Moral Injury in Veterans: Considerations for Care Providers and Others

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Associate Director, VA Mental Health and Chaplaincy
Durham, NC
Objectives

1. Define moral injury and describe affiliated psychosocial challenges.

2. Identify, measure, and assess for moral injury using different available scales and other approaches.

3. Explore and potentially utilize evidence-based psychotherapeutic approaches, interdisciplinary approaches, and/or community-based approaches to moral injury.
Key Colleagues: Moral Injury

- Dr. Keith Meador
- Chaplain Bill Cantrell
- Dr. Jen Wortmann
- Dr. Melissa Smigelsky
- Chaplain Steve Sullivan
- Dr. George Jackson
- Dr. Kent Drescher
- Dr. Joe Currier
- Numerous chaplain and mental health colleagues
Outline

- Preliminary Indications
- Birth of a Construct
- Measurement and Identification
- Intervention & Future Directions
Moral Injury:
Preliminary Indications

Moral Injury: Indicators in Antiquity

The Trojan Women
- Euripides (415 BC)
Killing

- Killing associated with:¹⁻⁶
  - Higher PTSD symptomatology (OIF/OEF)
  - Suicidal ideation (Vietnam)
  - Depression and PTSD symptoms (OIF)
  - PTSD symptoms, alcohol abuse, anger, and relationship problems (OIF)
  - PTSD, dissociation, functional impairment, violent behavior (Vietnam)
  - PTSD and problematic alcohol use (Gulf War)

Spiritual Struggle

I abandoned my religious faith during the war.

N = 100 Vietnam veterans in PTSD treatment

Difficulty reconciling beliefs with traumatic warzone events

Spiritual Struggle

Spiritual Struggle\(^1\) in:

**OIF**\(^2\) *(\(N = 50\) OEF/OIF veterans in PTSD treatment)*

**GP** \((N = 654\) males in Nat’l Rep. Sample)*

- I wonder whether God has abandoned me.
- I feel God is punishing me for my sins or lack of spirituality.
- I know that God forgives me.
- I have forgiven those who hurt me.
- I have forgiven myself for things that I have done wrong.

Compared to demographically matched non-veteran counterparts, both Vietnam era and Iraq/Afghanistan era veterans display weaker spirituality across a range of dimensions:\(^2\)

- Daily spiritual experiences
- Forgiveness
- Private practices
- Religious coping
- Organizational religiousness
- Values

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Why do Veterans with PTSD turn to VA?

“That is, veterans’ motivation for continued pursuit of mental health services does not appear to be primarily greater symptom relief or more social contact. Rather, the specificity of paths to the number of therapy sessions from guilt and change in religious faith suggests that a primary motivation of veterans’ continuing pursuit of treatment is their search for a meaning and purpose to their traumatic experiences. In this regard, they appear to be looking to their therapists and, perhaps, the VA system as a whole to provide the answers and a sense of belonging to a larger whole that is no longer being fulfilled sufficiently by their religious faith.”

- Fontana & Rosenheck (2004). Trauma, change in strength of religious faith, and mental health service use among veterans treated for PTSD. The Journal of Nervous and Mental Disease, 192, 579-584.
Moral Injury:
Birth of a Construct
Moral Injury: What is it?

“1) A betrayal of what’s right, 2) by someone who holds legitimate authority (e.g., in the military – a leader), 3) in a high stakes situation. All three.”

- Johnathan Shay (1994, 2002, 2014)¹, ², ³

“psychological, biological, spiritual, behavioral and social impact of perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations”

- Brett Litz et al. (2009)⁴

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Moral Injury: What is it not?

- Not a psychiatric diagnosis

- Not Posttraumatic Stress Disorder (PTSD)

- However, PTSD is:
  - Related conceptually and empirically
  - No longer in “Anxiety Disorders” section of DSM, perhaps gesturing toward other consequences of psychological trauma, such as moral injury.
Moral Injury, PTSD, & fMRI

Moral Injury

PTSD

Moral Injury in Professional Contexts\textsuperscript{1,2}

“Moral Injury” Cites in PubMed

- Publications

“Moral Injury” Cites at ISTSS

- Citations (any kind)
- Talks
- Posters

2. ISTSS citations counted by Jason Nieuwsma based on ISTSS Final Program guides. Separate mentions (hits) for moral injury as part of same presentation are counted as single citation. Separate mentions (hits) as part of a symposium (e.g., symposium name, titles of presentations within symposium) are counted separately.
What’s in a Name?
Utility of “Moral Injury” for Different Constituencies

- Mental health
- Religious / spiritual
- Sociopolitical
- Military / veterans
- Patients
- Health care
- And beyond...
Identifying & Measuring Moral Injury
Should We Measure Moral Injury?

- Pitfalls of measurement
  - Can reduce experience to high/low on a measure
  - Can downplay importance of narrative
  - Might not be a fully “measurable” phenomenon
  - Invites:
    - Disease/Treatment mentality
    - Symptom reduction mentality
  - Might diminish serious consideration of other aspects of moral injury, including social, spiritual, theological, communal, political, and ethical.

- Should we allow conceptualizations of moral injury to challenge traditional boundaries of mental health paradigms?
Should We Measure Moral Injury?

A ruler is a tool, not a blindfold.

- Lederberg & Fitchett (1999)
### Moral Injury Scales

<table>
<thead>
<tr>
<th>Measure</th>
<th># of items</th>
<th>Response options</th>
<th>Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moral Injury Events Scale (MIES)(^1,2)</td>
<td>9</td>
<td>1 = SA to 6 = SD</td>
<td>.89(^6)</td>
</tr>
<tr>
<td>Moral Injury Questionnaire – Military Version (MIQ-M)(^3)</td>
<td>20</td>
<td>0 = Never to 3 = Often</td>
<td>.90(^6)</td>
</tr>
<tr>
<td>Expressions of Moral Injury Scale – Military Version (EMIS-M)(^4)</td>
<td>17</td>
<td>1 = SD to 5 = SA</td>
<td>.94(^4)</td>
</tr>
<tr>
<td>Brief Moral Injury Screen (BMIS)(^5)</td>
<td>7(^*)</td>
<td>0 = SD to 3 = SA</td>
<td>.89(^6)</td>
</tr>
</tbody>
</table>

\(^*\) Items 4-7 only completed if endorse (agree, strongly agree) with at least one item from 1-3.

# Moral Injury Events Scale (MIES) $^{1,2}$

**Moral Injury Event Scale**

<table>
<thead>
<tr>
<th>(1) I saw things that were morally wrong</th>
<th>Strongly Agree</th>
<th>Moderately Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Moderately Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) I am troubled by having witnessed others’ immoral acts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(3) I acted in ways that violated my own moral code or values</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(4) I am troubled by having acted in ways that violated my own morals or values</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(5) I violated my own morals by failing to do something that I felt I should have done</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(6) I am troubled because I violated my morals by failing to do something that I felt I should have done</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(7) I feel betrayed by leaders who I once trusted</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(8) I feel betrayed by fellow service members who I once trusted</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(9) I feel betrayed by others outside the U.S. military who I once trusted</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>10. I trust my leaders and fellow service members to always live up to their core values</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>(11) I trust myself to always live up to my own moral code</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

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Table 1. Descriptive statistics for Moral Injury Questionnaire—Military version items for community and clinical sample

<table>
<thead>
<tr>
<th>MIQ Item</th>
<th>Community sample</th>
<th>Clinical sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Things I saw/experienced in the war left me feeling betrayed or let-down by military/political leaders</td>
<td>6.61 2.32 1.13</td>
<td>3.27* 0.83</td>
</tr>
<tr>
<td>(2) I did things in the war that betrayed my personal values</td>
<td>6.63 1.82 1.04</td>
<td>2.74* 1.14</td>
</tr>
<tr>
<td>(3) There were times in the war that I saw/engaged in revenge/retribution for things that happened</td>
<td>7.05 1.62 0.93</td>
<td>2.59* 1.12</td>
</tr>
<tr>
<td>(4) I had an encounter(s) with the enemy that made him/her seem more ‘human’ and made my job more difficult</td>
<td>3.61 1.70 1.08</td>
<td>2.25* 1.10</td>
</tr>
<tr>
<td>(5) I saw/was involved in violations of rules of engagement</td>
<td>5.37 1.33 0.66</td>
<td>1.96* 1.11</td>
</tr>
<tr>
<td>(6) I saw/was involved in the death(s) of an innocent in the war</td>
<td>6.27 1.45 0.82</td>
<td>2.25* 1.03</td>
</tr>
<tr>
<td>(7) I feel guilt over failing to save the life of someone in the war</td>
<td>9.41 1.56 0.97</td>
<td>2.91* 1.17</td>
</tr>
<tr>
<td>(8) I had to make decisions in the war at times when I didn’t know the right thing to do</td>
<td>6.50 1.72 0.94</td>
<td>2.61* 1.10</td>
</tr>
<tr>
<td>(9) I feel guilt for surviving when others didn’t</td>
<td>10.94 1.69 1.04</td>
<td>3.62* 1.04</td>
</tr>
<tr>
<td>(10) I saw/was involved in violence that was out of proportion to the event</td>
<td>5.65 1.46 0.83</td>
<td>2.28* 1.10</td>
</tr>
<tr>
<td>(11) I saw/was involved in the death(s) of children</td>
<td>6.33 1.43 0.82</td>
<td>2.27* 1.05</td>
</tr>
<tr>
<td>(12) I experienced tragic war-zone events that were chaotic and beyond my control</td>
<td>9.11 1.84 1.04</td>
<td>3.10* 0.93</td>
</tr>
<tr>
<td>(13) I was sexually assaulted</td>
<td>0.66 1.05 0.28</td>
<td>1.00 0.00</td>
</tr>
<tr>
<td>(14) I sometimes treated civilians more harshly than was necessary</td>
<td>7.06 1.75 0.96</td>
<td>2.72* 1.13</td>
</tr>
<tr>
<td>(15) I felt betrayed or let-down by trusted civilians during the war</td>
<td>7.17 1.69 0.94</td>
<td>2.67* 1.11</td>
</tr>
<tr>
<td>(16) I saw/was involved in a ‘friendly-fire’ incident</td>
<td>4.46 1.23 0.58</td>
<td>1.64* 0.78</td>
</tr>
<tr>
<td>(17) I destroyed civilian property unnecessarily during the war</td>
<td>6.76 1.41 0.80</td>
<td>2.35* 1.22</td>
</tr>
<tr>
<td>(18) Seeing so much death has changed me</td>
<td>9.26 2.00 1.15</td>
<td>3.38* 0.96</td>
</tr>
<tr>
<td>(19) I made mistakes in the war zone that led to injury or death</td>
<td>4.09 1.17 0.40</td>
<td>1.64* 0.91</td>
</tr>
<tr>
<td>(20) I came to realize during the war that I enjoyed violence</td>
<td>8.24 1.59 0.85</td>
<td>2.68* 1.15</td>
</tr>
<tr>
<td>Average item score</td>
<td>9.74 1.62 0.64</td>
<td>2.45* 0.61</td>
</tr>
</tbody>
</table>

* p < .001.
## Brief Moral Injury Screen (BMIS)\(^1\)

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>During my time in the warzone...</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. ...I witnessed morally wrong acts.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. ...I did not stop morally wrong acts even though I could have.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. ...I did things that were morally wrong.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>If you answered “0” or “1” to ALL 3 items above, skip items 4-7 below.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>As a result of things I witnessed, failed to stop, and/or did in the warzone that were morally wrong...</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. ...I now think I am not a moral person.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. ...I now do not behave morally.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6. ...I now do not think that other people are moral.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7. ...I have abandoned moral beliefs that I had before going to war.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Moral Injury Experience

- **Moral Injury Study**\(^1\)
  - \(N = 315\) post-9/11 veterans
  - Recruited from VISN 6 MIRECC Repository\(^2\)
  - Completed 40-page questionnaire by mail

- 44% endorsed experiencing at least 1 morally injurious event on BMIS.
Symptomatology based on MIE


Symptomatology based on MIE

Moral injury Sequela

PTSD Symptoms

Alcohol Abuse

Depression Symptoms

Suicidality

Drug Abuse

Novel Types of Moral Injury

**Reputation Smearing:** “In Cuba, somebody, a girl that I worked with, accused me of being a terrorist sympathizer... I had leadership telling me that they were going to send me home. And it was extremely stressful and horrible.”

**Animal Abuse:** “And then there was one instance where a fellow went after a dog with a sledgehammer, and that one really bothered me. I was able to let the dog go, but, yeah. He was hungry, and he was trying to get into a Conex. The dog got hit once with the sledgehammer, and I think it just hurt the dog a little bit, didn’t do any lasting damage, but he was planning on killing him with a sledgehammer.”

**Fraud, waste, and abuse:** “...I don’t even know how many I had, eight, nine, maybe a thousand night vision goggles, which are very expensive, like $7000 dollars each, and I had like a thousand of them brand new in a Conex, in a container. And I was scared to death because no one knew about it but me. And here was my friend telling me, oh, man. Do you know what we could do with this stuff? We could sell it and some stuff. You know what I’m saying? But I was scared to death.”
Emerging Approaches to Care
Emerging Psychological Interventions for Moral Injury

ACT for Moral Injury$^{1,2}$

“Hold and Move”

- Distinctive attributes within ACT as an evidence-based modality for approaching moral injury:
  - Understanding of human suffering
  - Willingness to be present
  - Approach to forgiveness and guilt
  - Orientation toward values
  - Behavioral emphasis
  - Engagement beyond mental health

Who should “Treat” Moral Injury?

• The “treatment” mentality:
  ○ Implies a “cure” to a “disease/disorder”
  ○ Alternative: reintegrating into a community where one can have value and purpose\(^1,2\)

• A collaborative care approach:
  ○ Psychosocial (psychology, counseling, social work)
  ○ Psychopharmacological (psychiatry)
  ○ Religious/spiritual (clergy, chaplains)
  ○ Community (social networks, faith communities, emerging ways of connecting)

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Collaborative Care

- People who are suffering frequently turn to clergy & chaplains.¹

- Veterans and Service members can be uniquely motivated to turn to clergy.²,³

- Chaplains/Clergy identify psychosocial issues over spiritual issues as what they see most often, though the two are interrelated.⁴

- Veterans with PTSD are turning to VA to address interrelated psychosocial, existential, and spiritual problems.⁵

- Moral injury beckons for a collaborative mental health and pastoral care approach.⁶

- To learn more about what chaplain-mental health teams in VA are doing to address moral injury, see: https://www.mirecc.va.gov/mentalhealthandchaplaincy/CollaborativeCare.asp

³ RTI International (manuscript under review). Help-seeking among active-duty military personnel: Utilization of chaplains and other mental health service providers.
⁵ Fontana & Rosenheck (2004). Trauma, change in strength of religious faith, and mental health service use among veterans treated for PTSD. The Journal of Nervous and Mental Disease, 192, 579-584.
Community Care

A Place to Call Home

- Developed for faith communities; applicable for other groups
- Series of four 20-minute videos designed to spur small-group discussions
  1. Partners in Care
  2. Trauma
  3. Moral Injury
  4. Belonging

https://www.mirecc.va.gov/mentalhealthandchaplaincy/community.asp
A Final Thought

“I cannot escape the suspicion that what we do as mental health professionals is not as good as the healing that in other cultures has been rooted in the native soil of the returning soldier’s community...

We must create our own new models of healing which emphasize the communalization of the trauma. Combat veterans and American citizenry should meet together face to face in daylight, and listen, and watch, and weep...

Tragedy brings us to cherish our mortality, to savor and embrace it. Tragedy inclines us to prefer attachment to fragile mortals whom we love...”

- Jonathan Shay, MD, PhD

_Achilles in Vietnam_
Questions?