(Re)Turning Warriors: A Practical Theology of Military Moral Stress

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(Re)Turning Warriors: A Practical Theology of Military Moral Stress

Abstract
The concept of military moral injury emerged in the past decade as a way to understand how traumatic levels of moral emotions (not posttraumatic fear) generate moral anguish experienced by some military service members. Interdisciplinary research on moral injury has included clinical psychologists (Litz et al., 2009; Drescher et al., 2011), theologians (Brock & Lettini, 2012), ethicists (Kinghorn, 2012), and philosophers (Sherman, 2015). This dissertation uses a pastoral theological method (Doehring, 2015a; Graham, Walton, & Ward, 2005) that draws upon life experience—memoirs written by veterans (Boudreau, 2008; Goodell, 2011; Mehl-Laituri, 2012; Peters, 2014)—to identify the inadequate understanding of moral identity within the existing discourse on moral injury. This project recognizes moral injury as radical moral suffering, but also considers moral stress in a broader spectrum of experiences. This project articulates a new key concept—moral orienting systems—a dynamic systems of values, beliefs, and behaviors learned and changed over time and through formative experiences and relationships such as family of origin, religious and other significant communities, mentors, and teachers. Military recruit training reengineers pre-existing moral orienting systems and indoctrinates a military moral orienting system designed to support functioning within the military context and the demands of the high-stress environment of combat, including immediate responses to perceived threat. This military moral orienting system includes new values and beliefs, new behaviors, and new meaningful relationships. Recognizing the profound impact of military recruit training, this project challenges dominant notions of post-deployment reentry and reintegration, and formulates a new paradigm for first, understanding the generative circumstances of ongoing moral stress that include moral emotions like guilt, shame, disgust, and contempt (Litz et al., 2009; Kim et al., 2011; Nash & Litz, 2013; La Bash & Papa, 2013), and, second, for responding to such human suffering through compassionate care and comprehensive restorative support. This paradigm is used to compare three significant programs providing resources for veteran reintegration: a government model (VA hospitals); a veterans' organization model (The Mission Continues); and a congregational model (Rez Vets at The Church of the Resurrection). This project calls for more effective participation of religious communities in the reentry and reintegration process and for a military-wide post-deployment reentry program comparable to the encompassing bio-psycho-spiritual-social transformative intensity experienced in recruit-training boot camp.

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(Re)Turning Warriors: A Practical Theology of Military Moral Stress

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A Dissertation

Presented to

the Faculty of the University of Denver

and the Iliff School of Theology Joint PhD Program

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by

Zachary Moon

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Abstract

The concept of military moral injury emerged in the past decade as a way to understand how traumatic levels of moral emotions (not posttraumatic fear) generate moral anguish experienced by some military service members. Interdisciplinary research on moral injury has included clinical psychologists (Litz et al., 2009; Drescher et al., 2011), theologians (Brock & Lettini, 2012), ethicists (Kinghorn, 2012), and philosophers (Sherman, 2015). This dissertation uses a pastoral theological method (Doehring, 2015a; Graham, Walton, & Ward, 2005) that draws upon life experience—memoirs written by veterans (Boudreau, 2008; Goodell, 2011; Mehl-Laituri, 2012; Peters, 2014)—to identify the inadequate understanding of moral identity within the existing discourse on moral injury. This project recognizes moral injury as radical moral suffering, but also considers moral stress in a broader spectrum of experiences. This project articulates a new key concept—moral orienting systems—a dynamic systems of values, beliefs, and behaviors learned and changed over time and through formative experiences and relationships such as family of origin, religious and other significant communities, mentors, and teachers. Military recruit training reengineers pre-existing moral orienting systems and indoctrinates a military moral orienting system designed to support functioning within the military context and the demands of the high-stress environment of combat, including immediate responses to perceived threat. This military moral orienting system includes...
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# Table of Contents

Chapter One: Introduction
  Methodology
  Chapter Overview
  Significance of Research and Potential Outcomes

Chapter Two: Diagnosing Moral Injury
  Defining Moral Injury
  Moral Emotions
  Responding to Moral Injury in the Clinical Context
  Clinical Evaluations of Moral Injury
  Moral Injury and Meaning Making
  Moral Injury Memoirs
  Reimagining Moral Injury

Chapter Three: Your Moral Orienting System Is Showing
  A Matrix of Values, Beliefs, and Behaviors
  Socially-Relationally Constructed
  Seeking Confirmation and Validation
  Vulnerable to Stress
  Resilient and Reconnective
  Moral Orienting Systems

Chapter Four: Military Recruit Training
  Authority and Obedience
  Social Learning and Aggression
  Powerful Situations

Chapter Five: Transitions Home
  Heroes or Head-cases
  Programs for Veterans
    Veterans Health Administration
    The Mission Continues
    The Church of the Resurrection
  Post-Deployment Transitions and Moral Injury

Chapter Six: Conclusion
  Boots to Shoes: Reentry and Reintegration Training
    Canine Therapy
    Equine Therapy
    Mindfulness Practices
    Yoga
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meaningful Relationship Reengagement</td>
<td>114</td>
</tr>
<tr>
<td>Community Service Work</td>
<td>115</td>
</tr>
<tr>
<td>Veterans and the Life of Congregations</td>
<td>116</td>
</tr>
<tr>
<td>Outreach Ministries to Military Families</td>
<td>117</td>
</tr>
<tr>
<td>Rituals and Practices</td>
<td>118</td>
</tr>
<tr>
<td>Pastoral Care and Counseling</td>
<td>118</td>
</tr>
<tr>
<td>Small Group Fellowship</td>
<td>119</td>
</tr>
<tr>
<td>Community Service Projects</td>
<td>119</td>
</tr>
<tr>
<td>References</td>
<td>123</td>
</tr>
</tbody>
</table>
Chapter One: Introduction

[Young people] with a normal viewpoint were taken out of the fields and offices and factories and classrooms and put into the ranks. There they were remolded; they were made over; they were made to "about face"; to regard murder as the order of the day. They were put shoulder to shoulder and, through mass psychology, they were entirely changed. We used them for a couple of years and trained them to think nothing at all of killing or of being killed. Then, suddenly, we discharged them and told them to make another "about face"! This time they had to do their own readjustment... We didn't need them anymore. So we scattered them about... Many, too many, of these fine young [people] are eventually destroyed, mentally, because they could not make that final "about face" alone.

Major General Smedley Butler, USMC

I could never escape. Shaped and formed, I was because of the Marine Corps.

Sergeant Benjamin Peters, USMC

These two voices, United States Marines of different generations, echo one another. Since 2001, more than two million men and women have deployed in military operations to Afghanistan and Iraq (Litz et al., 2016, p. 6). More than a million children have had one or both of their parents deployed. While military service often includes experiences of intense stress, the end of military service does not mark an end to stress and hardship for veterans and their families. Obvious military stress responses—suicide rates, domestic violence, and high-risk behaviors—grab the headlines and are deserving of our collective attention. Notably, since 2001, approximately 25 veterans have died by
suicide for every one death in combat. While this data is compelling, the circumstances that can generate such human suffering are simplified and ignored.

Across generations of American war-making, veterans’ failure to thrive has been given different names: soldier’s heart, shell shock, combat fatigue, post-traumatic stress disorder (Shay, 1995; Young, 1995). From this succession, a new term has emerged—moral injury (Litz et al., 2009; Drescher et al., 2011). Despite the changes in terminology, the dominant framework is a medical model that interprets veterans’ struggles as symptoms in need of medication and clinical therapy (Kinghorn, 2012). A medical paradigm has not always been the interpretative lens utilized in understanding the detrimental consequences of war-fighting. In medieval times, for example, the impact of war on those who fought was seen as a moral problem that could only be addressed by a moral community (Verkamp, 2006).

The term “moral injury” represents an opportunity to return to considering human experiences of traumatic stress more holistically, as I argue in this dissertation. Trauma has been described as a stress response that overwhelms one’s existing assumptive world—one’s beliefs and values concerning self, others, and Higher Power—and as the subsequent inability to assimilate or accommodate the dissonant evidence adequately into one’s existing moral orienting system of beliefs, values, and ways of coping (Janoff-Bulman, 1992). PTSD arises from the experience of fear in the face of actual or perceived threat. In this dissertation I describe the stress responses of moral injury as generating protracted moral emotions—shame, guilt, and disgust (Haidt, 2012). While broadening the neurophysiological and emotional world generated by trauma is a necessary step in
better understanding human suffering, I argue here that our definitions remain limited by the attribution of trauma solely to acute events rather than envisioning socio-environmental conditions (Levine, 2015). In order to better comprehend veterans’ struggles to reintegrate post-deployment, our gaze must include the socialization of military identity and its learned system of values, beliefs, and behaviors.

This project articulates a new key term—moral orienting systems—in considering moral stress and moral injury. This framework envisions a complex multidimensional system of one’s values, beliefs, and behaviors, as informed by one’s network of meaningful relationships and impacted by one’s lived experiences. One’s moral orienting system is subject to a wide array of intersecting factors: including those of one’s own choosing and intentional learning, but also those generated by various political, social, and economic realities. Moral orienting systems, therefore, incorporates theories of intersectionality (Ramsay, 2013). When we consider the journey of our nation’s military veterans, it is critical that we recognize who they were prior to their military service, what communities they were raised in, and how they understood themselves, others, and the Divine in the worlds they inhabited.

As those narratives of pre-military life are made visible, we must also realize that military recruit training, by design, destabilizes and diminishes the constancy of a recruit’s pre-existing moral orienting system. Having stripped away such moral coding, including embedded values, beliefs, behaviors, and meaningful relationships, military recruit training indoctrinates recruits with a new moral orienting system that supports
functioning in military contexts and the high stress environments of combat. One military spouse recounts,

He gets so mad at me because I told him that when he got out of boot camp he had PTS [post-traumatic stress]. I told him that you can’t be a young eighteen-year-old, go through three months of these people yelling in your face, stripping you of your identity, giving you a new identity…then spit you out into the world, without some sort of side effect. (Sherman, 2015, p. 64)

What this spouse observes and relates to post-traumatic stress following his military recruit training, reveals a process of change this dissertation seeks to investigate more deeply.

Every veteran remembers military recruit training, usually called Basic Training or Boot Camp, an intentional matrix of stress-inducing activities and circumstances intended to prepare recruits to function at a high level in combat (Litz et al., 2016, p. 32). Physical training pushes the body and mind to their limits, and accomplishing unprecedented feats of endurance instills a sense of courage and group solidarity (Peters, 2014). But for a recruit to be initiated into the warrior community, more than resolve and athleticism are required. Within the first 24 hours of Marine Corps boot camp, a recruit receives a haircut, hands over all personal property, dons a common uniform, and makes a scripted call home reporting his or her arrival and wellbeing.

Would-be Marines…must understand the things that have defined them are the obstacles that cage them. Status, privilege and dependence on what has been acquired are all unceremoniously ripped away. Each recruit is leveled and humbled, reduced to an anonymous number. One must first be stripped clean, freed of the false notions of self. (USMC recruiting materials)

A recruit’s moral orienting system is deconstructed through military indoctrination: removing distinctive personal identifiers such as hairstyle, clothing, etc.; shutting out
contact with meaningful relationships within the civilian worlds; and devaluing encultured habits and pre-existing moral codes; then, having been stripped of these old forms, a new identity guided by a new moral orienting system can be instilled.

A parallel reformation of the service member's moral orienting system is not provided prior to discharge. Military service members returning post-deployment to their civilian worlds are essentially offered two doors: (1) re-become the persons they were prior to military service; or (2) seek treatment oriented to diagnosis, symptom management and medication. These options dichotomize function or dysfunction in limited terms, underestimate the transformative qualities of military training and service, and generally devalue the positive elements of one’s military service (Litz et al., 2016, p. 32). To approach the moral dimensions of post-deployment transition differently, we must reframe our understanding of the human experiences of military service and take seriously the role one’s moral orienting system plays in human suffering and human thriving. As one Marine recounted to me once, “I dropped my pack, but it didn’t drop me.”

Humans are moral creatures with moral orienting systems comprised of values, beliefs and behaviors constructed over time and shaped by many sources: family, friends, mentors, religious communities, and other cultural institutions. Moral identity has too often been conceived in terms of individualized personhood, which may undervalue the role relationships and embodied experiences contribute to one’s moral character. Moral stress is generated when a person’s lived experiences is not easily assimilated into or accommodated by his/her moral orienting system. Moral stress is more than what can be
put into words and more than one’s cognitive capacities can endure; therefore, it is necessary to consider the whole picture of a person’s lived experiences including one’s relationships and one’s body as sources and sites of moral identity and potential moral stress (Chopp, 1995, p. 16).

This dissertation investigates how moral stress is generated during the post-deployment, reentry process because of irreconcilable dissonances between military moral orienting systems and the moral worlds of civilian life and advocates for an alternative paradigm of understanding and responding to military moral stress.

**Methodology**

This is a practical theological project concerned primarily with the task of improving understanding and responses to the needs of suffering persons in particular contexts, and therefore the project is rooted in lived human experiences (Chopp, 1995, p. 12). This project’s method is hermeneutical in that it takes seriously these contextual dynamics and circumstances as being theologically significant. To speak on the topic of military service and war-making is to stand in the breach between multiple political and cultural binaries; therefore, it is necessary to claim a compassionate care approach that can generate a new public theological discourse.

While this project’s objectives are scholarly analysis and constructing new conceptual frames, this project speaks on behalf of, and is therefore accountable to, military service members and their families. There is no appropriate separation between theory and practice; without the other, either will perish. “[T]his method…characterizes theology as ‘performative knowledge’, that is, a way of knowing that is inseparable from...
doing. The fundamental assumption here is that theory and practice are inextricably joined” (Graham, Walton, & Ward, 2005, p. 170). Under this demand, all the theoretical work of this dissertation will be oriented toward the pragmatic possibilities of real application.

My approach is designed to be interdisciplinary in claiming the rich wisdom and scholarly labor not only of religious studies but of social psychology and moral philosophy. While theology remains the central vocabulary and trajectory, these cognate fields provide critical content to the project (Chopp, 1995, p. 26). “Theology emerges as a practical problem-solving and inductive discipline…that draws on other disciplines in its analysis of experience in order to do justice to the complexity of any given situation” (Graham, Walton, & Ward, 2005, p. 5). This method of integrating multiple disciplines can be described as a postmodern version of revised correlative method (Browning, 1991; Tracy, 1996; Graham, Walton, & Ward, 2005).

This project’s conceptual work will engage personal accounts of military service and returning home. There is a robust body of military memoir literature that will resource this project’s reframing of the discourse on military moral injury, the development of the conceptual framework of moral orienting systems, the investigation of moral reformation in military recruit training, and the analysis of the moral dimensions of transitioning home (Boudreau, 2008; Goodell, 2011; Mehl-Laituri, 2012; Peters, 2014).

This project is rooted in my own professional and pastoral concerns for military service members and their families. My own biography is marked by the impacts of
military service and moral engagement with war. My father, uncle, and grandfather are all military veterans. I was born into and raised in a pacifist family and Quaker church community in Berkeley California, a city’s whose cultural identity is connected with the anti-Vietnam-war movement. For much of life, my family members’ military service was unnoticed and unacknowledged, buried beneath ideologies and theologies that deemed military service as shameful participation in America’s imperial global project. Not until my mid-20s did I begin to reflect on the barriers created by these moral judgements, and instead seek new approaches.

During my theological education in seminary, I began serving as a chaplain in the VA hospital system, first as an intern and then as a resident. In August 2011, I commissioned as a chaplain in the United States Navy and continue to serve in that capacity. Although today I am in an Active Reserve status that supposes my part-time commitment to military duties, I am tasked with providing support and care for more than 700 Marines and their families, geographically spread across the western United States. Through these ministries with veterans at the VA hospital and with uniformed military service members, I have heard hundreds of unique stories of military service, personal struggle and growth, and the search for integration of traumatic experiences and their moral dimensions. As a scholar, I have sought to build bridges between these human stories, the practical demands of providing compassionate care, and the need for better theoretical frameworks for understanding and responding (Moon, 2015). I hope that this project will contribute to such ongoing practical efforts and scholarly discourses in productive ways.
Chapter Overview

Chapter 2 will assess the discourse on moral injury across disciplines to bring scholars from clinical, philosophical, and theological fields into conversation. This field of inquiry is presently dominated by clinicians (Litz, Nash, Drescher, and others) and their research with military service members will be closely examined. The work of theologian Rita Nakashima Brock, ethicist Warren Kinghorn, and moral philosopher Nancy Sherman will be engaged in order to maximize the interdisciplinary potential of this project. The work on moral injury is weighted toward military moral injury, spanning the centuries from Homer’s Iliad and Odyssey (Shay, 1995 & 2003) to modern war-making (Brock, 2013; Sherman, 2015). There are many pioneering contributions being made by scholars, and this dissertation will seek to build on the existing foundations and envision new territories of inquiry that better address a broader conception of military service and a more nuanced understanding of moral identity.

Chapter 3 will construct a conceptual framework for moral orienting systems, drawing on conceptual work on assumptive world (Janoff-Bulman, 1992), habitus (Bourdieu, 1998), spiritual orienting systems (Pargament, 2007), embedded theologies (Doehring, 2015), religious meaning making (Park, 2005), and moral identity (Haidt, 2012). The nature of moral orienting systems can be obviously and vitally religious and spiritual, but might not include explicit “God talk” or explicitly spiritual coping practices. One’s moral orienting system is more than cognitive capacity; it is a dynamic system of (a) values, beliefs, and behaviors (Doehring, 2015); (b) relationships (Gergen, 2002); and, (c) body knowledge (Van der Kolk, 2014; Levine, 2015). The concept of moral orienting
systems constructed in this project will be built on these three key criteria and consider how each of these elements is engaged (supporting thriving) or disempowered (exacerbating struggles) through various situational contexts in the following chapters.

Chapter 4 will analyze how military recruit training functions as a social learning process of moral orienting system reformation. This effort will draw on social psychologists—Stanley Milgram, Albert Bandura, and Philip Zimbardo—and their research on obedience to authority, social learning theory, and authorizing violent aggression in human behavior, respectively. Military recruit training rescripts (a) values, beliefs, and behaviors; (b) meaningful relationships; and, (c) body knowledge. In order to understand why veterans struggle morally to come home to civilian existence, one must take seriously military recruit training as a process that re-constructs a moral orienting system that is both divergent with preexisting locators of civilian identity and discordant with the civilian worlds to which veterans return.

Chapter 5 will examine how, while there is not a parallel training program to boot camp provided prior to military discharge, other institutions may be providing veterans opportunities to reform their military moral orienting systems. I will compare three significant programs providing resources for veteran reintegration: a government model (VA hospitals); a veterans’ organization model (The Mission Continues); and a congregational model (Rez Vets at The Church of the Resurrection). This examination will involve a discursive analysis of their visions and mission statements and consideration of their methods. I will assess how they engage veterans’ moral orienting systems including (a) values, beliefs, and behaviors; (b) relationships; and, (c) bodily
knowledge and practices. I will then consider how they are meeting the needs of (1) reducing cognitive dissonance between transitioning self-concepts, (2) creating and sustaining a sense of camaraderie and social belonging, and (3) instilling meaningful opportunities to serve within civilian life. As this is practical theology, concerned with real persons in real situational contexts, I will provide insight into areas of failure in these contexts and make recommendations for better engaging veterans and military families.

Chapter 6 will consider broader implications and potential outcomes of this research as well as account for gaps in the project and opportunities for further research. Particular attention will be paid to equipping religious communities and the potential for a military-mandated re-integrative boot camp process.

**Significance of Research and Potential Outcomes**

This project will build on the existing foundations of research on military moral injury and address critical elements and contexts of military moral stress that have been underestimated thus far. This project lays the groundwork for more comprehensive application in various homefront contexts: reentry and reintegration programs, religious communities, educational settings (where many young veterans are utilizing their earned GI benefits to attend college) and medical institutions. Because this project bridges various disciplines and envisions a paradigm of care for military moral injury, scholars of multiple fields and practitioners working with veterans and military families will also benefit from this project.

This project contributes directly to the theoretical foundation of two much-needed efforts. First, the role of religious communities in the reintegration process has been
significantly limited by a civilian and military experience/language division, a host of divergent political ideologies, and a well-intentioned but patronizing charity-based approach by religious communities of supporting “those broken veterans.” This project will name these failures and illuminate how religious communities can better equip themselves to contribute their unique gifts within the process of post-deployment reentry and re-integration. Religious communities can be exceptionally resourceful as communities of co-creative meaning-making, in providing narrative and ritual spaces for reflection and integration of lived experiences, and in nurturing interpersonal relationships built on compassion and mercy.

Second, this project offers a theoretical rationale for post-deployment reentry training programs for all military service members to decrease the symptoms generated by moral stress and moral anguish. There are not any examples of programs that have a comparable degree of encompassing bio-psycho-spiritual-social intensity as recruit-training in boot camp. This project makes an explicit argument for a comprehensive training environment that takes seriously the transitioning military moral orienting systems to moral orienting systems that can thrive in civilian contexts, including the necessary shift in values, beliefs, and behaviors. Such a “boots to shoes” camp would require involvement of not only service members, but also eventually their families and other meaningful relationships within their civilian worlds.

If moral stress is being generated by the transition home, as this project asserts, how do we engage the challenges of reentry and reintegration in ways informed by the changes to one’s moral orienting system that have occurred during military recruit
training? How would we differently conceive of the process of homecoming if we adequately acknowledged the deeply embedded character of that moral orienting system? And how would we better provide compassionate care in supporting the deeply personal and interpersonal processes of adapting one’s moral orienting system from that of military culture and context to that of civilian cultures and contexts? The reintegration process must address a returning warrior’s moral identity—a dynamic system of values, beliefs, behaviors, relationships, and body knowledge—and identify and employ new tools of translation and transition.
Chapter Two: Diagnosing Moral Injury

The purpose of this chapter is to assess the scope of the discourse on moral injury. This goal will be met by pursuing the three following objectives: (1) to review the history of the concept of moral injury and its evolving definition; (2) to explore its utilization within the moral injury literature including contemporary publications in psychology, theology, philosophy, ethics and war memoir; (3) to consider some key limitations to the conceptual framework at this juncture.

Tracing the historical roots of the concept of moral injury is a subjective task. In one telling of that history, the concept has only appeared in clinical parlance since the early 2000s, driven by a committed core group of scholars and clinicians. However, in reading these recent articulators of the concept, one recognizes echoes of the anti-war activist scholarship of Robert Jay Lifton, whose book *Home from the War: Learning from Vietnam Veterans* (1973, 1985, 1992, 2005) continues to inform the thinking regarding the moral intersections of war-making and questions of responsibility.

While Lifton did not use the terminology of moral injury to describe Vietnam veterans’ experience, he is posing many of the same moral challenges to national consciousness concerning war-making, exploring many of the same elements of guilt and shame for actions and inactions, and drawing many of the same conclusions regarding impact on war-fighters and the neglect of broader, nation-wide awareness. He also offers
many insights similar to our current understanding of how to respond to military moral injury: reconnect and make new connections within meaningful interpersonal relationships; reestablish an inner sense of integrity and integration of identity and experience; and move through and grow beyond emotionally entrenched and degraded psycho-spiritual spaces (Lifton, 2005, p. 381). Lifton’s work has been criticized by some who saw his interpretations of veteran struggles and sufferings as a scapegoating projection of the nation’s moral concerns toward the war in Vietnam (Shephard, 2001; Hagopian, 2009). Lifton’s research and the subsequent criticisms are valuable in understanding the current moral injury discourse in that his vision is evident in the current conceptual framework and because, decades later, some of the same assumptions and anti-war motives continue to direct our attention.

The more recent work in this area, and the first regular use of the term “moral injury,” can be located in the clinical work of psychologists working with military veterans in Veterans Health Administration, known commonly as “the VA.” Jonathan Shay, a VA psychiatrist, wrote *Achilles in Vietnam* (1994), in which he utilized his reading of Homer’s classic, *The Iliad*, to explore his clinical encounters with Vietnam veterans toward an understanding of the military service-related moral turmoil. As with Lifton, Vietnam veterans’ experiences are the represented and therefore privileged primary source materials. More recent works by Brock and Lettini (2012) and Sherman (2015) represent multiple generations of military service members, but the predominance of Vietnam veteran voices in building the conceptualization of military moral injury has resulted in what can be described as an ahistorical approach that can often miss the
particularities of different veteran generations and various combat operations. Shay’s reliance on Homer’s dramas only reinforces this tendency toward essentialism, claiming that moral injury has existed as long as warfighting makes one point while missing some key moral complexities presented by modern war-making (i.e. urban warfare, enemy combatants who are indistinguishable from civilian innocents, remote-control drone strikes, etc). These critiques withstanding, Shay’s *Achilles in Vietnam* and its sequel *Odysseus in America* (2003) have been widely read and have popularized the concept of moral injury more than any other source material.

Whether one marks its genesis with Lifton, Shay, or elsewhere, the clinical motivation for developing a concept of moral injury emerged as a necessary differentiation from the prevailing diagnostic lens, Post-Traumatic Stress Disorder (PTSD), which could not adequately account for some of the cases of traumatic suffering of military service members and veterans (Kinghorn, 2012, p. 59).

[I]t is necessary to expand the current conceptualization of combat trauma to include moral injury. Many of the themes fall outside the purview of the diagnostic criteria for PTSD, thus indicating that unique sets of reactions to traumatic experiences exist, including those that occur when a person’s moral framework has been violated. (Vargas et al., 2013, p. 6)

**Defining Moral Injury**

Moral injury’s definition continues to evolve. Bret Litz and his VA clinician colleagues offered the initial definition as a traumatizing experience of “perpetuating, failing to prevent, bearing witness to, or learning about acts that transgress deeply held moral beliefs and expectations” (Litz et al, 2009, p. 700). Two years later, another group of clinical scholars defined moral injury as a “disruption in an individual’s confidence
and expectations about one’s own or others’ motivation or capacity to behave in a just and ethical manner” (Drescher et al., 2011, p. 2). In the years following, the refinement of the concept has continued,

[m]oral injury is an event that is not only inconsistent with previous moral expectations, but which has the power to negate them. Moral injury is not merely a state of cognitive dissonance, but a state of loss of trust in previously deeply held beliefs about one’s own or others’ ability to keep our shared moral covenant. (Nash & Litz, 2013 p. 368)

They add that moral injury “[is] the consequence of a challenge to moral belief systems that exceeds the information-processing capacity of the person at their current state of development, given available social and spiritual resources” (Nash & Litz, 2013, p. 370). Moral injury is not a certain and universal outcome of particular events, just as post-traumatic stress symptoms may be experienced differently by different persons, or not experienced at all. Persons, even those living in the same situational context, have their own moral beliefs and values which are developed over the course of their lives, and therefore possess a varied capacity for response (Nash & Litz, 2013, p. 369).

According to the DSM V criteria for PTSD, criterion A – “due to fear of threat or perceived threat” – the traumatic stress that leads to persistent symptoms (i.e. disorder) is generated by the experience of fear. In differentiating moral injury, fear is not the primary emotional experience generating symptoms; rather the moral emotions of shame, guilt, disgust, and contempt are the driving forces. When traumatic events or conditions are unable to be integrated “within existing self- and relational-schemas” (Litz et al, 2009, p. 698), the experience of these moral emotions produces the same series of symptoms attributed to PTSD: hypervigilance, intrusive thoughts and nightmares, and hyper-
arousal. Therefore, it is necessary to recognize the primary emotion(s) generating the symptoms rather than see the symptoms as the totality of the diagnosis.

**Moral Emotions**

Moral injury is fueled by experiencing overwhelming levels of moral emotions, be they self-evaluative in nature such as shame or guilt, or other-evaluative in nature such as disgust or rage. If these self- and other-evaluations are left unprocessed and become protracted, they degrade and diminish one’s regard for self and/or others, making one increasingly vulnerable to self- and other-harming behaviors (Litz et al., 2009, p. 701).

Moral injury [assigns] a central role to shame, guilt, and self-destructive impulses, and their perpetuation because of an inability to forgive oneself for failing to live up to one’s own moral expectations. Similarly, intense anger and impulses to seek revenge are central in moral injuries resulting from others’ acts or failures to act that seem to violate communally shared moral values, and these emotions and cognitions are maintained through an inability to forgive perceived perpetrators… triggers avoidance behaviors similar to those characteristic of PTSD caused by fear conditioning. (Nash & Litz, 2013, p. 369)

Guilt and shame are different moral emotions, generated by different factors, creating different self-evaluations, and needing different care responses (Kim et al., 2011, p. 68). Guilt is generated when a specific action regrettably causes harm to another. Guilt produces a self-evaluation along the lines of “my action harmed another” and motivates gestures of reparative action including apology and restitution to the one harmed. Guilt fuels an outward, interpersonal response seeking to restore relationship with the other.

Shame, in contrast with guilt, has a global dimension to its evaluative function generated by a real or perceived discord within one’s standing in the interpersonal or social fabric. Shame’s self-evaluation is not action-specific but instead totally engrosses a person’s sense of value along the lines of “my self is defective and undeserving of good
outcomes.” Where guilt is likely to generate outward, reconciling behaviors, shame is likely to produce some form of withdrawal and hiding, further entrenching the disconnection in valued relationships with others (Bryan et al., 2013, p. 56; French, 2010, p. 148; Harman & Lee, 2010, p. 14; Herman, 1997, p. 263; Kim et al., 2011, p. 70; Singer, 2004, p. 380; Tangney, 2002). All too often, shame perpetuates social isolation and relational discord, as well as high-risk, self-harming or parasuicidal behaviors (Bryan et al., 2013, p. 55).

Both guilt and shame are self-reflective moral emotions critical to the sustainability of well-ordered social life and necessary in “negotiating problems of cooperation, group living, and maintenance of social relationships” (Kim et al., 2011, p. 69). Uncovering shame’s potential pro-social function may be challenging given that the person may now be buried under excruciating quantities of negative evaluations and despair. Judith Herman writes that “shame may serve an adaptive function as a primary mechanism for regulating the individual’s relations both to primary attachment figures and to the social group” (Herman, 1997, p. 262). Other clinicians have echoed this assertion by stating that “shame is a motivational response to threat to social integration or social standing” (La Bash & Papa, 2013, p. 164).

A person experiencing traumatic levels of stress-inducing shame may not be in touch with the pro-social function of shame (Woodyatt & Wenzel, 2014, p. 128). The client and care-professional may both seek to alleviate shame by avoiding or minimizing its impact, which may actually increase the shame’s life-limiting power and further disconnect the person from shame’s adaptive, pro-social function (Woodyatt & Wenzel,
“Experienced shame alerts the individual to start the work of repairing a damaged reputation or restoring compromised social standing” (Kim et al., 2011, p. 72). An engaged response to shame necessitates a concerted effort toward reconnection with the beneficial, restorative functions within shame, and supporting actions that reconnect and reconcile with meaningful social-relational worlds.

Whereas guilt and shame are self-evaluative moral emotions, disgust and contempt are other-evaluative moral emotions. Unlike guilt and shame, where the judgements of moral discord and violation are directed inwardly first and foremost, disgust and contempt forcefully direct those condemnations outwardly. As with guilt and shame, disgust and contempt are socially-learned responses designed to maintain social order and interpersonal balance (Engelhard et al., 2011, p. 58). “[T]he primary function of both moral disgust and contempt: to mark individuals whose behavior suggests that they represent a threat and avoid them, thereby reducing the risk of exposure to harm” (Hutcherson & Gross, 2011, p. 720). Disgust and contempt, like shame, generate a totalizing negative evaluation that can be violently destructive. As with guilt and shame, disgust and contempt are too often minimized and/or avoided in care encounters that deem these emotional responses to be inappropriate, unhealthy, or dangerous. This manner of interpretation fails to recognize how disgust and contempt are adaptive and socially-learned, and how these moral emotions have important self- and social-protective functions, namely to protect oneself from exposure to harm.

The moral emotions of shame, guilt, disgust, and contempt are not by their nature disordering, but when experienced in a way that enforces a persistent sense of
unforgiveability, they can become entrenched and fuel chronic symptoms and unhealthy behaviors (Kinghorn, 2012 p. 61). Moral emotions have pro-social and reconciling goals within them, but they begin with the recognition that a violation has occurred within a person’s internalized moral code or of shared social moral covenants between persons or between persons and society. Just as theologians have sought to redeem the positive qualities of anger (Lester, 2003), it will be critical that we understand the ways in which shame, guilt, disgust, and contempt beckon persons toward compassion and relational health.

Responding to Moral Injury in the Clinical Context

While the understanding of moral injury within the clinical field has increased rapidly, treatment responses and processes of recovery have been slow in materializing. As with PTSD, pharmaceutical treatment options only address specific symptoms. While in some cases these measures are relieving suffering in certain immediate ways, the deeper issues related to the traumatic stress of overwhelming shame, guilt, disgust, and contempt cannot be addressed adequately through pharmaceutical options.

The therapeutic measures that have sought to address the PTSD experience of traumatic fear have been dominated by two paradigms: Prolonged Exposure Therapy and Cognitive Behavioral Therapy. Prolonged Exposure Therapy (PE) targets a persisting memory of a specific traumatic event. By repeatedly recounting that specific remembered story and re-experiencing its related stressors, the client becomes de-sensitized to their effects and power to overwhelm.¹ In contrast, Cognitive Behavioral Therapy (CBT)

¹ http://www ptsd va gov/public/treatment/therapy-med/prolonged-exposure-therapy.asp
attempts to change the patterns of thoughts, attitudes, or interpretation of events that generate intense fear-based stress. CBT targets the thoughts and beliefs about behaviors, and thereby changes the possible outcomes of behavior.² While these therapeutic paradigms engage the client’s fear through different methods, they share the goal of reestablishing functionality through the management of emotional triggers (Foa et al., 2000). Both heavily rely on adequate levels of cognition, which is sometimes not possible with traumatized persons, and address only the persistence of fear-generating stressors.

Adaptive Disclosure is a six-session treatment program currently being utilized in active-duty military situations to address moral injury. Developed by leading clinical psychologists in the field, this approach borrows techniques from PE and CBT with goals of reducing stigma, increasing disclosure capacity, and diminishing overwhelming levels of moral emotions (Litz et al., 2016). Adaptive Disclosure engages moral injuries as though they were all generated by an acute traumatic events, which may create limitations in situations where moral injuries emerge out of more complex situations. If we recognize that moral emotions “arise in the context of morally relevant conduct. More specifically, moral emotions promote or detect conduct that violates or conforms to a moral rule” (Prinz, 2007, p. 68), and that moral identity is constructed from multiple sources and governed by rules and values that emerge social-relationally from various cultures, contexts, and relationships, this complexity must be accounted for and addressed in treatment approaches.

² http://www.ptsd.va.gov/professional/treatment/early/cbi-after-trauma.asp
Clinical Evaluations of Moral Injury

Although the purpose of this project is not quantitative research on military moral injury, it is important to note the emerging work of clinical researchers in this area. Two groups of clinical scholars recently published their findings from their respective self-report measures (Currier et al., 2013; Nash et al., 2013). Currier and his colleagues designed a 20-item moral injury questionnaire with both active duty personnel and military veterans taking part in a survey group of 213 total participants. The group acknowledged the study as pioneering new territory in the clinical study of military moral injury. “Given the newness of the construct in the behavioral sciences, clinicians and researchers have lacked screening instruments to assess [morally injurious experiences]” (Currier et al., 2013, p. 60). Of the 20 possible self-reporting items on their questionnaire, the four most commonly endorsed stressors involved: (1) leadership betrayals, (2) betrayal of personal values, (3) harsh treatment of civilians, and (4) survivor’s guilt (Currier et al., 2013, p. 57).

Nash and his colleagues designed an 11-item “moral injury events scale” that was provided twice at 1-week and 3-month post-deployment intervals to a survey group of 1,609 Marines participating in the Marine Resiliency Study. This survey was more open-ended in its descriptions of each item, a choice that has the advantage of greater freedom to self-identify one’s own experiences but also has the disadvantage of being less specific. The research team noted this in their discussions, “[r]esearchers, clinicians, and educators may also do well to remain mindful of the terms preferred by service members
and veterans when discussing possible contradictions between behaviors and moral expectations” (Nash et al., 2013, p. 650).

Both studies validated the importance of the concept of moral injury in military contexts and both studies named the need for further evaluations that diversify the survey participants (i.e. gender, military occupations, etc.) (Currier et al., 2013, p. 61; Nash et al., 2013, p. 650). Neither study was able to adequately engage the morally injurious experiences of sexual harassment and sexual assault (Currier et al., 2013, p. 54).

**Moral Injury and Meaning Making**

As previously mentioned, Jonathan Shay’s articulation of moral injury remains the cornerstone for much of the subsequent scholarly efforts. His books, *Achilles in Vietnam* (1994) and *Odysseus in America* (2002), follow a similar structure of utilizing Homer’s classics in conversation with Shay’s clinical experience as a psychiatrist with Vietnam veterans at the VA. His illustrative device is compelling and suggests that moral injury has existed as long as organized warfare.

Shay’s motivations appear layered. He states “I believe we should care about how soldiers are trained, equipped, led, and welcomed home when they return from war” (Shay, 1994, p. 195). His focus on care is meaningful to this practical theology project. Yet more often than not, care is a secondary, perhaps even tokenized, principle for Shay. His focus on war as radical evil (p. 185), war atrocities (p. 117), combat as “enslavement” (p. 35), and failures of leadership (p. 196) disclose a project in line with Lifton’s decades earlier; namely, one that calls for broader awareness of veterans’ suffering motivated by anti-war stance.
Shay’s first book was written before the coining of the term moral injury, but he uses synonymous terms throughout. Most commonly he uses the terms “moral violation” and “character damage” (Shay, 1994, p. 208). Even at this juncture, Shay was writing about moral anguish as though it were an injury. “Just as the flak jacket has prevented many physical injuries, we can prevent many psychological injuries” (Shay, 1994, p. xxiii). His choice of imagery poses an unintended and tragic problem. Beyond disputing whether or not “moral injury” is an “injury,” flak jackets have prevented death by guarding certain vital organs but they in no way prevent injuries to other parts of the body: head or face, extremities, genitals. Listening to the stories of persons who survived improvised explosive device (IED) blasts because they were wearing a flak jacket, but lost many basic capacities and struggle every day with those injuries, is a tragic reminder of how we all too often view prevention and protection. What does it mean to survive moral trauma if the resulting losses permanently diminish or limit human flourishing? We must take seriously the need to not merely survive the aftermath of moral injury, but to recover the necessary capacities to thrive in the future chapters of life.

The most significant conclusion made by Shay, and one carried forward by the subsequent projects of other scholars, is the importance of community. “What a returning soldier needs most when leaving war is not a mental health professional but a living community to whom his experience matters” (Shay, 1994, p. 198). Shay, again, humbles his own professional class, when he argues to “push mental health professionals off of center stage in the drama of recovery from trauma, and…place them in the wings as stagehands” (Shay, 2002, p. 162). His picture of community is based on his experience
with veterans’ groups, where a revised-post-service comraderie sustains a necessary level of trust and bonding. As with Lifton, Shay calls for broader attention to these issues without a clear, practical vision for broader, civilian participation in co-creating a better future.

Shay is not the only one to mine the riches of ancient texts in order to illustrate the impact of military moral injury (Tick, 2005; Brock & Lettini, 2012, p. 69-70; Wiener & Hirschmann, 2014). Edward Tick, like Shay, is a psychologist working with Vietnam veterans. Tick relies on his use of depth psychology and Jungian archetypes to make universal claims about warriorhood and trauma (Tick, 2005, p. 4). As with Shay, Tick is advocating for an engagement with the larger, mythic qualities of war-fighting, stating “we crave war in its mythic dimension” (Tick, 2005, p. 283). War-making in mythic terms allows Tick to make his assertion about PTSD as “a soul illness” (Tick, 2005, p. 283) that can only be adequately addressed by returning “to the path of the mystic warrior” (Tick, 2005, p. 289). The Jungian framework is explicit in Tick’s analysis, but seems to lack critical awareness of problems presented by grounding one’s argument in assumptions of universal archetypes. Shay and Tick’s respective books are written for popular audiences and have been read widely, thereby contributing to a broader public discourse on military moral injury.

Given that these works utilize ancient texts to illuminate military moral injury in modern contexts, it is concerning that these works lack self-awareness regarding the historical-contextual blindness of this analytical device. If moral identity, and therefore moral injury, have anything to do with socialization within particular cultures of values,
beliefs, and judgments, then comparing war experience in ancient times to that of modern warfare is discordant, if not incomprehensible. The few glimpses of self-critical analysis that would seem to problematize these limitations remain buried (Wiener & Hirschmann, 2014, p. 190). Stranger still may be that this hermeneutical strategy is engaged in the face of ample available material documenting the experience of modern war fighters. Each of these authors include such accounts, and yet treat them as though they are inadequate to speak for themselves.

Nancy Sherman’s books, *The Untold War* (2011) and *Afterwar* (2015), offer a philosopher’s interpretation of moral injury. Sherman is a scholar and educator who became engaged with veterans’ experiences at Walter Reed hospital. She remains a philosopher, quoting Aristotle and Kant in reference to hearing a particular veteran’s experiences. Yet unlike Lifton, Shay, and Tick, Sherman actively works against universalizing or essentializing veterans’ suffering. “There is no cookie-cutter story to tell. There is no ‘universal soldier’” (Sherman, 2015, p. 10). She does rely on some medicalized languaging, but she is adamant that the healing process that is needed is possible only in community. “We are a part of the homecoming—we are implicated in their wars” (Sherman, 2015, p. 20). Her focus on building trust and empathetic listening are vital components of this community-based reintegration process.

Brock and Lettini’s book, *Soul Repair* (2012), is the strongest example of a moral injury project rooted in modern war-fighters’ experiences.

The life and death urgency of war forces untenable actions that can elicit profound guilt and shame. When we feel that what we did was wrong or unforgiveable and that our lives and our meaning system no longer makes sense, our reason for living is in tatters. This shattering of the soul challenges what holds
life together, and the anguish of moral injury begins. (Brock & Lettini, 2012, p. 52)

The stories of military moral injury recounted in this text are substantive and the authors actively participate in a co-creative process of meaning making about suffering generated by war. Both authors locate themselves and their own family of origin relationships to military service which provide a model of subjective and authentic engagement.

Their project is limited in some ways by the authors’ anti-war motivations, which appear throughout the book. However, by the end of the book they concede “we have become less absolute in our personal opposition to war” (Brock & Lettini, 2012, p. 117). This tension is instructive for further work and may reveal how anti-war positions could limit access to communities who don’t share those values and beliefs. In one such example, Brock and Lettini envision war itself as fundamentally morally injurious, suggesting that all who participate in war would become morally injured (Brock & Lettini, 2012, p. 50). Their assertion indirectly places the burden of responsibility on veterans to self-identify and attributes lack of identification or refusal of this labeling to those deficient in conscience.

Like Shay and Sherman, Brock and Lettini emphasize the importance of the homecoming process.

Those who…return ‘home’ are expected to switch almost seamlessly from a combat zone to life back home, to shift from the urgencies and traumas of war to ordinary civilian life… There is a boot camp to prepare for war, but there is no boot camp to reintegrate veterans to civilian life. (Brock & Lettini, 2012, p. 42)

And their conclusions also include a strong call for collective, national acknowledgement and responsibility-taking: “we must face the cost of sending others to fight our wars and
our failure to understand what it means to bring them home. Whatever we think of a war, the crucial responsibility is to accompany the journey home” (Brock & Lettini, 2012, p. 91).

Warren Kinghorn, a psychiatrist and scholar, has offered the most complex treatment of military moral injury.

The dissonance between experience and moral beliefs leads to particular moral emotions, particularly guilt and shame, and can lead to persistent self-ascriptions of unforgiveability that can then drive the re-experiencing, numbing/avoidance, and hyperarousability symptoms characteristic of PTSD. (Kinghorn, 2012, p. 61)

This is a clearly articulated definition that very much represents the current understanding of moral injury, but Kinghorn is much more proactive in considering the contextuality of moral identity and violations thereof. Moral stress must be engaged as “fully situated within and constituted by a sociocultural matrix of language and meaning and valuation in which ‘trauma’ cannot be understood apart from understanding of that matrix” (Kinghorn, 2012, p. 62-63).

Kinghorn’s articulation of moral injury is also strengthened by opting out of the anti-war position. Rather than simply stating war’s radical evil, he illuminates how moral stress is often generated by the ambiguities and uncertainties in the midst of war-fighting.

Soldiers who kill in ambiguous circumstances are often to themselves neither guilty nor innocent, neither victims nor perpetrators, neither heroes nor villains, but some complex amalgam of them all that is not well captured in the sound-bite conversation with which the American public has to date discussed our current wars. (Kinghorn, 2012, p. 63)

This articulation serves to disrupt both the politicized nature of public discourse on war and the essentialized interpretations of veterans as either heroes or victims of their experience. Since neither of these categories adequately accounts of the complexities of
the military service members’ experiences, this assertion of an “amalgam of them all” is critically important.

Much like the other scholars considered above, Kinghorn is advocating for community engagement. Like Brock and Lettini, and Sherman, Kinghorn envisions communities that are willing to hear the stories and live into new possibilities.

[V]eterans need…a community that can listen, reflect, bear, and grieve with them…to hear confession and to meet that confession not with cheery reassurance or avoidant condemnation but with the willingness to walk with the veteran on the path of reconciliation. (Kinghorn, 2012, p. 69)

Because Kinghorn’s work engages more directly with religious studies and theological questions, he is able to venture a more explicit invitation to religious communities. “Faith communities, unlike the clinical disciplines, are able to embrace thick and particular conceptions of human flourishing and human failing” (Kinghorn, 2012, p. 71). This is an important element to integrate into envisioning community engagement, but Kinghorn doesn’t address the challenges that often limit such encounters between religious communities of civilians and veterans and their families.

Each of these scholars has sought to engage the evident moral suffering experienced by military service members. They have gone about their respective projects utilizing various source materials and at times drawing different conclusions. The conclusion that seems to demonstrate a kind of consensus is the importance of communities that can hear and respond to these stories of moral anguish. Although this project will address these questions of community involvement more fully in subsequent chapters, it is critical that we move forward recognizing both the need for listening and
compassionate response, and the struggles to do so. These stories are not easy to hear, and most of us would experience some stress in trying to do so.

**Moral Injury Memoirs**

The evolution of the moral injury discourse has not only been driven by scholars and clinicians, but by service members and the published accounts of their combat experiences. As with any published work, there are certain social privileges that often accompany one’s access to publishing opportunities and most of the published memoirists are white, straight men. There is an obvious need to expand the represented voices heard in this discourse; however that is not the work of this project. This project will utilize available published accounts of military service members and their experiences in order to offer theory that is accountable to lived experience, but will also seek to locate those stories within an appropriate cultural matrix and acknowledge their limitations. Two of the four memoir writers are theologians with formal theological education; and this dissertation considers each of these works to be theologically significant.

The four personal accounts each display the lived experience of military moral injury in their own terms. The definitional work done by the scholars and clinicians cited above can serve as a filter, interpreting stories like these and exploring how they may fit into the existing understanding of moral injury. But just as the existing definition gives voice to certain elements, there are also elements that are silenced. These memoirs are integrated into this project in order to promote a reencountering and reconnecting with the lived human experiences of military service and military moral stress. The use of first
names in reference to the memoirists is not meant to diminish their authority, but instead to locate the significance of their narratives are as personal accounts of lived experiences.

Benjamin Peters’ (Caucasian, male, heterosexual) life had stalled out, working a thankless job at a mattress store, and wondering what more was out there. Like many young adults out on their own, he didn’t have a clear sense of direction or purpose. For him, the events of September 11, 2001, provided that sense of clarity. But his embedded mixture of religious and patriotic idealism dried up during his military service. “War is ugly. War is brokenness…I was no scholar or learned Rabbi. I was only a young Marine wrestling with the truth or non-truth of his actions…The more I tried to untie the knot, the tighter it pulled” (Peters, 2014, p. 62). At the center of that knot were questions of justification and responsibility.

I’m a Marine. I made a choice, and I can’t change that. I’m also a Christian. I’ve bought into a religion that says, ‘love your enemies.’ I’m torn apart by opposites. Our government pats me on the back and says everything will be okay and that I’m some sort of hero. But people died; I killed them. I hated it and, yet, I craved it. The truth is: I’ve never felt so alive. And you want to know what haunts me every night? The question: was I justified in what I did? The government and the conservative right says, yes! The far left says, no! And moderate Christians don’t have a damn clue either way. But what I keep coming back to is this: someone, somewhere, has to be held responsible – me, the government, God, Christendom. I don’t even care at this point. I just want to know. (Peters, 2014, p. 102)

The questions of justification and responsibility were worsened by the futility of asking them: no one had the answers he was seeking and a world that had appeared orderly came undone. “There was no bravery, only a maddening randomness. Goddammit, people are dying. Why are we still talking about Christ? Reconciliation? I see a world ripping itself apart. And for what? Oil? New Markets? Freedom? Oppression? Who the fuck knows”
(Peters, 2014, p. 81-2). His values, ideals, and beliefs drifted haphazardly through the fog of war. Survival became the only rule to follow.

No one fights for abstract ideals. No one fights for freedom. In the panic of combat, they fight because they don’t want their spark snuffed – they might care about their fellow Marine. But that’s not always true. If I’d died on that patrol, the sun would still rise and my parents would’ve been assured that I’d died bravely, defending my country. They would’ve been told a lie. I would have pissed my pants like the rest. (Peters, 2014, p. 74)

Ben’s story demonstrates the kind of intense moral stress that the scholars and clinicians above would identify as moral injury. He was angry and disgusted, but also feeling trapped and isolated. “I could never escape. Shaped and formed, I was because of the Marine Corps” (Peters, 2014, p. 165). Ben’s struggles had a religious dimension, and so after completing college, he enrolled in seminary and tried to get the answers he had been looking for. What he didn’t find in books and terms papers, he found in meaningful relationships.

Logan Mehl-Laituri (Caucasian, male, heterosexual) grew up going to church. Both his parents were public school teachers. “I had always thought of myself as having a soft heart” (Mehl-Laituri, 2012, p. 25). He knew how important education was but couldn’t finance his college education. He was already serving in the Army when the events of September 11, 2001, occurred. Like Ben, his identity as a Christian and as an American were tightly enmeshed.

Being a Christian was part and parcel of being American… So when I began talking to an Army recruiter about enlisting, it was not merely a patriotic task; it had religious undertones. To defend the country was to serve God… it was an assumption that I never questioned. (Mehl-Laituri, 2012, p. 29)
When the realities of a deployment he never expected set in, his moral stress strained both his sense of duty and his sense of faith.

The anger that came and never left him, showed itself to have a purpose. That anger fueled his activism on behalf of other veterans. “Anger is good at leading us out of the pews and into the streets, bullhorn in hand” (Mehl-Laituri, 2012, p. 18). Like Ben, Logan found his way to seminary and into the sort of steadfast relationships that could hear both his anger and his grief and love him where he was. But the anger and the grief have not gone away. “There are so few liturgies of lament for the longest war in American history [and that] worries me tremendously” (Mehl-Laituri, 2012, p. 18). He found constructive outlets for his passion, working as a veterans’ advocate and training communities on both the theological and practical dimensions of caring for veterans.

Tyler Boudreau (Caucasian, male, unknown sexual identity) went to the Marine Corps recruiting office when he turned sixteen. He was told he was too young and to come back. He did, a year later. His life at home was abusive, and he worked at a tire store through his teen years in a rough part of Boston. He wanted to escape and he wanted to prove himself.

My heart pumps out a lot of rage since coming home from war, and I ride the rapid blood streams like a lone paddler, thrashing to stay afloat. Sometimes I spew a head full of turmoil at the passing scenery and whatever passing people are in it, and sometimes I manage a little stoicism, but I’m angry all the time, and what I’ve found most frustrating is that I don’t know at whom exactly I should be angry. Who deserves all this loathing? Who are the bad guys? (Boudreau, 2008, p. 144)

Like Ben, he was looking for someone or something to answer his questions, someone to receive his anger: “I’m not even sure there are bad guys anymore” (Boudreau, 2008, p.
He remained haunted by the failure of his values and beliefs to sustain him during this military service.

I’m angry at all the people who turned my ideals into platitudes. I’m angry at the people who turned “fighting for freedom” into a hollow slogan. I’m angry at the people who took those ideals of mine and hung them upside down like a slain animal, and let the blood drain out into the sand. (Boudreau, 2008, p. 189)

Underneath his rage, was a vast wilderness of grief—for the loss of brothers-in-arms, for the loss of his patriotic naïveté, for the loss of his sense of moral compass.

Jess Goodell (Caucasian, female, unknown sexual identity) enlisted in the Marine Corps right after graduating high school in 2001, and deployed to Iraq in 2004 with a mortuary affairs unit. She was a woman in a fiercely masculine culture and wanted to deploy in order to be seen as a “real” Marine. “[T]o be judged by the accepted standards that define a ‘good’ Marine, even if those standards evolved from an exclusively male culture… Will these good Marines be judged as Marines first or as females first?” (Goodell, 2011, p. 25-26).

The handling of dead bodies and body parts is explicitly named as a cause of PTSD and moral injury (Litz et al., 2009). A mortuary affairs unit would be responsible for this task, day after day. She titled her memoir Shade It Black, a reference to her job of diagraming dead bodies and shading black those body parts that were missing. But that phrase becomes an interpretive lens for her as she processes her experience.

The counselor didn’t tell us that whole spheres of our lives and basic aspects of our selves were gone. Obliterated. That friends and family members and spouses, good memories, sleep, fun, food, and clarity would all have to be shaded black. He didn’t tell us that for several of us, our former lives would be shaded black. (Goodell, 2011, p. 131)

That image also illustrates her recovery process and finding new possibilities in her life.
In the good days, I feel a stirring inside, as the meaning and purpose and
closeness and love I once thought dead show signs of life, after all. It is on these
days that I am able to lighten the hue of so much I had shaded black. It is then that
I am able to hope. (Goodell, 2011, p. 183)

The writing process, with its remembering of all that can be given words, serves
these memoirist veterans as a step toward their next phase of life. Each of these stories
reveal cultural factors that contribute to their experiences of and responses to moral
stress. These elements are too often marginalized in diagnostic models of moral injury
that only look for post-traumatic stress symptoms and moral emotions. When we consider
human experiences of moral anguish, we need to ask: what values, ideals and beliefs
remained resilient, and which failed? One’s system of moral orientation is not universal,
but a system uniquely constructed from experiences and sources given authority.

Reimagining Moral Injury

There are a number of areas within the development of moral injury that become
problematic both conceptually and in application once practicing responsive care with
actual persons in actual contexts becomes the goal. The most immediate challenge
presented by moral injury is the terminology itself. This problem has been addressed by
military institutions, clinicians, and scholars alike. Across the Department of Defense
(DoD), much of the work on moral injury has been integrated into trainings on stress
management, suicide prevention, and so on. However, there was immediate resistance to
the term “moral injury,” and these DoD trainings have now rebranded the same
conceptual framework as “inner conflict.”

In current Navy and Marine Corps doctrinal publication…inner conflict is defined
as ‘stress arising due to moral damage from carrying out or bearing witness to acts
or failures to act that violate deeply held belief systems’… Although defined in words similar to moral injury… moral injury is perceived by some to be pejorative. (Nash & Litz, 2013, p.368)

Clinicians have heard this feedback as well and have tested alternative terminology (Dresher et al., 2011, p. 4). The negative reaction is directed at both “moral” and “injury.” “Moral” suggests that this condition is caused by doing something “immoral,” a label that many would reject. “Injury” suggests this condition is something that can be fixed presumably medically. Kinghorn responds to this clinical association applied in the term: “the medical model, once invoked, inducts postcombat suffering into the means-ends logic of technical rationality” (Kinghorn, 2012, p. 65). For many the term “moral injury” is a non-starter at best and deeply offensive at worst.

As Kinghorn suggests above, the term “moral injury” provides a particular kind of lens through which one perceives particular kinds of dynamics and outcomes. Whether we call this the “medical-model,” “clinical,” or otherwise, these approaches often see the person as an individual entity, exhibiting objective symptomology, and without recognizing the social and cultural elements of one’s personhood. “Morality itself is formed out of interplay between the individual and society, in this case between the individual’s personal narratives of war and the societal discourses about war” (Brunell et al., 2011, p. 42). We are socially-situated beings: our beliefs and values are not static nor viable in a vacuum; and moral turmoil is more complex than mere symptoms to be medicated. The medicalizing of human suffering is not only present within the moral injury concept, but in the broader mental health field. “As with all issues of mental health, the wellbeing of soldiers following deployment, and the way in which psychiatry
conceptualizes this, cannot be divorced from the prevailing social and cultural context” (Brunell et al., 2011, p. 36).

I suspect there is a lurking motivation behind a pathologizing medical response to moral stress, namely that the responsibility rests with the one who suffers, not with the broader society.

When combat veterans speak of the impenetrable darkness in which they now live out their days, much less their nights, or try to convey the shame and guilt that consumes them, psychiatrists may well and often do question whether the most appropriate solution is to whip out their Rx pads. (Meagher, 2014, p. 3)

If this is the case, our nation is scapegoating our veterans, obligating them to not only fight our wars for us, but to carry the burden of war-making’s violence, grief, and shame.

The complexity of identity as a socialized process, rather than a static form to be altered and fixed, requires that we think in more sophisticated ways about cultural context and intersectionality. The reliance on Greek classics to illustrate the experience of moral injury perpetuates an ahistorical, de-contextualized understanding of moral identity. Further, the interpretations of other resources, accessed by clinical encounter or memoir writing, too often demonstrate a collective failure to look more deeply at the role of socially constructed identities and the impact of intersecting factors (i.e. race, gender, class, education, sexuality, etc.). The dominant reading of these first-hand accounts, taken at face value, further entrenches an essentialized concept of personhood, morality, and suffering.

Having offered that critique, we need not limit ourselves to those interpretive lenses. Pastoral and practical theologies, significantly informed by liberation, feminist and womanist theological movements, now take seriously the role of “the malleable and
performative character of social imaginaries” (Ramsay, 2013, p. 468). This is a profound invitation to all scholarship, but particularly those scholarly efforts concerned with human experience and moral anguish. As Ramsay advocates, our attention to intersectionality would reshape our intellectual sight, our pedagogies, and the efficacy of our social justice objectives. For the purposes of this investigation of moral injury, embracing a conceptual framework that integrates intersectionality could deepen our thinking about moral identities, transgressions of moral boundaries and consequential moral anguish, and the impact of social learning and social relationships on integration of moral stress and recovery.

Chapter 4 will more fully explore the role of social and situational dynamics as they pertain to moral identities and moral stress in the military context; however, it is important to note that by remaining in a fundamentally medicalized paradigm, moral injury lacks serious awareness of social context and situation. Beyond acute traumatic events, what other factors contribute to the emergence of moral injury?

Soldiers may feel morally motivated in their actions while they are in battle, but when they return home they may have difficulty reconciling what they have done with a new environment that constitutes different social-relational models and consequent moral motives and has no consistent process for reintegrating them into the social group. (Rai & Fiske, 2011, p. 69)

Litz and his colleagues mention such a possibility.

[I]t makes sense that most service members are able to assimilate most of what they do and see in war because of training and preparation… However, once…separated from the military culture and context, some service members may have difficulty accommodating various morally conflicting experiences. (Litz et al, 2009, p. 697)
As one Iraq Army veteran shared, “A lot of things really make sense when you’re doing them over there. But when you come back, it’s just like, ‘How did I do that?’” (Brock & Lettini, 2012, p. 45).

However this line of inquiry has not been adequately explored. Usually, the questions raised by change of context between military and civilian worlds are overtaken by explanations about moral injury appearing after returning home because the memories had been repressed or compartmentalized until space for decompression and reflection were possible. I would not argue against this explanation, but rather claim that it may not be the full story. We need to consider that we are attending to complex human predicaments in which “differing experiences of self, i.e. before the war, during the war and after the war, [that] are all part of the same person” (Singer, 2004, p. 382) and for which the homecoming experience itself may be generating moral stress by enforcing the moral incompatibility of actions and inactions during military service with the expectations of civilian society.

The conceptual framework of moral injury has much to offer to our understanding experiences of military service and as well as other difficult human experiences. Yet as moral injury takes its place in the discourse, we need to ask what it provides our consciousness and what it limits, and how we could more fully address the human experience of moral suffering. The next chapter will seek to re-approach the conceptual landscape of moral identity, considering how one’s imbedded values and beliefs orient one’s sense of moral order, and how in situations of crisis and change these systems of
moral orientation can become stressed beyond functionality, leading to prolonged moral anguish.
Chapter Three: Your Moral Orienting System Is Showing

The previous chapter considered some of the most visible scholars within the discourse on moral injury and sought to illuminate both their contributions and some of the limitations of the current conceptual framework. The moral injury concept deserves to be more fully articulated, from an interdisciplinary perspective, in terms of what we mean by “moral.” The moral injury concept claims that some traumatic experiences have moral dimensions, generating moral emotions that lead to radical moral suffering. This concept of causation is wide open to interpretation, notably to the idea that combat is inherently morally injurious, as some scholars (Lifton, 1973; Brock & Lettini, 2012) have asserted. This is a useful assumption in that it can normalize the moral stress of deployed personnel (Drescher et al., 2011; Currier et al., 2013; Nash et al., 2013), but that assumption also marginalizes war-fighters who don’t self-identify as morally injured, as well as fails to address moral stress experienced beyond combat experiences.

Defining morality is not the focus of this project, but this chapter will seek to give a working definition for a new concept of moral identity: moral orienting systems. One of the potential growth areas for the moral injury discourse is to better consider how one’s socially constructed moral identity informs a potentially morally stressful or morally injurious situation. Rather than beginning with traumatic experiences or situations, it is
important to take a step back and consider the moral worlds of the persons involved. This theoretical move will demonstrate two key adjustments to the moral injury framework.

First, moral stress is experienced in different degrees in various situations because a person’s moral identity is a socially constructed matrix of values, beliefs, and behaviors learned and altered over the course of one’s lifetime. “[A]s individuals, we are multiple: I am not exactly the same person in all the different situations I act in” (Burkitt, 2008, p. 3).

Second, moral stress in all its forms can be addressed outside the clinical model by exploring how moral stress, like moral identity, is not a static condition or “injury” but a dynamic process of social learning. “[W]e bring to this interactive context embodied traces of past experience as habit, disposition, memory, values and beliefs, aligned with some and against others” (Burkitt, 2008, p. 66).

This chapter will integrate the research of scholars, representing multiple disciplines, who offer significant insights toward re-envisioning the concept of moral injury. Unlike those in the previous chapter, these are not often cited in the moral injury discourse. However they are useful to this project because their intellectual works engage moral identity as a constructed, socialized reality, and provide some of the necessary apparatus to build a revised concept of moral injury.

One’s moral identity performs in a context, with one’s values, beliefs, and behaviors jostling around within the given circumstances, searching for validation and avoiding disruption. In instances where one’s moral identity, as currently constructed, cannot assimilate or accommodate the experiences within that situation, moral stress is
generated as a challenge for meaning-making and adaptation toward a moral identity that can reconcile within the environment. However, one’s moral identity is not solely a matter of brain cognition, but rather is contained by one’s embodied knowledge. Traumatic experiences do not only impact the brain, but also one’s body (Van der Kolk, 2014; Levine, 2015). Moral stress is a physiological response to identity threatening circumstances; therefore, moral stress must not be regarded as a failure to thrive, but rather a whole-self moving toward finding new ways to survive and inhabit a meaningful life.

Moral orienting systems will be explored in five elements: (1) as a uniquely, personally comprised matrix of values, beliefs and behaviors; (2) as socially and culturally informed by important relationships with family, friends, mentors, religious traditions and/or other significant communities; (3) as fluid and responsive, seeking confirmation and validation within situations and working to assimilate and accommodate experiences within its structure of expectation; (4) as vulnerable to situations or events that overwhelm existing boundaries and assumptions, producing moral stress; and, (5) as restorative and resilient, seeking to relieve stress through reconnection in meaningful relationships.

A Matrix of Values, Beliefs, and Behaviors

Morality has long been thought of as a standard of right and wrong, good and bad. This definition is helpful in accounting for societal conforming and personal conduct, but it can also be too generalized and fail to interrogate necessary social power realities. One’s moral orienting system doesn’t appear out of nowhere, but neither is it merely
societal indoctrination. It is simultaneously self-composed and relationally-informed. Therefore, when meeting people it is important to consider both their intersecting social and cultural identities, and their creative and uniquely personal integration and application of those identities.

One’s moral orienting system is also simultaneously idealistic and practical, a dynamic interplay between one’s desires, hopes, and beliefs, and one’s experiences in various situations. One’s moral orienting system comprises cognitions of both the mind and the body. Two persons with similar cultural identities, values, and beliefs may come to demonstrate their respective moral orienting systems very differently depending on lived experiences.

Pierre Bourdieu, a sociologist, was concerned largely with social class identity; however his concept of habitus suggests moral identity in some useful ways. Bourdieu resists directly defining habitus, opting instead for a string of word images to describe its function. Habitus is “an acquired system of generative schemes, [which] makes possible the production of all the thoughts, perceptions and actions inherent in the particular conditions of its production and only those” (Bourdieu, 1980, p. 55). Similar to habitus, moral orienting systems are generative of thoughts, perceptions, and interpretations, given the matrix of values, beliefs and experiences comprised within, and therefore provide both motivation and capacity to perform certain responses and behaviors according to the situation. Bourdieu’s concept of habitus will be elaborated further in this chapter, in terms of its social and embodied nature.
In her landmark work, *Shattered Assumptions*, Ronnie Janoff-Bulman articulates the concept of the *assumptive world*. She describes it as “a conceptual system, developed over time that provides us with expectations about the world and ourselves…a set of assumptions or internal representations that reflect and guide our interactions in the world and generally enable us to function effectively” (Janoff-Bulman, 1992, p. 5). A decade later, in his retrospective edited volume, *Loss of the Assumptive World*, Jeffrey Kauffman states “[t]he assumptive world concept refers to the assumptions or beliefs that ground, secure, or orient people, that give a sense of reality, meaning, or purpose to life” (Kauffman, 2002, p. 1). Janoff-Bulman’s concept of assumptive world relates to the concept of moral orienting systems, particularly its emphasis on effective functioning. One’s moral orienting system provides guidance and patterns of behavior that shape one’s lived choices and strategies. Janoff-Bulmann’s focus on shattered assumptions in trauma has been extremely influential in describing the impact of trauma, and is a helpful entrée into moral injury for clinicians familiar with her work.

Kenneth Pargament is one of the most significant contemporary scholars of religion and psychology, and at the heart of his work is the concept of *spiritual orienting systems*. Pargament’s choice of “spiritual” too narrowly specifies the concept’s utility for this project, which seeks a broader, more pluralistic reach. Nevertheless, Pargament and his colleagues have succeeded in valuing the available resources at a client’s disposal. “Clients generally come to therapy with psychological, social, financial, and medical resources that have proven invaluable to them in the past” (Pargament, 2007, p. 243). All of these elements are interworking parts of the whole person which become “a general
way of viewing and dealing with the world…a frame of reference, a blueprint of oneself and the world that is used to anticipate and come to terms with life’s events” (Pargament, 1997, p. 130). Such engagement with clients provides an immediate counter-balance to the model of pathologizing symptoms and makes visible the complexities of human identities in many circumstances. Pargament’s research explores both the beneficial and limiting role of spiritual orienting systems.

A person’s moral orienting system is much more complicated than his/her voting record or religious affiliation. Rather moral orienting systems are a dynamic interplay between values, beliefs, experiences, and behaviors from which assumptions, expectations, hopes, and judgements about oneself, others, and Higher Power are generated accordingly within a particular situation.

**Socially-Relationally Constructed**

While one’s moral orienting system is unique to oneself, it is not merely one’s own possession. Important persons and communities inform one’s moral orienting system as it develops over time (Janoff-Bulman, 1992, p. 5). The elements function in a system or as Bourdieu conceived “a community of dispositions” (Bourdieu, 1980, p. 170). Additionally the values, beliefs and behaviors are themselves learned socially over one’s life time.

As with Bourdieu’s habitus, moral orienting systems are “attuned to the demands of the group, [a] materialization of the collective memory…The group's resulting tendency to persist in its being works at a much deeper level than that of ‘family traditions’…It is also deeper than the conscious strategies” (Bourdieu, 1980, p. 291).
Moral orienting systems are formulated by more than family systems or conscious will, although both these sources would contribute to one’s moral orienting system.

There are meaningful interactions within important relationships between persons, communities, systems of social class, and situational context. Thereby it is critical that we consider the role of socialized identities and the situationally dependent factors within a given context that co-create experience and interpretative meaning-making. “All our performances emerge from a meeting…and any social actor will have to be reflexive to a greater or lesser extent depending on the degree of fit between their dispositions and the social situation in which they are acting” (Burkitt, 2008, p. 173).

Pastoral theologian Carrie Doehring, an active contributor to the scholarly discourse on moral injury and moral stress, is the only scholar to have published work on moral injury that integrates Nancy Ramsay’s work on intersectionality. Systems of social, economic, and political advantaging and disadvantaging have a role in shaping one’s moral orienting system and in how one may experience and recover from moral stress or moral injury (Doehring, 2015b, p. 638). Moral orienting systems include both past and present impacts of social-relational structures and interactions. In the sections that follow I will elaborate this interdisciplinary understanding of moral orienting systems and their functioning during morally stressful or injurious experiences.

**Seeking confirmation and validation**

One’s moral orienting system is not a static set of rules, but a living organism of experiences and interpretations. One’s prior experiences and meaning-making schemas guide the interpretations of future experiences (Janoff-Bulman, 1992, p. 27). Our values
and beliefs are enacted within our experiences, meaning “our behaviors contribute to the essential conservatism of our conceptual system” (Janoff-Bulman, 1992, p. 34). In other words, one’s moral orienting system experiences stability most easily when one is in familiar settings, with familiar others, on familiar terms.

Stress challenges one’s moral orienting system to recalibrate in order to reestablish balance. Crystal Park’s work pertains to meaning-making and coping in the aftermath of traumatic stress. She states that there are two coping strategies: assimilation and accommodation (Park, 2010, p. 260). Assimilation is the easier process, which illuminates why persons often seek out situations, relationships and terms that confirm and validate their preexisting moral orienting systems. Accommodation requires a higher degree of change, often difficult if necessary support is not available.

Jonathan Haidt points out that the meaning making process is not only personal, but communal. Values and beliefs are not only located and utilized by individual persons, but by communities, and therefore communities may undergo some of the same processes as individual persons in creating and sustaining a meaningful moral community (Graham & Haidt, 2010, p. 140). This analysis immediately diverges from models of moral identity that conceive of values and beliefs as distinct possessions of a solitary individual, and locates moral identity instead as a process of meaningful relationships within significant interpersonal networks.

Rather than focusing on the central figure of the moral community (i.e. theistic figure within a religious tradition) and investigating experiences of encounter with this ultimate being, Haidt considers the community process of creating and sustaining itself.
“The group-focused approach to religion treats God as a maypole—it is indeed the center of the action, but the action itself is the creation, enacting, and maintaining of an emergent community by the collective behaviors taking place all around it” (Graham & Haidt, 2010, p. 142). While beliefs and values, whether religious in nature or otherwise, may stand at the center of a community’s identity, it is the shared action encircling these values and beliefs that generates meaning. “If God is a maypole, then the health and happiness benefits of religion come from participating in the maypole dance, not from sitting alone at home thinking about the pole” (Graham & Haidt, 2010, p. 145).

Haidt studies how community processes create opportunities for engagement with others or foreclose such opportunities. “Brains evaluate everything in terms of potential threat or benefit to the self, and then adjust behavior to get more of the good stuff and less of the bad stuff” (Haidt, 2012, p. 55). Within this basic cognition, very little reasoning is required and privilege is given to familiar things (Haidt, 2012, p. 56). Patterns of familiarity, mapped through our interpersonal relationships and connections in communities, become the structure of person’s moral world. One’s moral identity serves to draw a person closer into these meaningful relationships and bind groups together, but this process can also blind them to the existence and coherence of other moral worlds (Haidt, 2012, p. 110).

Initially, a different moral community may be discomforting to deeply held patterns of familiar values, beliefs and behaviors. This discomfort may generate moral stress and demand rituals of cleansing and purification (Haidt, 2012, p. 61). But such encounters need not be bound to conflict. “The main way that we change our minds on
moral issues is by interacting with other people” (Haidt, 2012, p. 68). Haidt advocates for a theory of change based in trans-community interactions that can transform even deeply held values, beliefs and behaviors. While the first reaction may be to see divergent groups as a threat to one’s own moral matrix, empathy becomes the remedy in opening new space for dialogue and learning (Haidt, 2012, p. 49).

Moral orienting systems explain how persons and communities seek out situations that confirm and validate their existing orientation, leading to group connectedness on one hand, and to intergroup conflict on the other.

**Vulnerable to Stress**

One’s moral orienting system may be better suited to one context than another, meaning that a person could function well in one context and be severely shaken in another. One’s moral orienting system is vulnerable to disruption at any time. Experiences that traumatize one’s moral orienting system do so because one is unprepared (Janoff-Bulman, 1992, p. 53), and such experiences demand confrontation with one’s vulnerabilities at a profound existential level (Janoff-Bulman, 1992, pp. 61-62). These experiences throw one’s “inner world [into] turmoil. Suddenly, the self- and worldviews they had taken for granted are unreliable” (Janoff-Bulman, 1992, p. 62). These collisions threaten deeply held values, beliefs, commitments, and behaviors and produce moral emotions such as shame, guilt, rage, disgust, and fear of causing harm (Doehring, 2015b, p. 637).

Such encounters create potential for both traumatic stress and resilience. “Times of crisis give some people the opportunity to reveal potentialities unknown to themselves
and to others” (Bourdieu, 1980, p. 295). One’s moral orienting system is not inherently good or bad (Pargament et al, 2006, p. 121).

> [T]here is no guarantee that people will attach themselves to life-enhancing values. The bonds that individuals form with alcohol, drugs, materialism, promiscuity, hatred, and self-aggrandizement can be every bit as tenacious as the connections they form with more virtuous strivings. (Pargament, 2007, p. 122)

In such cases where life-limiting bonds are formed, one’s moral orienting system may generate problems with or without crisis or catastrophe. Moral orienting systems may “offer well-integrated, coherent frameworks for living. [But they also may] leave people lost, confused, and headed toward dead ends” (Pargament, 1997, p. 68).

While moral orienting systems may be more visible during times of crisis, they are shaping our interactions in the world at all times and places (Pargament, 2007, p. 3). The seeking of relationship and significance is fundamental to human life. “[P]eople seek a relationship with a sacred large enough to encompass life as a whole…a sacred that accepts the full range of human possibilities…and a sacred that provides an overarching and coherent vision to orient and guide peoples’ lives” (Pargament, 2007, p. 149).

One’s moral orienting system is both one’s best hope and one’s greatest challenge. “Depending on the character of this system, it may be a help or hindrance in the coping process, for orienting systems are made up not only of resources but of burdens as well” (Pargament, 1997, p. 99-100). Both life-giving and life-limiting tendencies will likely be demonstrated in stressful circumstances. There is no simple roadmap. “Although traumatic events can lead to spiritual growth, they can also lead to spiritual decline” (Pargament et al, 2006, p. 124). Traumatic crisis can throw one’s moral orienting system into chaos, fracturing old relationships and meaning-making strategies.
(Pargament, 2007, p. 112) creating what we would recognize as moral injury and moral stress. One’s moral orienting system has everything to do with one’s preparedness for certain situations and unpreparedness for others, one’s capacities to assimilate and/or accommodate new and challenging experiences, and one’s network of support in coping and making meaning in the aftermath (Exline, Pargament, Grubbs, & Yali, 2014).

**Resilient and Reconnective**

How we understand moral injury impacts how we envision resilience and recovery. Doehring makes a key contribution to the discourse on moral injury when she advocates for a broadening of boundaries.

Moral injury can be placed at one extreme end on a continuum of moral stress, with everyday moments of moral stress at the other end. People with strong core values of responsibility and concern for others will likely be more susceptible to moral stress because of their feelings of being responsible for harm. (Doehring, 2015b, p. 638)

Doehring promotes an understanding of moral injury that encompasses more than radical suffering, and identifies moral stress as a part of human life. This move opens the door to both theory and practical application in new areas such as work contexts, the context of one’s family, and significant life stage events such as pregnancy, child-birth, child-rearing, intimate partnerships, relocations, illness, and death. Broadening the scope of understanding makes visible the multitude of coping strategies and creative meaning-makings as an expression of thriving within human life.

Doehring emphasizes the need for embodied care with persons experiencing moral stress. “Morally-stressed persons need to experience the compassionate presence of others, notably through the body language of spiritual caregivers” (Doehring, 2015b, p. 638).
Spiritual integration of morally stressful experiences is a process of meaning-making, connecting with significant relationships and communities, and experiencing compassion (Doehring, 2015b, p. 647). An engaged care response with persons in such moral crisis requires assessment of both life-giving resources and life-limiting burdens in a movement toward coherency and reorientation. “Spiritual integration refers to the extent to which spiritual beliefs, practices, and experience are organized into a coherent whole” (Pargament et al, 2006, p. 130). The process toward spiritual integration may be as significant as any outcome. The support provided by meaningful persons may demonstrate the very affirmations and reconnections the person suffering needs to witness. “Through experiences of love and compassion, many people feel they come closer to an encounter with the divine” (Pargament, 2007, p. 44).

In the aftermath of traumatic experiences, there is a “need to reconstruct a believable, relatively non-threatening assumptive world” (Janoff-Bulman, 1992, p. 113). Janoff-Bulman envisioned this as an interpersonal recovery process with three components: (1) initial responding; (2) reconstructing a meaningful assumptive world; and, (3) reconnection with others in meaningful relationships.

She identified that responses or coping mechanisms were a part of the initial process and should not be reduced as symptoms to be pathologized and medicated. “Denial/numbing and intrusive recollections represent the exquisite interdependence of emotions and cognition, denial representing the need to emotionally protect the individual, and intrusions reflecting the need to conceptually process the event” (Janoff-Bulman, 1992, p. 95-6). These responses are too often minimized or negatively judged,
when in reality they demonstrate motivation toward a potentially restored and healthy self.

Re-stabilizing one’s moral orienting system is not a reconstitution of all the old parts, but about finding new and creative capacities for future thriving. “The solution involves innovation and transformation in the basic schemas of victims. What is involved is no less than a creative process, though a particularly difficult and painful one” (Janoff-Bulman, 1992, p. 114). This part of process may appear strange to outsiders because it involves creative transformation particular to the subject.

Rebuilding shattered assumptions involves somehow integrating the old and the new… motivated cognitive strategies function so as to minimize the differences between prior positive assumptions and the negative assumptions implied by the traumatic event. These appraisals may look odd or unexpected from an outsider’s perspective. Yet they are creative reformulations representing the unique perspective of the survivor. (Janoff-Bulman, 1992, p. 117)

This creative and courageous process is vital in recovery because ultimately it affirms the dignity of the survivor. “Despite the common recognition that the world is far more dangerous, there is a newfound awareness of one’s own strengths and possibilities” (Janoff-Bulman, 1992, p. 137). She posits that through the recovery process one may experience what has become known as post-traumatic growth (Pargament et al., 2006).

The third component in the recovery process is reconnecting and revitalizing relationships with others. “The restorative efforts of survivors to rebuild a valid and comfortable assumptive world are always embedded within the larger context of social relationships” (Janoff-Bulman, 1992, p. 143). Connecting with others in meaningful ways is not separate from the other two components but necessarily interrelated. If social support fails to develop at key times the recovery process is likely to collapse.
“Following their traumatic experience, the survivors are ‘re-injured’ through the failure to receive expected support from social agencies, communities, society in general, and even from family and friends” (Janoff-Bulman, 1992, p. 147).

The process of meaning making should not be essentialized for every person in every traumatic situation. Many variables including time (Park, 2005, p. 714), cultural contexts, and supportive resources shape the meaning-making process. Meaning-making will involve more than introspection “but is part of reciprocal and ongoing process between individuals and the societies in which they live” (Park, 2005, p. 722).

Eventually, one’s meaning-making process may include growth that takes a person into new perspectives, interpersonal relationships, work roles, and meaningful communities. In some religious terms such growth could be characterized as conversion (Park, 2005, p. 714), while others have come to identify this kind of recovery as post-traumatic growth (Pargament et al., 2006).

The condition of intractable “injury” is not the compulsory conclusion of experiencing moral anguish. One’s moral orienting system is resilient by nature, seeking creative ways to meet human needs and recover in the aftermath of traumatic stress. The pro-social dimension of moral emotions is evidence of how one’s moral orienting system works to reconcile and reconnect with important relationships.

**Moral Orienting Systems**

The building of a conceptual framework of moral orienting systems is indebted to the outstanding work of the scholars cited in this chapter. There is ample resonance with their respective research, but ultimately a new framework provides greater utility for the
sake of this project. While Pargament uses the terminology of “religious” and “spiritual” in defining his concept and subsequently in describing spiritual struggles, here the choice is the term “moral” for two reasons: (1) “moral” allows for a broader view of meaningful values, beliefs, and behaviors that includes non-religious and non-spiritual self-identifications, and (2) “moral” is the terminology choice of the moral injury and moral stress discourse, and while that term has its limitations, it also serves as a bridge to that intellectual work.

One’s moral orienting system is uniquely one’s own while also being uniquely constructed through significant relationships—family, friends, mentors, meaningful communities, and religious traditions. Not all of these relationships, nor their corresponding values, beliefs and behaviors, are guaranteed to be positive, life-giving additions. A person may have adopted and/or internalized values, beliefs and behaviors that are harmful or burdensome. And a person may have adjusted against the values, beliefs, and behaviors, and in seeking to not resemble the character of another, developed a moral orienting system in opposition.

One’s moral orienting system generates assumptions and expectations about oneself and others, as well as venturing into existential and metaphysical questions. While some of us may have moral orienting systems embedded within a religious tradition, resemblance to classic moral virtues or religious principles is not necessary. Paul Tillich’s concept of ultimate concern is applicable here in considering that a person’s moral identity may be structured around any number of subjects (Tillich, 1958,
What makes something meaningful is not only a matter of outside authority, but of inner reflection, interpretation, and meaning-making.

The American mythologies of individuality and self-determination are particularly detrimental in conceiving and engaging with the complexities of persons’ moral identities (Burkitt, 2008, p. 2). One’s moral orienting system is not a self-composed process or outcome, but one that is social in its creation, its nurture, and its adjustment.

Each one of us is born into a society composed of social relations that bear the imprint of a power structure... our family, neighborhood, social contacts, social class, gender, ethnicity, and the beliefs and values in which we are educated – will put a sizable imprint on the self we become. (Burkitt, 2008, p. 3)

Rai and Fiske’s exceptional work on the social-relational cognition of one’s moral identity points to this very tension. “[A]pproaches to moral psychology have traditionally followed the axiom that the basis for moral judgments and behaviors are restricted to rational, impartial, logical, universal principles of right actions” (Rai & Fiske, 2011, p. 68). Such a paradigm can assign too much responsibility on an individual person for failing to achieve these principles and also rationalize condemning cultural practices that don’t fit into the prescribed norms of dominating power-holders (Rai & Fiske, 2011, p. 69).

Moral values, beliefs, and behaviors must be seen as rooted in significant social relationships (Rai & Fiske, 2011, p. 57). One’s moral orienting system will function differently in the face of different challenges and in different contexts, because the social-relational elements vary from situation to situation.

[S]oldiers may feel morally motivated in their actions while they are in battle, but when they return home they may have difficulty reconciling what they have done with a new environment that constitutes different social-relational models and
consequent moral motives and has no consistent process for reintegrating them into the social group. (Rai & Fiske, 2011, p. 69)

While this project will investigate the issue of moral identity socialization in the next chapter and consider the pressures on those social-relational bonds during post-deployment reintegration in the fifth chapter, it is critical to conceptualize the impact of these social-relational bonds in creating, sustaining and adjusting one’s moral orienting system.

Conceiving of moral identities as informed and shaped by social processes and powers opens the framework to better integrate Nancy Ramsay’s analysis of intersectionality (Doehring, 2015, p. 638). Doehring’s use of the term “embedded theologies” in describing one’s values, beliefs, and behaviors functions as a bridge to other theological dialogue partners; however it may discourage a broader audience who don’t use theological terminology. Her concept of embedded theologies, as with the other scholars reviewed above, takes seriously the role of significant relationships and the impact of social systems. Doehring goes the furthest in naming the importance of social systems of oppression and privilege in shaping the dynamics in which moral identities participate.

The matter of designating a person’s system of schemas and calling it habitus, assumptive worlds, embedded theologies, or spiritual orienting systems, or opting for the concept of moral orienting systems may appear to be parsing semantics, as these concepts have more in common than not. However, what is substantial is the expectations behind the concepts. This project advocates for a vision of moral identity that consists of values, beliefs, and behaviors constructed over time through meaningful social-relational
interactions and shaped by systems of social oppression and privilege, and that remains
dynamic in its learning and particularly impacted by situational factors. One’s moral
orienting system may or may not be religious or spiritual in character, but is nonetheless
significant in its generative power to create ideas and expectations regarding self, others
and ultimate meaning. Moral stress is the result of events or situations that interrupt,
stifle, or destabilize one’s moral orienting system (Exline et al., 2014).
Chapter Four: Military Recruit Training

The preceding two chapters explored the current scholarly discourse on military moral injury and developed a conceptual framework for this project’s key term—moral orienting systems. The concept of moral orienting systems provides a more nuanced framework of moral identity thereby making a necessary adjustment in approaching moral injury. The next two chapters will examine the application of the moral orienting systems concept in two significant seasons of military service experience. This chapter will explore the re-shaping dynamics of military training, and the next chapter will explore the transition out of the military culture and how identities may struggle to adjust.

This chapter will analyze military recruit training in light of the research contributions of three prominent social psychologists: Stanley Milgram, Albert Bandura, and Philip Zimbardo. Their respective works on obedience to authority, socialized aggression, and role performance are critical to this project in further developing our understanding of military service and moral identity. Practical theology as a discipline engages cognate fields and interdisciplinary conversation partners as a way to broaden and deepen scholarly efforts. As very little has been written by pastoral theologians or practical theologians concerning the human experiences of military service, social psychology becomes a necessary and vital partner in this project. Social psychology also benefits from a clear vision of the social-relational factors in human behavior, a
dimension that reinforces this project’s commitment to moral orienting systems as impacted by meaningful relationships and experiences.

Philip Zimbardo articulates the field of social psychology in one succinct statement: “Our personal identities are socially situated” (Zimbardo, 2008, p. 321). Three core terms are named in relation to each other: (1) identity; (2) sociality; and, (3) situation. Identities are formed, maintained, and adjusted by the circumstances of a social situation. The *Handbook of Social Psychology* uses the term *culture* to describe this intersubjective relationality, stating that “the process of becoming a self is contingent on people interacting with and seizing meanings from their cultural environments” (Fiske et al., 2010, p. 1428). Zimbardo writes that our senses of identity are significantly “conferred on us by others in the ways they treat or mistreat us, recognize or ignore us, praise us or punish us… Without realizing it, we often behave in ways that confirm the beliefs others have about us” (Zimbardo, 2008, p. 321). This cycle of feeling, behaving, and thinking toward perceived in-groups and out-groups, often becomes self-fulfilling, and over time can become deeply rooted in one’s moral orienting system.

A sense of belonging within a group is a deeply ingrained human need, and one that is often engaged in recruitment for military service.

Nations have a tremendous capacity to enlist the loyalty and self-sacrifice of their citizens, especially in conflicts with other nations. Belonging to groups is of profound significance for human beings. It fulfills deep needs and provides satisfaction inherent in connection. It provides a feeling of security. It is essential in defining the self: as a member of a family, a profession, a religious group, voluntary associations, and a nation. (Fitzduff, 2006, p. 7)

Given this deep human motivation to belong and be accepted within a meaningful group, one can understand how young adults could be willing to sign up for military
service and give over a great deal to be integrated into this culture (Fiske et al., 2010, pp. 606-609). When we additionally consider that many military recruits are graduates of disadvantaged schools and may not have access to other institutional groupings provided by college settings, aligning with a military culture of belonging takes on even more appeal (Litz et al., 2016, p. 154).

**Authority and Obedience**

One of the areas of emphasis within the military moral injury literature is the role of legitimate authority and obeying orders (Shay, 1994 & 2002). This is an area of inquiry well established in the field of social psychology. The classic experiment on authority and obedience was undertaken by a team led by Stanley Milgram in the 1960s. The experiment included volunteer participants who were paid a nominal stipend. One served as “teacher,” the other as “learner,” with the former asking questions presumably testing the recall of the latter. If an incorrect answer was provided, the “teacher” was to provide an electric shock to the “learner.” A white-coated, clip-board carrying overseer framed the examination as mutual volunteerism, necessary and safe. No person was actually receiving electrical shocks, but rather the “teacher” was hearing a pre-recorded series of responses and the “learner” was a confederate of the experiment. However what was disconcerting in the experiment’s results were the large numbers of “teachers” willing to continue to deliver shocks, in increasing voltage amounts, even after hearing groans and shrieks of pain from the “learner.”

Milgram was in part motivated to develop this experiment having observed an interesting interpretation, within the American context, of actions taken by Nazis in
WWII. Most Americans believed themselves fundamentally different from persons who had participated in the Nazi agenda. Nazi participants were deemed less than human, vile and sadistic monsters. Even after the findings of the shock-based experiment, the interpretive lens remained operative. Milgram wrote of his experiment: “A commonly offered explanation is that those who shocked the victim at the most severe level were monsters…But if one considers that almost two-thirds of the participants fall into the category of ‘obedient’ subjects…the argument becomes very shaky” (Milgram, 1974, p. 5).

Milgram’s experiment demonstrated that ordinary persons from any background, culture, or occupation were likely to follow orders from an authority figure presumed legitimate, even when the actions called for conflicted with their personal moral sensibilities. “The ordinary person who shocked a victim did so out of a sense of obligation—a conception of his duties as a subject—and not from any peculiarly aggressive tendencies” (Milgram, 1974, p. 6). This conclusion refuted both post-WWII sentiments that “good people would never do something like that” and that violence was possible only from persons predisposed to aggression.

In exploring the results of his experiment, Milgram references military service and participation,

Although a person acting under authority performs actions that seem to violate standards of conscience, it would not be true to say that he loses his moral sense. Instead, it acquires a radically different focus. He does not respond with a moral sentiment to the actions he performs. Rather, his moral concern now shifts to a consideration of how well he is living up to the expectations that the authority has for him. In war time, a soldier does not ask whether it is good or bad to bomb…rather he feels pride or shame depending on how well he has performed the mission assigned to him. (Milgram, 1974, p. 8)
Milgram articulated how the relationship with the authority figure was the catalyst for following orders. “[W]here legitimate authority is the source of action, relationship overwhelsms content. That is what is meant by the importance of social structure” (Milgram, 1974, p. 175). It is not that a person becomes less moral or immoral, but that the re-ordering of one’s moral orienting system—a process thoroughly social-relational—alters one’s values, beliefs and behaviors.

Many others since have reproduced Milgram’s findings and built on the social psychological understanding of authority and obedience. In Kelman and Hamilton’s writing on obedience in the decades following, they articulated three forms of relationship with authority that would generate obedience: (1) compliance; (2) identification; and, (3) internalization (Kelman & Hamilton, 1989). Compliance is rooted in influence and seeks the positive reaction of the authority figure. It is a strategy for attaining rewards and avoiding punishments controlled by the authority figure (Kelman & Hamilton, 1989, p. 104). Identification represents a deeper variation of compliance in that the authority figure no longer needs to be present to exert influence; however, behavior is still calculated in accordance with potential outcomes rather than having intrinsic value to the subject (Kelman & Hamilton, 1989, pp. 106-107). Internalization is a level of obedience in which the behaviors are integrated wherein “it becomes part of a personal structure, as distinguished from a set of social-role expectations. Such behavior gradually becomes independent of the external source” (Kelman & Hamilton, 1989, p. 109).

Kelman and Hamilton account for the likelihood that more than one of these forms of relationship may be operative, albeit haphazardly, at one time given the circumstances of
the situation. Each of these forms of relationship to authority would entail alteration to one’s existing moral orienting system.

Milgram considered some of these same ideas in his exploration of obedience and conformity.

[C]onsider a recruit who enters military service…[and] scrupulously carries out the orders of his [or her] superiors. At the same time, [the recruit] adopts the habits, routines, and language of his [or her] peers. The former represents obedience and the latter, conformity. (Milgram, 1974, p. 113)

Milgram’s use of the terminology of obedience and conformity describes human behavior, while Kelman and Hamilton are seeking to understand the motivation underlying that behavior. Their respective research illuminates the multi-dimensionality of the process of re-orienting a person’s moral orienting system. A goal of military recruit training is internalization, an ability to immediately obey orders without critical calculation of potential consequences.

Both Milgram, and Kelman and Hamilton, identify an important dimension of this topic concerning the reality of voluntary military service. “The psychological consequence of voluntary entry is that it creates a sense of commitment and obligation which will subsequently play a part in binding the subject to his role” (Milgram, 1974, p. 140). Kelman and Hamilton echo this point: “The nature of the experimental contract, though usually implicit, clearly called for the research participants to do the experimenter’s bidding. After all, they had agreed to come to the laboratory in order to serve as subjects” (Kelman & Hamilton, 1989, p. 151). Obligation is a more powerful binding factor for military service members of post-draft generations and may contribute, not only to a sense of loyalty and the corresponding emotions of guilt and shame, but a
sense of entrapment within the morally stressful situation (Kelman & Hamilton, 1989, p. 91).

With a structure of authority, a culture of discipline and obedience, and a rooted sense of obligation all in place, a very formative situation is created for all who participate. Such a powerful situation not only allows for the learning of skills, but the re-scripting of the underlying moral orienting systems and their constituent values, beliefs, and behaviors. Military service, and its process of indoctrination and training, typify this format. When we consider that a large majority of participants within this system are young adults from disadvantaged economic, educational and social backgrounds, we can understand that there may be an added vulnerability to damage or loss of preexisting moral orienting systems and uncritical adherence to newly enforced habits, codes, and relational dynamics (Arnett, 2015).

Close-order drill is a stunning example of the total immersion in the authority structure of the military culture that combines discipline and obedience with obligation. Milgram describes it well:

The hours spent on the drill field do not have as their major goal teaching the person to parade efficiently. The aim is discipline, and to give visible form to the submersion of the individual to an organizational mode. Columns and Platoons soon move as one man, each responding to the authority of the drill sergeant. Such formations consist not of individuals, but automatons. (Milgram, 1974, p. 181)

What is missed in his analysis is the meaningful experience of moving together as a unified body.

Close-order drill is articulated more generously by historian William McNeill:

“well-drilled troops presumably developed their own esprit de corps, an unthinking
readiness to obey their officers, and an almost complete disregard for competing attachments” (McNeill, 1995, p. 111). Drill generates an exhilarating sense of being greater than or even transcending one’s individual body, like sailing a ship through the ocean, only you are both crew and the boat itself: “A sense of pervasive well-being…a strange sense of personal enlargement; a sort of swelling out, becoming bigger than life” (McNeill, 1995, p. 2). The formative power of close-order drill is one of many collective rituals used in military training and like many of those practices, its process first and foremost is experienced in one’s physiology in a pre-verbal cognition only engaged through embodied practice. The goal of each of these collective, embodied rituals is the internalization of social-relational meaning structures that transform one’s moral orienting system.

Although Milgram’s experiment jarred the discourse on authority and obedience, refuting the common cultural narratives of anti-Nazi sentiment, and unnerving the comforting mythology of dispositionally “good people” and “bad people,” value judgments placed on following the orders of others continue to exist. Such obedience is particularly necessary in situations like combat, where the weighing of one’s options and considering various outcomes in advance may not be prudent or possible. Some have come to valorize this sacrifice of personal interest in the name of national interests, while some of the anti-war perspectives remain more broadly oppositional to such obedience. Both these interpretations appear fueled by a value system that elevates individual autonomy above all else, but world history is littered with examples of different cultures that have designed and implemented such systems in order to wage organized warfare.
The bonding of warriors into a cohesive unit increases the likelihood of their survival and accomplishment of their mission (Charuvastra & Cloitre, 2008). Close-order drill may be hard to understand for most Americans; as one learns in the first days of boot camp, giving up individualized ways of moving in the world is a process full of stumbling. As one studies military culture, it is important to consider that we are observing a total immersion of mind, heart, soul, and body.

Ben had dropped out of college and though he was working, he was incurring increasingly unmanageable credit card debt. He was looking for stability and a sense of purpose. “The great secret of the Marine Corps is it’s nothing like the commercials. On television, all of the Marines are chiseled men wielding flaming swords. In real life, Marines are people like you and me” (Peters, 2014, p. 5-6). Those other recruits around him had different backgrounds, different challenges, different reasons to be there, but they were all looking for something. “We were workers, simpletons, recovering addicts, lawbreakers, and patriots. We were college dropouts. We were ordinary” (Peters, 2014, p. 1). Ben’s reflections echo the evidence demonstrated by Milgram’s classic experiment—ordinary people can behave in aggressive and violent ways under certain situations (Milgram, 1974, p. 5).

Like so many young persons, particularly those who have been disadvantaged by life circumstance and/or social systems of power, the question of meaning and purpose within one’s life is centrally important.

I was a middle child in a large family riddled by divorce. If there was one thing I craved, it was self-discovery. I think that’s why, after my senior year of high school, I dove into Christianity and, later, the Marine Corps with an on-fire
fervor, hoping they would provide me with both a place of belonging and an identity I could call my own. (Peters, 2014, p. 8)

It is the vulnerability generated by this longing for meaning, purpose, belonging, and structure that the military so often seizes upon in its recruitment of young persons, and then utilizes profoundly in its training (Litz et al., 2016, p. 154).

Ben remembers his Drill Instructor’s words concerning motivation and the training process. “‘We have a job to do here, and respect ain’t gonna cut it. What’s needed is fear. What’s needed is dehumanization. You have to strip a man down—humiliate him—before you can begin the process of rebuilding him’” (Peters, 2014, p. 23). The humiliation, cruelty, and dehumanization inflicted on recruits is received as deeply and formatively as it is because these recruits come to believe in the ultimate values and beliefs promoted alongside them. “I was near the end of my training, and I no longer recognized myself…I was callous and unsympathetic. I wanted to be the best. I wanted to serve my country and defend freedom. I wanted to impress” (Peters, 2014, p. 22).

In the ultimate demonstration of overt authority over his preexisting moral orienting system, Ben remembers the first words he heard as a recruit. “‘You are now property of the United States Government. You will not eat, drink, or shit without the government’s approval. That means me, Recruits. I will tell you when and how to breathe’” (Peters, 2014, p. 4). One of the outcomes of this immersive social learning environment is the process of learning to do new things, think new things, and value new things.
Social Learning and Aggression

Albert Bandura’s model of social learning is a perceptive lens through which to understand the total immersion of military training and provides useful insights into how one’s moral orienting system can be reorganized. Bandura made great strides in reconceptualizing aggression in human behavior, a key contribution when considering military training. As Ben put it, “I’m not a natural killer. I’m a trained killer” (Peters, 2014, p. 1). Psychologists such as Freud viewed one’s moral self as energized by instinctive drives like aggression shaped by early childhood. Bandura, in contrast, saw social/situational factors like role-modeling and reward/punishment systems as the driving forces for learning and demonstrating aggression (Fiske et al., 2010, pp. 838-840).

Bandura’s social learning model offers a number of key contributions to our understanding of aggression. Firstly, he rejected notions that aggression is intrinsically bad, instead arguing

concern over the adverse consequences of aggression obscures the fact that such behavior often has functional value for the user… Unlike other social behaviors that cannot be effective without some reciprocity acceptable to the participants, aggression does not require willing responsiveness from others for its success. One can injure and destroy to self-advantage regardless of whether the victim likes it or not. (Bandura, 1973, p. 2)

This functionalist perspective on aggression disrupts superficial appraisals of aggression, but requires further investigation.
Secondly, Bandura firmly disputed the dominant traditions of Freudian psychoanalysis while refusing the nihilistic swing in the other direction. He envisioned a relationship between person and circumstances that was mutable.

In the social learning view, man [sic] is neither driven by inner forces nor buffeted helplessly by environmental influences. Rather, psychological functioning is best understood in terms of continuous reciprocal interaction between behavior and its controlling conditions. (Bandura, 1973, p. 43)

This alternative view ultimately allows for greater complexity and nuance in understanding the human experiences of military service and the process of social learning reengineering one’s moral orienting system.

Thirdly, Bandura’s conception of social learning supposes room for change, the potential to move toward health and wholeness, rather than merely pathologizing all human suffering. Bandura wrote, “soldiers are returned to civilian life without putting them through a re-socialization process designed to reinstate aggression restraints or to restore commitment to the dignity of human life” (Bandura, 1973, p. 100). This dissertation’s next chapter will engage this topic more fully, but here note that the value of Bandura’s social learning theory for this project is that social learning may recast our frames for considering post-deployment reentry and reintegration. Bandura is prescient in addressing issues that relate profoundly to military experiences, moral injury, and the reconceiving of values, beliefs and behaviors operating within one’s moral orienting system.

The human capacity for aggression has been engaged by pastoral theologian, Kathleen Greider, in her book Reckoning with Aggression. Like Bandura, she asserts that aggression must be understood as a human capacity, rather than merely a negative
behavior (Greider, 1997, p. 1-2). Greider names aggression as a spiritual force inherently neither positive nor negative. “We use aggression to do both good and harm, and we utilize it to build both positive and negative connections with others” (Greider, 1997, p. 21). She goes on to note that aggression becomes morally significant depending on how one employs such energies. “[A]ggression can turn violent in the face of real or perceived threat to one’s own survival or thriving, or that of one’s ‘loved ones’ – treasured people, things, places, ideas, and principles” (Greider, 1997, p. 21). Aggression can fuel other, more life-giving, outcomes; however, to actualize such outcomes complexity and ambiguity must be honored instead of fought against (Greider, 1997, p. 76). Greider’s assertions regarding aggression mirror this project’s description of moral emotions: neither positive nor negative, but significant in human experiences and life-giving behaviors because of their pro-social-relational potential. Both Bandura and Greider have engaged constructively with how aggression can be manipulated and employed within human experiences and demonstrated how this human capacity for aggression could be understood as not just instinctive destructive violence (Greider, 1997, p. 48) but also a human ability that could be directed toward beneficial outcomes. In the instance of military engagement, aggression is deemed a useful and necessary tool in battling an enemy deserving of harm (Fiske et al., 2010, p. 1035-1050).

Tyler enlisted as young as the Marine Corps would allow. He was like many young Marines: looking to challenge himself, looking to find validation and purpose, and looking for a way into a different, more stable, order of things.

When I was a young enlisted Marine, I thought I was an American original. I figured they broke the mold when they put those dress blues on me. But when I
went back to boot camp as an officer, and I interviewed all my recruits and asked them about their backgrounds, I was stunned to find out that I wasn’t an American original at all. I was an American statistic. I was just like all of them. We shared a common heritage. We came from broken, unstable homes. We lived on the fringes. We didn’t do so well in school. We’d developed a low opinion of humanity and of life, because the life we’d seen was ugly. The life we’d seen was poverty; it was beatings and abuse; it was abandonment; it was molestation; it was neglect; it was addiction; it was failure; it was filled with hopelessness. Not every single Marine saw the same ugliness, and of course some saw none at all. We all had different stories, but I interviewed a hell of a lot of recruits, and there was an irrefutable trend of desperation. Now that isn’t a coincidence. That’s profiling. And that is exactly what the Marine Corps does. (Boudreau, 2008, p. 142)

Tyler, and many others like him, found their way to the Marine Corps, and their boot camp training changed their lives forever.

What the yelling and the intimidation instilled above all was discipline and that ever-crucial instant willing obedience to orders. But the instant willing obedience was not exclusively to the good orders, or to the moral orders, or the legal orders, but all orders. When a man is trained so vigorously to act instantly without contemplation, he is denied the opportunity to distinguish between the good orders and the bad. (Boudreau, 2008, p. 134)

Tyler connects his training with a clear change in his thought-process and related behaviors, and while change may be deemed necessary for his survival in a high-stress environment that change is morally significant. Military training is preparing him to inhabit the morally conflicted space of war-making while subsuming his abilities to contemplate the moral dimensions of his actions.

When immersed in the total situation of military training and subsequent military service, it is not so easy to see the boundaries between right and wrong and understand the often instantaneous moral decision-making that occurs in assessing danger and the need for lethal use of force.

The individual Marine thinks about the problems, but you put him [or her] in that formation, and you tell him [or her] to move out, and the training is going to kick
in, and that conditioning to never quit is going to kick in. And if he [or she] does, [they]’ll have to break ranks to do it. Then he [or she] winds up adrift, cut off, alone. The individual knows this either consciously or unconsciously. He [or she] feels it in his [or her] gut. So where the training fails to keep a soldier in line, the fear of exclusion will surely assist. (Boudreau, 2008, p. 194).

This is a useful depiction of the power of military training and culture. One is not merely abiding by the rules and codes of the military culture and structure, nor has one been presented with the choice to participate or not given the circumstances; instead, each member of the larger body is pulled along by the deeply, socialized reorientation of their identities (Milgram, 1974, p. 140; Kelman & Hamilton, 1989, p. 151). Recruits are instructed that (1) their lives depend on their unit members, (2) the protection of their unit members is the highest form of valor, and (3) values such as valor, courage, commitment, loyalty, and honor are the bedrock of one’s moral orienting system. Such ideals are put into action in training that enables service members to respond automatically in situations of real or perceived danger that could require lethal use of force. In other kinds of morally distressing situations, like caring for the wounded or dead, military service members are trained to suppress distressing emotional responses by using the rhetoric of valorous sacrifice, framing injury and death within the values of valor, courage, commitment, loyalty, and honor.

Some years later, Tyler, now an officer, served as an instructor at Marine Corps boot camp, now occupying a different vantage point on military recruit training. He remembers a senior enlisted member within his training unit giving guidance to a young recruit.

He said to him, ‘Listen son, the yelling isn’t personal. It’s not about you. It’s about war. It’s about making you work and think under pressure. The yelling is
the bullets flying by. The yelling is the bombs going off, and the bodies coming apart, and the blood spilling. It’s the only way we can find out if you’re going to crack when the shit hits the fan…. Are you going to crack?’ That was all [the recruit] needed to hear. He went back to training that day. (Boudreau, 2008, p. 133)

At the time, Tyler was proud of this mentorship he observed, but later he came to question whether that rationale of military recruit training is justifiable.

I’ve been to boot camp and I’ve been to war, and they are not the same. Boot camp cannot fully prepare a [Marine] for the stress or predict [their] behavior in war. So there had to be more to it than that. The yelling was about urgency and speed. We had to make them think fast and act fast to survive. It was about overcoming fear and replacing it with audacity. It was part of the common trial that recruits had to endure together, producing among them a sense of camaraderie. (Boudreau, 2008, p. 133)

In some ways military training is directly linked to functioning and surviving in high-stress combat environments, but the larger picture is more complex than that. One’s survival, in a high-stress, morally conflicted environment, requires a major renovation of one’s moral orienting system. One’s values, beliefs and behaviors are substantively reoriented within a new world of challenges, opportunities and meaningful relationships.

Tyler’s moral orienting system, re-engineered during his military training, became further entrenched during deployments. The cultural gap between service members and civilian families and friends widened with each deployment.

The Marines and the civilians collided into a barrage of hugs and kisses. The civilians were the same as they always were, but the Marines they hugged and kissed were not the men [or women] they had once known. The consciousness of every man [or woman] in that unit had been reconfigured. Our identities were altered. (Boudreau, 2008, p. 8)

Tyler reflects on this change: “I used to have only one voice, one point of view. All right, so I’ve got a new perspective now. It happens. But it’s not like I just changed my mind.
My mind changed” (Boudreau, 2008, p. 10). This statement reveals the discomfort and instability he felt in trying to manage the forces within his dissonant values, beliefs and behaviors. And yet this struggle between moral worlds is not a mental health diagnosis, nor is it a rare occurrence for military service members; instead it is generated by the intentional reformulation of one’s moral orienting system during military training which may serve the demands of military service but then can be disconnected and ineffective in other situations, such a meaningful life in civilian contexts.

**Powerful Situations**

Social psychology emphasizes the power of situational factors. Zimbardo writes, “Good people can be induced…into behaving in evil ways… when they are immersed in ‘total situations’ that impact human nature in ways that challenge our sense of stability and consistency of individual personality, of character, and of morality” (Zimbardo, 2008, p. 211). Military indoctrination and training operates as a “total situation” that generates a re-formed self-concept, de-individuates identity and instills a new group identity, and creates a context in which human aggression can be demonstrated in new ways. Bandura noted that “the social influence process is greatly facilitated by immersing recruits in a totally new reality… [A]lmost every aspect of their daily life is closely regulated in accordance with the new reinforcement structure” (Bandura, 1973, p. 99).

The Schadings, in their introduction to military culture and customs, describe military recruit training as a sudden and total immersion into a new world.

Recruits are intentionally brought in at night to add to their nervousness, fear, and intimidation… It’s immediately harsh, intense, and extreme… indoctrination combined with complete isolation from outside influence gradually converts individuals into team members. (Schading & Schading, 2006, pp. 98-99)
The thinking, feeling, and behavioral patterns that constitute a person’s self-concept and moral orienting system begin to transform. Marine Corps slogans such as “Pain is just weakness leaving the body” and “Pain is temporary. Pride is forever” (Schading & Schading, 2006, p. 98) suggest a physically grueling and cognitively stressful transformational process.

Marine Corps recruits are forbidden from using ‘I’ to reference themselves, instead saying ‘this recruit requests…’ This is one of many elements of de-individuation that impacts identity transformation. “The introduction of uniforms, costumes, and masks, all disguise of one’s usual appearance promotes anonymity and reduces personal accountability” (Zimbardo, 2008, p. 219). With this stripping away of meaningful relationships and patterns of behavior often comes a sense of loss and grief. One veteran recounts the process, “I was leaving behind, forever, a way of life, an identity, a personality, and all that I cherished and held sacred for the past twenty-one years” (Brock & Lettini, 2012, p. 19).

However, de-individuation is not the only trajectory operative within this training process; military recruit training is instilling a deep, embodied sense of shared identity and group cohesion (Litz et al., 2016, p. 32).

Combining the camaraderie of a football team, the dedication to task accomplishment of a dot-com startup workgroup, the sense of separation of a cult, the unit preservation of a police department, and the love of a family will yield a cohesive force that still falls short of the ties that bind military members together. (Sledge, 2005, p. 15)
This is not an interpersonal ethic of sharing or taking care of others, this is group bondedness at the deepest level with the highest stakes: life and death (Charuvastra & Cloitre, 2008).

The reconstituting of a recruit’s self-concept is inseparably bound to imbedding a new moral orienting system. During my training, I was informed by a senior chaplain that the purpose of the military is “to kill people and break stuff.” A significant shift must occur in order for the recruit to successfully complete training that involves protecting oneself and one’s mission. “Our society’s mores, and often our own morals and ethics, forbid us to kill – except in certain closely limited situations. Eighteen-plus years of training must quickly be counteracted so that some killing is not only allowed but encouraged” (Sledge, 2005, p. 244). Bandura articulates the process:

The task of converting socialized men into proficient combatants is achieved not by altering personality structures, aggressive drives, or traits. Rather, willingness and ability to kill in combat are attained by direct training combining several important features. In the first place, the moral value of killing is changed so that people can do it free from the restraints of self-condemning consequences. This is accomplished through indoctrination that assigns a high moral purpose to warfare. One must fight for his country to defend its survival, to preserve world peace, to save humanity from enslavement by cruel oppressors, and for national honor. The force of the moral appeals is strengthened by portraying the enemy as servile fanatics or sub-humans. (Bandura, 1973, p. 99)

Military recruit training does not merely teach technical combat skills, but the moral rationale that give war-fighting purpose and meaning (Litz et al., 2016, p. 32). New values and beliefs are being instilled along with new learned behaviors, including killing. Kelman and Hamilton add to this description:

Three social processes that tend to create such conditions can be identified: authorization, routinization, and dehumanization. Through authorization, the situation becomes so defined that the individual is absolved of the responsibility
to make personal moral choices. Through routinization, the action becomes so organized that there is no opportunity for raising moral questions. Through dehumanization, the actors’ attitudes toward the target and toward themselves becomes so structured that it is neither necessary nor possible for them to view the relationship in moral terms. (Kelman & Hamilton, 1989, p. 16)

Both Bandura, and Kelman and Hamilton, offer insightful perspectives on the development and maintenance of a situation that is governed by different rules, values, and practices. The total immersion into this world allows persons to not only understand themselves differently, but come to see the world and potential need for directed aggression in a very different framework. Bandura observed “The highest rates of aggressive behavior are found in environments where aggressive models abound and where aggressiveness is regarded as a highly valued attribute” (Bandura, 1973, p. 97).

Military recruit training overrides previous identities, taboos, and values, and through authorization, routinization and dehumanization, empowers aggressive behavior including killing. One Vietnam combat veteran recounts “I sort of went into automatic and didn’t think about what I was doing, or even remember it later. I’m a firm believer in training… It lets people like me perform in combat when common sense was telling me to run like hell” (Grossman, 2008, p. 77). From an outsider’s perspective the notion of killing without thinking about it or remembering one’s actions may be quite jarring and concerning, but this testimony illustrates a moral orienting systems of values, beliefs and behaviors that deems such actions normal and routine.

Logan signed up for the Army in an attempt to fund his college education. As the son of two teachers, he knew the value of learning and thinking for himself. But with military recruit training, he found that practicing self-reflection and critical thinking were
disempowered. “In order to withstand the sensory and moral onslaught of combat, military training entails desensitizing recruits. The product of this training is called ‘reflexive fire.’ Essentially, soldiers are trained to fire by reflex instead of by conscious thought” (Mehl-Laituri, p. 2012, 34). Logan came to see his participation in the military as a kind of performance, within a very different context than he had ever experienced before. “I was engaged in a kind of roleplay, a coping mechanism in the absence of any reliable moral. We were all playing a part defined for us by…circumstance…[W]e put on our ‘war face’ and played the part expected of us” (Mehl-Laituri, 2012, p. 43). This statement echoes the social psychology research of Zimbardo, who observed the change in facial expressions and body language as participants in his prison experiment assumed different roles (Zimbardo, 2008). Logan was aware of the dissonance between the demands of the military context and his pre-existing moral frames. With new circumstances and expectations experienced in life and death terms, alterations to his pre-existing moral orienting system were pragmatic for survival.

In reflecting on that powerful transformation of his Army basic training, he connects that experience with the process undergone by converts to the early Christian church.

In the earliest Christian communities, the process of becoming a Christian…was physically traumatic and psychologically arduous…Converts to Christianity [were] being taught to see the world through new eyes…A catechumen had to completely relearn what it meant to be human. (Mehl-Laituri, 2012, p. 33)

Logan connects his experience in military recruit training with coming to see “the world through new eyes” and relearning “what it meant to be human.” These are significant statements of deep identity change.
As each of these memoirs of military service recount, military recruit training is a highly stressful, total-encompassing situation designed to disempower certain values, beliefs and behaviors and inscribe certain others in engineering a moral orienting system that can function within the military context including combat circumstances. The works of Milgram, Bandura, and Zimbardo serve as a framework for understanding this training as more than skills-oriented learning—this is profound identity re-authoring that can generate new ways of thinking, feeling and behaving. Military service members who use lethal force in response to real or perceived danger don’t need to be treated as fundamentally different human species, as Milgram demonstrated. Very ordinary people can act in startlingly different ways in certain situations. Rather, service members must be understood as persons who have undergone an intense and transformative alteration to their values, beliefs and behaviors that may not be easily integrated into civilian society post-deployment.

Milgram’s and Zimbardo’s respective experiments both demonstrate that persons can perform in assigned roles dramatically differently than they would have prior to that assignment, but may experience moral stress concerning their actions following the experiments.³ Participants stated that they had trouble recognizing themselves in the video footage.⁴ Zimbardo, himself, was in part motivated to conclude this experiment prematurely because his colleagues informed him that he was himself behaving differently as he took on the role of prison warden and immersed himself in the

³ https://www.youtube.com/watch?v=sZwfNs1pqG0
⁴ https://www.youtube.com/watch?v=sZwfNs1pqG0
experimental situation.\textsuperscript{5} The Milgram and Zimbardo experiments in total immersion situations were relatively brief in comparison to one’s participation in military service, suggesting that the impact on a service member would be even more deeply formative and complex.

The study of military moral anguish, reaching back to the work of Robert Jay Lifton, has recognized the role this ritual initiation of military recruit training and the reengineering of one’s moral orienting system must contribute to the ultimate consequences made possible by military service.

To reach the desired psychological state, the socialized warrior has always required some kind of initiation process, a symbolic form of death and rebirth… In that rite (now called basic training), his civil identity, with its built-in restraints, is eradicated, or at least undermined and set aside in favor of the warrior identity and its central focus upon killing. Only through such a prescribed process can the warrior become physically numbed toward killing and dying, shielded from complexity, and totalized in his commitment to the warrior role. (Lifton, 2005, p. 28-29)

And yet, even with such awareness throughout the available scholarship on military moral injury, the primary attention is paid to acute traumatic events rather than the morally significant socialization process of military recruit training and its repercussions on human bodies during their military service and how it could greatly impact the post-military transition. The following chapter will take up this task more fully.

We cannot underestimate, much less ignore, the role of the social-relational situation in the human experiences of military service and its impact on one’s moral orienting system. Recognizing the role of social learning in identity formation allows us

\textsuperscript{5} https://www.youtube.com/watch?v=sZwfNs1pqG0
to better understand what is happening in military recruit training and challenges us to think differently about the process of coming home and reconnecting in meaningful ways post-deployment. A service member’s moral orienting system is changed during military recruit training; new values, beliefs, and behaviors replace pre-existing values, beliefs, and behaviors, and new meaningful relationships are nurtured that sustain the new military moral orienting system. This new moral orienting system is designed to function in a military context, including the demands of working in high-stress, life-threatening environments. However, just as the military recognizes that you can’t take civilians and insert them into military life without intense training to reengineer their moral orienting systems, we also must recognize that taking military service members and inserting them into civilian contexts without opportunities to adequately rescript their military moral orienting systems may generate a number of different problems, including moral stress.

Military training intentionally engages and changes a recruit’s moral orienting system: diminishing many values, beliefs, and behaviors common in civilian life, and instilling new values, beliefs, and behaviors relevant to military service; diminishing social-relational bonds with civilian persons, and promoting social-relational connection with military persons and hierarchical social order; and, re-inscribing these moral orienting forces through intense, highly-ritualized, body-based experiences. Treatment approaches and reintegration programs for military service members must acknowledge and engage moral orienting systems with similar penetrating thoroughness if they hope to meet the complex demands of reentry into civilian worlds.
Chapter Five: Transitions Home

The previous chapter explored how socialization of recruits through military training and their total immersion in military service substantively re-engineers the moral orienting systems of service members. This project will build on the analysis of military recruit training in order to shift the dominant conceptualizations of military moral injury. This chapter will investigate the post-deployment transitions of military service members and articulate an alternative conceptualization of the factors involved in generating moral injury.

As chapter 2 assessed, the prevailing understandings of military moral injury emphasize individual actions and inactions of persons in authority (Shay, 1994; Shay, 2002) and/or the individual service member (Litz et al., 2009; Drescher et al., 2011; Nash & Litz, 2013). In this understanding of moral injury, the symptoms appear post-deployment because the service member then has time to reflect and thus experiences overwhelming levels of guilt, shame, disgust, and/or rage. Subsequently, veterans’ suicide rates, instances of domestic violence, social isolation and so on are attributed to this inescapable moral anguish.

This project is deeply concerned with the moral dimensions of the suffering of military service members, but finds the leading frameworks of military moral injury to be limited by overly-individualistic conceptualizations of morality and personhood,
assumptions that undervalue social-relational dimensions and are acutely discordant with military indoctrination and culture. One’s re-engineered moral orienting system, imbedded through military recruit training and calcified through high stress deployment environments, may struggle: (1) to transition out of these total military situations; and, (2) to enter the situations presented by civilian society. These challenges of transition may contribute significantly in generating moral stress and moral anguish.

**Heroes or Head-cases**

Two pervasive narrative frames in American society orient military service and post-deployment transitions. The first, what I would call the “hero” narrative casts all service members as heroes and seeks to valorize their courageous defense of the nation and its values. In this frame, veterans deserve accolades, special perks, parades, and discounts when shopping at Home Depot. The “hero” narrative is rooted in long standing mythologies of military heroism and is promulgated, at least in part, in support of military recruitment and retention. This narrative honors military service on a superficial level and cannot easily accommodate evidence of PTSD, moral injury, and veteran suicide because these phenomena seem to diminish the stoic warrior image.

The second, what I would call the “head-case” narrative, assumes all service members have been physically, emotionally, and/or spiritually broken by their military service experience. Veterans are deserving of the nation’s pity and collective regret for the human costs of war-making. The “head-case” narrative is a softened alternative to the villainizing of veterans that followed the war in Vietnam. This narrative honors service member’s sacrifice in a very different way, allowing for veteran’s struggles but excluding
evidence of positive character development resulting from experiences in military service.

Both of these narratives are fueled by differing political values and agendas, although both propose their own version of the message “Support Our Troops.” As with many organizing frameworks, these narratives show us something valuable about veterans and the human experiences of military service while also limiting or minimizing important evidence that may seem contrary. No veteran fits seamlessly into either categorization.

Perhaps most problematic are the practices or programs these narratives support. “Heroes” get parades and “head-cases” get clinics, and in both cases authentic relationships within civilian communities are withheld (Litz et al., 2016, p. 34). Interpersonal interactions are often framed with similar expectations projected onto veterans and their experiences.

I got the picture real fast. If my story wasn’t tragic, if it didn’t make ‘em cry, or if it didn’t yank ‘em to the edge of their seats, or get a big laugh, nobody wanted to hear it...They wanted high-speed adventure and witty heroes who escaped death by the skins of their teeth and saved the day in the end. Well, I’m not a hero, and I don’t have that kind of story to tell. (Boudreau, 2008, p. 8)

Many civilians seem curious about military service, but interactions between veterans and civilians are too often governed by unhelpful assumptions. Tyler is a great story-teller. He performs simultaneously into these projections and against their limitations.

Human beings seek meaning in telling stories, and war stories have particular cachet in many communities. But the way we tell and receive these stories influences how we interact with the persons and experiences depicted. If these stories don’t promote
interactions that allow for deviation from the narrative’s norms, they can foreclose opportunities for authentic and trustworthy relationships. Logan recounts his own struggle with these two narratives:

When service members are called heroes, they are called to a standard of living that is impossible to achieve, especially given what they experience in combat. The other end of the spectrum is to call service members monsters… As a soldier I could never be just human, just a man trying to live a life of faith; I was either hero or monster to just about everyone I met. The greatest challenge in my life has been simply to find a community of fellow believers who know me not as Logan, “Combat Veteran,” but as Logan, “Friend.” (Mehl-Laituri, 2012, p. 164)

Any military service member is going to be the subject of their own unique story, one that is not only about their experiences in war, but about their journey of coming home. Tyler describes how his post-deployment transition was more jarring than his experiences of military recruit training or deployment. “The journey home from war is the threshold between a killing order and a peaceful chaos…But…home ain’t a point on the map—it’s a point of view…My attitude was like a cooked egg—permanently altered. My basis was adrift” (Boudreau, 2008, p. 5). His own expectations for himself and what awaited him upon return failed to be realized because his sense of self, including what I have named as moral orienting system, had been reordered. What he encountered of “home” now seemed “distorted.” He struggled to reacquaint himself with the values, beliefs and behaviors of civilian society, describing instead how permanently changed he felt as “a cooked egg.”

Tyler articulates how he felt adrift as he moved from military life to inhabiting civilian reality. “I say coming home is hell, and hell ain’t got no coordinates. You can’t find it on the charts, because there are no charts. Hell is no place at all, so when you’re
there, you’re nowhere—you’re lost” (Boudreau, 2008, p. 148). What becomes useful for Tyler is a gradual process of meaning-making, what I would identify as re-orienting his moral orienting system enough that he can survive in a civilian context.

I don’t have a recipe, but there’s one thing I do know and that is the power of the narrative. Put the story together. Understand the story. Ask questions of the story; make it answer you. Make it. You don’t take no for an answer. You find the answer. You keep building that narrative until the answer comes around. That’s the low road out of hell. (Boudreau, 2008, p. 148)

His process of meaning-making, and the gradual transitioning of his moral orientation system, are not prescriptive for all veterans but rather gesture toward a real need that too often goes unmet.

Tyler’s meaning-making process would not have been possible without meaningful relationships with civilian friends. Earlier it was noted that sometimes such interactions and relationships are stunted by assumptions. Another commonly experienced challenge is the gap of cultural imagery and language.

I was rapping my “truth” to a friend one day when he suddenly scratched his head and asked, “Why do you do all that cussing?”…When I step into my narrative, it’s like stepping into character. When I saw the sights, and smelled the smells, and felt the heat…I was cussing. So if I want to live it again, if I want to think about it, if I want to get in that memory and find some meaning to it all, I’m bound to be cussing. (Boudreau, 2008, p. 151)

Tyler’s behavior in terms of language adoption is a key indicator of his “stepping into character.” He is transgressing worlds he once inhabited, translating experiences between social-relational spaces, and in so doing he draws together previously disparate parts of himself. The coherence he constructs is not easy or clean, but becomes functional for his existence post-deployment. The sought after coherence is not only subject to Tyler’s process of speaking, but in the hearing and reception by his civilian friend. As Tyler
seeks to speak across the cultural and experiential gaps between them, his friend’s ability to listen patiently and compassionately is crucial. Their conversation demonstrates the crux of the veteran-civilian interpersonal encounter: each person must be present with integrity, but both must also exhibit their capacities to move toward each other. In order for veterans to transition successfully into meaningful interpersonal relationships within a civilian context, the work of cohering and integrating seemingly disparate pieces is a shared responsibility.

As Tyler works to build meaningful and trustworthy relationships within the civilian context, he also experiences a kind of exile from the world that once embraced him.

When I see…a man walk past me with an Eagle, Globe and Anchor…tattooed on his arm, I want to yell out, “Semper Fi, brother. You and I were in the same suck!” (That’s what we called it—The Suck.) But then I always stop short when a voice inside me says, “You’re not brothers anymore. And you damn sure ain’t on the same page of music now.” (Boudreau, 2008, p. 186)

Tyler experiences this kind of dissonance because he now actively speaks out publicly against the wars he fought in but also feels as though such actions betray the brotherhood he once valued above his own life.

I think there is a common impression among outsiders that life in the military is a detached experience and that soldiers are deliberately segregated from their emotions. I disagree. Emotions are an integral part of the soldier’s existence and more vital to success in battle than any weaponry or equipment could ever be. The soldiers’ bond with each other, and what is often referred to as “the faith” is their strength; it’s what keeps them fighting, and on the battlefield it’s really all they’ve got. (Boudreau, 2008, p. 186)

Tyler’s account of the deep emotional bonds built through military recruit training and deployments is a direct rebuff of interpretations of military service members as
automatons emotionlessly following orders (Milgram, 1974, p. 181). The picture Tyler offers is of human beings who have been profoundly reoriented into new values, beliefs, and behaviors, and who demonstrate their new moral orienting systems with passion and commitment. The struggle to break ranks and make the transition into a meaningful existence in a civilian context with different, even conflicting, values, beliefs and behaviors should not be underestimated.

Both Tyler and Logan reject the label of “hero” and likewise don’t wish to be seen as victims of their military experiences, as “head-cases.” As with many service members they are each seeking to construct their own meaning-making narratives, build trustworthy relationships, and find meaningful ways of connecting their experiences and their futures. We need to interrogate the motivations that prop up these dominant narratives regarding military service, asking how these narratives intentionally distance civilians from veterans, and also shield citizens from the horrific human and environmental costs of their nation’s war-making.

**Programs for Veterans**

Today, one cannot turn around without seeing promotions for new programs for veterans, from big corporations seeking to hire veterans, to universities imploring veterans to bring their G.I. Bill monies to their institutions. Veterans represent a particular brand of cultural and economic value, and market forces are very much in play. One of the most visible veterans’ charities, The Wounded Warrior Project, has been exposed for exploiting injured veterans’ stories and then spending it on lavish parties.

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6 https://www.whitehouse.gov/joiningforces/about
instead of veterans. In 2014, the organization received $300 million in donations and only 60% went to support of veterans. This is an ugly example of how images and narratives regarding veterans can be enacted in public spaces. Such intersections of values, economic and political systems, and real human needs exceed philosophical debates concerning war and military service; here we find the discourses, institutions, and cultural values that relate directly to how veterans return home, receive care, and transition from military life to something that comes next.

Veterans’ organizations have a wide range of goals and objectives. Some, like Veterans of Foreign Wars (VFW), American Legion Auxiliary, and Disabled American Veterans (DAV) offer a range of support programming. Organizations such as The Mission Continues and Team Rubicon have been established more recently and focus on community service as a path to healing and reintegration. Veterans groups like Veterans for Peace or Iraq Veterans Against War have a central goal of organizing veterans into political action. These are but a few examples of the most visible veterans’

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8 http://www.vfw.org/
9 https://www.alaforveterans.org/
10 https://www.dav.org/
11 https://www.missioncontinues.org/
12 http://www.teamrubiconusa.org/
13 http://www.veteransforpeace.org/
14 http://www.ivaw.org/
organizations, and while their goals differ, they are organizations by veterans, for veterans.

Many other organizations and institutions also engage in the challenges of post-deployment reentry and reintegration. The Veterans Health Administration and Vet Centers represent the large scale effort by the federal government to provide aid and care for veterans and military families. Research and educational groups like the National Center for Post-Traumatic Stress Disorder\(^{15}\) and the Soul Repair Center at Brite Divinity School\(^{16}\) are breaking new ground on best practices for treatment of PTSD and moral injury, respectively. Universities, like the University of Denver, have hired Veterans Services staff,\(^{17}\) and there are now graduate programs in social work\(^{18}\) and theological education\(^{19}\) focused on care of veterans and military families.

Given this project’s conceptual work on moral orienting systems and the morally-significant dimensions of post-deployment transitions, it is important to consider how these organizations are endeavoring to fulfill their goals of supporting veterans. There are too many programs to adequately address, so for the sake of beginning such an investigation, three such initiatives will be considered here: the Veterans Health Administration, The Mission Continues, and RezVets at The Church of the Resurrection. These three are selected because they are each highly visible representatives of different

\(^{15}\) http://www.ptsd.va.gov/

\(^{16}\) http://www.brite.edu/academics/programs/soul-repair/

\(^{17}\) http://www.du.edu/veterans/

\(^{18}\) https://msw.usc.edu/academic/sub-concentration/military-social-work/

\(^{19}\) http://www.iliff.edu/degrees-certificates/military-ministry-course-provider
modalities of veteran support organizations. While all share the common goal of supporting veterans in the reintegration transition, they each represent models with very different cultural milieux and strategies for meeting the challenges of reintegration. Particular attention will be paid to the social-relational dimension of each organization’s support of veterans, to the processes of receiving care in a cultural framework that resonates with military moral orienting systems, and to how these organizations create opportunities for necessary change and growth of those moral orienting systems.

Veterans Health Administration

The Veterans Health Administration (commonly referred to as “The VA”) has an infamous reputation in the veterans’ community. It has suffered considerable scrutiny in recent years due to lack of institutional accountability, length of wait times in receiving care, and an inability to stem the tide of veteran suicide. The most visible media attention came in 2014, when at least 40 veterans died while awaiting care from the Phoenix Arizona VA hospital. An internal audit of the hospital revealed that the Phoenix VA hospital officially reported an average 3-week wait time for an initial appointment, while in reality the average wait time was nearly three months. Upon further investigation, at least 1,700 veterans not properly registered in the system were consequently not being tracked or responded to at all. This scandal became a lightning rod for criticism and brought about the resignation of then US Veterans Affairs Secretary Eric Shinseki. Within months of this story making headlines, other facilities were also scrutinized.


However, the sheer size of the VA makes reforms and improvements difficult to assess. With an annual budget of nearly $100 billion and nearly a half million employees serving in hundreds of facilities nationwide, the Department of Veterans Affairs remains the largest such institution in the world.

In the wake of the 2014 scandal at the Phoenix VA hospital, President Obama made a number of public statements, including promises of renewed commitment to the nation’s veterans and their families:

They’re the best that our country has to offer. They do their duty. They expect us to do ours. So, today, I want every man and woman who’s served under our flag to know—whether your tour has been over for decades, or it’s just about to end—we will never stop working to do right by you and your families.22

The President did not excuse this instance as an isolated occurrence and pledged heightened accountability.23 “[T]he misconduct has not been limited to a few VA facilities, but many across the country. That’s totally unacceptable. Our veterans deserve the best…I said that if we found misconduct, it would be punished. And I meant it.”24 Such sweeping political proclamations demonstrate the cultural values of heroism and self-sacrifice attributed to military service as well as a broad desire to take responsibility for the well-being of veterans and their families, with resounding echoes of the “hero” narrative illuminated earlier. The failures to actualize these values institutionally destabilizes certain patriotic notions for veterans and civilians alike.

22 https://www.whitehouse.gov/the-press-office/2014/05/30/statement-president
24 https://www.whitehouse.gov/the-press-office/2014/05/30/statement-president
Underneath the discursive habits of political speeches is the day-to-day reality of veterans’ care in this institution. Some of the obvious failures ought to be considered the unfortunate consequence of massive bureaucracy attempting to adequately respond to unique and complex human struggles. Veteran Affairs is basically trying to provide two branches of support to veterans and military families: (1) medical care and (2) financial entitlements. While both of these services can contribute to the well-being of veterans and military families, neither adequately addresses the significance of military moral orienting systems nor the crisis of transitioning between military and civilian worlds without the necessary support of modification to those military moral orienting systems.

A deeper assessment of the limitations of the VA with attention to moral orienting systems reveals that while the VA may be able to provide medical services including primary and specialized care and support, they are expressly working from a medical model of engagement that views human subjects as static objects categorized by set criteria. While military service members are accustomed to being viewed by the government as unitary pieces that can be moved, mobilized, and replaced when necessary, much of the medical model conflicts with a military moral orienting system.

An area of conflict emerges with the abrupt re-individualization of military service members. The entitlement administration asks, “What do you specifically deserve?” The medical services ask, “Given your specific symptoms, what treatment should you receive?” Such approaches radically disrupt a military moral orienting system rooted in embodied group identity. Such transactional interactions also resemble patronizing charity that trigger a litany of stigmas concerning mental health, weakness,
and dependency. Both the military and the VA have sought to address such stigmas with slogans like, “It’s ok to not be ok.” But again, these efforts tragically minimize the formative power of military recruit training and the re-engineering of moral orienting systems (Litz et al., 2016, p. 32). Many veterans quickly reject such help-seeking messages as trickery to expose hidden weakness, even cowardice.

Western medical models are too often limited in conceiving of care in holistic modalities, opting instead to address perceived obvious ailments and symptoms through medication. Kinghorn writes that “the medical model, once invoked, inducts postcombat suffering into the means-ends logic of technical rationality” (Kinghorn, 2012, p. 65). These modalities of treatment can miss the social-relational factors in the existence and persistence of problematic behaviors, mental health challenges, and so on. One successful process of providing more holistic care, utilized in many VA facilities, is the use of interdisciplinary teams in which doctors, nurses, therapists, social workers, and chaplains meet together to share insights concerning a patient’s care. Such conversations can bridge disciplinary gaps, connect care professionals to one another in common mission, and generate care approaches that better recognize complex human conditions including social-relational factors, family issues, and so on.

Another area of success within the VA environment is the utilization of group therapies and group psycho-education. These sessions are central to ongoing outpatient care and are sometimes co-facilitated by clinicians and chaplains, incorporating the benefits of interdisciplinary teamwork. These weekly groups provide consistent space to ventilate challenges and breakthroughs in post-military life. The groups themselves
provide social-relational support and often engage topics including family relationships and relational health. The trust that these groups build over time gradually allows for the transitioning of one’s moral orienting system, within a container of familiarity and non-judgmental support. Unlike individual therapies where a veteran would be singled-out from group identity, these groups embody shared identity as the central modality of healing and growth.

However, these groups—like all services within the VA—are optional and require self-selection in getting help. The real cultural barriers of stigma result in most veterans never seeking services in the VA, even if they qualify. This phenomena is particularly true for younger veterans, whose military moral orienting system is still freshly operational. The culture and environment of a large hospital administration is so jarring that a level of desperation is often necessary before seeking help and then, with diminished capacities, veterans may very easily get lost and fail to receive the support they need.

The VA has an important role in providing care and support for post-military transitions, but they should not shoulder the entirety of the task. Financial entitlements and medical care are useful contributions to the wellbeing of many veterans and their families, but much more is involved in successful reintegration, and other organized efforts must play their unique parts.

The Mission Continues

Founded in 2007 by Eric Greitens, a Navy Special Operations veteran deployed to both Iraq and Afghanistan, The Mission Continues specifically engages with post-9/11
veterans in providing opportunities “to find purpose at home through community impact.”25 From their purpose statement:

We redeploy veterans on new missions in their communities…Our operations in cities across the country deploy veteran volunteers alongside non-profit partners and community leaders to solve some of the most challenging issues facing our communities: improving community education resources, eliminating food deserts, mentoring at-risk youth and more. Through this unique model, veterans build new skills and networks that help them successfully reintegrate to life after the military while making long-term, sustainable transformations in communities.26

Their choice of language is distinctive in its cultural resonance with military moral orienting systems. They use terms like “redeploy,” “deploy,” “missions,” and “operations” that are all framed with a strengths-based tone around meeting challenges, problem-solving, and building new skills. “The Mission Continues is committed to changing the national conversation around veterans. We believe veterans are assets, and through their continued service, they can create better transitions, and build stronger communities.”27 Their vision and language exhibit astute knowledge of military cultural and identity, increasing the likelihood that veterans would feel comfortable and engaged in such surroundings.

The nature of their work is simple and powerful: Gather teams of veterans together around a common project, which in many cases would have been identified and organized by a veteran in their Fellows program. These projects would have obvious and immediate value to the participants, i.e. building a house or a school, or working with

25 https://www.missioncontinues.org/about/history/
26 https://www.missioncontinues.org/about/
27 https://www.missioncontinues.org/buzz/
young people. The positive feedback of that experience serves to affirm and increase one’s inner sense of goodness and dignity. The central value of service to others connects commitments from a veteran’s military service with the well-being of civilian communities back home. By working side by side with other veterans in a team, participants experience a high level of social-relational connection. In these ways, The Mission Continues is an excellent example of how a non-profit organization can constructively engage the military moral orienting systems of veterans in social-relational processes toward meeting the challenges of reintegration into civilian contexts.

The Church of the Resurrection

The Church of the Resurrection, a congregation of the United Methodist Church (UMC), was founded in 1990, in the greater Kansas City area, seeking to reach persons not connected and affiliated with any church community. Their statement of purpose reads: “To build a Christian community where nonreligious and nominally religious are becoming deeply committed Christians.”28 It has grown to be the single largest UMC congregation in the nation and now has four church campuses.

Members of the congregation identified unrealized opportunities to do more intentional work with veterans and military families. They began gathering data to assess the potential need and found that more than a thousand veterans were already a part of the congregation, although no process currently existed to make them visible or bring them together as a community within a community.

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28 http://archive.cor.org/about-resurrection/beliefs-and-values/
The Church of the Resurrection is a large and well-resourced institution, and they were able to build a robust veterans program, RezVets, which included a range of educational, counseling, and outreach efforts. Their larger goals involve bringing “awareness, camaraderie, hope, and healing” to veterans, military families and those who love them.\(^{29}\) Their educational initiatives include book study groups on moral injury, supporting a national moral injury conference in 2015, and writing workshops. Their counseling efforts include training veterans in the congregation as “mentors,” equipping them with the skills to provide support and refer when necessary, and working with existing congregational structures like their “Congregational Care Ministries” to train for more effective support of veterans and military families.

Not all of their projects within the RezVets mission have worked the way they envisioned, and they have learned by trying and at times failing. They learned, for example, that veterans of different generations have different needs, and likewise, that male and female veterans have different needs, so they have diversified their programs to offer different groups for different constituencies (Moon, 2015, p. 49).

This kind of diversity of programming is RezVets’ strength. Like all of the organizations mentioned in this chapter, such program options are based on self-selection and volunteer participation. Given that character, having programs that offer different resources and could appeal to veterans at different junctures of their respective journeys allows for greater accessibility and reach.

\(^{29}\) [http://www.cor.org/leawood/rezvets](http://www.cor.org/leawood/rezvets)
Their program offerings are highly social-relational in nature. The mentoring and counseling programs train members of the congregation to be better equipped for trustworthy and authentic relationships with veterans and military families. RezVets organizes supporting veterans and civilians differently as “mentors” and “counselors” respectively. Therefore, a veteran seeking support has the opportunity to find compassionate relationships with both veterans and civilians, creating great social-relational capacity in the reintegration process.\(^{30}\)

Likewise, their book study groups and writing workshops provide self-reflection space supported in a social-relational environment. They have worked closely with The Soul Repair Center at Brite Divinity School, hosted its director Dr. Rita Nakashima Brock for presentations on moral injury, and even developed a study guide for her book *Soul Repair*. As a religious community, their congregation has taken multiple steps in engaging military moral injury and integrated it into their related ministries. The writing workshops have been well attended and meaningful for those involved, and this program offering is currently being expanded.\(^{31}\)

RezVets’ initiatives are highly social-relational in disposition and multiple in their content and potential appeal, and thus provide substantive opportunities for veterans seeking to transition their moral orienting systems and reintegrate into meaningful relationships in post-military life. They have done an outstanding job of taking their available resources, assessing the present needs, building partnerships with other like-

\(^{30}\) http://www.cor.org/leawood/rezvets

\(^{31}\) http://www.cor.org/leawood/rezvets
missioned groups, and actively evaluating and learning from their efforts along the way. Their greatest strength is the most basic—they are a community that seeks to nurture one another and provide hospitality to those looking for a home.

Each of the examples explored here illuminate certain gains and limitations in the current programmatic paradigms. In complex human circumstances there are likely to always be debates about where one should begin, what resources are necessary, and what the overall processes will entail in terms of time, structure, and so on. Having served in uniform myself as a military chaplain, having worked as a chaplain resident in VA hospital systems, and having served in leadership positions in Christian congregations, I would advocate for multiple initiatives functioning in highly accessible, proactive, and empowering ways. Because no one model or program will address all veterans’ needs and interests, sustaining a diversity of opportunities maximizes the overall response.

**Post-Deployment Transitions and Moral Injury**

As I have argued, and many of the scholars cited in this project have noted, military recruit training profoundly reengineers the values, beliefs, and behaviors of military recruits in the process of preparing for military service. This social-relational process intentionally undermines preexisting meaningful relationships while introducing new relationships of importance. “The process of basic training, and the subsequent welding of the individual into a unit, will have gone some way towards giving the soldier a military identity in which home and family are of diminished importance” (Holmes, 1985, p. 79). This point is echoed in Nancy Sherman’s work on military moral injury. “[T]urning a civilian into a soldier involves a radical resocialization… It strips civilian
and personal identity and socializes individuals into members of a cadre” (Sherman, 2015, p. 12). Such a radical process of change cannot be merely withdrawn from and forgotten.

Modifications to one’s moral orienting system are deeply inscribed physiologically, and one’s reactions, reflections, and responses are not merely rationally derived choices but rather embedded in how one inhabits the surrounding world. To pose this another way, a moral orienting system is designed to fit a given world, and if one is removed from that world without reformatory training to one’s moral orienting system, one may likely struggle to inhabit that new world with an inner sense of goodness, hope, and security. As Sherman posits,

[T]he attachment elements in military life cannot be underestimated. Many young recruits, just out of high school, join the military in search of a new family. What they have at home may no longer, or never did, satisfy. They want new role models that give them something to believe in and idealize. They want to be part of something bigger than themselves, where there is community and caring if they are willing to work for it. (Sherman, 2015, p. 56)

The deeply embedded structure of one’s military moral orienting system must be engaged in order to effectively respond to veterans’ struggles to transition into civilian life.

One recent study by Worthen and Ahern begins to test some of this hypothesis (2013). They interviewed 24 veterans and paid particular attention to identifying anger issues and related causes. The researchers categorized the causes of anger as related to (1) PTSD, (2) moral injury, or (3) loss of structure. They found that 12 of the 24 reported struggling with anger following their military service; 25% of those with anger issues related to PTSD, 25% related to moral injury (as connected with their military deployment), and 50% related their anger to a loss of structure. While this study is small
in sample size, it is also stunning given the amount of attention paid to PTSD, and now increasingly to moral injury, that the loss of structure upon transitioning from military to civilian life was so significant in generating anger “as a response to living in a less structured and predictable environment than they were used to living in during military service” (Worthen & Ahern, 2013, p. 5). More research in this area could further test these results.

However, even given the limited sample size of this study, its results are critically important and present an urgent opportunity to reconsider the sources of veterans’ struggles to transition into civilian worlds due to the loss of the structure or total situation of the military environment and its corresponding values, beliefs, and behaviors. This study investigated the root cause of veterans’ feelings of intense anger. The emotion of anger is generated when one perceives a kind of threat to valued entities: when someone endangers my life or that of my loved ones, when someone contradicts my deeply held beliefs and values, and so on. Anger can be an indicator that all is not right with one’s moral orienting system, however the results from this study point to the likelihood that it is the loss of meaningful worlds in the transition from military to civilian life that is generating this stress to the moral orienting systems of these veterans. Ultimately, I would argue that our conceptualizations of military moral injury must integrate this revelation into our vision; namely, that moral anguish and its symptomology (including intense anger) may be generated not only from actions and inactions during military service, but also in cases where the necessary components of transitioning out of the military and into civilian worlds are not adequately realized.
Chapter Six: Conclusion

One of the limitations of the moral injury discourse is an underdeveloped claim as to precisely what is being “injured.” Descriptions of the post-traumatic symptoms, as well as the multiple coping behaviors of those suffering from moral anguish, including high-risk behaviors, isolating from social situations and meaningful relationships, self-medicating and substance abuse, domestic violence, and suicide, are well documented (Litz et al., 2009; Litz et al., 2016). However, as the concept of moral injury continues to develop it will be important to clarify our underlying assumptions of what is injured by “moral injury.”

Moral orienting systems provide clarification toward this end. The dynamic interaction of values, beliefs, and behaviors adopted by a person over time and subject to the impact of meaningful relationships and experiences, and further defined by larger systems of power including patriarchy, white supremacy, and heteronormativity, has significant influence in one’s experience of moral injury. The concept of moral orienting systems disputes notions of moral self that remain static and monolithic, claiming instead that moral orienting systems are mutable and necessarily adaptable through various situations and circumstances. By locating the site of potential suffering and investigating the substance of that part of one’s personhood, we can consider with greater complexity
the factors generating such suffering and how a process of integration could adequately occur for a person.

Attention to military recruit training and its reengineering of moral orienting systems necessarily moves away from conceiving of moral injury as primarily caused by acute traumatic events. Such acute events indisputably generate moral anguish; however, when our gaze is occupied with such singular moments, we fail to consider the impact of the situational, contextual, and developmental influences. One’s experiences prior to military service, especially those of traumatic significance, and the unmooring and re-anchoring of one’s moral orienting system through recruit training, a traumatic process in itself, influence one’s response to circumstances and events during military service.

Incorporating a more nuanced understanding of a person’s journey and the profound impact of military recruit training on all service members opens new opportunities in understanding why many veterans struggle in coming home and immediately thriving (Litz et al., 2016, p. 32). Three models of veteran reintegration served as an illustrative sample representing the enormous programmatic capacity established to support veterans and their families. Most of these programs seek to provide something: medication, therapy, disability entitlements, employment and housing information, vacations for families, and so on. Very few of these programs consider the social-relational performance demonstrated in how they are providing their support. Who has power in the interaction? Who has the authority to tell this veteran’s story? Who knows what this veteran needs? Integrating the concept of moral orienting systems into
these programmatic missions could challenge embedded assumptions and support a re-envisioning of how care is provided.

It’s funny what war does to the memory and what it corners you into thinking about all the time. Nobody is built the same, but so many soldiers have found the extremes of war emotionally overwhelming. Fear, and anger, and joy. Love and hate. Sorrow. Vigor and fatigue. None of them has ever been felt so poignantly as in war, and yet somehow this is backwards. There is something incongruous about it. Emotions aren’t meant to be stretched to such limits over such a short duration. They are supposed to correspond with a whole lifetime of experiences. Emotions are the topography of our memories. But the emotional spikes of war, powerful as they are, can overwhelm and diminish the emotions associated with every other experience of a soldier’s life. The memories of his past, while accessible, can become antiseptic, unfeeling events. So when the mind wanders through its memories, it will naturally tend to the experiences that have had the sharpest impact on the psyche, i.e., the experiences attached to the strongest feelings. When was I most scared? When was I most angry? When was I most sad? When was I most tired? For veterans, the answer is almost always war. (Boudreau, 2008, p. 149)

Tyler’s reflections on his service with the Marines speak to key elements in the transformation of moral orienting systems: the interconnections between emotions and meaning-making; the dissonances created between the amplified experiences of military service and those of civilian life; and the ways in which one can become stuck between these worlds. This project claims that the value of the moral injury concept is that such categorization of human suffering transcends medical models and demands broader relational and societal reckoning. Moral injury, by nature of its relationship to socially held norms, values, and beliefs, cannot be addressed individually. The stress symptoms generated by moral injury can be treated through the medical model of pharmacology and therapy, but the underlying sources of the anguish can only be addressed through community engagement, truth-speaking, and reconciliation (Shay, 1994 & 2002, Brock & Lettini, 2012; Kinghorn, 2012; Sherman, 2015). Moral injury is not a medical condition.
Moral injury is a harrowing experience of failing to transition, readjust, and reintegrate in which one’s needs—to share stories, to sort through dissonances, to confess and lament, to practice rituals of grief, reconciliation, and renewal, and to learn new ways of thinking, feeling, working, and loving within the contexts presented by one’s life—are not adequately met by one’s social-relational worlds.

Understanding moral orienting systems, and the impact of moral stress and moral injury on military service members as a crisis of these moral orienting systems, provides a foundation to consider future applications that more effectively respond to military moral injury. All such responses must, however, adequately acknowledge and engage the moral orienting systems of military service members by working constructively with the values, beliefs, behaviors instilled during military training and entrenched through one’s military service, with the social-relational bonds intricately enmeshed in one’s military orienting system, and with the embodied dimension of moral orienting systems. Military service members need opportunities to translate and transform their moral orienting systems, to reconnect with meaningful values, beliefs, and behaviors appropriate to civilian life, and renew meaningful interpersonal relationships and social-relational structures in civilian worlds. Just as military training reengineers a recruit’s moral orienting system through intense, highly-ritualistic, body-based experiences, reintegration work must also be intensely body-based and intentional with its use of ritual and shared practice.

Two cultural structures have critically important resources to address moral injury and yet presently lack the necessary level of investment. First, the military invests a great
deal of money, personnel, and time in training new recruits, but only provides a small fraction of such resources to the process of reentry and reintegration. Secondly, religious communities of all kinds are represented in the military ranks, but none of them are adequately addressing the reintegration needs of military service members and their families, especially when it comes to engaging moral stress and moral injury. Some small scale success stories were covered in the previous chapter, but the millions of families whose lives are impacted by military service are scattered across the country, therefore both of these social-relational worlds—of the military and of congregations respectively—must increase their efforts to meet the complexity and scale of the challenges.

**Boots to Shoes: Reentry and Reintegration Training**

One of the most important social-relational worlds in the post-deployment reentry and reintegration process is perhaps the most obvious, namely, the military itself. As covered in chapter 4, military recruit training aggressively alters recruits’ moral orienting systems. The training process suggests that one cannot transition from civilian worlds into that of the military without rigorous reorienting of one’s values, beliefs, behaviors, and meaningful relationships. Why then would anyone imagine that one can transition from the military into civilian worlds without such comprehensive reorienting? The operative hypothesis appears to be that most if not all military service members should be able to resume their pre-military moral orienting systems and blend back into civilian society without being noticed. And yet these represent conflicting theories: at one end intense training is needed, and on the other end nothing more than a few Power Point out-
briefing presentations is required. If military service is predicated on reengineering a recruit’s moral orienting system through a process of socialization, we must envision a process of reinstatement and restoration into civilian life, equally intense and comprehensive as military recruit training (Brock & Lettini, 2012, p. 42).

Three elements must be engaged in such a reentry training program: (1) values, beliefs, and behaviors; (2) meaningful relationships; and, (3) embodied knowledge. The challenges of civilian worlds are in some ways more complex, i.e. there is not always a clear mission, a clear path to accomplishing that mission, and/or a clear role for each participant in that effort. And yet post-deployment life may also be difficult because rarely will one experience the adrenaline-pumping rush of high stress situations. As Tyler’s reflection earlier suggested, a service member may have felt various emotions at a profound level during combat, and may struggle to find meaning in daily life lacking in such emotional intensity or bio-chemical charge. Therefore among the goals of reentry training must be a comprehensive reconnection with purpose and meaning within the more mundane contexts of civilian life.

This reentry training could utilize any number of valid approaches toward such constructive engagement of military moral orienting systems. Here are a few examples:

**Canine Therapy**

Bonding with a service dog can be a vital component in reintegration, particularly in situations where veterans are struggling to nurture trustworthy relationships with other people. Dogs are trained according to the needs of the person with whom they are paired; emotional support, mobility assistance, psychiatric service, and comfort therapy all
represent distinct training regimens. Many veterans have also benefited from training service dogs for others. Because dogs primarily communicate through their body language, veterans who are challenged to verbalize their feelings and thoughts often experience a greater sense of safety and comfort in canine company. However, learning to bond with a dog and read a canine companion’s body language builds important relational capacities that can eventually generate better human interactions and sustained relationships (Cortani, 2013).

**Equine Therapy**

Equine therapy has two different therapeutic capacities: (1) horseback riding, known as hippotherapy, and (2) horse care oriented psychotherapy known as Equine Assisted Psychotherapy (EAP). Hippotherapy utilizes the synchronicities of human and horse physiologies, namely that a horse’s pelvis moves in the same way as a human pelvis. “Sitting on a moving horse allows the warrior’s body to move naturally. It…requires balance, coordination, and muscle strength. Injuries from war may have affected those abilities, and these can be helped to improve with this type of therapy” (Buckley & Raulerson, 2013, p. 208). In Equine Assisted Psychotherapy, planned activities with defined therapeutic goals inform the interactions, which are usually for a small group of veterans.

Horses are considered herd animals because they rely on each other for safety and survival. So are humans, whether we act like it all the time or not. Utilizing horses in EAP allows the warriors to work on issues of trust, relationships, patience, and boundaries, in a setting that is very different from the inside of a therapist’s office. (Buckley & Raulerson, 2013, p. 212)
As with canine-based therapies, equine therapies nurture relational capacities including trust and mutual care by engaging veterans in non-verbal therapy modalities.

**Mindfulness Practices**

Mindfulness practices heighten attention to basic physical and emotional functions—breathing, body awareness, passing thoughts, and sensitivity to environment. Slowing down and paying greater attention to memories or feelings is sometimes a hard sell for those in the military, many of whom connect deeply the values of toughness and stoicism.³²

Moving through the changes that take place physically, emotionally, and mentally from such experiences is no simple task… Mindfulness practices, in that they enhance our self-awareness and the ability to observe our experiences without emotionally engaging with them, offer a powerful tool to support physical and mental resilience, growth, and healing. (Mizuki, 2013, p. 156-157)

Engaging such practices during a reentry training program will support self-reflection and connecting with compassion and goodness; learning such practices will become a resource in the weeks, months, and years to come.³³

**Yoga**

Yoga has proved to be one of the most effective therapeutic interventions in reducing post-traumatic stress symptoms (Emerson & Hopper, 2011). Organizations such as Yoga Warriors³⁴ and the Veterans Yoga Project³⁵ specifically target military service

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³⁵ [http://www.veteransyogaproject.org/for-veterans.html](http://www.veteransyogaproject.org/for-veterans.html)
members and their families. The studied results include notable improvements to sleep patterns, reduction in hyper-arousal and anger, and an increase in inner calm and relaxation. These clear benefits have not gone unnoticed by the Department of Defense, which began taking a closer look at yoga-based therapies in 2006 and developed their iRest program which utilizes both asanas (body-based movements) and meditation (Miller, 2015).

**Meaningful Relationship Reengagement**

Reentry training must proactively engage reconnection to meaningful relationships within civilian worlds. Because military recruit training and deployment experiences have bonded service members to one another, and more generally to others in uniform, service members making the post-deployment transition may experience necessary levels of interpersonal trust only with their unit members and be grieving their loss of proximity to these trusted persons. Awaiting them at home are family and friends who will need to be parts of the social-relational support system, but emotional distance has often been created between the service members and these key civilian relationships. Reentry training must acknowledge the substantial adjustment between these two social-relational worlds, helping to provide some closure and provide some reconnection with meaningful civilian relationships. Acknowledging meaningful relationships, building interpersonal communication skills applicable in civilian contexts, and designating time and space for military families to reconnect and rebuild trust will be crucial elements for such reentry training.
Community Service Work

As covered in chapter 5, community service work provides multiple benefits to the readjustment process. Service work prioritizes physical movement, exertion, and skill, which supports one’s needs for sense of goodness and purpose. Such community service opportunities could be done early in the reentry training with unit members, and then again later, within integrated teams that included meaningful civilian relationships, thereby extending the sense of team and teamwork to a broader interpersonal circle.

It would be unproductive to attempt to strip away all of one’s military orienting system, because there are useful traits that could be implemented in different ways in civilian contexts to promote health and well-being. The goal instead is for service members and their families to integrate their military experiences into coherent moral orienting systems that can serve their needs and the needs of civilian worlds they are now inhabiting.

Currently, “retreat” models that seek to provide some of these opportunities for integration to interested veterans and military families only reach a tiny minority of the military population. Comprehensive reentry training must be instituted military-wide and be made mandatory. Without making it mandatory such resources will only reach a small, self-selecting minority and may suffer from widespread stigmas against seeking and receiving help. Without making it military-wide, this training would fall short of the total immersive environment of the military context, a structure without which many veterans struggle (Worthen & Ahern, 2013). In contrast to VA programs, this type of training environment could better normalize the challenges of transitioning to civilian life and
demonstrate that acquiring the requisite skills to thrive in civilians worlds is mission critical. Given that recruit training is universally applied to all members of the military, a reentry training program should also be universally applied. This will require a higher level of investment in military service members than we are committed to currently, but one that will repay itself many times over. Without effectively completing the cycle of transformation, we are leaving the burden of reentry and reintegration solely on the shoulders of military service members and their families.

Because our military is often deploying and redeploying service members multiple times, it will be necessary to have two formats for such training: (1) with short-term focus anticipating re-deployment, and (2) with long-term focus when military service is concluded. It will likely also be beneficial to have “refresher” courses, as certain impacts may not be available for integrative work immediately. The program with a long-term focus will emphasize developing healthy coping-strategies and practices, anticipating that such integrative work will continue long after the training program.

Veterans and the Life of Congregations

Congregations, such as the RezVets initiative at The Church of the Resurrection, have invested resources and envisioned programs supporting veterans and military families. A number of denominations, including the Christian Church (Disciples of Christ),36 United Methodist Church,37 and Unitarian Universalists,38 have sought to

36 http://councilonchristianunity.org/document/1011/
provide educational materials in support of congregational ministries. However, most of these programs, whether educational or therapeutic in nature, or mentioning military service members during the pastoral prayer, or asking veterans to stand up and be applauded on Veterans’ Day, demonstrate a superficial level of awareness. Sincere concern and respect are often the motivators for such gestures, but these expressions can appear condescending and/or tokenizing. However, if that concern can be mobilized in ways that better engage the moral orienting systems promoted by the congregation and their corresponding religious tradition, as well as the moral orienting systems of the veterans and military families with whom they will seek to be in relationship, then very different kinds of ministries become possible.

Here are few examples of ministries and sacred practices that could address moral orienting systems more effectively:

**Outreach Ministries to Military Families**

The process of reentry and reintegration can be supported well before demobilization, and supporting families is a big part of this effort. Staying connected to the day-to-day life of military families during all phases of the deployment cycle demonstrates community commitment to that family and nurtures the social-relational connection. Laura, a military spouse of nearly three decades, reflects “Being there for military families is…complicated…I wish there was an easy answer, and I wish we could tell you what we need. But many times, we are just breathing and stepping forward. Be present and be involved” (Moon, 2015, p. 33).
Rituals and Practices

In all religious traditions there are customs, rituals, liturgies, or practices that engage human suffering, loss, and reconnection. In the Catholic Church, sacraments of reconciliation (i.e. confession) and receiving the Eucharist, or praying the Rosary are practiced in order to experience reconnection with God and the church community, unburden oneself, and re-devote oneself in faith. In other Christian traditions the communion table and baptism embody similar themes. The liturgical calendars of different Christian traditions, particularly the seasons of Advent and Lent, highlight many complex human experiences and connect them with religious meaning (Sippola et al., 2009). Across various religious traditions, one will find examples: recognition and remembrance ceremonies, rituals of purification, talking circles, rituals of lamentation, rituals of rebirth and renewal (Wilson, 2013, p. 48). These are a sample of the many religious resources that can engage persons’ values, beliefs, and behaviors through social-relational embodied practices and support veterans’ reorienting their military moral orienting systems.

Pastoral Care and Counseling

Religious elders, ordained clergy or lay leaders, imbued with pastoral authority and responsible for caring for their congregations, can offer special direct support to veterans and their families. Conferences on military moral injury\(^{39}\) and educational resources designed for clergy (Sippola et al., 2009; Moon, 2015) are a few examples of

\(^{39}\)https://brite.edu/academics/programs/soul-repair/
how congregational leaders can equip themselves for trustworthy ministries with veterans and military families.

**Small Group Fellowship**

Small group programs, from VA outpatient care to congregations like The Church of the Resurrection, have demonstrated the value of such fellowship opportunities. It may be easier for veterans to rebuild trust and relational bonds in settings with clear expectations and known persons. While these groups are likely to rely heavily on verbal communication, when veterans are ready for such engagement, these opportunities will be critically important in encouraging veterans to share their stories and get feedback from trusted others.

**Community Service Projects**

As organizations like The Mission Continues and Team Rubicon have shown, community service opportunities can provide essential supports for transitioning moral orienting systems. Many religious communities also place a high value on community service, making such efforts a sensible adoption. Imagine if religious communities were investing in community service initiatives with veterans and military families in their communities. Some religious communities have been perceived as judgmental, moralistic, and inhospitable to outsiders (Litz et al., 2016, p. 34). The simple task of building a house or cleaning up the neighborhood can provide inviting, non-judgmental, and mutually empowering experiences for all participants. Such projects can also serve to establish trust between persons of different backgrounds without relying too much on
verbal communication, while prioritizing the values of teamwork and mission accomplishment in a civilian context.

The programmatic suggestions offered here each contribute necessary opportunities in the transformation of one’s moral orienting system. As disparate pieces they are unlikely to succeed, but by organizing such resources into comprehensive reintegration programs, military service members will have the support they need to meet the demands of moving between military and civilian worlds. Such an organized effort would clearly promote: empowerment of continued service and mission in civilian contexts; strengthened social-relational bonds with both military and civilian personnel; embodied forms of reconnection and health-promotion including ritual and other body-based practices; and renewal of personal and collective meaning, sense of goodness, and compassion. These efforts would require a higher level of investment and participation from civilian communities, bringing civilians into closer proximity to the experiences of military service. Such bridge-building would benefit all participants, and would likely provide opportunities for new conversations about the complexities of military service and war-making, not as defined by political platforms and rhetoric, but by the demands of authentic interpersonal relationships.

The concept of moral orienting systems signals some necessary elements that have remained unaddressed in the moral injury discourse. To further test the utility of the concept of moral orienting systems, new research including quantitative and qualitative research that prioritizes the elements of values, beliefs, and behaviors, in light of meaningful relationships and experiences, and recognizes the impact of embodied
formation, will need to be conducted. A longitudinal study of military recruits would be an excellent way to chart this data: studying moral orienting systems before and after military training, as well as during and following military service. Moral orienting systems are subject to change both in terms of what may appear to be growth and what may appear to be trauma. The concept invites a reconsideration of how we have come to see certain impact and change as positive and other impact and change as negative. Rather than casting judgments of these kinds, the more important inquiry is how a person’s moral orienting system works for him/her.

This investigation necessarily considers situational factors, contextual forces, and social-relational support. We must rethink what contributes to “injury,” examine what else beyond acute traumatic events may lead to severe moral anguish, and more fully incorporate what formational and situational dimensions influence the lived experience of moral injury.

With further development of our understandings of “injury,” there must also be a clarification of the meaning of “moral” in the “moral injury” discourse. The concept of moral orienting systems, as a key term in that clarification process, articulates the mutable complexity of moral identity and the dynamic interaction between one’s values, beliefs, and behaviors, as informed by one’s meaningful relationships, systems of social power, and contextual factors.

Judith Herman’s landmark book, *Trauma and Recovery*, begins with a thorough and at times scathing assessment of trauma studies. Her book remains a centrally important text in the field because it stands as a signpost between eras of trauma research.
As with many movements of scholarly inquiry, there are often different waves or
generations, with the next building on the former and also seeking to correct certain
limitations of the preceding scholarship. This project carries just that kind of hope.
Recognizing the pioneering contributions of decades of scholarship spanning generations
of military service, there is a need to improve our conceptual apparatus and address
limitations. Such critical engagement promises new and more effective responses to the
presenting challenges of military moral stress and moral injury.
References


123


