



## The Effects of Media Coverage of Terrorist Attacks on Viewers

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Many people are unable to resist news coverage of terrorist attacks. As horrific as they are to watch on television and read about in newspapers and magazines, many still find it nearly impossible to turn away. It is difficult to know why the information is so hard to resist. Some say that people are hoping for information because they are fearful of future attacks and want to be prepared; others say that people are watching and reading in an effort to digest and process the event; still others say the media is intentionally creating seductive and addictive images almost like those seen in an action movie. Whatever the reason, it is important to understand the effects on the community that this type of exposure may have. Research generally finds an association between watching media coverage of terrorist attacks and stress symptoms. However, most studies cannot answer the important question of whether watching television of the event makes people worse or if people who have more severe stress reactions are the ones who choose to watch more television coverage of the event.

### Research from the September 11th, 2001 Attacks

#### Adults

In a national survey of U.S. adults, 3-5 days after the September 11th, 2001 attacks, people reported watching an average of 8 hours of television related to the attacks. Those who watched the most coverage had more substantial stress reactions than those who watch less television coverage. <sup>1</sup>

#### Children

In the same national survey, parents reported that their children watched an average of 3 hours of television related to the bombing, with older adolescents watching more than younger children. Children who watched the most coverage were reported to have more stress symptoms than those who watched less coverage. <sup>1</sup>

### Research from the Oklahoma City Bombing

Before September 11th, 2001, the bombing of the Alfred P. Murrah Federal Building in 1995 was the most deadly terrorist act perpetrated on U.S. soil. One hundred sixty-eight people were killed, over 700 were injured, and more than 16,000 individuals in the downtown area

were affected by the blast. In addition, approximately 12,000 people were involved in the rescue effort in a variety of different contexts. Because of the serious nature of this event, the media covered the bombing extensively.

## **Adults**

In a study of 85 adults seeking mental-health services six months after the bombing, the number of hours of bomb-related television watched did not correlate with increased PTSD symptoms <sup>2</sup>.

## **Children**

Two-thirds of a large group of Oklahoman school children in grades 6 through 12 reported that, in the seven weeks after the bombing, "most" or "all" of their television viewing was bomb related. Children in this group who watched bomb-related television reported more PTSD symptoms seven weeks after the bombing than children who did not watch as much bomb-related television. This was true for children who lost an immediate family member and for those who did not lose a close family member. However, children who were related to a deceased victim reported more difficulty calming down after watching bomb-related television than children who did not lose a close family member <sup>3, 4</sup>.

Similar results were found in a sample of over 2,000 middle-school children (grades 6-8) from Oklahoma. Again, approximately two-thirds reported that "most" or "all" of their television viewing was bomb related. Interestingly, television exposure was directly related to PTSD only in children who did not see, hear, or feel the explosion and who did not know anyone who was killed or injured in the explosion. These findings suggest two different possibilities. The first is that watching bomb-related television may contribute to an increase in PTSD symptoms. Alternately, it may be that the children who were the most distressed chose to watch bomb-related television <sup>5</sup>.

## **Information from Other Sources**

### **Adults**

Two hundred thirty-seven Israeli adults were divided into two groups. One group was exposed to television clips of terrorism and political violence; the other group was exposed to news clips unrelated to national threat. Individuals who watched the terrorism clips reported more anxiety than those who watched clips unrelated to terrorism <sup>6</sup>.

In a sample of adults, those who had an intimate friend or relative killed in the Mount St. Helens tragedy reported that the media was a hindrance to their recovery. Adults who suffered property loss reported that the media was neither a help nor a hindrance <sup>7</sup>.

Dr. Neal Cohen was New York City's mental health commissioner at the time of the crash of TWA Flight 800 and one of the psychiatrists who provided services to family members. In an article in *Psychiatric Services*, Dr. Cohen wrote, "The mourners involvement with the media had both positive and negative impacts. Certainly the media helped to allay the feelings of powerlessness that frequently afflict those stricken by a tragedy. However, the presence of reporters and cameras also imposed a heavy burden on family members. The most personal aspects of mourning could too easily become the subject of a television news feature " (p. 462) <sup>8</sup>.

In a letter to the *Medical Journal of Australia* (1986) about the effects of trauma-related media on adult trauma victims, psychiatrist Alexander McFarlane wrote, "media exposure following a trauma may reinforce the victims' feelings of vulnerability and fixate their images of death and destruction." Media exposure also "may increase the risk of the development and maintenance of chronic PTSD following a trauma" (p.664) <sup>9</sup>.

## Children

Sixty-five percent of a small sample of children from Kuwait reported viewing televised images of violence, death, and grotesque mutilation related to the Gulf War. This type of television exposure was associated with increases in PTSD symptoms <sup>10</sup>

## Conclusions

Clearly the media plays a critical role in the aftermath of a disaster. The media provides needed information, makes announcements, and gives instructions regarding services that are available to victims and their families. They are a resource for the community and can provide a source of hope. However, too much trauma-related television viewing may have a negative impact, especially on children. Although there is little research in this area, adults should monitor their viewing. If you find that you feel anxious or stressed after watching a news program, if you feel you cannot turn off the television or participate in recreational activities, or if you have trouble sleeping, you may want to consider limiting the amount and type of media coverage that you are viewing. Some strategies that may be useful include limiting viewing just prior to bedtime, reading newspaper and journal articles rather than watching television, and talking to people about the attack as a means of gathering information.

Literature regarding children and television more clearly asserts that too much viewing of disaster related television could be harmful. Statistics from before September 11<sup>th</sup> tell us that televisions in the average American household are on for more than seven hours a day <sup>11</sup>. This doesn't necessarily mean that one person is watching TV for seven hours straight, but, nonetheless, the TV is on. Different people may watch at different times, or the TV may be on as someone is cooking or engaging in some other activity. As such, children in most American households are probably being exposed to images of traumatic events for many hours each

day even though no one has made a conscious decision to expose these children to these images.

If parents allow young children to watch the news at all, experts suggest that parents watch the news WITH their children and talk about what they are seeing. For example, if parents allowed their children to watch coverage of the September 11<sup>th</sup> attacks, children may have needed it explained to them that despite seeing the plane crash into the building over and over again, this was a single incident on one day. Also, parents can help their children put the news into context by explaining that (1) there are many good people who will do their best to keep them safe if something bad happens (focus on the firemen and rescue teams and not just on the attack); and (2) the news often tells us bad things that happen in the world, but most of the country is safe and most people who fly in airplanes land safely on the ground and have no problems at all.

Unfortunately, it is true that most reported news is bad news. We don't hear about the plane that landed safely or the car that made it to and from its destination without incident. Children need to be reminded that what they see on the news does not represent the way things are everywhere.

Most importantly, parents need to allow and even encourage children to ask questions. Children may have irrational fears after watching a news report because they misunderstand something. If they share those fears or ask clarifying questions, parents can help alleviate their anxiety. Parents can tell the child that a lot of people are working hard to make the situation safer for the future. If a child seems to be watching too much news coverage of a traumatic event, the parent can redirect the child's attention to other more productive and positive activities.

## References

1. Schuster, M.A., Stein, B.D., Jaycox, L.H., Collins, R.L., Marshall, G.N., Elliott, M.N., et al. (2001). A National Survey of stress reactions after the September 11, 2001 terrorist attacks. *New England Journal Medicine*, 345, 1507-1512.
2. Tucker, P., Pfefferbaum, B., Nixon, S., & Dickson, W. (2000). Predictors of post-traumatic stress symptoms in Oklahoma City: Exposure, social support, peri-traumatic response. *Journal of Behavioral Health Services and Research*, 27, 406-416.
3. Pfefferbaum, B., Moore, V., McDonald, N., Maynard, B., Gurwitch, R., & Nixon, S. (1999). The role of exposure in posttraumatic stress in youths following the 1995 bombing. *Journal of the State Medical Association*, 92, 164-167.
4. Pfefferbaum, B., Nixon, S., Tucker, P., Tivis, R., Morre, V., Gurwitch, R., Pynoos, R., & Geis, H. (1999). Posttraumatic stress response in bereaved children after the Oklahoma City

bombing . *Journal of the American Academy of Child and Adolescent Psychiatry*, 38, 1372-1379.

5. Pfefferbaum, B., Nixon, S., Tivis, R., Doughty, D., Pynoos, R., Gurwitch, R., & Foy, D. (2001). Television exposure in children after a terrorist incident. *Psychiatry*, 64, 202-211..

6. Sloan, M. (2000). Response to media coverage of terrorism. *Journal of Conflict Resolution*, 44, 508-522.

7. Murphy, S. (1984). After Mount St. Helens disaster stress research. *Journal of Psychosocial Nursing*, 22, 9-18.

8. Cohen, N. (1997). Lessons learned from providing disaster counseling after TWA flight 800. *Psychiatric Services*, 48, 461-462.

9. McFarlane, A. (1986). Victims of trauma and the news media [Letter] . *Medical Journal of Australia*, 145, 664.

10. Nader, K., Pynoos, R., Fairbanks, L., Al-Ajeel, M., & Al-Asfour, A. (1993). A preliminary study of PTSD and grief among the children of Kuwait following the Gulf crisis. *British Journal of Clinical Psychology*, 32, 407-416.

11. DeFleur, M. & Dennis, E. (2002). *Understanding mass communication: A liberal arts perspective* (7th ed). Boston: Houghton Mifflin.