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On the Job

Scathing Memory

Journalism finally faces up to the psychic costs of war reporting

By [Judith Matloff](#)

Weekends spent alone at home, drinking to the point of unconsciousness. Romances that always seem to crumble after a couple of months. Feeling too paranoid to go to a movie or too agitated to sleep. This is a story about the invisible wounds that journalists often suffer when covering war. Anyone who has covered violence is aware of the psychic damage it can wreak — the guilt, the sense of being a parasite, the unbearable pettiness of daily life. The tribe of war correspondents is notoriously macho, and to even admit the damage — let alone surrender to it — has always been considered a sign of weakness. We are dispassionate chroniclers, after all, protected by the talisman of the notebook and the camera. The standard practice has been to go forth with a bottle of Scotch, absorb the pain and fear, and never tell your editors.

This denial has by no means disappeared, but the collective trauma of September 11 ushered post-traumatic stress disorder into the national lexicon, and it is beginning to usher therapists into the newsroom as well. The public and the medical community have a better understanding of trauma and its impact than they did just a decade ago, and the growing number of women on the battlefield — with their willingness to share their anguish — has made it easier for male colleagues to open up. With a new wave of emotionally scarred reporters coming out of Iraq (many of them relative rookies), editors are realizing that it will take more than flak jackets and “hostile environment training” to keep correspondents healthy. Among other things, they are introducing confidential hotlines for journalists who need help, and scrutinizing e-mail for signs of distress. “The wall of resistance is just coming down,” says Frank Ochberg, a psychiatrist based in Michigan who works with traumatized journalists.

It’s about time.

Greg Marinovich, a freelance photographer, felt a deep sense of impotence as he witnessed a gruesome period of South Africa’s history in the early 1990s, when his daily routine involved taking pictures of people being shot or hacked to death. When he won a Pulitzer in 1991, he found it difficult to celebrate. The winning photos, taken for the AP, were of a mob savagely murdering a man. Marinovich had been unable to save the victim as he was dragged from a train in Soweto by five men who then beat and stoned him and stabbed him in the head before dousing him with gasoline and setting him on fire. “I felt shock, repulsion, fear, excitement, dread — always the dread,” he says. “Now, having said that, there is the issue of enjoying, and being excited at, getting good photographs. So all these weird and disturbing thoughts, combined with the fact that we were earning money, added to the guilt — terrific guilt.”

During the same period, one of Marinovich’s best friends, Ken Oosterbroek, also a photographer, was shot dead in a crossfire just yards away from him in Tokoza township. Marinovich took a bullet in the chest in that incident and nearly died. He recovered, went back to work, and later buried two more colleagues who had committed suicide.

Marinovich escaped the numbing trap of drugs and alcohol that ensnared many of the

journalists he worked with, but he endured terrible spells of depression and, as he puts it, “destroyed some relationships.”

Science suggests that a terrifying experience alters the chemistry in the brain. The amygdala, an almond-shaped part of the brain that researchers believe is tied to memory, releases cascades of stress hormones such as adrenaline. Such hormones change the way the mind processes information during times of stress, lodging images like snapshots in the memory. This can contribute to post-traumatic stress disorder, when vivid recollections return well after the event, evoking the initial horror. Classic signs include panic attacks, the avoidance of people or reminders of the incident, and flashbacks or nightmares.

These physical reactions compound psychological burdens such as guilt. Extreme stress can spawn other symptoms of distress, from insomnia to depression. Many mental health experts believe journalists should debrief as early as possible after the traumatic experience, so that disturbing thoughts don't fester. This could be with colleagues at the hotel bar, or a couple of sessions with a therapist. The important thing is to process it. “It's like carrying around a bowling ball if you don't deal with it,” says Frank Smyth, the Washington, D.C., representative of the Committee to Protect Journalists.

He should know. Smyth was tormented by nightmares in 1991 after being held for two weeks in Iraq's Abu Ghraib prison when he was covering the Kurdish rebellions that followed the first gulf war. While on assignment for CBS, Smyth drove straight into an ambush. For seventeen hours he hid in a ditch, listening as Iraqi soldiers executed a colleague who had been traveling with him. The soldiers eventually found Smyth and another colleague and locked them in a cellblock. There, Smyth had a prime view of guards torturing prisoners with electroshock and hitting them with wooden boards. Engraved in his memory was a boy named Jaffer, who yelped like a dog while guards beat him with a rubber hose. “He was so young his voice hadn't yet cracked,” Smyth says.

After his release, Smyth says, going to sleep each night was “like a horror movie,” as the scenes replayed in dreams. Smyth eventually sought counseling and began to receive acupuncture treatments and practice yoga. The nightmares faded.

This does not mean that therapy will cure all. John Laurence, author of *The Cat from Hue*, a memoir about covering Vietnam for CBS, has sought help on and off since 1966, when he suffered his first combat stress. After Vietnam, Laurence, now sixty-four, covered fifteen more wars. Counseling helped him cope with the psychological costs of his career. He describes his old self as a “mess” — heavy drinking, sleeplessness, paranoia, dependence on tranquilizers. At his lowest points, he says, he would drop to the pavement at sharp noises. He was scared to leave his room, and had terrifying dreams of being trapped in a crashing cargo plane.

Still, he went to Iraq last year (for *Esquire* and National Public Radio) and the familiar demons of depression scuttled back. “I have never felt cured,” he says.

Photographers are among the most susceptible to PTSD, according to a study published in the *American Journal of Psychiatry* in 2002. Because photographers have to get close to capture their subjects, they must switch off their human instinct to help, and this can cause inner conflict. Mark Brayne, a former BBC correspondent who became a psychotherapist after experiencing his own anguish, hypothesizes that writers often cope better than photographers because they create a narrative. “When it has a beginning, a

middle, and an end it can be put to bed,” he says. “But a photographer creates fragmented images, and the brain stores these fragments that cause distress.”

Corinne Dufka dealt with her distress by shutting down emotionally. Dufka, who has won nearly every major photography award for her macabre images of Africa, says she grew so desensitized that she began to lack feeling even for friends. She had an “epiphany” after the U.S. embassy bombing in Nairobi in 1998, when she agonized over missing the story rather than the fate of the victims. Dufka cried days later, when it dawned on her that real people had been blinded (her mother is blind). “I was ashamed about my lack of empathy and sense of humanity,” she recalls.

Soon thereafter, Dufka quit photojournalism to become a human-rights campaigner. (She won a MacArthur “genius” award last year for her activism in Sierra Leone.) These days she only takes snapshots of her five-year-old daughter, Eloise.

Experts note that trauma is often worse when violence is random and people are unprepared for it. In this respect, Iraq presents a dire scenario. There’s no relief from fear in Baghdad (see “Baghdad Diary,” page 36); reporters are living among a hostile population and bombs can explode anywhere. And since many reporters dispatched to Iraq have never covered conflict before, they have no practiced responses.

Steve Franklin, who has covered the Middle East for many years for the Chicago Tribune, was “stunned” by the anxiety permeating Baghdad when he was there earlier this year. “People were obsessed with security,” he says. “They had to have walkie-talkies, they sandbagged their houses. But they couldn’t tell the newspaper back home that they were too scared to leave the house.”

Adding to the reporters’ isolation was that many editors seemed ill-prepared to lend emotional support. “We ask people to cover these wars on the fly, but we’re not trained to ask ‘How do you feel now, after you almost got killed today?’” Franklin says. “In the macho environment, we ignore it. We can’t show fear.”

There are warning signs to watch for when a reporter returns from covering combat. A common one is intense loneliness. The journalists often feel they can only relate to colleagues who have been in similar situations. How do you convey to others the guilt of leaving a besieged city, as children pull at your sleeves begging to be saved?

Paul Holmes, one of Reuters’s top war reporters, found it hard to reconnect with his now ex-wife and three children in between stints in Bosnia. He was on edge and would snap at minor things. “You’re expected to reinsert yourself into normal urban existence and it’s extremely stressful for your family,” he explains. “You go home and there’s a problem because the local supermarket runs out of cornflakes and it just doesn’t seem important.” Plenty of war correspondents still suffer in silence, but a growing number speak out.

David Loyn, the BBC’s developing-world correspondent, took six months off conflict reporting after a harrowing time in Kosovo in 1998. He has told his bosses he doesn’t want to go to Iraq for now. He sees no shame in seeking professional help, which he did after witnessing the execution of an Afghan man who allegedly stole a BBC camera. “I was no good to anyone after that,” Loyn recalls. “Very jittery.”

Loyn matter-of-factly describes trauma therapy as a technical process, like vacuuming a carpet: “If an ordinary sentient human being is exposed to a lot of violence, then you need a cleaning.” He’s blessed with receptive employers who are pioneering trauma awareness for the media. Last year, the BBC added trauma instruction to its safety training, and supervisors are being told how to deal with troubled colleagues in the field

and after they return. Several stars have “come out” about their experiences to assure more junior people that it’s okay to have stress disorder. Former correspondent Brayne, hired as a consultant, holds regular seminars in London on the topic.

Reuters has followed suit, with managerial training and a telephone helpline. Ironically, for a country where psychotherapy is more widely accepted than in England, American media lag behind. There are a few notable exceptions, though. Chris Cramer, the managing director of CNN International, is one of the press’s loudest advocates for trauma training. Cramer, who suffered paranoia for years after being held hostage in the Iranian embassy in London in 1980, encourages informal debriefings, some of which take place in his office. He will intervene, too, if he feels one of his journalists is not emotionally ready to return to the field. “This kind of a dialogue didn’t happen ten years ago,” Cramer says.

CNN also provides voluntary, confidential counseling to its staff, in person or on the phone. The New York Times offers similar services, and recently consulted with a military psychiatrist about ways to further soothe its correspondents in Iraq. NPR and Hearst Newspapers conducted trauma training sessions earlier this year. Since it opened in 1999, The Dart Center for Journalism & Trauma at the University of Washington (www.dartcenter.org) has aggressively tried to raise awareness of these issues.

The stigma, though, persists. Journalists who are suffering sometimes fear that they will destroy their careers if they ask for help. The staff at the Dart Center says there has been too little systemic progress in combating trauma within newsrooms. Often the bosses may be on board, but not the assignment editors, for example.

We will know only later how Iraq will affect reporters’ psyches, since often the damage bleeds out over time. For instance, in my own case, I put myself on autopilot when I was in Angola for a particularly rough six months in the early 1990s. I was nervous about a death threat, but distracted myself by working eighteen-hour days. When caught in sniper fire, I assumed a Zen-like state of denial. Landing at an airport that was being shelled, I busied myself with helping the wounded and collecting testimonies.

Months later, after leaving the country, I had disturbing dreams about limbless people whom I couldn’t save. I developed a phobia about roads that reminded me of an ambush. My catharsis came from writing a book about the war, which forced me to confront emotions. And, yes, I consulted a trauma expert.