

Media-Induced War Trauma Amid Conflicts in Ukraine

Zhaohui Su, Dean McDonnell, Ali Cheshmehzangi, Barry L. Bentley, Junaid Ahmad, Sabina Šegalo, Claudimar Pereira da Veiga, and Yu-Tao Xiang

Abstract

War could be traumatic. War trauma could often lead to severe and sustained health consequences on people's physical and psychological health. War trauma is often prevalent in people who either participated in the war or lived near conflict zones, such as military professionals, refugees, and health workers. Advances in information and communication technologies, such as the speed, scale, and scope at which people worldwide could be exposed to the near-time happenings of the war, mean that an unprecedented number of people could face media-induced war trauma. Different from war experienced in person, which could be limited in scope and intensity, media-induced war trauma can be substantially more extensive and comprehensive—news reports on the war often cover all aspects and angles possible, possibly paired with disturbing, if not demoralizing, images, repeatedly 24/7. Although media-induced war trauma could have a profound influence on people's mental health, particularly factoring in the compounding challenges caused by the pandemic, there is a dearth of research in the literature. To shed light on this issue, in this article, we aim to examine the implications of media-induced war trauma on people's health and well-being. Furthermore, we discuss the duties and responsibilities of the media industry amid and beyond the current conflicts in Ukraine.

Keywords

war trauma, mental health, ethics, media, public health

War could be traumatic. In the name of defense or justice and often under the guise of following orders, war reveals the worst of humanity. War also represents a rare situation in which even violence designed for mass destruction or deliberate decimation can be justified (Tzu, 2014). Yet the scars it leaves are galore. As seen in military professionals, refugees, and health workers, exerting, receiving, or even witnessing atrocities could often cause war trauma (Derluyn et al., 2004; Fouad et al., 2017; B. S. Levy & Sidel, 2013). War trauma could be understood as traumatic health consequences resulting from being exposed to the war (Hunt, 2010). Recurring evidence shows that war trauma could often lead to severe and sustained health consequences on people's physical and psychological health (Charlson et al., 2019; Howard et al., 2022; Roberts et al., 2019). A study of 1,247 Ukrainians amid the war, for instance, showed that Ukrainians who have direct exposure to the Russian-Ukraine conflicts experienced elevated levels of posttraumatic stress disorders compared with people who did not have direct exposure (Johnson et al., 2022). Findings from meta-analyses further show that at any point in people affected by war or conflicts, the prevalence of mental disorders, such as depression, posttraumatic stress disorders, and schizophrenia, is 22.1% (Charlson et al., 2019).

Traditionally, war trauma is often prevalent in people who either participated in the war or were in close proximity to the battleground, such as military professionals, refugees, and health workers (Murthy & Lakshminarayana, 2006; Rozanov et al., 2019). However, situations might be changing because of the unique circumstances of the Russia-Ukraine war. For starters, the current conflicts occur against the backdrop in which advanced information and communication technologies are becoming ever-more prevalent. The speed, scale, and scope at which people could be exposed to the near-time happenings of the war mean that the battleground of the war is expanding via the Internet to people's living rooms and workplaces fast. In other words, exposure to the brutality of the war is no longer confined within the geographical space where the shelling and bombing occur; rather, it could encroach into people's cyberspace, where media coverage of the war travels and meanders (Su et al., 2021). This means that an unprecedented number of people who neither participated in the war nor were in close proximity to the conflicts could be exposed to media-induced war trauma.

It is important to underscore that rather than trivial, media-induced war trauma may lead to material mental health challenges in people worldwide. Different from military professionals, refugees, health workers, or even war journalists, who may experience or witness only some parts of the war near or from afar, people at home often have to struggle to process all aspects of the war from all angles possible, often paired with disturbing, if not demoralizing, images and video footages, repeatedly 24/7. Social media could further compound the situation. The built-to-monetize algorithms that many social-media platforms worship could ensure that not only do people receive news, they also receive it in a calculated fashion that can further fuel their continued media consumption (R. Levy, 2021). This heavy media coverage could not only expose people, even people who live thousands of miles away from the conflict zones, to the darkest sides of war and humanity and, in turn, war trauma, but also has the potential to inadvertently overwhelm people to levels of war trauma that might not be even seen in communities who are directly affected by the war. Not to mention that misinformation on social

media, which could be both distracting and mentally exacting (Lazer David et al., 2018), may further stress people's mental health.

The pandemic could further exacerbate the situation. It is important to emphasize that 2022 marks the third year of the COVID-19 pandemic, a time when much of the world's mental health has been materially affected by the pandemic (Q. Liu et al., 2020; S. Liu et al., 2020; Santomauro et al., 2021). It is estimated, for instance, that the pandemic has added an additional 76.2 million anxiety disorders and 49.4 million major depressive disorders across the globe (Santomauro et al., 2021). The fact that COVID-19 is still evolving (Our World in Data, 2022), either surging or resurfacing in many parts of the world, could exert additional pressure on people's mental-health issues (Su et al., 2022). What these insights combined suggest is that in a time when people's ability to protect personal and public health, as well as global health such as the well-being of Ukrainians, is in high demand, as a result of unduly exposure to media-induced war trauma, their mental health might be too mired in challenges to be helpful in a timely fashion. Furthermore, they also point to the critical role of the media industry in shaping public health and global affairs and the need for media professionals to assume duties and responsibilities in promoting the welfare of all members of society while limiting, if not eliminating, the unintended consequences of their reporting. In other words, questions such as "Does this report present well-balanced views and factual evidence, or is it engineered to be sensational?" and "What intended and unintended consequences might this coverage on the war cause in all stakeholders, especially those who live with severe mental health disorders?" should be asked and confidently answered before they meet the public.

Amid the cascading threats of the COVID-19 pandemic, climate change, environmental degradation, and the war, as the "fourth state" or the guardian of virtuous social norms and accountable behaviors (Schultz, 1998), the media industry not only has an obligation to bear witness and protect people who live in or near the conflict zone but also to the health and well-being of all citizens of the globe, especially when the dangers come from within, such as media-induced war trauma. This due diligence would require media professionals to factor in the mental health of all their intended and unintended audiences (Society of Professional Journalists, 2022), ranging from families of fallen soldiers from both Ukraine and Russia to young children from both countries to people who live with severe mental-health disorders across the globe, in assessing the impacts of their coverage on the war. If history is any guide (Jefee-Bahloul et al., 2016; Shoib et al., 2022; Singh et al., 2021), both war and subsequent humanitarian aid often take the form of a marathon, as opposed to a sprint. This means that the duration of help needed from refugees from Ukraine and other countries will likely be in units of decades, as opposed to days or weeks. To ensure optimal and sustainable humanitarian help could be encouraged and empowered by their reports alone, not least to avoid breeding fatigue and inaction among their audiences, the media industry should take profound caution to avoid overexposing the world to an infinite amount of war trauma. Unlike the war, which is inherently traumatic, the media industry has a choice. If there is an ideal time for the media industry to make a stand and be a positive light in humanity's darkest hours, via balanced and accountable reporting and beyond, it is now.

Author Contributions

Z. Su conceived the work, reviewed the literature, and drafted and edited the manuscript. D. McDonnell, A. Cheshmehzangi, B. L. Bentley, J. Ahmad, S. Šegalo, C. P. da Veiga, and Y.-T. Xiang reviewed the literature and edited the manuscript. All of the authors approved the final manuscript for submission.

Declaration of Conflicting Interests

The author(s) declared that there were no conflicts of interest with respect to the authorship or the publication of this article.

Open Practices

Data are available upon reasonable request.

ORCID iDs

Zhaohui Su <https://orcid.org/0000-0003-2005-9504>

Barry L. Bentley <https://orcid.org/0000-0002-4360-5902>

Acknowledgments

We express our gratitude to the editor and reviewers for their kind feedback and constructive input.

References

- Charlson, F., van Ommeren, M., Flaxman, A., Cornett, J., Whiteford, H., & Saxena, S. (2019). New WHO prevalence estimates of mental disorders in conflict settings: A systematic review and meta-analysis. *The Lancet*, 394(10194), 240–248. [https://doi.org/10.1016/s0140-6736\(19\)30934-1](https://doi.org/10.1016/s0140-6736(19)30934-1)
- COVID-19 Mental Disorders Collaborators. (2021). Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic. *The Lancet*, 398(10312), 1700–1712. [https://doi.org/10.1016/S0140-6736\(21\)02143-7](https://doi.org/10.1016/S0140-6736(21)02143-7)
- Derluyn, I., Broekaert, E., Schuyten, G., & Temmerman, E. D. (2004). Post-traumatic stress in former Ugandan child soldiers. *The Lancet*, 363(9412), 861–863. [https://doi.org/10.1016/S0140-6736\(04\)15734-6](https://doi.org/10.1016/S0140-6736(04)15734-6)
- Fouad, F. M., Sparrow, A., Tarakji, A., Alameddine, M., El-Jardali, F., Coutts, A. P., El Arnaout, N., Karroum, L. B., Jawad, M., Roborgh, S., Abbara, A., Alhalabi, F., AlMasri, I., &

Jabbour, S. (2017). Health workers and the weaponisation of health care in Syria: A preliminary inquiry for The Lancet–American University of Beirut Commission on Syria. *The Lancet*, 390(10111), 2516–2526. [https://doi.org/10.1016/S0140-6736\(17\)30741-9](https://doi.org/10.1016/S0140-6736(17)30741-9)

Howard, J. T., Stewart, I. J., Amuan, M., Janak, J. C., & Pugh, M. J. (2022). Association of traumatic brain injury with mortality among military veterans serving after September 11, 2001. *JAMA Network Open*, 5(2), Article e2148150. <https://doi.org/10.1001/jamanetworkopen.2021.48150>

Hunt, N. C. (2010). *Memory, war and trauma*. Cambridge University Press.

Jefee-Bahloul, H., Bajbouj, M., Alabdullah, J., Hassan, G., & Barkil-Oteo, A. (2016). Mental health in Europe's Syrian refugee crisis. *The Lancet Psychiatry*, 3(4), 315–317. [https://doi.org/10.1016/S2215-0366\(16\)00014-6](https://doi.org/10.1016/S2215-0366(16)00014-6)

Johnson, R. J., Antonaccio, O., Botchkovar, E., & Hobfoll, S. E. (2022). War trauma and PTSD in Ukraine's civilian population: Comparing urban-dwelling to internally displaced persons. *Social Psychiatry and Psychiatric Epidemiology*, 57, 1807–1816. <https://doi.org/10.1007/s00127-021-02176-9>

Lazer David, M. J., Baum Matthew, A., Benkler, Y., Berinsky Adam, J., Greenhill Kelly, M., Menczer, F., Metzger, M. J., Nyhan, B., Pennycook, G., & Zittrain Jonathan, L. (2018). The science of fake news. *Science*, 359(6380), 1094–1096. <https://doi.org/10.1126/science.aao2998>

Levy, B. S., & Sidel, V. W. (2013). Adverse health consequences of the Iraq War. *The Lancet*, 381(9870), 949–958. [https://doi.org/10.1016/S0140-6736\(13\)60254-8](https://doi.org/10.1016/S0140-6736(13)60254-8)

Levy, R. (2021). Social media, news consumption, and polarization: Evidence from a field experiment. *American Economic Review*, 111(3), 831–870. <https://doi.org/10.1257/aer.20191777>

Liu, Q., Luo, D., Haase, J. E., Guo, Q., Wang, X. Q., Liu, S., Yang, J., & Yang, B. X. (2020). The experiences of healthcare providers during the COVID-19 crisis in China: A qualitative study. *The Lancet Global Health*, 8(6), e790–e798. [https://doi.org/10.1016/S2214-109X\(20\)30204-7](https://doi.org/10.1016/S2214-109X(20)30204-7)

Liu, S., Yang, L., Zhang, C., Xiang, Y.-T., Liu, Z., Hu, S., & Zhang, B. (2020). Online mental health services in China during the COVID-19 outbreak. *The Lancet Psychiatry*, 7(4), e17–e18. [https://doi.org/10.1016/S2215-0366\(20\)30077-8](https://doi.org/10.1016/S2215-0366(20)30077-8)

Murthy, R. S., & Lakshminarayana, R. (2006). Mental health consequences of war: A brief review of research findings. *World Psychiatry*, 5(1), 25–30.

Our World in Data. (2022). Coronavirus pandemic (COVID-19). <https://ourworldindata.org/coronavirus>

Roberts, B., Makhshvili, N., Javakhishvili, J., Karachevskyy, A., Kharchenko, N., Shpiker, M., & Richardson, E. (2019). Mental health care utilisation among internally displaced persons in Ukraine: Results from a nation-wide survey. *Epidemiology and Psychiatric Sciences*, 28(1), 100–111. <https://doi.org/10.1017/s2045796017000385>

Rozanov, V., Franciškovic, T., Marinic, I., Macarenco, M.-M., Letica-Crepulja, M., Mužinic, L., Jayatunge, R., Sisask, M., Vevera, J., Wiederhold, B., Wiederhold, M., Miller, I., & Pagkalos, G. (2019). Mental health consequences of war conflicts. In A. Javed & K. N. Fountoulakis (Eds.), *Advances in psychiatry* (pp. 281–304). Springer International Publishing.

Schultz, J. (1998). *Reviving the Fourth Estate: Democracy, accountability and the media*. Cambridge University Press.

Shoib, S., Saeed, F., Dazhamyar, A. R., Armiya'u, A. Y., Badawy, M. M., Shah, J., & Chandradasa, M. (2022). Women in Afghanistan: A call for action. *The Lancet Psychiatry*, 9(5), 342–343. [https://doi.org/10.1016/S2215-0366\(22\)00039-6](https://doi.org/10.1016/S2215-0366(22)00039-6)

Singh, N. S., Ataullahjan, A., Ndiaye, K., Das, J. K., Wise, P. H., Altare, C., Ahmed, Z., Sami, S., Akik, C., Tappis, H., Mirzazada, S., Garcés-Palacio, I. C., Ghattas, H., Langer, A., Waldman, R. J., Spiegel, P., Bhutta, Z. A., Blanchet, K., & BRANCH Consortium Steering Committee. (2021). Delivering health interventions to women, children, and adolescents in conflict settings: What have we learned from ten country case studies? *The Lancet*, 397(10273), 533–542. [https://doi.org/10.1016/S0140-6736\(21\)00132-X](https://doi.org/10.1016/S0140-6736(21)00132-X)

Society of Professional Journalists. (2022). Society of Professional Journalists code of ethics. <https://www.spj.org/ethicscode.asp>

Su, Z., McDonnell, D., Ahmad, J., Cheshmehzangi, A., & Xiang, Y.-T. (2022). Mind the “worry fatigue” amid Omicron scares. *Brain, Behavior, and Immunity*, 101, 60–61. <https://doi.org/10.1016/j.bbi.2021.12.023>

Su, Z., McDonnell, D., Wen, J., Kozak, M., Abbas, J., Šegalo, S., Li, X., Ahmad, J., Cheshmehzangi, A., Cai, Y., Yang, L., & Xiang, Y.-T. (2021). Mental health consequences of COVID-19 media coverage: The need for effective crisis communication practices. *Globalization and Health*, 17(1), Article 4. <https://doi.org/10.1186/s12992-020-00654-4>

Tzu, S. (2014). *The art of war*. Penguin Group