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Civil War in Syria: the psychological effects on journalists

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Abstract

Purpose – More journalists died in Syria during 2013 than in any other country experiencing conflict. This statistic raises concerns about the psychological wellbeing of journalists covering the internecine violence. The paper aims to discuss this issue.

Design/methodology/approach – The study sample was made up of 59 western journalists currently covering the Syrian conflict. To place these results in the broader context of war journalism previously collected data from a group of 84 journalists who had reported the war in Iraq were used as a control sample. Outcome measures included indices of posttraumatic stress disorder (PTSD) (Impact of Event Scale-revised) and psychological distress (General Health Questionnaire-28 item version (GHQ-28)).

Findings – Compared to journalists who covered the Iraq war, the journalists working in Syria were more likely to be female ($p = 0.007$), single ($p = 0.018$), freelance ($p = 0.0001$) and had worked fewer years as a journalist ($p = 0.012$). They were more depressed according to the GHQ-28 ($p = 0.001$) and endorsed more individual symptoms of depression including worthlessness ($p = 0.012$), helplessness ($p = 0.02$) and suicidal intent ($p = 0.003$). A linear regression analysis revealed that the group differences in depression data could not be accounted for by demographic factors.

Research limitations/implications – An absence of structured interviews. Results not applicable to local Syrian journalists.

Practical implications – Western journalists covering Syrian appear to be particularly vulnerable to the development of depression. Journalists and the news organizations that employ them need to be cognizant of data such as these. Given that depression is treatable, there needs to be a mechanism in place to detect and treat those in need.

Originality/value – This is the first study that highlights the emotional toll on western journalists covering the Syrian conflict.

Keywords Syria, War, Emotional health, Journalism, Psychological wellbeing, Posttraumatic stress disorder

Paper type Research paper

Introduction

The civil war in Syria has claimed over 100,000 lives thus far. The level of violence made the country the most dangerous for journalists in 2013, with 29 killed, many more wounded and an undisclosed number kidnapped (Committee to Protect Journalists, 2013). While local journalists have paid the highest price, the war has taken the lives of many foreign journalists too, including one of the finest correspondents of her generation, Marie Colvin, killed in Holms in a mortar attack that also claimed the French photojournalist Remi Ochlík.

Notwithstanding the dangers confronted by war journalists, there is a surprisingly small literature devoted to the profession's psychological wellbeing. This contrasts with a burgeoning trauma literature encompassing veterans, police, firefighters, and victims of assault, rape, and motor vehicle accidents, among others (Javidi and Yadollahie, 2012). Reasons for this relevant neglect are complex and thought to include managerial indifference, the macho culture of frontline journalism, the cultivated persona of the war journalist and a belief, held until recently, that

journalists by virtue of their status as neutral observers of conflict were immune from the mayhem of war (Feinstein, 2006). These beliefs and attitudes are starting to shift and it is now recognized that the level of violence visited on journalists in war zones can have a deleterious effect on their emotional wellbeing (Simpson and Coté, 2006; Massé, 2011). In a study of 140 war journalists and a control group of 107 domestic journalists who had never seen war, the former were shown to have significantly more symptoms of posttraumatic stress disorder (PTSD) and depression (Feinstein *et al.*, 2002). Moreover, structured interviews made it possible for the authors to obtain psychiatric diagnoses in a subgroup of their sample. The results revealed lifetime prevalence rates of PTSD and major depression that approached combat veterans and well exceeded the general population, respectively. A study of journalists in the 2003 Iraq war confirmed these findings (Feinstein and Nicolson, 2005). The numbers, however, tell only part of the story. PTSD and major depression are associated with considerable morbidity, exerting a deleterious effect on relationships, family members, employment and quality of life (Zatzick *et al.*, 1997; Cohen *et al.*, 2013).

One of the reasons why the psychological health of journalists is starting to receive increasing attention is the escalating threat faced by journalists in war zones. Of note is that the war in Iraq has proved historically the most lethal conflict for journalists since the profession first appeared on the battlefield in the Crimean war of 1853-1856. A view of the mortality rate over time reveals that in the four years of the First World War, two journalists were killed. The Second World War saw 69 fatalities, 17 died in Korea, 63 in Vietnam and over 100 in Iraq (Joyner, 2006). Whether the toll in Syria will exceed this is likely to depend on the longevity of the conflict.

The reasons for undertaking the present study were twofold. First, as noted Syria is currently considered the most dangerous country in the world for journalists. Second, we now know that journalists who cover war are at heightened risk, not only in terms of their physical safety, but also their emotional wellbeing. While our study is essentially exploratory, these two facts allowed us to hypothesize that rates of psychopathology would be comparable, at least, to that elicited from frontline journalists who have covered other dangerous zones of conflict. We therefore compared our findings to data collected from journalists covering the 2003 war in Iraq and published elsewhere (Feinstein and Nicolson, 2005).

Methods

Participants

We were given access to a secure database of western journalists covering the Syrian conflict. The listing comprises a mix of network and freelance journalists who have come together informally as a support network, sharing information among themselves that primarily addresses safety issues relating to working in Syria. Of the 294 names in the database, a random selection of 98 journalists was chosen to take part. Of these, 59 (60.2 percent) responded. Most (84.7 percent) were working inside Syria without a government visa. Only 1.7 percent completed the study while inside the country, reflecting their concerns that the Syrian government was monitoring internet traffic. All the journalists enrolled either spoke English as their first language (90 percent) or were bilingual (10 percent).

Data from a second group of 84 journalists collected during the early stages of the war in Iraq (Feinstein and Nicolson, 2005) were used to help place the findings from Syria in a broader context.

Measures

Two self-report psychometric questionnaires were used. Both are considered robust and valid instruments for recording psychopathology that can arise following traumatic events. They have also been used in previous research studies involving journalists (Feinstein, 2012; Levaot *et al.*, 2013). The scales were as follows.

The Revised Impact of Events Scale (IES-R, Weiss and Marmar, 2000) contains 22 questions that closely follow the DSM-IV criteria for PTSD. Three subscales look at intrusive (re-experiencing), avoidance and hyperarousal phenomena. There is a choice of five

responses for each question, which are scored 0 (low)-4 (high), respectively. Subjects were asked to indicate symptoms that had occurred during the past seven days only and related to traumatic events that had taken place in their line of work in Syria.

The 28-item General Health Questionnaire (GHQ-28; Goldberg and Hillier, 1979) contains four subscales, describing symptoms of somatic complaints, anxiety, social dysfunction and depression, respectively, that have been present *in the past 28 days only*. Individual questions that allow for four responses were scored 0-0-1-1 according to the authors' recommendations. The subscale scores are summed to give an overall index of psychological distress. By convention, scores ≥ 5 were considered to represent psychiatric caseness denoting clinically significant psychological distress.

Data on past psychiatric history included whether journalists had been seen by a psychiatrist, the reason for the assessment (personal or conflict related) and the type of treatment received (medication, therapy or both).

Details of alcohol and illicit drug use: The amount of alcohol used weekly was recorded. A unit of alcohol was defined as either a regular size bottle of beer, glass of wine or shot of spirits. Fourteen units of alcohol per week for males and nine units for females were considered the upper limit of acceptable weekly intake (Bondy *et al.*, 1999).

Statistical analysis

Prior to undertaking between group comparisons the data were analyzed to determine their distribution. A Shapiro-Wilk test revealed that all the continuous data were non-normally distributed. As such, comparisons here were undertaken with a non-parametric analysis (Mann-Whitney *U*-test). Predictors of psychological outcome were explored with a linear regression model, once outcome data had been log transformed given their non-Gaussian distribution. Statistical significance was set at 5 percent.

Consent

Approval for the study was obtained from the Ethics Committee at Sunnybrook Health Sciences Centre affiliated with the University of Toronto.

Results

The demographic comparisons between journalists working in Syria and Iraq are shown in Table I. Significant between group differences were present with the Syrian group more likely to

Table I Demographic comparisons between journalists who have covered conflicts in Syria and Iraq					
	<i>Syria</i>	<i>Iraq</i>	<i>t</i> -test/ χ^2	<i>Sig.</i>	<i>95 percent CI</i>
Age	35.78 (9.1)	37.68 (7.1)	<i>t</i> = 1.4	<i>p</i> = 0.18	-0.91-4.71
Gender	34:25	66:18	$\chi^2 = 7.23$	<i>p</i> < 0.01	
Marital			$\chi^2 = 8.05$	<i>p</i> < 0.05	
Single	40	38			
Married	14	39			
Divorced	5	7			
Education			$\chi^2 = 5.31$	<i>p</i> = 0.07	
School	7	4			
College	18	17			
University	34	63			
Years as a journalist	10.15 (8.94)	13.7 (6.90)	<i>t</i> = -2.56	<i>p</i> < 0.01	0.80-6.30
Freelance (%)	41 (65%)	0	$\chi^2 = 37.47$	<i>p</i> < 0.001	
Psychological treatment (%)	43.1	32.14	$\chi^2 = 1.78$	<i>p</i> = 0.18	

be women, single and freelance journalists. They had also worked on average three fewer years as a journalist.

Psychometric comparisons appear in Table II. The journalists working in Syria were found to be more depressed on the GHQ-28 depression subscale than those who had covered the Iraq war. Given that the GHQ depression subscale consists of seven questions, each one was analyzed separately and results are displayed in Table II as well. Of note is that the Syria sample endorsed significantly more depressive related symptoms on five of the seven sub-scales. In addition, the average total GHQ score for the journalists working in Syria exceeded the threshold for psychiatric "caseness," which was not the case for their colleagues who had covered Iraq. This difference was not, however, statistically significant ($\chi^2 = 1.16, p = 0.28$). There were no between group differences on any of the PTSD symptom scales nor when it came to alcohol use stratified according to gender. Female journalists working in Syria were the only group in either conflict whose weekly alcohol intake exceeded the upper limit of what is considered healthy.

Given the demographic mismatch between the two groups, a linear regression analysis was undertaken with marital status, freelance status and years worked as a journalist added to the group (Syria vs Iraq) membership as potential predictors of depression. The result revealed that none of these predictors apart from group membership exerted a significant effect of depression (see Table III).

A comparison of male and female journalists found no differences with respect to freelance status ($\chi^2 = 0.61, p = 0.44$) or years worked as a journalist ($t = 0.87, p = 0.38$), but females were more likely to be single ($\chi^2 = 7.94, p < 0.05$).

Table II Behavioral comparisons between journalists who have covered conflicts in Syria and Iraq

	Syria, mean (SD)	Iraq, mean (SD)	Mann-Whitney test	Sig.
GHQ somatic	1.23 (1.80)	1.0 (1.6)	$Z = -0.52$	$p = 0.61$
GHQ anxiety	1.73 (2.16)	1.56 (1.84)	$Z = -0.03$	$p = 0.98$
GHQ social dysfunction	2.04 (2.34)	1.56 (1.84)	$Z = -1.26$	$p = 0.21$
GHQ depression	1.08 (1.85)	0.27 (0.75)	$Z = 3.37$	$p < 0.001$
Worthlessness	0.23 (0.43)	0.08 (0.27)	$Z = -2.51$	$p < 0.01$
Hopelessness	0.15 (0.36)	0.03 (0.19)	$Z = -2.33$	$p < 0.05$
Life is not worth living	0.10 (0.30)	0.01 (0.11)	$Z = -2.23$	$p < 0.05$
Thought of doing away with yourself	0.17 (0.38)	0.03 (0.16)	$Z = -2.97$	$p < 0.01$
Could not function because of bad nerves	0.13 (0.34)	0.05 (0.22)	$Z = -1.69$	$p = 0.09$
Wishing you were dead	0.10 (0.30)	0.04 (0.19)	$Z = -1.36$	$p = 0.18$
Suicidal thinking	0.19 (0.40)	0.03 (0.16)	$Z = -3.23$	$p < 0.001$
GHQ total	6.08 (6.71)	4.3 (4.84)	$Z = 1.26$	$p = 0.21$
IES-R intrusion	0.96 (0.78)	0.90 (0.83)	$Z = -0.68$	$p = 0.5$
IES-R avoidance	0.80 (0.78)	0.70 (0.65)	$Z = -0.54$	$p = 0.59$
IES-R arousal	0.82 (0.79)	0.68 (0.71)	$Z = -1.16$	$p = 0.25$
Alcohol-male	11.56 (6.77)	13.23 (16.96)	$Z = -0.65$	$p = 0.52$
Alcohol-female	10.3 (5.47)	8.89 (7.59)	$Z = -1.23$	$p = 0.22$

Table III Predictors of depression

	β	SE	t	Sig.
Gender	0.05	0.04	1.27	$p = 0.21$
Marital	-0.01	0.03	-0.31	$p = 0.76$
Freelance	-0.09	0.07	-1.26	$p = 0.21$
Years worked in frontline journalism	-0.00	0.00	-0.30	$p = 0.77$
Group (Syria, Iraq)	0.05	0.02	3.13	$p < 0.001$

Discussion

The most notable findings to emerge from the study were that journalists covering the current conflict in Syria, when compared to those who had reported from the Iraq war ten years earlier, were more likely to be female, single, freelance and have worked for less time in war zones. The Syria group was also more depressed, had an average GHQ score that exceeded the threshold for psychological distress and in the case of the female journalists had a weekly alcohol consumption above medical recommendations (Bondy *et al.*, 1999).

These data add to a small literature that underscores the psychological costs some journalists pay for their work in zones of conflict. To date studies have been completed following the civil wars in the Balkans (Feinstein *et al.*, 2002), the invasion of Iraq (Feinstein and Nicolson, 2005), and the ongoing drug related violence in Mexico (Feinstein, 2012) and all have revealed prominent PTSD and depressive symptoms in approximately a quarter of the journalists. Members of the press covering local news are not immune from these symptoms either as data from journalists in Israel (Levaot *et al.*, 2013), New York post September 11 (Feinstein and Owen, 2013) and those working on crime and accident related news (Peyevich *et al.*, 2003) show. Here it is noteworthy that "local" atrocities can generate a level of emotional distress that equates with, or in some cases exceeds, that seen in journalists reporting from or filming wars in foreign, distant lands. This is exemplified by the hazards confronted by Mexican journalists working on drug-related stories. For these journalists there has been little or no respite from intimidation given that they work and live in regions of conflict, which in turn leaves not only them, but their families vulnerable to threat and kidnap from the cartels. In fraught situations such as these the emotional wellbeing of journalists' is severely challenged (Feinstein, 2013).

Given that our study of the journalists working in Syria was primarily descriptive, we can only speculate on the reasons for their increased depressive, but not PTSD related symptoms when compared to the Iraq data. Demographic factors in the general population are known to influence psychopathology with female gender (Ferrari *et al.*, 2013) and single marital status (Urquia *et al.*, 2013) both associated with higher rates of depression, anxiety and PTSD. Both these variables distinguished the Syria from the Iraq group, but when taken together their putative influence was insignificant when placed alongside the more powerful predictive effects of group (Syria vs Iraq) membership. One may also plausibly argue that less time worked in war zones may have left the Syria group more vulnerable, although it is germane to note that the Syria group had had on average a decade of experience in the field to date. This longevity likely accounts for the failure of this variable to emerge as a potential predictor on the regression analysis. Here the three-year difference between the groups is something of a moot point. Ten or more years covering wars, which reflected the Syria group's experience, will have entailed multiple exposures to life threatening stressors. One therefore has to look elsewhere for possible explanations to account for the higher depression scores in the Syria journalists.

The war in Iraq has been deadly for journalists, but not withstanding the threat, the foreign journalists who have reported from the country (the current control group) have always had access to relatively safe locations, be it a fortified bureau or, in the case of embedded journalists, a coalition forces' military base. When it came to leaving the confines of a secure location this was generally done in the presence of a military unit or else accompanied by a personal security detail. The current situation in Syria is very different. There are no coalition forces in the country to provide security to journalists who have entered Syria to report on the civil war. There are literally no safe places for journalists in cities under siege like Homs or Aleppo. One has only to read Paul Conroy's memoir, "Under the Wire: Marie Colvin's Last Assignment" (Conroy, 2013) to appreciate the intensity and unremitting nature of the threat posed to civilians and journalists alike, the complete absence of security and the distinct likelihood that journalists are being deliberately targeted by a government which does not want the media bearing witness to behavior considered a crime against humanity by the UNHCR (Moore, 2011). It is the unremitting strain of having to work under conditions in which there is no respite from grave threat, no down time to relax that has arguably set the Syria group apart and which has translated into a more deleterious effect on mood.

Depression is often found together with PTSD in individuals exposed to grave danger. Evidence suggests psychological distress is higher in the presence of this comorbidity than when each

condition is present alone. The risk of suicide increases too while quality of life falls (Morina *et al.*, 2013). In addition, while a 17-year longitudinal study of combat veterans and former prisoners of war (ex-POW) revealed a higher prevalence of depressive symptoms than PTSD symptoms at all time points, both groups of symptoms appeared part of a common general trauma stress construct (Dekel *et al.*, 2014). Findings like these overlap with the data in our study where depressive symptoms, not those of PTSD, differentiated the Syria and Iraq groups. Moreover, the presence of depression in the Syria group reflected, in part, increased thoughts of suicide, which is in accord with findings from veterans who have served in Vietnam, Iraq and Afghanistan. Notable among these data were the observation that suicidal ideation was more likely to occur in veterans with PTSD who also endorsed prominent symptom of depression (Pukay-Martin *et al.*, 2012).

Our study is not without limitations, some of which are linked to the logistics of collecting data from an itinerant group of subjects with whom one has no personal contact and who, while supportive of the study, are leery of the potential for having their whereabouts potentially monitored via internet contact. This places constraints on how much data can be collected. Practical experience from past studies has taught that if too much is asked for in a series of questionnaires, journalists balk and the questions go unanswered. That said, our study was primarily descriptive and lacked the methodology to explore the behavioral differences found between the two groups. We also did not have in place a method to quantify personal exposure to life threatening events. Tacit in our methodology was the assumption that this exposure did indeed take place and no journalist declined to complete the IES-R citing a lack of life threatening experiences. However, we were not able to quantify the number and rate the severity of these events in both groups.

In conclusion, these data should be viewed as a work in progress. Studies like these will always contain the challenge of good data acquisition given the need to collect information at a distance and with contact between researcher and subject dependent to a degree of the many uncertainties that characterize life in a war zone. Looking to the future, what is needed, in addition to a representative sample selection, are longitudinal data that can elucidate whether symptoms remit or decline once a journalist stops covering a conflict like the one in Syria. To date, no such data exist and it therefore remains unclear whether the distress we have captured with our current study reflects a transient phenomenon or a more enduring mental state. What is more certain, however, is that the conflict in Syria appears far from over. The Syrian civil war is likely to continue into the foreseeable future, which means that intrepid journalists will not stay away. How this will affect their emotional wellbeing needs to be carefully monitored, because the data presented here suggests that the nature of the conflagration may be associated with levels of distress, in particular depressive symptoms, beyond those ascertained during earlier conflicts. This point deserves emphasis because it captures the central message of our study. Depression comes with a morbidity and mortality, but it is also treatable, three compelling reasons why it cannot be ignored.

Recommendations

News organizations and their journalists need to become more aware of the psychological risks that are part of war reporting.

These risks appear to be particularly high in prolonged, civil war type conflicts that offer little respite from violence and few safe shelter options for journalists.

Journalists should have the option of a confidential psychological assessment on their return from war zones.

Conditions such as PTSD and depression, which can impair a journalists' ability to work and socialize, are treatable.

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