



# Moral Injury and Spirituality in Veterans

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# Chronic PTSD :Challenges

- ▶ There is a need for better treatments that offer greater hope of recovery (Koenig et al., 2018; Steenkamp et al., 2015)
- ▶ VA has mandated the recovery model for serious mental illness
- ▶ Recovery embraces the notion that people with serious mental illness can live meaningful lives (Viktor Frankl, Man's Search for Meaning.)



# Recovery from Mental Illness/PTSD and Holistic/Integrative Approach

- ▶ Biological
- ▶ Psychological
- ▶ Social
- ▶ Spiritual



# Walsh's Recommended Therapeutic Lifestyle Changes (TLCs)

- ▶ Exercise
- ▶ Nutrition and diet
- ▶ Time in nature
- ▶ Recreation
- ▶ Relaxation
- ▶ Stress management
- ▶ Religious and spiritual involvement
- ▶ Community involvement- volunteerism (Walsh, 2011)



# Bio-Psycho-Social-Spiritual Scale

- ▶ 0 Means you don't agree
  - ▶ 10 Means you do agree
- 
- 1) I have a strong and healthy body
  - 2) I have sharp and clear mind
  - 3) I have positive connection to other people
  - 4) I experience personal peace and happiness



# TLCs in Weight Loss Study

- ▶ MAMAO - Management of Antipsychotic Medication Associated Obesity
  - ▶ Group classes and individual case management to combat weight gain from antipsychotic medication
- ▶ Pilot study of TLCs:
  - ▶ Veterans asked to record how frequently they implement TLCs
  - ▶ Data were analyzed with mixed-effects linear models to test for effects of TLC participation and week of the study



# TLC Results in Weight Loss Study

- ▶ More TLCs practiced → Higher Bio-psycho-social-spiritual (BPSS) Scale Scores
  - ▶ Avg. increase of 1.4 points (0-40 scale) for each additional TLC practiced ( $p = .013$  for main TLC effect)
  - ▶ TLCs provided the most benefit to psychological and social wellbeing, which each increased by about 0.5 points (0-10 scale) for each additional TLC.
- ▶ More TLCs practiced → Greater weight loss
  - ▶ Avg. weight loss of 0.03 lbs each week (1.5 lbs over course of year-long study) for each additional TLC practiced ( $p = .001$  for interactive TLC\*week effect)

Tessier, 2017



# TLC Study 2 Methods

- ▶ Developed workbook and provided groups and individual coaching on 8 TLCS
- ▶ Veterans set SMART goals
- ▶ Veterans keep diary of TLC behaviors
- ▶ Impact on Quality of Life/BPSS examined

Tessier, 2017



# TLC Pilot Study 2 Results

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- ▶ Weekly TLC Journals showed significant increase in TLC practice over time ( $F(1,322) = 107.3, p < .01$ ) with an average increase of 2 positive wellness behaviors per week ( $d = .8$ ).
- ▶ Quality of Life Improvements:
  - Physical health increased from 20.4 to 22.3 ( $F(1,21) = 4.9, p = .04$ ).
  - Psychological health increased from 17.2 to 18.9 ( $F(1,19) = 4.4, p = .05$ ).
  - Environmental health increased from 28.4 to 30.3, ( $F(1,19) = 9.0, p = .01$ ).
  - Improvement in the total score from 74.7 to 81.0 was also significant ( $F(1,19) = 9.4, p = .01$ ).
- ▶ Changes in WHOQOL-BREF were directly associated with changes in number of positive holistic behaviors, or TLC practice ( $r = .54$ )
- ▶ Significant decrease in diastolic blood pressure found, from 81.3 to 76.2 ( $F(1,21) = 4.5, p = .05$ ).

Tessier, 2017



# TLC Research: Conclusions

- ▶ Classes and Individual Coaching for each of the 8 Therapeutic Lifestyle Changes Demonstrated:
  - 1) Increased healthy behaviors
  - 2) Improvement in Quality of Life
  - 3) Decreases in Blood Pressure

Tessier, 2017



**My THERAPEUTIC LIFESTYLE PRACTICES DIARY**  
**THE 8 WAYS TO PRACTICE TLC'S**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

My goal is to make little changes for each lifestyle element to improve the quality of my life.

	Specific Goals	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Exercise								
Nutrition and Diet								
Time in Nature								
Relationships								
Recreation								
Relaxation / Stress Management								
Religious/Spiritual Involvement								
Service and Helping Others								



# Project 22

- ▶ 22 Veterans committed suicide each day of 2013
- ▶ Movie about and by Veterans raising awareness for high numbers of suicides in PTSD sufferers (Egbert & King, 2015)





# Definitions of Moral Injury

- ▶ “Perpetrating, failing to prevent, bearing witness to, or learning about acts that transgress deeply held moral beliefs and expectations.” (Litz et al., 2009)
- ▶ “a betrayal of what’s right, by someone who holds legitimate authority, in a high-stakes situation” (Shay, 2014, p 183)
- ▶ “a deep sense of transgression including feelings of shame, grief, meaninglessness, and remorse from having violated core moral beliefs” (Brock & Lettini, 2012, p xiv)

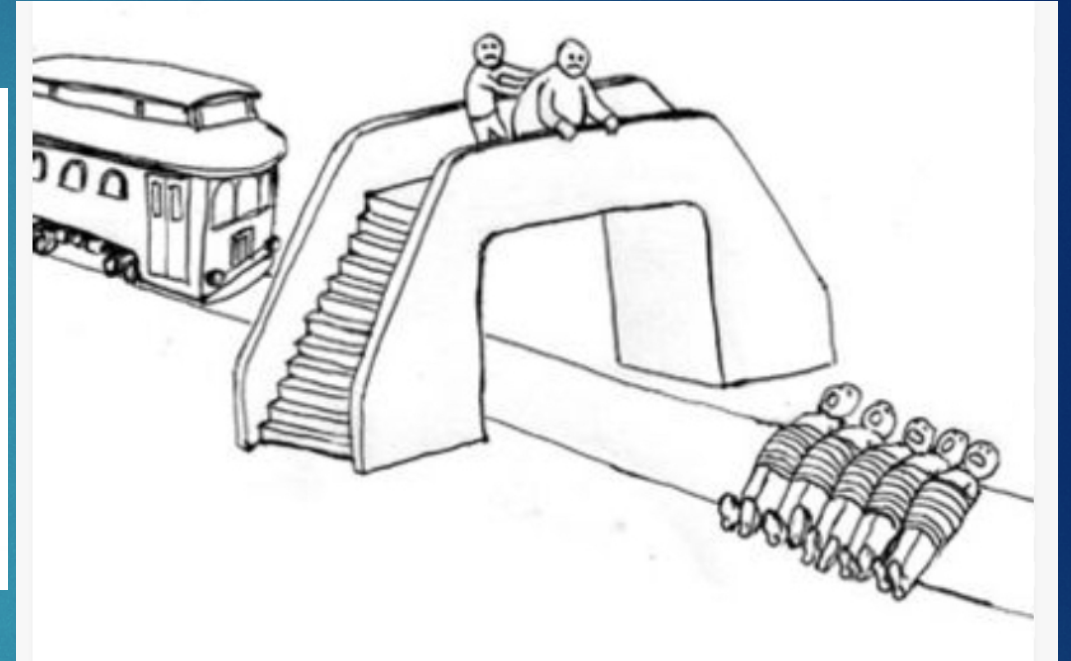
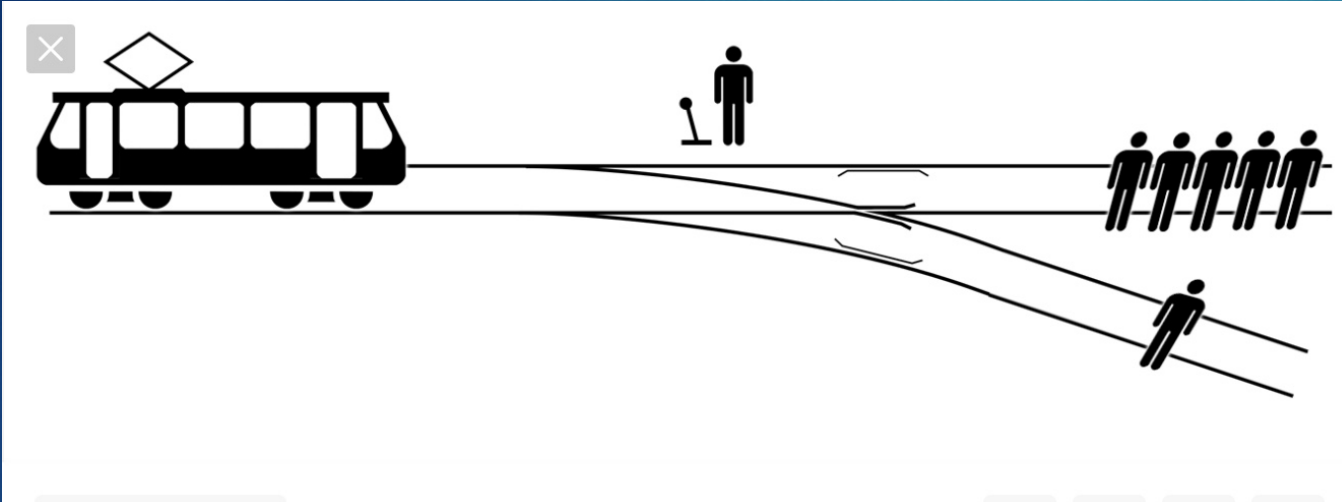


# Inner Conflict

- ▶ Sometimes moral injury is described as inner conflict. It may occur in the setting of having to make a choice between two outcomes, such as sacrificing few to save many. (Trolley Experiment, Otsuka, 2008)
- ▶ For example– Winston Churchill must have suffered inner conflict and/or moral injury, knowing he would sacrifice 3 thousand soldiers in France to save 300,000 in Dunkirk during World War II.
- ▶ Moral injury can occur when you make such a decision or witness someone in authority making such a decision



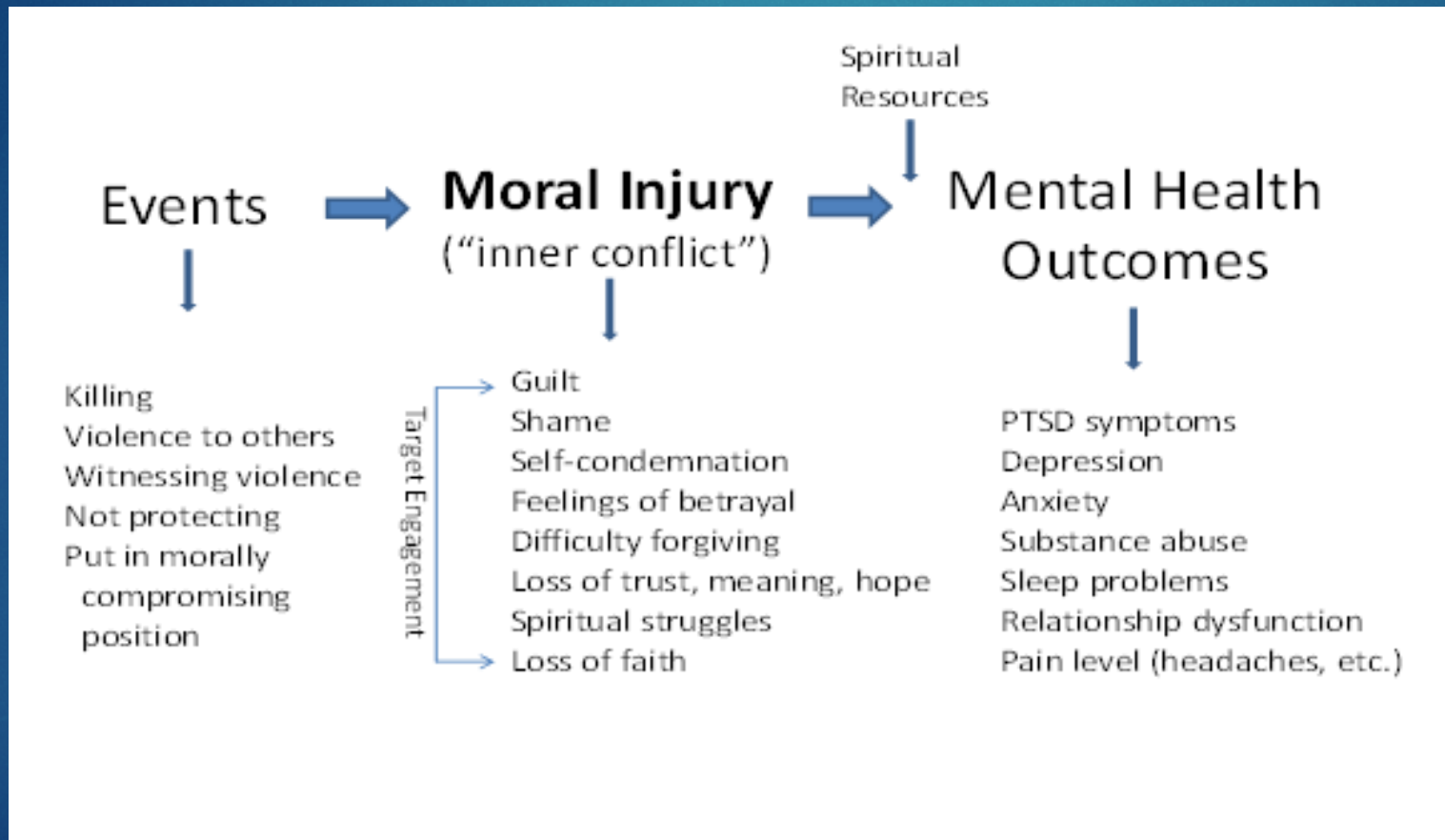
# Trolley dilemma:



Images from Wikipedia



# Moral Injury Model:





# Moral Injury and PTSD

- ▶ Moral injury is not PTSD. Persons with PTSD may also suffer from moral injury. But persons with moral injury may not necessarily have all the symptoms of PTSD.
- ▶ The presence of moral injury may complicate the recovery of persons with PTSD only receiving treatment that is focused on PTSD, and resolving MI may also improve PTSD or make it more amenable to standard treatments.



# Moral Injury and PTSD

## Moral Injury

Shame  
Guilt  
Betrayal  
Moral concerns  
Spiritual Distress

## PTSD

Nightmares/flashbacks  
Avoidance  
Emotional numbing  
Hyperarousal



# What research exists on Moral Injury?

- ▶ The study of moral injury has been evolving
- ▶ Instruments have been developed to measure the presence of a morally injurious event in a person's life (e.g. MIES, Nash et al., 2010)
- ▶ Instruments have been developed recently to measure the symptoms of moral injury and their change over time when Veterans are provided a treatment)



# Psychological Symptoms

- ▶ Self-condemnation
- ▶ Difficulty forgiving
- ▶ Inner conflict over moral concerns
- ▶ Feelings of betrayal
- ▶ Guilt
- ▶ Shame
- ▶ Loss of meaning/purpose
- ▶ Loss of trust



# The Consequences

Moral Injury and PTSD Sufferers may both have

- ▶ Anger
- ▶ Depression
- ▶ Anxiety
- ▶ Legal/disciplinary problems
- ▶ Physical disability
- ▶ Substance use problems
- ▶ Increased suicide risk
- ▶ Relationship problems and social withdrawal
- ▶ Legal/disciplinary problems
- ▶ Physical disability
- ▶ Substance use problems



# Measurements for Moral Injury:

## Events and Symptoms

- ▶ Moral Injury Events Scale (MIES)
- ▶ Moral Injury Questionnaire-Military Version (MIQ-Q)

## Symptoms only

- ▶ Moral Injury Symptom Scale-Military Version (MISS-M)
- ▶ MISS-M-Short Form (MISS-M-SF)
- ▶ Expressions of Moral Injury Scale (EMIS-M)



# Moral Injury Symptom Scale-Military Version: Development

- ▶ West LA VA MISSION team and four other VA sites collected 570 surveys from Veterans with PTSD symptoms (2016-2017)
- ▶ High prevalence of moral injury in Veterans surveyed (nearly 90%)
- ▶ High level of interest by Veterans in treatment for moral injury (over 80%)



# MISS-Military Version Subscales (45 items)

- ▶ Guilt
- ▶ Shame
- ▶ Moral concerns
- ▶ Religious struggles
- ▶ Loss of religious faith/hope
- ▶ Loss of meaning/purpose
- ▶ Difficulty forgiving
- ▶ Loss of trust
- ▶ Self-condemnation
- ▶ Betrayal



# MISS-M Validity and Reliability

- ▶ Discriminant validity: relatively weak correlations with other psychosocial, religious, and physical health constructs
- ▶ Convergent validity: strong correlations with PTSD, depression, and anxiety symptoms
- ▶ Cronbach's alpha of the overall scale was .92 and of individual subscales ranged from .56 to .91
- ▶ The test-retest reliability was .91 for the total scale and ranged from .78 to .90 for subscales



# MISS-M-SF

- ▶ MISS-M is a comprehensive 45-item scale
- ▶ MISS-M-SF is a 10-item version of the MISS-M
- ▶ Includes 1 item rated on 1-10 scale per subscale
- ▶ Has high reliability ( $\alpha=0.73$ ) and test-retest validity ( $ICC=0.87$ )
- ▶ Highly correlated with MISS-M ( $r=0.92$ )
- ▶ Score on any item of 8 or higher needs attention



# MISS-M-SF

1. I feel betrayed by leaders who I once trusted.
2. I feel guilt over failing to save the life of someone in war.
3. I feel ashamed about what I did or did not do during this time.
4. I am troubled by having acted in ways that violated my own morals or values.
5. Most people are trustworthy.
6. I have a good sense of what makes my life meaningful.
7. I have forgiven myself for what happened to me or others during combat.
8. All in all, I am inclined to feel that I am a failure.
9. I wondered what I did for God to punish me.
10. Compared to when you first went into the military has your religious faith since then... Weakened or Strengthened



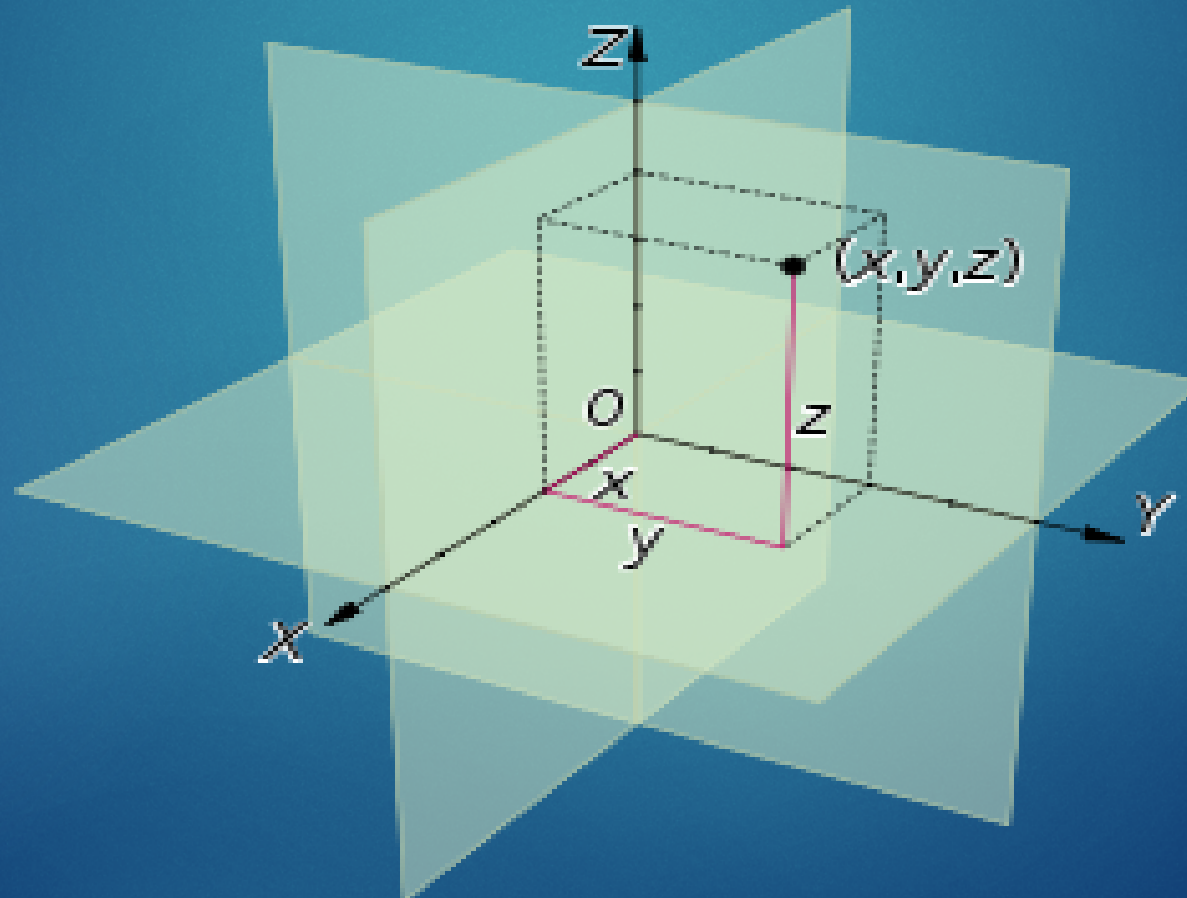
# Moral Injury May Result in Relationship Problems: (Future Research)

- ▶ We are spiritual beings
- ▶ “We are all struggling with a relationship problem” (Glasser, 1999)
- ▶ Is there a problem with a relationship with self? (self-loathing- a part of moral injury)
- ▶ Is there a problem in a relationship with others(friend, family, work) from withdrawal?
- ▶ Is there a problem with a relationship with G-d or higher power a sense of purpose or meaning? (Spiritual Struggles)
- ▶ How do these relationship problems then affect the soul– the mind, the will, the emotions? Nee, 1968



# SIMPLE AS X Y Z

- On a scale of 1-10 on each axis what is the health of this spiritual being in terms of relationships with self, others and Higher Power?



Wikipedia image

Ratsch, 2019



# RELATIONSHIP HEALTH SELF RATING

Please rate your agreement with the following 3 statements:

*I have always done my best.* (SELF) (x axis)

1      2      3      4      5      6      7      8      9      10  
(No, I am a failure)      (Yes, I have overcome many difficulties)

*I am rich with friends and family.* (OTHERS) (y axis)

1      2      3      4      5      6      7      8      9      10  
(No, I am lonely)      (Yes, I have many caring people in my life)

*I have purpose and meaning.* (HIGHER POWER) (z axis)

1      2      3      4      5      6      7      8      9      10  
(No, I just exist)      (Yes I enjoy every day)



# Moral Injury Symptoms and Suicide Risk

- ▶ Growing evidence of link between moral injury and increased suicide risk
- ▶ Published study of 570 Veterans and Active Duty Military
  - ▶ Measured moral injury, suicide risk index based on 10 known suicide risk factors
  - ▶ Measured religiosity and moderating effect of religion
- ▶ Moral injury strongly correlated with suicide risk ( $r=0.54$ )
  - ▶ Self-condemnation had the highest subscale correlation with MI
  - ▶ Religiosity did not mediate relationship between moral injury and suicide risk



# Moral Injury and Spirituality/Religiosity

- ▶ Religiosity/Spirituality (R/S) in Veterans has been inversely related to PTSD symptoms (Currier, et al 2014).
- ▶ And positively correlated with “Post Traumatic Growth” (Tsai et al 2015)
- ▶ In our study 90% of Veterans with PTSD symptoms reported Moral Injury symptoms as well.
- ▶ Overall, religiosity was inversely related to moral injury in Veterans with Severe PTSD. (religiosity measured by validated measure, BIAC) (Koenig, et al, 2018)



# Moral Injury and Treatment Preference

- ▶ What is the preference of Veterans in terms of treatment modality/provider?
- ▶ Some Veterans may prefer Chaplains
- ▶ Others may prefer mental health provider
- ▶ Stigma associated with mental illness– Veterans may prefer getting help in their faith based community leader
- ▶ Mental health/psychiatry should partner with faith based communities to help Veterans
- ▶ Also, within the VA mental health and chaplains should collaborate
- ▶ In one recent publication by this group Youssef et al, 2018, 80% of Veterans were open to a spiritually oriented treatment



# Specific Interventions in Development

- ▶ Adaptive Disclosure (AD)
- ▶ Impact of Killing
- ▶ Acceptance and Commitment Therapy
- ▶ Building Spiritual Strength (BSS)
- ▶ Spiritual-Integrated Cognitive Processing Therapy (SICPT)
- ▶ Chaplain Interventions (West LA, VA Shark Tank)



# A Structured Chaplain Intervention for the Treatment of Moral Injury: Under Development

- ▶ This intervention consists of twelve 50-minute individual one-on-one pastoral care sessions with the Veteran
- ▶ The intervention is designed specifically for those who indicate that religion is important in their lives. It is to be adapted to the specific religious beliefs of the Veteran. (Koenig et al., 2019)



# Contents of Chaplain Intervention

## II. 10 Moral Injury Dimensions (Content for Sessions)

1. Guilt	29-30
2. Shame	31-32
3. Betrayal	33-34
4. Moral concerns	35-36
5. Loss of trust	37-40
6. Loss of meaning	41-43
7. Self-condemnation	44-45
8. Difficulty forgiving	46-48
9. Religious struggles	49-50
10. Loss of religious faith	51-52



# Contents of Chaplain Intervention

## III. Modules (for Dimensions above)

Conviction	54-55
Lament	56-58
Repentance	59-60
Confession	61-62
Forgiveness	63-67
Reconciliation	68-71
Atonement	72-75
Recovery & Resilience	76-78
Anger(optional)	79-81



# Spiritually Integrated Cognitive Processing Therapy:

- ▶ Spiritually integrated form of CPT that explicitly draws on a client's spiritual/religious resources and that addresses spiritual struggles and moral injuries.
  - ▶ Spiritual beliefs, practices, rituals, values, and inspirational passages to challenge and change unhelpful patterns of thinking and behavior
  - ▶ Spiritual concepts, such as kindness, compassion, and acceptance
  - ▶ Spiritual practices, such as confession, forgiveness, making amends, spiritual surrender, prayer/meditation, and spiritual community
- ▶ Targets MI to reduce PTSD symptoms
- ▶ 5 religion-specific appendices (Pearce, et. al, 2018)



# Summary:

- ▶ In addition to a holistic– bio-psycho-social-spiritual approach, Veterans may benefit from treatments utilizing a spiritually integrated, approach
- ▶ Moral injury should be recognized as it may explain why Veterans with PTSD do not fully recover with currently available treatments for PTSD
- ▶ Spiritually integrated treatments can foster collaboration between chaplains, faith based communities, and mental health providers
- ▶ Research on recognition and treatment of moral injury in Veterans and civilian populations needs to continue



# Sacred Texts: Themes of Forgiveness

## Example– Prodigal Son (Luke 15:11-32)

- ▶ There is a loving G-d who wants to hold us in his arms no matter how broken we are
- ▶ And never gives up on us coming home
- ▶ Imagine if we all treated each other with the compassion, mercy, forgiveness, grace and unending love that the prodigal's father, had for him? (Boyle, "Tatoos on The Heart," 2011)



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