

Trauma on the News Frontlines: Mental Health and Coping Among Bangladeshi Field Journalists

A Mixed-Methods Study of Psychological Risks and Resilience in Crisis Reporting

List of authors

Dr. Muhammad Anwarus Salam

Associate Professor
Department of Mass Communication and Journalism,
Jagannath University, Dhaka-1100, Bangladesh
Email: salam.anwar@yahoo.com
Contact no: +880-1970077799

Md. Raisul Islam

PhD researcher and Associate Professor
Department of Mass Communication and Journalism,
Jagannath University, Dhaka-1100, Bangladesh
Email: raisulislam@mcj.jnu.ac.bd
Contact no: +880-1911111016

Corresponding author

Md. Raisul Islam

Associate Professor
Department of Mass Communication and Journalism,
Jagannath University, Dhaka-1100, Bangladesh
Email: raisulislam@mcj.jnu.ac.bd
Contact no: +880-1911111016

Abstract

This article presents the first mixed-methods study of Bangladeshi field journalists' trauma reporting, addressing a critical gap in research on media in the Global South. Journalists often serve as first responders to crises covering pandemics, protests, and disasters while exposing themselves to psychological harm. Although international studies have documented high rates of PTSD, depression, and burnout, systematic evidence from South Asia has been limited. This study examines the mental health effects of trauma reporting in Bangladesh from 2020 to 2025, a period marked by COVID-19, political unrest, and mass casualty disasters. A survey of 100 journalists, along with 15 in-depth interviews, found that 10% met criteria for PTSD, increasing to 20% among high-exposure groups; 15% reported moderate to severe depression, 20% anxiety, and 30% burnout. Two-thirds showed symptoms of depression, and 79% expressed life dissatisfaction. Coping strategies included peer support (70%) and religious reflection (40%), but maladaptive responses such as avoidance (55%) and substance use (30%) were common.

Institutional support was nearly absent until 2025, when programs like Khola Janala counseling and gender-focused para-counselor initiatives were introduced but remain limited. The findings confirm that Bangladeshi journalists face mental health risks similar to war correspondents, yet without systemic protections, underscoring the urgent need for counseling services, trauma-informed newsroom reforms, and stigma reduction efforts to preserve press freedom.

Keywords : *Journalists; Trauma; Mental Health; Burnout; Resilience; Global South Journalism; Occupational Stress*

Introduction

Journalists often serve as frontline witnesses to crises—such as pandemics, protests, disasters, and violent conflicts—placing themselves at risk of both physical harm and psychological trauma. Research indicates that between 80% and 100% of journalists encounter work-related traumatic events during their careers, leading many to develop post-traumatic stress disorder (PTSD), anxiety, depression, or burnout (Dart Center for Journalism & Trauma, 2019; Flannery, 2022; Hadley-Burke & Saxena, 2021). While these risks are well documented in Western contexts, studies from the Global South also highlight equally critical challenges. In Pakistan, journalists covering terrorism and political unrest report higher rates of PTSD and anxiety (Shah et al., 2022). In India, research shows that women journalists face additional stressors such as harassment, unsafe working environments, and balancing work with family responsibilities, which contribute to burnout (Sundar & Varadarajan, 2022). In Sri Lanka, reporters covering post-war ethnic violence experience long-term trauma and fear of reprisals (Fernando, 2021). These regional findings underscore the importance of situating journalism and trauma research within politically unstable, resource-limited, and socially stratified environments.

Bangladesh is a critical yet understudied case. With its unstable political scene, frequent industrial accidents, and fragile media economy, journalists often face traumatic exposure. Between 2020 and 2025, they experienced a series of crises: the COVID-19 pandemic, which infected over 1,000 journalists and claimed 35 lives (Mondol & Paul, 2021); the violent “July Uprising” of 2024, which resulted in over a thousand deaths including four journalists—and injured many more (Sarwat, 2024); the Sitakunda container depot explosion in 2022, which killed 49 and injured more than 300 (Al Jazeera, 2022); and the 2025 Milestone School plane crash, which caused 36 fatalities, many of them children (Sharmin, 2025). Reporters covering these events described intrusive memories, sleeplessness, and long-lasting psychological distress (Sohel, 2025), emphasizing the significant human toll of frontline reporting.

Despite these challenges, Bangladeshi journalists operate with minimal institutional support. Formal counseling, trauma-awareness training, and protective newsroom policies are uncommon, leaving reporters to rely on informal peer support or unhealthy coping mechanisms. This study addresses an important gap: despite frequent exposure to high risks, no systematic research has examined how Bangladeshi field journalists experience trauma, how they handle it, and what systemic supports are needed during multiple national crises.

Problem Statement

Journalists are particularly vulnerable to psychological distress because of their regular exposure to traumatic events such as violence, disasters, and pandemics. While global research has associated trauma reporting with post-traumatic stress disorder (PTSD), depression, anxiety, and burnout (Flannery, 2022; Dart Center for Journalism & Trauma, 2019), most of this research focuses on Western settings. The experiences of journalists in developing countries are less studied, despite often working in politically unstable, disaster-prone, and resource-limited environments (Islam et al., 2021).

Bangladesh highlights this critical gap. Between 2020 and 2025, field journalists faced repeated exposure to trauma-inducing assignments, including the COVID-19 pandemic, the Sitakunda industrial explosion in 2022, the violent “July Uprising” of 2024, and the Milestone School plane crash in 2025. These incidents not only put journalists in physical danger but also caused lasting psychological harm, such as intrusive memories, insomnia, and anxiety (Sohel, 2025; Sharmin, 2025). Despite these dangers, Bangladeshi media organizations have generally lacked institutional support—like counseling services, trauma training, or structured debriefings—to help manage trauma

effects. New initiatives, like the Kholā Janālā program launched in 2025, are still limited and mostly focused on Dhaka.

This gap between the high intensity of trauma exposure and the lack of systematic mental health support highlights a serious problem: the psychological well-being of Bangladeshi field journalists remains neglected, under-researched, and under-supported. Addressing this is crucial not only for the welfare of journalists but also for maintaining the quality of journalism and, ultimately, democratic accountability.

Research Objectives

Building on this identified gap, the study aims to offer a systematic understanding of how trauma reporting impacts field journalists in Bangladesh. The specific objectives are:

To examine the psychological impact of covering traumatic events such as pandemics, political unrest, industrial disasters, and accidents on field journalists in Bangladesh.

1. To assess the prevalence of PTSD, anxiety, depression, and burnout among Bangladeshi field journalists between 2020 and 2025.
2. To explore the coping mechanisms journalists employ to manage work-related trauma and stress, including adaptive and maladaptive strategies.
3. To evaluate the availability, adequacy, and perceived effectiveness of institutional mental health support within Bangladesh's media industry.
4. To identify demographic and professional variations (e.g., gender, medium of journalism) in mental health impacts and support needs.

Research Questions

In line with these objectives, the study is guided by the following research questions:

RQ1: What are the psychological consequences of covering traumatic events (e.g., COVID-19, the 2024 student uprising, the Sitakunda explosion, the 2025 Milestone School crash) for Bangladeshi field journalists?

RQ2: What is the prevalence of PTSD, depression, anxiety, and burnout among these journalists, and how do these rates compare with international findings?

RQ3: What coping strategies—both adaptive and maladaptive—do Bangladeshi journalists employ when dealing with trauma-related stress?

RQ4: What institutional or organizational supports for mental health exist for field journalists in Bangladesh, and how effective or inadequate are they perceived to be?

RQ5 (Exploratory): How do mental health impacts and support needs differ across subgroups of journalists, such as by gender, medium (print, TV, photojournalism), or level of exposure to traumatic events?

Contribution of the Research

This study makes important contributions to both theory and practice.

Theoretical Contribution: It broadens Trauma Theory and Stress and Coping Theory into a South Asian journalism context, showing how repeated exposure to domestic crises can cause psychological risks similar to those faced by war correspondents. The findings emphasize cumulative trauma effects, gender differences in psychological burden, and culturally specific coping strategies, thus expanding the relevance of these frameworks beyond Western-focused studies.

Empirical Contribution: By combining survey data with in-depth interviews, the research provides the first systematic evidence on the prevalence and lived experiences of PTSD, depression, anxiety, and burnout among Bangladeshi field journalists. This mixed-methods approach offers both statistical data and qualitative insights into coping mechanisms and resilience.

Practical Contribution: The study highlights the urgent need for institutional reforms in the Bangladeshi media industry. It shows that the lack of structured trauma support harms journalists' well-being and professional performance, while also emphasizing recent initiatives as possible models for growth. These findings offer practical insights for policymakers, journalist associations, and media organizations to develop sustainable support systems.

Significance of the Study

The importance of this research lies in its timely focus on a vulnerable yet under-studied professional group. For academia, it expands the scope of journalism and trauma studies by including evidence from a developing-country context, thus addressing the current imbalance in the literature. For the media industry, it underscores the urgent need to establish mental health support systems. It offers an evidence base for creating targeted interventions, such as counseling, debriefing protocols, and workload management.

On a societal level, the study highlights that journalists' mental health is not just a labor rights issue but also a democratic concern. When trauma-affected reporters withdraw, self-censor, or leave the profession, the quality and sustainability of journalism—and, consequently, the flow of trustworthy information to the public—are impacted. By highlighting both the seriousness of the issue and the emergence of early support efforts, this study underscores journalists' mental health as an urgent matter for public and policy attention.

Literature Review

Trauma and Mental Health in Journalism: Global Findings

A substantial body of research has shown that journalists covering crises, conflicts, and disasters face serious risks to their mental health. Early studies in Western settings identified post-traumatic stress disorder (PTSD) as a common issue among war reporters, with Feinstein et al. (2002) reporting a 28.6% PTSD rate much higher than average population rates. More recent systematic reviews confirm that PTSD rates among journalists generally fall between 4% and 12%, with a significant minority showing clinically important symptoms, especially when exposed to violence repeatedly (Backholm & Björkqvist, 2022). Coping strategies play a key role: avoidant methods and unhealthy behaviors, like increased alcohol use, can worsen long-term stress (Morales, 2011; Buchanan & Keats, 2023). These findings highlight how journalists are occupationally vulnerable in ways similar to emergency responders and humanitarian workers.

The COVID-19 pandemic expanded this area of research by showing that domestic reporting can be as psychologically damaging as war coverage. Smith et al. (2021) found that 10% of journalists covering COVID-19 showed PTSD symptoms, while 26% experienced anxiety. In the UK, nearly 30% of intensive COVID reporters reached the clinical cutoff for PTSD—similar to war correspondents (Newman et al., 2022). These results were linked to extended exposure to illness, death, and grief, along with personal risk of infection. Besides trauma responses, burnout has become a chronic workplace hazard. Defined by exhaustion, cynicism, and reduced professional effectiveness, burnout is strongly connected to job insecurity, long hours, and toxic work environments (Dart Center, 2019; Reinardy, 2023). Pandemic-related layoffs and pay cuts increased these stressors, showing how structural pressures heighten psychological risks.

Not all journalists, however, develop long-term disorders. Protective factors include resilience, supportive editorial environments, and access to counseling. Conversely, stigma and cultural norms often discourage help-seeking, with newsroom cultures framing vulnerability as weakness (Hadley-Burke & Saxena, 2021). This silence around trauma persists even in high-risk contexts, highlighting the need for both organizational reform and cultural change.

Regional Perspectives: South Asia

While global research is well established, empirical studies in South Asia are only beginning to emerge, although they highlight equally serious risks. In Pakistan, Shah et al. (2022) documented high rates of PTSD, depression, and anxiety among journalists covering terrorism and political unrest, worsened by threats, censorship, and institutional neglect. In Sri Lanka, Fernando (2021) reported that journalists covering post-war ethnic violence experienced ongoing trauma symptoms, compounded by fear of reprisals, illustrating how political repression intersects with trauma exposure. In Tamil Nadu, India, Sundar and Varadarajan (2022) emphasized gendered vulnerabilities:

women journalists reported disproportionate stress from workplace harassment, unsafe reporting environments, and dual work–family responsibilities, leading to higher burnout rates. Together, these South Asian studies show that political instability, repression, and gender inequality increase journalists’ mental health risks in ways different from Western contexts.

The Bangladesh Context

Despite Bangladesh’s volatile media landscape, empirical research remains limited. Islam et al. (2021), in one of the earliest studies, surveyed 191 Dhaka-based journalists and found that 79% expressed extreme dissatisfaction with life and hopelessness, while over half showed at least mild depressive symptoms. Gender disparities were significant: women reported higher stress levels and more severe depression, reflecting harassment, discrimination, and unequal domestic burdens. Huda (2015) also found that lack of managerial support, more than physical danger, was the strongest predictor of work-related stress.

Institutional support mechanisms have historically been absent. Until the mid-2020s, Bangladeshi newsrooms rarely offered counseling, debriefing, or trauma-related training. Stigma surrounding mental illness further discouraged journalists from seeking help, forcing them to cope alone, often through maladaptive strategies. Recent discussions, however, indicate a gradual change. Sarwat (2024) noted that stress has long been accepted as normal in Bangladeshi newsrooms, but initiatives like Kholo Janala (launched by Dhaka Reporters Unity in 2025) and MRDI’s para-counselor training for women journalists reflect a budding awareness of trauma. Nevertheless, these programs remain Dhaka-centric and inaccessible to rural or freelance reporters.

Synthesis and Gap

The literature clearly shows that journalists worldwide—and increasingly in South Asia—face serious risks of PTSD, anxiety, depression, and burnout. In the Global South, these vulnerabilities are worsened by political repression, structural neglect, and gender inequalities. However, systematic evidence about Bangladeshi field journalists is limited, with most existing studies focusing on general stress or job dissatisfaction rather than trauma-specific outcomes, coping strategies, or institutional responses.

This study fills that gap by providing the first mixed-methods investigation of Bangladeshi field journalists’ mental health from 2020 to 2025, a period marked by the COVID-19 pandemic, violent protests, industrial disasters, and the Milestone School plane crash. By combining global theoretical insights with South Asian comparative perspectives and localized empirical data, the study enhances understanding of how trauma reporting impacts journalists in developing democracies and what systemic measures are needed to reduce these effects.

Theoretical Framework

This study is guided by two complementary perspectives *Trauma Theory* and *Stress & Coping Theory* which together offer a multidimensional view for understanding the mental health of Bangladeshi field journalists.

Trauma Theory

Trauma Theory provides a foundation for understanding the psychological effects of repeated exposure to distressing events. Originally developed in clinical psychology to explain the impacts of war, disaster, and violence, the theory highlights how trauma appears through intrusive memories, avoidance, hyperarousal, and emotional numbness. In journalism, Trauma Theory points out that reporters who regularly witness death, violence, and human suffering face a higher risk of developing PTSD-like symptoms (Feinstein et al., 2002). Importantly, the theory emphasizes the cumulative nature of trauma exposure, where each new assignment in situations like violent protests, industrial disasters, or public health crises increases vulnerability. For Bangladeshi journalists covering the COVID-19 pandemic, the 2024 student uprising, and the Milestone school plane crash, these experiences created conditions similar to combat reporting, demonstrating the dose–response principle central to *Trauma Theory*.

Stress & Coping Theory

Complementing this, Stress & Coping Theory (Lazarus & Folkman, 1984) shifts the focus from exposure to response. It explains how individuals evaluate stressors and activate coping resources, distinguishing between:

- **Problem-focused coping** (e.g., focusing on technical reporting tasks, seeking counseling, or requesting assignment rotation).
- **Emotion-focused coping** (e.g., peer conversations, prayer, avoidance, or maladaptive reliance on alcohol or sedatives).

Research consistently shows that avoidant coping intensifies trauma symptoms, while social and organizational support systems can reduce distress. In Bangladesh, however, strong stigma surrounding mental illness and limited institutional resources mean that journalists often rely on informal coping methods like peer support or private rituals. Stress & Coping Theory is therefore beneficial for explaining why, even with similar exposure, outcomes can differ significantly among individuals.

Integrating the Frameworks

Taken together, the two theories offer complementary explanations. Trauma Theory explains how exposure to violence, disaster, and mass suffering causes psychological harm. Stress & Coping Theory describes the variation in outcomes, showing how coping strategies and support systems influence risk. By combining these perspectives, this study not only highlights the risks associated with repeated trauma exposure but also identifies the resources—or lack thereof—that shape journalists' mental health paths.

In doing so, the study expands both frameworks into a Global South context, where institutional neglect, cultural stigma, and political repression create unique dynamics. This dual-theoretical approach thus allows for a more comprehensive understanding of how Bangladeshi field journalists experience, process, and attempt to cope with trauma.

Methodology

Research Design

This study used a mixed-methods approach to examine both the prevalence and lived experiences of trauma-related psychological distress among Bangladeshi field journalists. A cross-sectional survey collected quantitative data on mental health outcomes, while in-depth qualitative interviews offered narrative insights into coping strategies and contextual realities. Combining these methods provided both breadth and depth, aligning with the research questions and guided by *Trauma Theory* and *Stress & Coping Theory*.

Sampling and Participants

Participants were recruited using a combination of purposive and snowball sampling due to the professional and political sensitivities involved in working with journalists in Bangladesh. Initial recruitment was done via press associations, professional networks, and newsroom contacts, with referrals expanding the pool. Out of 142 journalists invited, 100 completed the survey (response rate: 70.4%). The sample consisted of journalists from print (40%), television (35%), online journalism (15%), and photojournalism (10%).

From this group, 15 journalists were selected for follow-up interviews using maximum variation criteria to ensure diversity in gender, media type, and trauma exposure. Eligibility required participants to have directly reported on at least one traumatic event between 2020 and 2025 (e.g., the COVID-19 pandemic, the Sitakunda industrial

explosion, the 2024 student uprising, or the Milestone School plane crash). No financial incentives were offered; instead, participation was presented as a voluntary contribution to research aimed at improving journalist well-being.

Instruments and Measures

Validated psychological instruments were used, aligned with international trauma and occupational health research.

- PTSD Checklist for DSM-5 (PCL-5): assessed post-traumatic stress symptoms.
- Patient Health Questionnaire (PHQ-9): screened for depression.
- Generalized Anxiety Disorder scale (GAD-7): measured anxiety symptoms.
- Maslach Burnout Inventory (MBI): captured emotional exhaustion, cynicism, and reduced professional efficacy.

These measures ensured reliability, validity, and comparability with international studies while aligning with constructs central to *Trauma Theory* and *Stress & Coping Theory*.

Data Collection Procedures

The online survey was conducted on an encrypted, password-protected platform from March to July 2025, ensuring anonymity and preventing data from being traced back to individuals. Each participant was assigned a unique code; no identifying information, such as IP addresses or names, was collected or stored. Participants provided informed digital consent before continuing.

Semi-structured interviews were conducted in Bangla, either in person or via secure video calls, depending on the participant's preference. All interviews used an open-ended guide focused on trauma exposure, coping strategies, and organizational support. Recordings were made with explicit consent, transcribed verbatim, and some transcripts were translated into English and checked for accuracy.

Data Analysis

Quantitative data were analyzed using descriptive statistics (to determine the prevalence of PTSD, depression, anxiety, and burnout) and inferential tests (chi-square, correlation analyses) to examine subgroup differences based on gender, medium of journalism, and trauma exposure.

Qualitative data were analyzed thematically following Braun and Clarke's (2006) six-step approach. To improve reliability, two researchers independently coded transcripts and resolved discrepancies through discussion. Emerging themes were aligned with theoretical concepts: Trauma Theory (e.g., intrusive memories, avoidance, hyperarousal) and Stress & Coping Theory (e.g., adaptive versus maladaptive coping).

Ethical Considerations

This study followed the Declaration of Helsinki and ethical standards for research with sensitive groups. All participants provided informed consent, were assured of confidentiality, and knew they could withdraw at any time without penalty. Because of the potential for distress, participants received contact information for local mental health services.

Findings

RQ1: Psychological Consequences of Trauma Reporting

The data show that Bangladeshi field journalists face significant psychological distress when covering traumatic events. One in four respondents (27%) reported notable PTSD-related symptoms, either clinical or subclinical, linked to assignments such as the July 2024 protests, the Sitakunda depot explosion, and the Milestone School plane crash. Specifically, 10% met the PCL-5 threshold for probable PTSD, while 17% fell within the subclinical range. Among frontline reporters

covering the most violent or graphic events, the rate of probable PTSD increased to 20%, underscoring the heavy burden on those with high exposure.

Qualitative evidence provided context for these outcomes. Journalists often described working on “autopilot” during assignments—suppressing fear to fulfill professional demands. A TV reporter recalled: *“When the shooting started [in 2024], I was live on air. I felt fear, but I boxed it away to keep reporting.”* Emotional breakdowns frequently occurred after deadlines. A print reporter explained: *“That night after Sitakunda, I hugged my wife and just wept. All those bodies—I held it together till deadline, then it hit me.”*

Thematic analysis revealed four dominant emotional responses:

- Fear and Helplessness, especially during violent clashes: *“I thought I might not make it home that day.”*
- Horror and Shock, particularly after the Milestone crash, where photojournalists reported intrusive images of child victims.
- Guilt, both survivor’s guilt and moral guilt: *“I was taking photos instead of helping the injured—that haunted me.”*
- Anger, directed at negligence or injustice, which for some reinforced their sense of professional duty.

These experiences align with *Trauma Theory*, which highlights intrusive memories, avoidance, and cumulative stress from repeated exposure.

RQ2: Prevalence of PTSD, Depression, Anxiety, and Burnout

Survey data show that Bangladeshi journalists experience higher levels of psychological distress than the general population. Prevalence rates are summarized in Table 1.

Condition	Prevalence	Key Subgroup Findings
PTSD	10% probable; 17% subclinical; 27% significant symptoms	20% in frontline/high-exposure reporters
Depression	15% moderate-severe; 50% mild (total 65%)	Severe depression higher among women (11% vs. 1% of men)
Anxiety	20% moderate-severe	Journalists who received threats (n=15) had higher mean GAD-7 (9.5 vs. 6.2)
Burnout	30% high burnout	Correlated with years of experience ($r = +0.45$, $p < .01$); 22% reported stress-related physical illness; 3% suicidal ideation

Table 1. Prevalence of Mental Health Outcomes among Field Journalists (N=100)

The findings highlight both immediate and long-term risks. Mild depressive symptoms were common (65%), while severe depression was more common among women, indicating gender-specific vulnerabilities. Anxiety was reported by 20% overall, but was significantly higher among those experiencing threats or harassment. Burnout affected 30%, showing clear signs of cumulative stress over time.

Critically, cumulative trauma exposure intensified outcomes. Among journalists covering multiple major events (n = 18), 50% met the criteria for at least one clinical condition (PTSD, depression, or anxiety), compared to 20% among single-event reporters ($\chi^2(1) = 6.5$, $p = 0.011$). This statistically significant finding supports the dose–response principle in Trauma Theory, which states that repeated trauma exposure increases the risk.

RQ3: Coping Strategies of Journalists

Coping mechanisms revealed both resilience and vulnerability, highlighting the dual nature of journalists’ responses under extreme stress.

Coping Strategy	Prevalence	Illustrative Examples
Peer Support	70%	Informal debriefing: <i>“We are all in this together.”</i> Often occurred over drinks, blurring into maladaptive use.
Avoidance	55%	<i>“I drown myself in other assignments or binge-watch movies to forget.”</i>
Substance Use	30%	<i>“After July 2024, I started drinking daily. It was the only way I could sleep.”</i>
Religious/Spiritual Coping	40%	Prayer and reflection: <i>“Praying for victims helps me carry the weight.”</i> Younger reporters were more ambivalent.
Professional Counseling	2%	Only two had ever consulted a mental health professional, neither for work-related trauma.
Workshop/Training	5%	Mostly through international exposure; almost no local training.
Individual Resilience Practices	<10%	Rituals (playing with children, journaling) used as self-designed healing strategies.

Table 2. Coping Strategies Reported by Field Journalists (N=100)

These results support *Stress & Coping Theory*, where adaptive emotion-focused strategies (peer support, prayer, journaling) provided partial relief. However, widespread reliance on avoidance and substance use posed long-term risks. The lack of professional counseling or structured training highlights structural barriers that increase vulnerability.

RQ4: Institutional and Organizational Support

Institutional responses to trauma among journalists in Bangladesh are still limited, although new initiatives show early signs of promise.

Absence of systemic support

- 0% of respondents reported newsroom-based counseling or mental health programs.
- Only 8% recalled supervisors checking on their well-being, and 10% noted occasional supportive gestures, none formalized.
- Interviews emphasized a culture of silence: *“Here, it is ‘Get the story and move on.’ There is no crying in the newsroom.”*

Emerging initiatives (2024–2025)

- Kholā Janālā (2025): DRU’s partnership with Moner Bondhu provided biweekly counseling. One participant reflected: *“For the first time, I felt heard.”*
- MRDI Para-Counselor Program (2024): Trained five senior female journalists to act as peer counselors, creating safe spaces for 71 women.
- BJIM/Mindshaper Workshop (2025): Focused on PTSD after the Milestone crash; ~20 journalists attended.

Unmet demand

- 85% called for routine debriefings after traumatic coverage.
- 78% wanted trauma literacy training.
- Journalists requested assignment rotation policies and mental health-inclusive insurance.

Although these initiatives indicate progress, they remain Dhaka-centric and disconnected from newsroom structures, excluding rural and freelance reporters. The findings confirm that institutional neglect is a key factor that worsens trauma.

RQ5: Variations Across Demographics and Professional Roles

The impact of trauma reporting varied significantly across gender, medium, and experience level, rather than being the same for all.

Subgroup	Distinctive Findings	Illustrative Quotes
Gender	Women reported higher depression (mean PHQ-9 = 12.3 vs. 9.1 for men); severe depression 11% of women vs. 1% of men.	“I cover violence outside, then face a second battle at home.”
Media Type	Photojournalists showed highest PTSD (27%), due to intrusive imagery. Broadcast reporters reported greater burnout linked to live coverage and time pressure.	“Through the lens, you cannot look away. Those images stay forever.”
Experience Level	Early-career journalists (<5 years) reported higher anxiety (mean GAD-7 = 11.2 vs. 7.4 for senior journalists). Veterans (>10 years) displayed more burnout and emotional detachment.	<i>“The first time I saw a body, I froze.” / “After 20 years, nothing shocks me anymore—but I feel empty.”</i>

Table 3. Variations in Mental Health Outcomes by Subgroup

These differentiated findings emphasize that trauma’s effects vary. Women, photojournalists, and younger reporters experience severe psychological risks, while senior journalists suffer from ongoing burnout. The evidence shows the importance of customized interventions instead of one-size-fits-all solutions.

Discussion

The findings of this study highlight a critical mental health crisis among Bangladeshi field journalists, worsened by the extraordinary events of 2020–2025. Using *Trauma Theory* and *Stress & Coping Theory*, the results show how repeated exposure to trauma, structural neglect, and stigmatized newsroom cultures combine to create psychological vulnerability. At the same time, the study expands these frameworks by placing them in a Global South context, where weak institutional safeguards, gender inequalities, and political repression produce unique stress patterns.

Trauma Exposure and PTSD: Domestic “War Zone” Conditions

Findings reveal that Bangladeshi journalists experience trauma rates comparable to war correspondents. About 10% met PTSD thresholds, with another 17% showing subclinical symptoms—outcomes linked to crises such as the 2024 student uprising and the 2025 Milestone crash. These patterns confirm Trauma Theory’s dose–response principle: reporters exposed to multiple crises were more than twice as likely to develop clinical symptoms. Narratives of fear, guilt, and horror also highlight secondary traumatic stress, showing that empathetic witnessing of suffering—especially involving children—carries its own psychological burden.

Burnout and Chronic Stress

Burnout affected 30% of journalists, with a strong correlation to years of experience. Veterans often displayed emotional detachment, while younger reporters reported acute anxiety. This reflects Stress & Coping Theory: problem-focused coping initially mitigates stress, but chronic exposure without support fosters cynicism, withdrawal, or substance reliance. Such findings underscore journalism in Bangladesh as a **long-term pressure cooker**, not only a crisis-driven profession.

Coping: Resilience vs. Risk

Coping strategies were double-edged. Peer support (70%) and spiritual practices (40%) provided emotional anchors, while maladaptive responses—avoidance (55%) and substance use (30%)—were widespread. Alarming, only 2% accessed professional counseling. These findings illustrate that in contexts with limited institutional support and stigma around mental health, journalists rely on informal methods that may offer short-term relief but heighten long-term vulnerability.

Institutional Support: Emerging but Unequal

Until 2024, newsroom cultures normalized silence: “get the story and move on.” Recent initiatives—Kholā Janālā counseling, MRDI para-counselor training, and PTSD workshops—signal cultural change, but remain **small, urban-centered, and disconnected from newsroom routines**. Demand far exceeds availability, with 85% of journalists requesting debriefings and 78% seeking trauma literacy training. These gaps show institutional neglect as a structural driver of vulnerability.

Unequal Vulnerabilities Across Groups

Trauma impacts were not uniform. Women showed higher rates of severe depression, reflecting compounded pressures from harassment and domestic burdens. Photojournalists experienced the highest PTSD due to intrusive imagery, while broadcast reporters struggled with live-reporting burnout. Early-career journalists reported acute

anxiety; veterans faced entrenched exhaustion. These findings emphasize that one-size-fits-all interventions are insufficient; gender, medium, and career stage require tailored approaches.

Implications for Journalism and Democracy

The evidence positions Bangladeshi journalists as **psychological first responders** operating without systemic protection. Left unaddressed, trauma can drive self-censorship, attrition, and weakened accountability, undermining press freedom itself. Thus, mental health support is not only an occupational need but a democratic imperative.

Conclusion and Recommendations

This study demonstrates that Bangladeshi field journalists endured significant psychological burdens from 2020 to 2025, with PTSD (~10%), depression (65% with symptoms), anxiety (20%), and burnout (30%) at levels comparable to war correspondents. Coping mechanisms balanced resilience (peer solidarity, spirituality) with risk (avoidance, substance use), while institutional support remained largely absent until small-scale programs emerged in 2024–25. These findings confirm that without systemic protections, journalists face escalating mental health risks that threaten both individual well-being and democratic information flows.

Tiered Recommendations

1. Newsroom-Level

- Introduce structured post-assignment debriefings and assignment rotations.
- Provide counseling access via partnerships with mental health professionals.
- Normalize mental health discussions to reduce stigma.

2. Industry-Level

- Scale initiatives like **Khola Janala** nationwide through press clubs.
- Integrate **trauma literacy** into journalism curricula and professional training.
- Build peer-support networks, with gender-sensitive spaces for women journalists.

3. Policy-Level

- Guarantee insurance or hazard pay covering psychological care.
- Fund **tele-counseling services** for rural and freelance journalists.
- Embed journalist well-being into national labor and media freedom policies.

Protecting journalists' mental health is not optional—it is foundational to sustaining press freedom in fragile democracies. A healthy press depends on healthy journalists. The challenge now is to transform small pilot efforts into systemic, nationwide frameworks that build resilience and safeguard both journalism and democracy in Bangladesh.

References:

- Al Jazeera. (2022, June 5). Bangladesh: Deadly fire and explosions at container facility. Al Jazeera. <https://www.aljazeera.com/news/2022/6/5/16-killed-170-injured-in-bangladesh-container-depot-fire>
- The Business Standard. (2025, August 8). BJIM, Mindshaper jointly organise mental health workshop for journalists. The Business Standard. <https://www.tbsnews.net/bangladesh/bjim-mindshaper-jointly-organise-mental-health-workshop-journalists-1207461>
- Dart Center for Journalism & Trauma. (2019). Research update: 80% of journalists have experienced work-related trauma. (Retrieved from Dart Center website.)
- Dart Center for Journalism & Trauma. (2025). The Journalist Trauma Support Network: An innovative training program to support journalists' mental health [White paper]. Columbia University.

- Dick, B. (2019, August 12). Journalists need more help than ever coping with work trauma. *Columbia Journalism Review*. <https://www.cjr.org/analysis/journalists-mental-health-trauma.php>
- Feinstein, A., Owen, J., & Blair, N. (2002). A hazardous profession: War, journalists, and psychopathology. *American Journal of Psychiatry*, 159(9), 1570–1575. <https://doi.org/10.1176/appi.ajp.159.9.1570>
- Flannery, R. B., Jr. (2022). News journalists and posttraumatic stress disorder: A review of literature, 2011–2020. *Psychiatric Quarterly*, 93(1), 151–159. <https://doi.org/10.1007/s11126-021-09919-z>
- Hadley-Burke, M., & Saxena, K. (2021, April 28). Journalists face “invisible wounds” reporting on traumatic stories. *The Thunderbird* (UBC School of Journalism). <https://thethunderbird.ca/2021/04/28/journalists-face-invisible-wounds-reporting-on-traumatic-stories/>
- Islam, M. A., Quarmal, S. B., & Das, A. (2021). An investigation into risks to mental health of Bangladeshi journalists. In S. Jamil, B. Çoban, & B. Ataman (Eds.), *Handbook of research on discrimination, gender disparity, and safety risks in journalism* (pp. 167–193). IGI Global. <https://doi.org/10.4018/978-1-7998-6686-2.ch010>
- Mondol, B., & Paul, B. (2021). Journalism in Bangladesh during the COVID-19 pandemic: An overview. *Current Research Journal of Social Sciences and Humanities*, 4(1), 45–53.
- Morell, R. (2020, July 15). Reporting and resilience: How journalists are managing their mental health. *Nieman Reports*. <https://niemanreports.org/reporting-and-resilience-how-journalists-are-managing-their-mental-health/>
- Sarwat, N. (2024, October 10). Time for journalists to speak up about their mental health. *The Daily Star*. <https://www.thedailystar.net/opinion/views/news/time-journalists-speak-about-their-mental-health-3723916>
- Sharmin, S. A. (2025, August 12). Milestone tragedy: Parents warn of bigger movement if investigation is delayed. *Dhaka Tribune*. (Available at <https://www.dhakatribune.com/bangladesh/388791/milestone-tragedy-parents-form-human-chain-with-8>)
- Shah, S. F. A., Jan, F., Ginossar, T., McGrail, J. P., Baber, D., & Ullah, R. (2022). Trauma exposure and post-traumatic stress disorder among regional journalists in Pakistan. *Journalism*, 23(2), 391–408. <https://doi.org/10.1177/1464884920965783>
- Sohel, M. H. (2025, July 30). DRU launches “Kholā Janālā” mental health service for journalists. *Pressenza*. <https://www.pressenza.com/2025/07/dru-launches-khola-janala-mental-health-service-for-journalists/>
- Tyson, G., & Wild, J. (2021). Post-traumatic stress disorder symptoms among journalists repeatedly covering COVID-19 news. *International Journal of Environmental Research and Public Health*, 18(16), 8536. <https://doi.org/10.3390/ijerph18168536>