications of journalistic work has focused on three constructs: trauma exposure, trauma reactions, and mood disorders. Together the reviews constitute a comprehensive synthesis of the available quantitative research relating to the psychological implications of journalistic work. The following subsections contain the key findings identified through the SLR process for each of the three constructs; the final subsection highlights the implications of the findings reported in Phase A.

**Journalists and trauma exposure**

Trauma exposure in journalists has been studied in a range of countries and across a range of media outlets. This trauma exposure can be conceptualised as either work-related or personal. Additionally, journalists experience stalking victimisation, which spans both the work-related and personal categories of trauma exposure. Journalists were found to have work-related exposure prevalence rates as high as 95% and personal exposure prevalence rates as high as 90%, these figures exceed rates of exposure reported in general population studies. Some studies focusing on journalists’ exposure have not measured personal and work-related exposure discretely, or have not measured personal exposure at all. In such cases it is difficult to assess the source of the majority
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of exposure. This is a considerable theoretical shortcoming since research has shown prior personal life exposure to trauma to be a greater predictor of negative trauma reactions than work-related exposure.

**Journalists and trauma reactions**

The broader trauma research literature indicated that individuals exposed to PTEs might develop symptoms associated with a range of trauma- and stressor-related disorders and anxiety disorders. However, only symptoms of PTSD have been considered in journalist samples. A preliminary profile of the kind of journalist most likely to be at risk of experiencing PTSD symptoms was constructed. Journalists most at risk tend to be female, older, with lower levels of education, more years of experience in the journalism industry, and greater exposure to work-related and personal PTEs, with lower levels of social support and sense of coherence, and increased levels of neuroticism and guilt cognitions.

**Journalists and mood disorders**

The broader trauma research literature indicated that individuals exposed to PTEs might develop symptoms associated with a range of mood disorders. The findings of this study indicate that depression has been the only mood disorder considered amongst journalist samples to date; moreover, the research on this construct requires considerable development in future research, because its focus has been on depressive symptoms, as opposed to prevalence, or experiences of major depressive disorder (MDD) or persistent depressive disorder. A preliminary profile of the kind of journalist most likely to be at risk of experiencing depressive symptoms was constructed. Journalists most at risk have increased exposure to work-related and personal PTEs, have experienced threats to themselves or their family, and have lower levels of family and peer support, social acknowledgement, and education.
8.2.1.2. Implications of the findings

This series of SLRs has synthesised the existing knowledge base concerning the psychological implications of journalistic work, and can be used as a comprehensive reference by future researchers and individuals working within the journalism industry to inform their work. It has also raised issues and identified a number of future directions in terms of methodology and theory. Each chapter detailing the SLRs includes an in-depth discussion of the findings and the potential implications. Hence, this section will outline a number of the general implications and future directions that were common throughout the SLRs conducted in Phase A.

1. TV news camera operators have not been the specific subjects of psychological research.

Central to the present thesis, the findings of the SLRs confirm that camera operators have not been the subject of specific research, despite the potential for increased trauma exposure and reactions in this group as a result of their role requirements. Those research areas where role differences have been considered, such as in the areas of burnout (MacDonald, Saliba, Hodgins, & Ovington, 2016) and substance use (MacDonald, Saliba, & Hodgins, 2016), have found notable differences, but have not considered camera operators. This thesis has explored camera operators in relation to other TV news workers; however, future research is needed. Recommendations regarding further research relating to the psychological well-being of camera operators are provided in Section 8.2.4, in light of the interview and questionnaire findings.
2. Profiles suggesting individuals most at risk of developing adverse psychological symptoms.

For some of the SLRs in Phase A, a profile has been provided to suggest those individuals who might be most at-risk. Such profiles provide an indication of the potential layering of trauma risk: an individual experiencing many of the factors associated with increased symptoms might be more likely than those who are not experiencing multiple factors to develop a psychological disorder. Hence, such profiles have theoretical relevance because they highlight factors to consider, and control for, in future research. However, these profiles are not intended to suggest practical implications for recruitment within news organisations. For example, it would be inappropriate and detrimental to a recruiting organisation to overlook female news workers because they tend to report more symptoms associated with PTSD than their male counterparts. The factors outlined are associated with increased symptoms, meaning a causal relationship is not implied. Additionally, the research focus in each case is sufficiently narrow that it is unclear what occupational strengths and psychological resilience an individual, potentially at risk of PTSD symptoms according to the provided profile, would bring to the role. Rather, this information should be used to provide appropriate support in relation to factors that can be effectively and appropriately influenced by news organisations to reduce overall levels of PTSD symptoms, such as the extent to which innovation and autonomy are promoted within the organisation, or ensuring that staff exposed to stressful stimuli, or who are otherwise having a difficult time, feel supported in the workplace.
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3. Areas that are relatively under-researched in terms of journalists’ exposure and reactions to trauma.

Such areas are likely to contribute to a more holistic understanding of the complex nature of trauma exposure and the psychological well-being of journalists. This SLR suggests that the following may be fruitful areas for further consideration:

- Comparing regional to metropolitan-based news workers;
- Alternative trajectories of trauma reactions, factors associated with resilience, and the perceived positive implications of journalistic work;
- PTEs that may be experienced in a unique way by journalists, such as stalking victimisation;
- Mood disorders, beyond measuring symptoms of depression;
- Trauma- and stressor-related disorders, and anxiety disorders, beyond measuring symptoms of PTSD;
- Personal exposure to trauma should always be measured alongside work-related exposure. Additionally, there is no apparent reason why journalists should experience elevated rates of personal exposure to trauma. Future research might consider whether this is a methodological issue, in that journalists may not readily distinguish between personal and work-related exposure in the same way that researchers do. Alternatively, it may be that journalists tend to be individuals who experience greater levels of personal trauma exposure than others, which then motivates them to join the journalism profession. Another potential explanation may be that fieldwork in journalism requires more travel and exposure to a variety of individuals and
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environments, potentially increasing the chance for negative life experiences while not working.

4. Methods to increase the overall quality and theoretical contribution of reported findings.

The overall quality and theoretical contribution of reported findings could be improved in future research by careful consideration of:

4.1. Standardised statistical reporting conventions—this includes considering previous approaches to reporting, and how data will be reported in any future research output. Specific attention should be paid to the following: descriptive statistics, prevalence rates, proportions of the sample in each cut-off category, and narrative descriptions of endorsed items.

4.2. Whether to adopt an established scale or develop new questions to assess a psychological construct—in this case, attention should be given to: whether a scale is journalist specific or general, what time periods will be used, what cut-offs will be applied and how they are justified within the context of the study, and whether recall or recognition responses are required.

4.3. How the findings of a new study can be contextualised in a meaningful way—this involves using theory and previous research as the foundation for future research, and comparing the research outcomes with those reported elsewhere in journalist and non-journalist samples. Useful comparative samples may include other high-stress or trauma-exposed occupational groups, normative population samples, and clinical samples.
5. Limitations associated with research methods typically implemented in the area of trauma exposure and reactions in journalist samples, and potential alternatives. Research in this area has tended to focus on online survey methods. Whilst such methods have produced useful findings, there remains the issue of participant recall of PTE experiences and symptoms over a period of time, as well as the capacity to determine the proportion of a sample experiencing a diagnosable disorder. Research including diagnostic interviews, longitudinal designs, or experience-sampling methods is likely to produce complementary information to enhance the overall understanding of the psychological well-being of journalists, while reducing potential methodological limitations associated with survey methods. Another limitation is that research in this area has been most commonly conducted in newspaper settings and is most likely to represent male journalists.

8.2.2. The kinds of work-related PTEs to which camera operators and other news workers are exposed.

8.2.2.1. Summary of key findings

The findings of this thesis indicate that the work-related trauma exposure of TV news camera operators and other TV news workers is complex and layered in nature. Typically, when journalistic exposure to PTEs is considered, the focus is on bearing witness to the aftermath of an event, hence news worker exposure to potentially stressful stimuli is often considered to be secondary. Such perceptions minimise the possible psychological impact of news work. However, as the trauma exposure review, the interview study, and the online survey findings demonstrate (Chapters 2, 5, and 7), there are many instances in which TV news workers experience firsthand exposure to PTEs. Previous research in this area also suggests that news worker exposure to PTEs is
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impersonal and short-lived. Nevertheless, the present findings indicate that news workers can experience involvement in a story as it unfolds over a long period of time. Additionally, the process of seeking out and engaging bereaved individuals is, in itself, a PTE for news workers because of the risk of causing distress in the people they interview. When these points are considered together, it becomes apparent that TV news workers’ exposure to trauma is complex, incorporating a mix of first-hand, indirect, and vicarious aspects.

Considering the findings of the interview and questionnaire studies in conjunction is beneficial, as together they provide a more holistic understanding of the kinds of PTEs news workers are exposed to. The questionnaire study has provided an indication of the proportions of news journalists who have experienced each type of work-related PTE on an established trauma exposure scale. A wide range of trauma exposure experiences were endorsed across the sample, and prevalence rates of exposure were higher in the present study than has been reported in previous research. The most commonly experienced kinds of work-related PTEs were: exposure to injured/dead children, fire, motor vehicle accidents, and murder. These findings are consistent with those reported by participants in the interview study, and are useful because they have allowed for comparisons to other journalist and general population samples, and provide an indication of how common each kind of PTE is across the sample.

Whereas, the interview findings provide detailed contextual information relating to trauma exposure in news workers, including an exploration of how experiencing one kind of PTE may be similar or dissimilar to covering another kind of PTE—even when both kinds are considered distressing and are experienced frequently. The kinds of PTEs experienced by the camera operators and reporters interviewed (explored in Chapter 5)
could broadly be classified into one or more of the following themes: accidental or other death related events, direct involvement in events, man-made violence, medical events, natural disasters, and transport related accidents. Participants indicated that they are most likely to be exposed to man-made violence and car accidents. The events reported to be the most distressing included car accidents, harm to colleagues, and harm to children.

8.2.2.2. Implications of the findings

A number of key findings have been discussed in Chapters 5 and 7, relating to TV news worker trauma exposure and the associated implications. In this section, two key implications are presented:

1. Areas relatively under-researched in terms of TV news workers’ exposure to trauma.

The findings point to a number of PTEs that TV news workers are exposed to and are impactful, but have either not been considered in the largely quantitative literature, or have been under-researched, such as:

- Covering stories of suicide
- Death knocks
- Harm to a colleague
- Harm to children
- Medical events.

Researchers in this area might consider including items related to these kinds of experiences in their quantitative work to establish how common these
kinds of PTE exposures are, and whether exposure to these kinds of events is associated with an increase in reported trauma reaction symptoms. A foreseeable challenge in this area of research is balancing the desire to use generalisable measures with the need to perform research that highlights and explains trauma exposure factors unique to this occupational group. News organisations might also consider whether the coverage of such events requires tailored policies and procedures to minimise potential adverse reactions amongst staff.

2. Adopting methods that more accurately reflect the complex and layered nature of trauma exposure in TV news workers.

Current research in the area of trauma exposure and reactions in journalist samples has understandably favoured the use of online survey methods, as journalists tend to be a time poor and highly mobile population, making other research methods difficult to implement. Other benefits of online survey methods are the ability to sample a large number of participants at relatively low costs and in relatively little time. They also allow anonymity to participants who may otherwise feel uncomfortable reporting their trauma exposures and reactions. Because of such factors, and also because we have known little about basic levels of trauma exposure and reactions amongst journalist samples until recently, the adoption of online survey methods was highly appropriate and advantageous.

However, online survey methods do not adequately reflect the complex layering of potential trauma experienced by TV news workers. Therefore, the next generation of trauma exposure and reactions research in journalist samples might benefit from adopting research methods such as experience-sampling method, in
which participants frequently indicate their rate of exposure to various kinds of PTEs, complete trauma reaction scales, and have the opportunity to provide qualitative data about their exposure experiences (with or without specific prompts). This kind of method is advantageous, with its ability to minimise the limitations associated with participant recall of PTE exposure and trauma reaction symptoms over a period of time. It also has the potential to provide insights relating to the varying nature of trauma exposure, and factors associated with negative trauma reactions that may currently be unidentified or under-researched.

8.2.3. Factors associated with greater psychological distress in camera operators and other news workers

8.2.3.1. Summary of key findings

The findings indicated a number of factors that participants believed made a PTE impactful. The most central of these factors included the individual news worker’s ability to relate to the circumstances of the PTE, and to subsequently imagine being subjected to the same violence or tragedy. The ability to relate to a PTE sometimes hinged on personal circumstances, such as the age or gender of a victim, having children of one’s own when covering stories of harm to children, or having a colleague harmed. Participants found it more personally threatening when covering stories in which the negative consequences seemed to be indiscriminate and could not be attributed to any fault of the victim(s). These kinds of events reduce the news worker’s perception of separation from the trauma they cover, and typically result in increased anxiety relating to their own mortality and the safety of those they care about. Reactions to such events appear to be particularly pervasive because they are more likely than other kinds of events to threaten participants’ fundamental attitudes and world beliefs.
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Other factors contributing to how impactful a PTE is on an individual news worker include: (1) their level of preparedness, both in relation to the specifics of the story and training in managing stressful situations, (2) arriving on-scene before emergency personnel have the situation under control and have minimised access to traumatic stimuli, (3) performing tasks that conflict with their moral code or that seem to be only for the benefit of network ratings, (4) experiencing a personal sense of conflict in finding PTEs exciting or interesting, (5) perceptions of senselessness or meaningfulness in the actions of others that result in avoidable tragedy, and (6) events which are simultaneously visually striking and the news worker is frequently reminded of them, such as car accidents. Conversely, participants found it is easier to manage PTEs in which negative evaluations or mistreatment of them by other people could be externally attributed, as opposed to being the result of some immoral or unprofessional action they have performed.

8.2.3.2. Implications of the findings

Based on the findings of this thesis (Chapters 5 and 7), the following suggestions are made for future news organisation practice and further research:

1. Practice and support within TV news organisations and training institutions.

The findings highlight a number of PTEs TV news workers are commonly exposed to, as well as a range of factors that are associated with increased distress. These findings can be used to inform practices within news organisations, as well as in training institutions whose graduates are likely to seek employment in the journalism industry. Given that previous exposure to trauma is a well-established predictor of distress after subsequent trauma exposure, it seems apparent that many individuals considering a career in TV news would benefit from a realistic
understanding of the nature of the PTEs they are likely to be exposed to, so that they might make an informed decision as to whether it will be a good fit for them.

Similarly, TV news organisations might consider how to:

• Increase their staffs’ sense of preparedness for covering various kinds of PTEs, especially PTEs that this research indicates are the most distressing for TV news workers, which include car accidents, harm to colleagues, and harm to children. This might also include training in how to work with individuals who are distressed or experiencing grief;

• Reduce the likelihood of staff arriving on the scene of a traumatic event before emergency personnel have the situation under control and have minimised the access to traumatic stimuli. This is particularly pertinent considering (1) the distress such exposure can cause, and (2) the fact that much of the graphic and confronting footage and details which could be obtained at this early stage are unlikely to be aired on TV;

• Foster and prioritise a sense of ethical integrity above network ratings and competition to provide staff with the peace of mind that their work is based around tenets of sound journalistic practice, and hence reduce the sense of guilt or distress when covering disasters or tragedy.

2. Further exploration of the relationship between gender and trauma reactions in TV news workers.

Broader trauma research, and some research with journalist samples, suggests gender differences in trauma reactions. The absence of significant differences
between female and male participants in this research, and in previous studies, could be the result of a range of factors. First, quantitative research in the area of journalists’ psychological well-being has typically used male majority samples; this point is discussed in detail by MacDonald, Saliba, Hodgins, and Ovington (2016). Second, it could be the case that TV news worker populations are comparatively more homogenous, and so gender differences are not as prominent. Third, randomised and stratified sampling methods are increasingly difficult with journalistic samples, hence there may be a sampling bias in the types of male and female participants recruited. Finally, it may be that personal exposure to trauma is more gendered than work-related exposure, resulting in reduced differences between male and female journalists. However, participants in this research reported greater rates of personal exposure than is typically reported in the general population, which might be expected to maintain gender differences in trauma reactions despite work-related trauma being potentially constant across males and females.

Considering the above points, there are grounds to support further research into the relationship between gender and trauma reactions in TV news workers. Additionally, the findings discussed in the following section (Section 8.2.4) indicate the presence of qualitative differences in trauma experiences across two groups, even in the absence of statistically significant quantitative differences on trauma reaction scales. These experiential differences revolve around the nature of trauma exposure and industry culture differences between the two groups. It seems appropriate then to suggest future mixed-methods research considering gender differences in the experiences of trauma exposure, organisational culture, and trauma reactions. It may be that males and females experience equivalent
levels of symptomology, but have quite unique experiences of trauma and organisational support. Broader psychological research suggests gender differences in help-seeking (Nam et al., 2010) and coping styles (Kelly, Tyrka, Price, & Carpenter, 2008; Matud, 2004). These are likely to be fruitful lines of inquiry with the potential to better inform post-trauma support tailored to male and female TV news workers, respectively.

3. Further exploration of TV news workers’ world assumptions.

The findings indicate that participants found PTEs more distressing if they cause the individual to question their basic assumptions of personal safety, or when events appear to be indiscriminate and cannot be attributed to any fault of the victim(s). These findings provide support for the assessment of TV news workers’ world assumptions and how these relate to trauma exposure and reactions. Only one study has considered journalists’ world assumptions, and the findings indicated “journalists with negative cognitive assumptions evidenced more work-related PTSD symptoms” (Pyevich, Newman, & Daleiden, 2003). However, this research was conducted with only newspaper reporters.

8.2.4. Role differences in trauma exposure and reactions between camera operators and other news workers.

8.2.4.1. Summary of key findings

The current thesis found that camera operators are not only exposed to as many PTEs as other news workers, they also experience elevated levels of psychological distress equivalent to those of other news workers. The findings suggest that a high
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proportion of professionals currently working in the TV news industry could exceed clinical cut-offs for PTSD: the levels reported in this thesis were much higher than for the general population, and as high as some occupational groups generally considered high risk. Previous research concerning trauma exposure and reactions in journalist samples has tended to predominantly sample individuals working within a reporting capacity. Additionally, this previous research has (1) firmly established journalism, and news production more specifically, as an occupational setting involving high levels of trauma exposure and adverse psychological implications, and (2) contributed to industry changes aimed at supporting staffers who might be experiencing adverse psychological reactions. In a research context that has not considered potential differences across journalistic roles in TV news, the absence of significant differences in levels of trauma exposure and trauma reaction symptoms between camera operators and other news workers, such as reporters, is an important contribution.

Despite the questionnaire study indicating no significant differences in the levels of trauma exposure and symptomology between camera operators and other news workers, the interview study has shown that the ways in which camera operators are exposed to trauma, and their organisational experiences, are different to those of other news workers. First, camera operators experience what is referred to in the present study as the viewfinder effect, a seemingly unconscious perceptual mechanism serving to separate them in some sense from the reality of what they are filming, and ultimately reducing their potential psychological distress. The author has tentatively linked the viewfinder effect to biological and sensory/perceptual research and theory (specifically visual and emotional lateralisation) in order to propose potential contributing factors at play when TV news camera operators experience this phenomenon. It is argued that the biological and sensory/perceptual distinction between the left and right eye when
exposed to threatening stimuli may be a contributing factor when camera operators experience the viewfinder effect. Camera operators are consciously aware of what they are shooting as they perceive it through their right eye, but are not attributing an emotional value to these stimuli because the left eye is closed. As such, they are not emotionally impacted by the event until required to put their camera down and view the event or their footage with both eyes simultaneously.

Second, the findings suggest that there is a hierarchy within TV news organisations that has important implications for the social dynamics of news workers, and in particular, the psychological well-being of camera operators. The consequence is a pervasive sense of disharmony, disunity, and fracturing of the news team based on role. Camera operators often feel they have less status and power compared to reporters, who they frequently view as the talent or in charge. The differences between camera operators and reporters in terms of trauma exposure, discussed below, appear to be rooted in these organisational hierarchy differences.

Finally, there are important differences between roles in terms of social visibility that have both physical and psychological risk implications. Camera operators are more likely than reporters to go into the field alone, to get closer to traumatic stimuli, and to be exposed to traumatic stimuli for longer. Camera operators are also more likely than reporters to find themselves personally injected into traumatic scenes. There appears to be a fundamental paradox in the social visibility of camera operators; whilst they are seemingly more conspicuous in the field as a result of their equipment (hence at greater risk), they are almost entirely socially invisible to news viewers because they are behind the camera and therefore not perceived as present in news segments. They are also
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socially invisible to management and policy makers as a result of the various organisational factors explored.

8.2.4.2. Implications of the findings

This section suggests a number of organisational practice and research implications, based on the findings regarding role differences in trauma exposure and reactions, between camera operators and other news workers:

1. Highlighting TV news camera operators as an at-risk group in terms of trauma exposure and reactions.

The findings of this thesis have served to raise the status of psychological implications of journalistic work for camera operators. Research into trauma exposure and reactions in journalist samples posits that reporters are an at-risk population and worthy of increased industry support and further research. Hence, the findings of the questionnaire study—which indicate that camera operators and other TV news workers have comparable levels of trauma exposure and trauma reactions—makes camera operators a noteworthy population by association. This means that camera operators are equally as deserving of acknowledgement of the potential psychological risks and implications of their work, as well as the accompanying support and research interest. This finding is likely to challenge commonly held attitudes within some TV news industry members, which situate camera operators as passive in the news production process, and hence unaffected by their work relative to reporters.
2. The trauma exposure and organisational experiences of camera operators and reporters may be fundamentally different, and require further consideration.

The qualitative findings reported in this thesis clearly highlight a myriad of ways in which the trauma-related and organisational experiences of camera operators and reporters may be fundamentally different. The experiential differences in trauma exposure and organisational hierarchy may result in other emotional and behavioural outcomes, which could have adverse implications for individuals and organisations alike. Future research might consider differences between camera operators and other news workers in a range of factors likely to be associated with trauma exposure, and further complicated by the level of perceived organisational support or status within the perceived organisational hierarchy, such as:

- Job commitment
- Job satisfaction
- Burnout symptoms
- Staff turnover
- Sick leave
- Coping strategies, including substance use
- Help-seeking behaviours, including accessing support services offered within and outside of the employing organisation.

3. Avenues for organisational change in an effort to reduce the adverse psychological implications for camera operators.
Camera operators and other TV news workers experience equivalent levels of trauma reactions, levels that can be categorised as at-risk. However, their experiences of trauma exposure and perceived status within the news organisation are different, hence they are likely to require differing interventions and support in order to reduce the negative impact of their work. News organisations may consider the following suggestions as means of reducing post-trauma symptomology, and increased perceived support amongst camera operators:

- The findings indicate that the psychological well-being of TV new workers could be enhanced by allowing them to work within a team, as opposed to covering PTEs alone. Using a team to cover a story might have greater financial costs; however, organisations should be aware of the potential risks involved in using single-person crews and consider whether it is more appropriate, and cost-effective in the long term, to avoid sending single-person crews out to cover certain events, especially those events that have been noted as the most distressing. Alternatively, it may be necessary to rotate staff more frequently to ensure that one individual is not constantly exposed to the most distressing events. Future research might also explore the functional role of crew relationships in terms of trauma exposure and reactions;

- Ensure equal access to support services between camera operators and other staff. Many news organisations already offer counselling or access to support services for their staff. Any promotion, or in-house discussions, of such services should be carefully considered, and tailored so as to appear appropriate for staff in various roles. Some organisations have implemented peer-support programs for staff. The findings of this research suggest that
because of the industry culture differences across role groups, camera operators are most likely to access this kind of support program if the peers offering support are also camera operators;

- Consider ways of facilitating a collective newsroom environment that is inclusive to staff of all roles. This could include changes in (1) the physical layout of the newsroom, (2) organisational norms and procedures, (3) the frequency of team meetings, (4) the extent to which the distinctive training and strengths of staff from various roles is drawn upon, with a focus on collaborative news production. Greater exposure to colleagues of other roles is likely to foster increased appreciation of the unique skills of others, as well as appreciation of shared experiences. This kind of exposure and understanding is likely to result in increased sense of camaraderie and perceived support amongst the news crew, which is associated with greater post-trauma resilience;

- Encourage news crewmembers to share all information they have about a story before any one person or crew is sent into the field. The findings suggest that information is perceived as power, and that preparedness is associated with reduced stress levels when covering a PTE.

5. Further exploration of the protective function, and limitations, of the viewfinder effect.

The findings of the interview study suggest that the viewfinder effect serves to separate camera operators from the reality of what they are filming, and ultimately reduces their potential psychological distress. However, further research is
required to gain a better understanding of the underlying mechanisms, protective function, individual psychological and social implications, and limitations of this phenomenon:

- This research proposes that greater theoretical emphasis, in terms of understanding camera operators trauma exposure and reactions, should be placed on the perceptual experience of viewing trauma through one eye, as well as the biological and sensory/perceptual mechanisms associated with this process. However, this suggested explanation requires experimental testing, which is likely to involve a considerable amount of careful planning and ingenuity, as there are apparent ethical dilemmas associated with experimentally testing perceptual variations in exposure to potentially traumatic stimuli;

- Some participants indicated that it is not until they review their footage later that they become conscious of just how shocking or stressful the PTE they covered was. This raises questions for further consideration regarding how to minimise the potential adverse reactions individuals might have from trauma exposure through visual media within the newsroom. This is not only an issue for camera operators editing their own footage, but also for staff that perform only an editing role within the news production team. The potential for adverse reactions in this latter group may be heightened given their reduced context and preparedness for what they might be exposed to;

- Participants indicated that the protective function of the viewfinder effect is inaccessible when they are required to put the camera down and so find themselves experiencing emotional reactions that they would not if looking through their viewfinder. A likely contributor to the increased sense of
discomfort relates to social roles. Keats (2010) suggests that the camera is symbolic, in that it designates the reason for the photojournalist to be present at the time of tragedy or disaster. Once the camera operator puts down the camera, their sense of justification and legitimacy for being present at the time of the tragedy or disaster is compromised, and they may feel an increased sense of their actions as intrusive as they are no longer performing a professional role. This is particularly interesting given some of the ethical issues raised by participants in the interview study—not wanting to be intrusive or cause distress to the people they cover in a story. Similarly, some participants indicated a sense of personal moral conflict because they find coverage of some PTEs to be exciting, at times indicating that they fear they may have a personality flaw. However, it may be that the viewfinder effect removes the emotional valence of the story, but camera operators still experience the adrenaline and excitement of covering the event. Future research might consider the potential interplay between the viewfinder effect, social roles, and morality amongst TV news camera operators.

8.3. Conclusion

This thesis aimed to explore the specific psychological implications for camera operators within the TV news industry as a result of their exposure to PTEs. Previous research covering the nexus of journalism practice and psychology has indicated that ongoing exposure to PTEs as part of the journalists’ role can result in psychopathology (Simpson & Boggs, 1999; Weidmann & Papsdorf, 2010), as well as other psychological consequences such as altered world assumptions (Pyevich et al., 2003). However, empirical research in the area has tended to take a one-size-fits-all approach by
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exploring psychological implications in convenience samples comprising individuals from a wide variety of journalistic roles. Hence, prior to this thesis, there was no empirical literature concerning trauma exposure and reactions amongst TV news camera operators. This is problematic because the role of camera operators within broadcast news is fundamentally different to other journalistic roles. Further, Newman, Shapiro, and Nelson (2012) suggested a need to go beyond the assessment of symptomology and prevalence of psychopathology by incorporating an exploration of individual’s attitudes and responses.

In order to address this research problem, a pragmatist approach was adopted, and a sequential between-strategies mixed-methods design implemented (Tashakkori & Teddlie, 2009). Three studies were conducted in total and are presented within this thesis in separate phases. Phase A provided a series of concise, comprehensive, and systematic literature reviews of the quantitative literature relating to the psychological implications of journalistic work. The findings of Phase A confirmed that no previous empirical research had considered trauma exposure or psychological well-being amongst TV news camera operators as a unique group. The psychometric scales used in Phase C of this research demonstrated no significant differences in trauma reactions between camera operators and other news workers; namely, symptoms of PTSD, depression, anxiety, and stress. However, the qualitative findings of Phase B clearly highlighted a myriad of ways in which the trauma-related and organisational experiences of camera operators and reporters may be fundamentally different. In combination, the quantitative and qualitative findings provide a greater overall understanding, and offer insights regarding the experience of trauma exposure and reactions amongst those working within the TV news industry. In this way, the findings are of considerable benefit to practice and research within the journalism industry. Had
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only the questionnaire study been implemented, it may have been concluded that the trauma exposure and reactions amongst camera operators is equivalent to that of other news workers, and hence the nuanced differences in trauma exposure and organisational hierarchy would have gone unexplored.

These findings and conclusions constitute a new perspective for future psychological practice and research within journalistic settings. This thesis has outlined a number of research implications and suggestions for future lines of research enquiry. Most importantly, this research has endeavoured to shed light on a group of news workers who have previously been socially invisible to the broader public, and as this research suggests, perhaps they have also gone relatively unrecognised within their professional industry as well. Camera operators and other TV news workers have comparable levels of trauma exposure and trauma reactions. Hence, camera operators are equally as deserving of acknowledgement in terms of the potential psychological risks and implications of their work. However, psychological research and support inside news organisations should be tailored to accommodate the differences inherent to the unique roles within the news crew. News consumers worldwide depend on the visual content produced by TV news camera operators to make assessments and inform their decisions on a range of contemporary issues. Considering that camera operators play this critical social role, they deserve visible status and ongoing attention to their unique trauma exposure, as well as consideration of the potential psychological and social implications for them and their families.
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Appendices

Appendix A.1. Table of data extraction categories

<table>
<thead>
<tr>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Title of article</td>
</tr>
<tr>
<td>• Reference</td>
</tr>
<tr>
<td>• Published in</td>
</tr>
<tr>
<td>• Author(s) location</td>
</tr>
<tr>
<td>• Funding body</td>
</tr>
<tr>
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</tr>
<tr>
<td>• Dependent variables</td>
</tr>
<tr>
<td>- Construct</td>
</tr>
<tr>
<td>- Definition</td>
</tr>
<tr>
<td>- Measure/tool used</td>
</tr>
<tr>
<td>Psychometrics</td>
</tr>
<tr>
<td>• Independent variables</td>
</tr>
<tr>
<td>- Construct</td>
</tr>
<tr>
<td>- Definition</td>
</tr>
<tr>
<td>- Measure/tool used</td>
</tr>
<tr>
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<tr>
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</tr>
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</tr>
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</tr>
<tr>
<td>• Source type</td>
</tr>
<tr>
<td>• Author(s) affiliation</td>
</tr>
<tr>
<td>• Author(s) email</td>
</tr>
<tr>
<td>• Aim and objectives</td>
</tr>
<tr>
<td>• Hypotheses</td>
</tr>
<tr>
<td>• Participants</td>
</tr>
<tr>
<td>• Roles of participants (e.g., reporter)</td>
</tr>
<tr>
<td>• Sampling method</td>
</tr>
<tr>
<td>• Media outlet (e.g., television)</td>
</tr>
<tr>
<td>• Conclusions</td>
</tr>
<tr>
<td>• Limitations</td>
</tr>
</tbody>
</table>
Appendix B.1. Example of the initial invitation to participate

Focus on Exposure
Online survey for TV news camera-operators + reporters

This research concerns TV news camera-operators and reporters’ exposure to potentially traumatic events and the associated psychological implications.

We are seeking participants for an online survey and / or interview who fulfil the following criteria:

**Survey**
- Over 18 years of age.
- Current TV news camera-operators/reporters (freelance included).
You can view more information and access the survey using the link at the bottom of the page.

**Interviews**
- Over 18 years of age.
- Current and past TV news camera-operators/reporters (freelance included).

Participants will receive a $10 incentive.

Participants will not be asked which organisation they work for.

Please feel free to forward this on to colleagues or friends you think might be interested in participating.

You can contact Jasmine with any questions or to setup an interview.
Jasmine MacDonalдж
jmacdonald@csu.edu.au
(02) 6933 4295

bit.ly/focus-on-exposure
Appendix B.2. Participant information statement

PARTICIPANT INFORMATION

Study:

A Focus on Exposure: Potentially traumatic events and the psychological implications for news camera operators, reporters, and sound recordists.

Who are we?

Charles Sturt University (CSU) was established in 1989 as a multi-campus institution and has grown into a dynamic and progressive university that is well-known for its innovative approach to education and applied research. Through our network of campuses, and in close association with industry, professions and government, CSU is committed to maintaining a course and research profile that meets the needs and supports the aspirations of our communities, and contributes to the enrichment of our regions.

Chief Investigator: Jasmine MacDonald
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(02) 6933 4295

Project Supervisors:

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(02) 6933 2306

Dr Gene Hodgins
School of Psychology, Faculty of Arts
Charles Sturt University
g hodgins@csu.edu.au
(02) 6933 2746

Invitation

You are invited to participate in a research study on TV news camera operators, sound recordists, and reporters’ exposure to potentially traumatic events and the associated psychological implications. Jasmine MacDonald from the School of Psychology at Charles Sturt University is conducting the study. This research is being conducted as part of Jasmine’s PhD studies.
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Before you decide whether or not you wish to participate in this study, it is important for you to understand why the research is being done and what it will involve. Please take the time to read the following information carefully and discuss it with others if you wish.

Why are we doing this?
The principal aim of this research project is to explore the kinds of traumatic events camera operators, sound recordists, and reporters are exposed to as a result of their work and to consider potential psychological implications. The results of the present study will be utilised to inform the journalism industry of the experiences of news camera operators, sound recordists, and reporters. This may help to identify resources and support needed, or ways to support the needs of specific news crew. The results will feature in Jasmine’s PhD thesis and may also be published within industry magazines, academic journals or conferences.

Who can participate?
We are seeking participants who fulfil the following criteria:

Survey:
• Over 18 years of age.
• Currently working as a TV news camera operator, sound recordist, or reporter (freelance included)

Interviews:
• Over 18 years of age.
• Working or previously worked as a TV news camera operator or reporter (freelance included)

What are we asking of you?
This is a two-part study, in which you can participate in an online survey and/or an interview.

The duration of the interview will be approximately 60–90 minutes. You will be asked about your experiences of potentially traumatic events at work and the psychological impact of your work. The chief investigator will conduct the interview. The interview will be audio recorded.

The survey will include sections relating to: demographics, personality type, substance use, positive outcomes of your work, previous experiences of trauma at work and in your personal life, world assumptions, and your coping style. The survey will also ask questions which are used by psychologists to assess symptoms of depression, anxiety, stress, and posttraumatic stress disorder. The survey will take approximately 15–25 minutes to complete.
Confidentiality/Privacy:
Please note that you will not be asked which news organisation you work for. The Australia Government has funded this research. The research team has no formal affiliations with the news industry.

The survey is completely anonymous and it will not be possible to identify you from your answers. Please try not to provide any identifying information when answering the open-ended questions of the survey. The interviews are not anonymous. However, only the chief investigator will know the identities of those interviewed and have access to interview participants contact details. Your contact details and interview recording/transcript will be filed separately. Any identifiable material in the interview transcripts will be changed to a pseudonym or removed.

All data collected will be stored in a locked filing cabinet or on a password protected computer with an encrypted hard-drive for the duration of the study. Information that identifies individual participants will not be published. All data will be kept for five years (as required by research protocols), after which it will be destroyed. However, non-identifiable data will be kept for later scholarly use.

Participation risks and benefits:
Some participants may find that responding to a survey or interview questions that relate to their exposure to potentially traumatic events and the associated psychological implications causes discomfort. Your participation in this research is voluntary and you can withdraw from either at any time without being subject to any penalty or discriminatory treatment. However, responses to the survey cannot be withdrawn once submitted due to the anonymous nature of the survey and interview data cannot be withdrawn once analysis and the final report are completed but individual transcripts can be destroyed and not used later if participants wish. Your well-being is the primary concern of the research team and will be put above the goals of the research project. If you are feeling distressed during or after participating in this study we encourage you to contact a support service and speak to someone. You can contact your doctor to discuss any emotional or drug related concerns you may have. Please refer to the list of community contacts at the end of this information statement if you are based in Australia.

Participants based in Australia will receive a $10 incentive as a modest form of compensation for the time and effort required to complete the survey or participate in an interview. Participants not based in Australia will be given the option to have $10 donated to charity as a modest form of compensation for the time and effort required to complete the survey or participate in an interview. Reimbursement for transport to and from interviews is also available, limited to $40 either way.

NOTE: Charles Sturt University’s Human Research Ethics Committee has approved this project. If you have any complaints or reservations about the ethical conduct of this project, you may contact the Committee through the Executive Officer:

The Executive Officer
Human Research Ethics Committee
Tel: (02) 6338 4628
Email: ethics@csu.edu.au
Any issues you raise will be treated in confidence and investigated fully and you will be informed of the outcome.

If at any time you have any questions, please do not hesitate to ask.
Appendix 7.1. Demographics sections of the online questionnaire

SECTION 1A: Demographics - Personal

1. What is your gender?
   - Male
   - Female

2. Which of the following applies to you?
   - Based in Australia
   - Not based in Australia

   (If based in Australia, directed to question 3; if not based in Australia, directed to question 5)

3. In which state is your permanent residence?
   - NSW
   - VIC
   - QLD
   - SA
   - WA
   - NT
   - ACT
   - TAS

4. What is your highest level of education obtained?
   - High school Year 10
   - High school Year 12
   - TAFE certificate or diploma
   - Bachelor’s degree
   - Postgraduate studies
   - Other (please specify) _______________________

5. What is your city of residence? ________________

   Your city of residence will not be published in any findings. It will only be used as an indication of where participants are based in terms of population sizes they are working within.

6. What is your country of residence? ________________

7. What is your highest level of education? ________________

8. What year were you born? ________________
9. What is your current marital status?

<table>
<thead>
<tr>
<th>Single</th>
</tr>
</thead>
<tbody>
<tr>
<td>In a relationship</td>
</tr>
<tr>
<td>De Facto</td>
</tr>
<tr>
<td>Married</td>
</tr>
<tr>
<td>Separated</td>
</tr>
<tr>
<td>Divorced</td>
</tr>
<tr>
<td>Widowed</td>
</tr>
</tbody>
</table>

**SECTION 1B: Demographics – Work-related**

1. Do you currently work in the television news industry as a camera-operator, reporter, or sound recordist? **YES / NO**

2. What percentage of your work is spent across these the following roles?

<table>
<thead>
<tr>
<th>Role</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Camera-operator</td>
<td></td>
</tr>
<tr>
<td>Reporter</td>
<td></td>
</tr>
<tr>
<td>Sound recordist</td>
<td></td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

3. How long have you worked in the **TV news industry**? _______ years ________ months

4. How long have you worked in the **news industry in general**? _______ years ________ months

5. Consider the previous month, how many hours a week did you work on average? ______________

6. What kind of employment status best suits your current work?

<table>
<thead>
<tr>
<th>Employment Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
</tr>
<tr>
<td>Part-time</td>
</tr>
<tr>
<td>Casual</td>
</tr>
<tr>
<td>Freelance</td>
</tr>
</tbody>
</table>

**SECTION 2: Journalists Trauma Exposure Scale (JTES)**

This section concerns the kinds of potentially traumatic events you may have been exposed to through your work.

[Items inserted here]
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SECTION 3: Traumatic Life Events Questionnaire (TLEQ)

The previous section was concerned with the kinds of potentially traumatic events you might have been exposed to through your work. This section is concerned with the potentially traumatic events you may have experienced in your personal life.

[Items inserted here]

SECTION 4: Depression, Anxiety, and Stress Scales (DASS-42)

[Items inserted here]

SECTION 5: PTSD Checklist – Civilian Version (PCL-C)

[Items inserted here]

SECTION 6:

Thank you for taking the time to participate in this survey. Your responses and your time are very valuable and appreciated. Please feel free to provide some feedback on the survey experience or any other comments below.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Appendix 7.2. Measures used in the online questionnaire

An overview of the internal reliability of the selected scales is presented in Table 7.12.

Table 7.13. Overview of internal reliability of measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>No. Items</th>
<th>Internal Reliability</th>
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</thead>
<tbody>
<tr>
<td><strong>Depression Anxiety Stress Scales</strong></td>
<td>42</td>
<td>α = .91</td>
</tr>
<tr>
<td>Depression</td>
<td>14</td>
<td>α = .91</td>
</tr>
<tr>
<td>Anxiety</td>
<td>14</td>
<td>α = .84</td>
</tr>
<tr>
<td>Stress</td>
<td>14</td>
<td>α = .90</td>
</tr>
<tr>
<td>(Lovibond &amp; Lovibond, 2004)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Journalist Trauma Exposure Scale</strong></td>
<td>23</td>
<td>α = .77</td>
</tr>
<tr>
<td>Frequency of Exposure</td>
<td>14</td>
<td>α = .77</td>
</tr>
<tr>
<td>Range of Exposure</td>
<td>14</td>
<td>α = .84</td>
</tr>
<tr>
<td>Intensity of Exposure</td>
<td>9</td>
<td>α = .63</td>
</tr>
<tr>
<td>(Pyevich, Newman, &amp; Daleiden, 2003)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PTSD Checklist – Civilian Version</strong></td>
<td>17</td>
<td>α = .91</td>
</tr>
<tr>
<td>(Backholm &amp; Björkqvist, 2010)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Traumatic Life Events Questionnaire</strong></td>
<td>16</td>
<td>Kappa &gt; .40</td>
</tr>
<tr>
<td>(Kubany et al., 2000)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Depression Anxiety Stress Scales 42 (DASS–42)**

The DASS 42 is a 42-item self-report measure of depression, anxiety, and stress symptoms, with 14 items in each subscale (Lovibond & Lovibond, 2004). Participants respond to various first person statements on a four-point Likert scale: 0 = Did not apply to me at all, 1 = Applied to me to some degree, or some of the time, 2 = Applied to me to a considerable degree, or a good part of the time, and 3 = Applied to me very much, or most of the time (Lovibond & Lovibond, 2004). The higher a
participant’s score the more likely they are experiencing psychological distress. As such, in some instances it is useful to combine participant scores for the three subscales to provide an overall index of general psychological distress (GPD; Crawford, Cayley, Lovibond, Wilson, & Hartley, 2011). Lovibond and Lovibond also provided cut-off scores, allowing for classification as normal, mild, moderate, severe, and extremely severe.

Lovibond and Lovibond (2004) report internal reliability scores of .91 for the depression subscale, .84 for the anxiety subscale, and .90 for the stress subscale. The 42-item DASS was selected for use over the 21-item version for two key reasons. First, internal reliabilities are higher for the DASS–42 than they are for the DASS–21 (depression = .81, anxiety = .73, and stress = .81; Lovibond & Lovibond, 2004). Crawford et al., (2011) also found internal reliability scores to be higher for the DASS–42 than for the DASS 21 for depression (.95, .90), anxiety (.88, .79), and stress (.94, .89). Second, each of the three subscales is comprised of various symptom categories. For example, the depression scale consists of items relating to dysphoria and hopelessness, among others (Lovibond & Lovibond, 2004). Use of the DASS–42 allows for greater exploration of the various components of the three scales reportedly experienced by participants.

Caution must be taken when measuring both anxiety and depression with the same participants. Whilst some argue that this is merely because of an overlap in symptoms (often somatic) between the two distinct disorders, others argue that anxiety and depression are inherently linked, therefore resulting in high levels of comorbidity (Stulz & Crits-Christoph, 2010). Furthermore, Lovibond and Lovibond (2004) note that depression, anxiety, and stress symptoms may have common causes, and conducted
correlations between the DASS–42 subscales and the Beck Depression Inventory (BDI; Beck, Steer, & Garbin, 1988) and the Beck Anxiety Inventory (BAI; Beck, Epstein, Brown, & Steer, 1988). In terms of discriminant validity, correlations between the DASS–42 subscales ranged from .54 (for the depression and anxiety subscales) to .65, the highest correlation understandably being between the stress and anxiety scales. The BAI and BDI correlation was .59. In terms of concurrent validity, the DASS depression subscale and BDI correlation was .74, and the DASS anxiety subscale and DAI correlation was .81.

Of particular interest to the present research, Crawford et al. (2011, p. 4) obtained normative data for a sample of 497 participants “broadly representative of the general Australian adult population in terms of the distributions of age, education, and gender.” This normative data will be used to compare participant scores to those of the general population.

**Journalist Trauma Exposure Scale (JTES)**

The JTES is a 23-item self-report scale concerning journalists’ work-related exposure to potentially traumatic events (PTEs). It requires participants to indicate their (1) range of exposure—whether or not they have been exposed to 14 different kinds of PTEs as part of a work assignment, (2) frequency of exposure—how many times they have been exposed to those kinds of events, and (3) intensity of exposure—participants are required to indicate whether or not they have been exposed to any of nine suggested intensity of exposure items (Pyevich et al., 2003). Participants were asked to respond to the scale in terms of their exposure within a particular year, as opposed to the entirety of their work-related exposure to PTEs. The frequency of exposure scale had an internal reliability score of .77, range of exposure scored .84, and intensity of exposure scored
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.63 (Pyevich et al.). Backholm and Björkqvist (2010) utilised the JTES but made some additions to the scale. First, participants responded to “an item focusing on the characteristics and experience of the worst event” they have covered as part of their work (p. 142). Second, the subscale assessing frequency of exposure included two types of exposure, ‘on the scene’ (OTS) and ‘indirect’ (ID)—exposure considered as indirect included various kinds of office-based exposure to a PTE. The frequency of exposure scale had internal reliability scores of .75 for OTS and .93 for ID, range of exposure scored .83 for OTS and .90 for ID, and intensity of exposure scored .62. Brown et al. (2012) also utilised the JTES and reported the following internal reliability scores: frequency of exposure = .95, range of exposure = .90, intensity of exposure = .70, and overall reliability score = .94.

PTSD Checklist – Civilian Version (PCL–C)

The PCL–C is a 17-item self-report scale that assesses the presence and intensity of various trauma-related symptoms (Weathers et al., 1993). Participants indicate how much they have been bothered by each symptom over the last month and respond on a 5-point Likert scale: 1 = not at all, 2 = a little bit, 3 = moderately, 4 = quite a bit, and 5 = extremely. Whereas other versions of the PCL refer to military experiences (PCL–M) or to a specific traumatic experience (PCL–S), the PCL–C is concerned with past stressful experiences in general (Norris & Hamblen, 2004). However, each version contains the same questions. The PCL–C can be used as a continuous variable in which higher scores indicate greater intensity of PTSD related symptoms. Psychometric data for the PCL Military (PCL–M) is more accessible than for the PCL–C and often used interchangeably because the items remain the same, only the focus changes to responses related to military experiences. The PCL–M has an overall internal reliability score of .97 (Weathers et al., 1993). The scale contains three subscales associated with the
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DSM–IV criteria for PTSD diagnosis (American Psychiatric Association, 2000) ranging in reliability scores from .92 to .93: Criterion B – persistent re-experiencing, Criterion C – avoidance and numbing, and Criterion D – increased arousal (Weathers et al., 1993). The PCL–C has been used within journalist samples and shown internal reliability scores of .91 (Backholm & Björkqvist, 2010) and .95 (Newman et al., 2003).

Traumatic Life Events Questionnaire (TLEQ)

The TLEQ is a measure of prior personal exposure to trauma (Kubany et al., 2000). Participants indicate how frequently they have been exposed to 23 different PTEs on a seven-point Likert scale (ranging from ‘never’ to ‘five times or more’), and whether or not the exposure caused them to experience intense fear, helplessness, or horror (Norris & Hamblen, 2004; Orsillo, 2001). Kubany et al. conducted a number of studies to determine the psychometric properties, some on the original 16-item version. First, a PTSD expert panel assessed the scale items; average ratings indicated that wording of the items and sampling of a broad range of PTEs was done “very well.” In order to assess temporal stability a sample of 49 participants receiving treatment for substance use completed the TLEQ once, and then again 60 days later. Kappa coefficients indicated moderate to substantial agreement, with scores of “.40 or higher for 11 of the 16 items and .60 or higher for 7 items” and an average test-retest agreement of 85% (p. 212). For a sample of military veterans (n = 51) who completed the TLEQ twice (average of 17.5 days between testing), “Kappa coefficients were .40 or higher for 12 of 16 items and .60 or higher for 5 items,” with an average test-retest agreement of 84% (p. 213).

Convergent validity and short-term temporal stability were assessed with a group of undergraduate psychology students (n = 62). Participants completed the TLEQ and also participated in a structured interview assessing exposure to PTEs included in
the TLEQ (Kubany et al., 2000). No significant differences were found between the
disclosure rates for the TLEQ compared to the structured interview (Norris & Hamblen,
2004), and within a one-week interval “the overall mean percentage of questionnaire-
interview agreements . . . averaged 85%” (Kubany et al., p. 216). A final study on the
full TLEQ, as opposed to the earlier 16-item version, assessed short-term temporal
stability over a two-week period for 42 participants sampled through a group for
battered women. “Kappa coefficients were above .40 for 20 of 21 items and .60 or
above for 12 items,” average overall test-retest agreement was 86% (p. 219). The
TLEQ is described in the literature as having exceptional psychometric properties as a
result of empirical assessment (Norris & Hamblen, 2004; Orsillo, 2001).
Appendix 7.3. Data screening and preliminary analysis

Participant data was only used in analysis if they had responded to all questions. Table 7.14 provides an overview of relevant features of the measures used. The data collected from the online survey was assessed according to Pallant’s (2007) guidelines for screening and preliminary analysis of variables, including the following steps:

• Checking the minimum and maximum scores for all variables.

• Checking the number of valid and missing data – The *a priori* plan for addressing missing data was based on the suggestions made by Tabachnick and Fidell (2007); where the missing data constitutes less than 5%, mean substitution is appropriate.

• Checking frequency scores for all variables.

• Reviewing case summaries – Checking for internal logic and consistency, response sets, and speeding.

• Checking Skewness – The *a priori* plan for assessing Skewness was based on the suggestions made by Tabachnick and Fidell (2007); values less than 1.5 are considered acceptable. The only trauma reaction variable to have a Skewness value greater than 1.5 was anxiety; however, the value was close to this cut-off and analysis of variance tests are considered to be robust enough to tolerate such violations. Caution is required when including such variables on correlation analyses, as highlighted in the footnote in Section 7.3.2.2.
• Checking Kurtosis – The *a priori* plan for assessing Kurtosis was based on the suggestions made by Tabachnick and Fidell (2007); values between $-2.0$ and $+2.0$ are considered acceptable. The only trauma reaction variable to have a Kurtosis value greater than 2.0 was anxiety. Caution is required when including such variables on correlation analyses, as highlighted in the footnote in Section 7.3.2.2.

• Checking for outliers – Each outlier was examined and found to be a genuine response. So as to minimise the influence of these outliers, Tabachnick and Fidell (2007, p. 77) recommend changing “the score(s) so that they are deviant, but not as deviant as they were. For instance, assign the outlying case(s) a raw score on the offending variable that is one unit larger (or smaller) than the next most extreme score in the distribution.” No more than 5% of all cases on a single variable were changed in this process.

Table 7.14. *Preliminary analysis of trauma reaction variables*

<table>
<thead>
<tr>
<th>Variable</th>
<th>$M$</th>
<th>$SD$</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Skewness</th>
<th>Kurtosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTSD</td>
<td>30.4</td>
<td>12.8</td>
<td>17.0</td>
<td>65.0</td>
<td>1.1</td>
<td>0.3</td>
</tr>
<tr>
<td>Depression</td>
<td>6.8</td>
<td>8.5</td>
<td>0.0</td>
<td>33.0</td>
<td>1.5</td>
<td>1.4</td>
</tr>
<tr>
<td>Anxiety</td>
<td>4.22</td>
<td>5.8</td>
<td>0.0</td>
<td>25.0</td>
<td>1.9</td>
<td>3.0</td>
</tr>
<tr>
<td>Stress</td>
<td>9.3</td>
<td>7.4</td>
<td>0.0</td>
<td>28.0</td>
<td>0.7</td>
<td>-0.4</td>
</tr>
</tbody>
</table>
Appendix 8.1. Phase A—Significant contributions

Key contributions of the overall systematic literature review (SLR) include:

1. The thorough and structured SLR process adopted provides the ability to assert with some degree of certainty what areas within the psychology and journalism literature require further consideration.
2. A range of methodological and theoretical issues and future areas of research were identified and discussed.
3. Together the reviews constitute a comprehensive synthesis of the available quantitative research relating to the psychological implications of journalistic work.

Key contributions specific to the constructs covered in each individual chapter include:

Trauma exposure (Chapter 2)

1. The first published review of research concerning journalists’ trauma exposure (MacDonald, Hodgins, & Saliba, 2017).
2. Journalists’ relative exposure to various work-related and personal PTEs.
3. Discussion of the relative advantages and disadvantages of adopting journalism-specific trauma exposure scales and other established trauma exposure scales.
4. There is a need to build upon the methodological and theoretical quality of the literature by considering areas such as: assessing personal and work-related exposure discretely, potential self-report differences based on terminology used (e.g., stressors compared to traumatic events), and adopting standardised and comprehensive methods of reporting statistical findings.
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Trauma reactions (Chapter 3)

1. Relative to the only other review considering PTSD in journalists (Aoki, Malcolm, Yamaguchi, Thornicroft, & Henderson, 2012), the unique contributions of the present SLR include the increased sample size \((n = 21)\), in-depth discussion of all studies reviewed, and a specific argument regarding research relating to journalists’ experiences of trauma- and stressor-related disorders, and anxiety disorders.

2. In terms of the potential trauma- and stressor-related disorders and anxiety disorders journalists might experience, only symptoms of PTSD have been considered.

3. A profile of the kind of journalist most likely to be at risk of PTSD.

4. There is a need to build upon the methodological and theoretical quality of the literature by considering areas such as: comparing journalist samples to other professions or to the general population, the inclusion of diagnostic interviewing to establish diagnosis levels, comparisons based on variables shown to influence PTSD in other populations, using standardised scales without altering them, conceptualising journalists and their experiences as existing within a broader social environment, and consideration of resilience and posttraumatic growth amongst journalist samples.

Mood disorders (Chapter 4)

1. Relative to the only other review considering depression in journalists (Aoki et al., 2012), the unique contributions of the present SLR include the increased sample size \((n = 10)\), in-depth discussion of all studies reviewed, and a considered argument regarding research relating to journalists’ experiences of mood disorders more broadly.
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2. In terms of the potential mood disorders journalists might experience, only symptoms of depression have been considered.

3. A profile of the kind of journalist most likely to be at risk of depression.

4. There is a need to build upon the methodological and theoretical quality of the literature by considering areas such as: comparing journalist samples to other professions or to the general population, the impact of journalism industry culture on research concerning mood disorders, the inclusion of diagnostic interviewing to establish diagnosis levels, the experience of mood disorders as separate from trauma exposure, difference between endogenous (melancholic) and exogenous (reactive) depression, and comparisons based on established demographic and work-related variables shown to influence depression and other psychological constructs in journalists and the general population.
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Appendix 8.2. Phase B—Significant contributions

A key contribution of the overall interview study is:

1. A greater overall understanding of the topic, complementing the current deductive trend in the literature, which focuses primarily on psychometric scales (Newman, Shapiro, & Nelson, 2012).

Key contributions specific to the two findings chapters individually include:

Kinds of trauma exposure (Chapter 5)

1. Identified and explained which PTEs are most frequently experienced by TV news camera operators and reporters, and which are considered the most distressing.
2. Identified a number of significant PTEs that have been previously unconsidered in the literature on journalists and trauma.
3. Moved beyond the identification of kinds of events and provided a rationale for why news workers might find certain PTEs distressing, such as car accidents. Provided a summary of factors that are associated with greater distress following PTE exposure.
4. Highlighted and challenged three common fallacies that seem to be unconsciously adopted and perpetuated from research focusing on journalists’ trauma exposure.

Role differences (Chapter 6)

1. Elucidated and explained a range of role differences due to organisational hierarchy and how these impact the well-being of camera operators and reporters.
2. Elucidated and explained a range of role differences in trauma exposure and how these impact the well-being of camera operators and reporters.

3. Established that differences in trauma exposure between camera operators and reporters are rooted in organisational hierarchy differences.

4. Highlighted a social visibility paradox that appears to be central to camera operators’ physical and psychological risk.

5. Contributions of the present study relating to the viewfinder effect include: (1) giving a designation to the phenomenon, (2) exploring the phenomenon in greater detail and elucidating instances where the pervasiveness of the viewfinder effect might be minimised, (3) considering what the viewfinder effect amongst camera operators implies for the PTE exposure of reporters, and (4) tentatively linking the viewfinder effect to biological and sensory/perceptual research and theory (specifically visual and emotional lateralisation) in order to propose potential contributing factors at play when TV news camera operators experience this phenomenon.
Appendix 8.3. Phase C—Significant contributions (Chapter 7)

Key contributions of the questionnaire study include:

1. This study is the first to consider the trauma exposure and reactions of TV news camera operators as a unique role group within the journalism industry.

2. The combined use of measures assessing symptoms of PTSD and depression, anxiety, and stress, providing a broader understanding of the kinds of trauma reactions apparent within the sample.

3. The first application of the DASS within research spanning the nexus of journalism and psychology. The benefits of adopting the DASS include empirically validated clinical categories, and accessibility to normative data and clinical studies that have previously used the DASS; this increases the ability to contextualise findings within the broader trauma research.

4. An assessment of the relative severity of symptoms in this sample compared to both clinical and non-clinical samples.