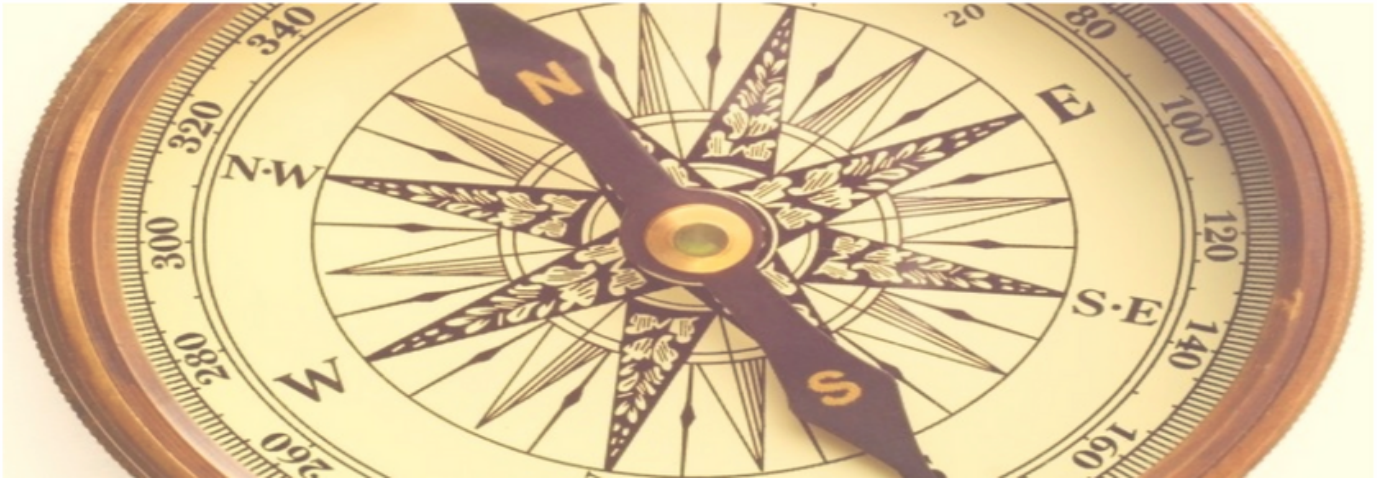


# MORAL INJURY

## Special Interest Group Newsletter



### UPDATE FROM THE CHAIRS

Dear SIG members,

Season's greetings! Welcome to our second and final issue of the newsletter for the year 2023. We hope that it finds you and your loved ones safe and healthy. This year, as the one before it, brought us many challenges and upheaval, and we were once again faced with bearing witness to intense human suffering. The moral injury and the historical trauma of wars being waged around the world will be reverberating through the fabric of humanity for years to come.

We also have reasons to remain hopeful. At this year's annual ISTSS convention, we had the most well-attended in-person meeting our SIG has had to date. In addition, the

annual meeting itself included a significant number of submissions pertaining to the conceptualization and treatment of moral injury. It was encouraging to see such a meaningful increase in interest and research, as well as to hold productive conversations about some of the more salient questions in the field: how to define moral injury and whether or not it should be considered a mental health diagnosis. The passion, care, and collegiality with which these conversations were engaged was heartening, especially in the social and political climate of divisiveness we are all currently experiencing. The meeting also brought up important questions about how our SIG can evolve along with the field and how we, as its leadership, can foster a more fertile ground for members to get to know each



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other. To that end, please keep an eye out for our emails regarding an interest call for launching quarterly zoom meetings.

In this issue of the newsletter, we are pleased to include an original submission by Drs. Patricia Pernicano and Austin Lemke on the conjoint treatment of substance use disorder and moral injury. Drs. Pernicano and Lemke graciously agreed to share with us information about their important work on the development and application of Acceptance and Forgiveness Therapy (AFT) with military Veterans. In addition, this issue features a brief report by Dr. Bart Buechner pertaining to the Moral Injury panel held at the Mayhugh Foundation's 6th Annual Hero's Journey Symposium in Washington, D.C.

Last but not least, we are now accepting applications for co-chair and student co-chair of the SIG. Becoming a Moral Injury SIG co-chair is a fantastic opportunity for you to step into a leadership role, create more connections, and help guide our SIG forward. The deadline to submit your application is **December 18th**. If you are interested, please submit a brief cover letter (1 page max) expressing your fit and vision for the role, and send it to us, along with your CV.

Personal note from Valentina: It was such a pleasure to meet so many of you this year at the annual ISTSS conference. I am grateful for how active and engaged our community is, as well as for the ways in which we all can

support, inspire, and learn from each other. Many of you expressed ideas for the SIG during our meeting on Thursday 11/2, and I invite you to continue to do so on our listserv, as well as to consider applying for a co-chair position!

Warmly,

**Drs. Valentina Stoycheva & Barton Buechner**

*Moral Injury SIG Co-Chairs*

**Anna Cole**

*Moral Injury SIG Student Chair*

## IN THIS ISSUE

- p. 3: MAYHUGH FOUNDATION'S 6TH ANNUAL HERO'S JOURNEY SYMPOSIUM**
- p. 7: SPOTLIGHT** featuring Drs. Pat Pernicano & Austin Lemke
- p. 8: ORIGINAL SUBMISSION:**  
*Conjoint treatment of Moral Injury and Substance Use in U.S. Military Veterans using Introduction to Acceptance and Forgiveness Therapy* by Drs. Austin Lemke & Pat Pernicano
- p. 13: TRAINING OPPORTUNITIES**
- p. 14: RESEARCH HIGHLIGHTS**
- p. 17: SIG MISSION STATEMENT**

# MAYHUGH FOUNDATION'S 6TH ANNUAL HERO'S JOURNEY SYMPOSIUM INCLUDES PANEL ON MORAL INJURY

### Advancing and shaping a national conversation about mental health

The John P. Mayhugh Foundation was established in 2017 to expand the national conversation about mental health by bringing together thought leaders in government, industry, academia, and healthcare to shape holistic strategies that address mental health issues. While the emphasis of the Foundation is on service members, veterans, and their families, the Foundation takes a holistic public health approach that is inclusive of the entire community. The foundation is headed by Mary Lowe Mayhugh, who is also a principal of the MITRE Corporation, a not-for-profit public policy advocacy group.

The Mayhugh Foundation organizes the annual "Hero's Journey Symposium" to support and inform this national conversation. The Symposium, comprised of four facilitated panel discussions, provides a collective sharing of promising practices and identifies policy and research gaps.

Ultimately, these sessions work towards producing an action plan to "build better pathways to recovery, from wounds to wellness."

The 6th Annual Hero's Journey Symposium was held in Washington D.C. on September 14, 2023 with the purpose of identifying existing and emergent mental health challenges facing our nation, and put forward promising solutions and recommendations. This year, the Symposium focused primarily on barriers faced by our service members, veterans, and their families with a lens towards a public health approach benefiting all our communities and its' people. One of the four panel discussions was specifically focused on Moral Injury, as part of efforts to help close a perceived gap of awareness of this phenomenon among national policymakers. The other three panels were devoted to other aspects of mental health that are considered to be generally under-represented or neglected. For the 2023 symposium, these topics were: mental well-being services for children and families; expanding access and electronic delivery of mental health services to reach underserved populations; and incorporation of the "Healing Arts" through nontraditional therapies employing complementary and alternative methods (CAM).

### The Moral Injury panel

The moral injury panel explored the complex psychological impact of Morally Injurious Events (MIEs) affecting U.S. service members and veterans, and considered implications for other populations who may be troubled by similar experiences. The panel facilitator was Kathleen Koch, former CNN Washington and disaster correspondent. Panelists were: Dr. Jason Nieuwsma, Associate Professor, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center and Associate Director, Veterans Affairs Office, Integrative Mental Health; Dr. Melissa Smigelsky, a psychologist with the VA Office of Integrative Mental Health; Timothy "Tito" Torres, a combat veteran and the Executive Director of the Moral Compass Federation; and Dr. Barton Buechner, PhD, Captain, US Navy (Ret), Senior Adjunct Faculty, Military Psychology MA Program, Adler University.

Panelists represented diverse perspectives of moral injury, including first-hand experience, interdisciplinary academic research, and clinical practice.

Examples of moral injury among non-veteran populations discussed included survivors of natural disasters, healthcare workers, journalists, and emergency personnel, including front-line healthcare workers during the COVID-19 pandemic.

Panelists underscored the need for an increased public understanding of the experience of moral injury, the challenges of diagnosis, and the potential for broader social impacts of failure to understand and address the underlying causes of moral injuries at the systemic (society) level. In the opening remarks for the panel, Koch—who shared her brush with moral injury as a result of covering the destruction of Hurricane Katrina in her hometown in 2005—summed up the difference as "PTSD is a racing heart, moral injury is a broken heart." Drs. Nieuwsma and Smigelsky pointed out that the moral dimension of trauma was not initially included in the PTSD diagnosis when it was introduced in the 1980s. Therefore, there is currently no official diagnosis or threshold for moral injury, and it is not included in the Diagnostic and Statistical Manual of Mental Disorder (DSM). To help close this gap, the VA is currently launching a 3-year study of the prevalence of moral injury in the US veteran population, using a standardized MIE scale for the assessment.

Timothy Torres described his work with the Moral Compass Federation, as being a "bridge builder" between scientific researchers interested in exploring moral injury while also creating a sense of community among Veterans who have experienced it first-hand. In the aftermath of

the 2021 withdrawal from Afghanistan, Torres emphasizes peer-to-peer counseling and explores the connection between social construct and academic research in treating moral injury.

Dr. Buechner described his early encounters with stories of moral injury while doing oral history work with veterans of World War I, World War II, Korea, Vietnam, and later with veterans of Afghanistan and Iraq. He presented a view of moral injury from the perspective of Adlerian psychology, which differs from currently-prevalent psychodynamic models by focusing on social relationships and “community feeling” as primary mental health factors. From this lens, moral injury can be seen as a disruption of the “rightness” of the social order, with both individual and collective implications. This, in turn, opens space for a shared healing process in which those affected may share their stories meaningfully, and engage in community-based endeavors that might provide a sense of redemption and a new purpose.

### **Next steps and recommendations**

There was a general consensus among panelists that more public awareness and education are needed to create a context in which moral injury can be discussed and

appropriate assistance made available to those who may have experienced it. Conclusions from the panel discussion are being developed into a “white paper” to inform public and policy engagement.

Advocacy efforts could include:

- Increasing public awareness about the phenomenon of moral injury, and the available treatments.
- Further differentiate between treatments now offered for PTSD versus promising and emerging therapies for moral injury.
- Stress the collective dimensions (and shared responsibility) around moral injury to help prevent moral injury from being turned into another medical-model disorder or stigmatizing label.
- Engage veterans' voices directly in the national conversation about moral injury.
- Create channels for veterans to share their stories among expanded peer groups (including non-veterans) where they may feel more comfortable processing emotions with others who have experienced similar events.
- Provide storytelling education (and witnessing or “story-hearing” preparation) to help communities engage with morally injurious experiences more effectively.

## Mayhugh Foundation's 6th Annual Hero's Journey Symposium

The Mayhugh Foundation plans to include moral injury in its ongoing efforts to inform the public and government officials about barriers to mental health issues, as part of an overall systems-level strategy to enable communities to engage in positive ways. More will be shared here as these efforts unfold.

**Hero's Journey Symposium 2023 panel recordings, including the Moral Injury panel:**

<https://johnpmayhugh.org/2023-heros-journey-symposium>

**The Moral Compass Federation Website:**

<https://www.moralcompassfederation.org/>

## JOINING THE SIG

1. Log in to the ISTSS website as a member
2. Click "Edit Your Profile" on the right side of the page
3. Click the "SIG Choices" tab
4. Check "44 - Moral Injury"
5. Click "Save" – You're a member!

## FOLLOW US!



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SIG Facebook Group

## SPOTLIGHT NOMINATIONS

The Moral Injury SIG welcomes nominations for students, researchers, clinicians, and anyone advancing the moral injury field to be "spotlighted" in an upcoming newsletter.

Nominations should include a brief nominating statement and the CV of the nominee. Self-nominations are encouraged. Nomination materials should be sent to the SIG Chairs:

**Valentina Stoycheva, PhD**

valentina.stoycheva@gmail.com

**Barton Buechner, PhD**

bbuechner@adler.edu

## SPOTLIGHT

### Drs. Pat Pernicano and Austin Lemke



**Dr. Pat Pernicano** received her doctoral degree in clinical psychology from Baylor University in 1985. She has worked as a psychologist with VHA Mental Health since 2018. Prior to her work with the VA, she authored several books about the use of story and metaphor in trauma-informed therapy and worked in family reunification and trauma recovery. With the input of Chaplain Kerry Haynes, Dr. Pernicano

developed a now-12-week Acceptance and Forgiveness Group Therapy (AFT, 2018) for veterans with moral injury. Dr. Pernicano and Chaplain Dr. Haynes also published a 4-week educational program through MIRECC VSN 16. AFT includes story, metaphor, drawing, practice assignments, and interpersonal process, in addition to “seeding” new ways of looking at self and others. Veterans who complete the 12-week program display significantly lower anxiety, depression, symptoms of PTSD, and religious & spiritual struggles, as well as improved self-acceptance and sense of purpose.

**Austin Lemke, Psy.D.**, is a Clinical Psychologist & Assistant Professor at the University of Texas Health Science Center in San Antonio, where he is developing a program to provide mental health services to local police officers. He earned his Psy.D. from Wheaton College, completing both predoctoral internship (General Mental Health Emphasis) and postdoctoral fellowship (Substance Use Disorder/ Homelessness Emphasis) with the South Texas Veterans Health Care System in San Antonio. Contact: [lemkea@uthscsa.edu](mailto:lemkea@uthscsa.edu)



## CONJOINT TREATMENT OF MORAL INJURY AND SUBSTANCE USE IN U.S. MILITARY VETERANS USING INTRODUCTION TO ACCEPTANCE AND FORGIVENESS THERAPY

*Austin W. Lemke, PsyD*

*Patricia Pernicano, PsyD*

Moral injury has been widely studied in U.S. military servicemembers and veterans given its prevalence and severity in these populations. In fact, as many as 41.8% of U.S. military veterans may experience moral injury (Wisco et al, 2017). While moral injury can independently cause significant disruptions in different areas of life (e.g., psychological, spiritual, social), it is also widely known to be associated with other psychopathology including Major Depressive Disorder, Posttraumatic Stress Disorder, and suicidality (McEwan et al., 2021). A growing body of research indicates a substantial connection between moral injury and substance use disorders (SUD) in veterans, finding that moral injury is associated with an increased risk for SUD (OR = 1.15-1.20; Maguen et al., 2023), as well as 61% greater likelihood for alcohol-related problems (Wilk et al., 2010).

Although research is limited regarding specific pathways between the two, it is possible that veterans use alcohol and other substances to manage feelings of guilt, shame, and helplessness, core features of moral injury. Additionally, feelings of self-blame or self-hatred associated with moral injury may lead veterans to engage in problematic levels of substance use without regard to their own well-being, or even as a form of self-punishment. Substance use can also maintain a self-perpetuating morally injurious cycle. Veterans may feel continued guilt regarding negative consequences of use on loved ones or perpetrations related to the acquisition and use of substances. Substance use may also be morally injurious due to a veteran's conceptualization of one's own substance use, due to failing to meet a standard set for oneself as a veteran or violation of religious/spiritual beliefs.

The mutually perpetuating relationship between moral injury and substance use makes it difficult to effectively treat one concern while the other persists. However, therapies for moral injury are often provided solely within PTSD clinics or chaplaincy services at Veterans Affairs clinics and hospitals. While these clinicians provide effective care for moral injury, the



setting of these services can make it difficult to concurrently address both moral injury and SUD.

To address this limitation, we offered a 4-week moral injury psychoeducational intervention (*Introduction to Acceptance & Forgiveness*, Pernicano & Haynes, 2021) to veterans in a VA SUD outpatient treatment program. This curriculum (Facilitator Guide and Program Handbook) is available through MIRECC VSN 16

(<https://www.mirecc.va.gov/visn16/moral-injury-psychoeducation-group.asp>). Veterans often confuse Moral Injury with PTSD and wrestle with unresolved guilt, grief, loss, regret, blame (self/others), responsibility, hopelessness, forgiveness and acceptance.

In this group, Dr. Lemke introduced veterans to concepts of moral injury through stages of change theory, metaphor & story, concepts of guilt & responsibility, cross cultural concepts of confession, forgiveness, and reconciliation, concepts of restorative action/justice, and forgiveness as a form of radical acceptance. These concepts are consistent with SUD program concepts of harm reduction, motivational enhancement, and responsibility-taking. Each group began with processing group members' reactions from the prior week's group.

Next, we engaged with psychoeducational material about a topic related to moral injury (e.g., stages of change, responsibility, acceptance). Finally, we read a short story illustrating the take-home point of the week's content. For homework, Veterans completed a worksheet related to the story. Notably, this intervention did not include disclosing specific morally injurious experiences.

Though group sizes were small due to the preliminary nature of the project, this group appeared to be beneficial to the veterans who attended. We used the Moral Injury Outcome Scale (MIOS; Litz et al., 2021) to assess moral injury severity, with veterans reporting a decrease of 6.71 points ( $n = 7$ , pre = 28.85, post = 22.14). We used the Brief Addiction Monitor-Revised (Cacciola et al., 2013) to assess substance use factors. Veterans endorsed an average 8-point decrease ( $n = 4$ , pre = 24.75, post = 16.75) in use, an 18-point decrease in risk factors ( $n = 4$ , pre = 83.00, post = 65.00), and a 20-point increase in protective factors ( $n = 4$ , pre = 57.00, post = 77.25). Of note, veterans attended this group in conjunction with other outpatient SUD-focused groups, and thus these outcomes do not reflect benefit solely from our group.

In anonymous satisfaction surveys and verbal feedback at the conclusion of groups, veterans reported that the group was beneficial to their overall mental health and relevant to their SUD treatment. Veterans indicated benefit through several mechanisms, including support from other group members and greater understanding of moral injury. Through difficult conversations surrounding responsibility, guilt, acceptance, and forgiveness, veterans learned to redefine their experiences and developed a more nuanced understanding of the concepts. One veteran said, "It helped me recall where my priorities were in terms of my self-esteem. I have always been my worst critic and I needed to remind myself that forgiveness is key." Veterans also found value in connecting with other group members to develop honest, trusting relationships. One veteran stated "I appreciated the honesty and openness," whereas another reported benefit via "understanding my situation and honestly getting to know someone." A third veteran wrote "I definitely appreciated the openness of the group and the ease and comfort amongst the group members. We weren't afraid to open up and discuss anything.... I enjoy [the facilitator's] delivery and how he allows us to personalize everything and peels back the onion on issues and

problems we may have. He wants us to really understand where everything is coming from!" Relationships formed within the group enabled veterans to interact with the material with greater openness, particularly as those further in recovery provided normalization and encouragement to others ambivalent about engaging. We saw initially cautious veterans choose to repeat the group, then help new group members connect their own experiences to the material.

Overall, our project emphasizes the need for identification and treatment of moral injury throughout mental health mental health settings that serve veterans, particularly SUD clinics. Empirically-validated self-report measures for moral injury such as the MIOS can be used during intake to quickly and effectively identify veterans who may benefit from concurrent moral injury interventions. For these veterans, even brief moral injury interventions may provide some relief and strengthen treatment for SUD and other mental health concerns.

## GROUP STRUCTURE AND PRIMARY COMPONENTS

### Session 1: Introduction to Moral Injury

- Discuss of moral injury, including how it arises, areas of life it impacts, and how it relates to other mental health difficulties

### Session 2: The Change Process

- Discuss stages of change as they relate to both moral injury and substance use, identify veteran's current stage of change in both areas

### Session 3: Responsibility and Guilt

- Review of levels of responsibility, describe of factors that differentiate healthy versus unhealthy guilt

### Session 4: Acceptance, Forgiveness, and Restoration

- Describe the concept of acceptance, define of forgiveness as a form of radical acceptance, identify of methods to add nuance to previously held definitions of forgiveness

## SELECTED VETERAN QUOTES:

*"It helped me recall where my priorities were in terms of my self-esteem. I have always been my worst critic and I needed to remind myself that forgiveness is key."*

*"I definitely appreciated the openness of the group and the ease and comfort amongst the group members. We weren't afraid to open up and discuss anything....I enjoy [the facilitator's] delivery and how he allows us to personalize everything and peels back the onion on issues and problems we may have. He wants us to really understand where everything is coming from!"*

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## ARTICLE SUBMISSIONS

We invite SIG members to submit relevant articles of no more than 2000 words. Submissions may be data-driven, descriptive, theoretical, clinically oriented, etc. provided that they are relevant to the field of moral injury. Consistent with our mission to bring together clinicians and researchers from across healing disciplines and related fields, we hope to consider a range of submissions.

Articles should be no more than 2000 words (including references, tables, and figures). At least one SIG member should be an author on all submissions, though non-members may contribute in any role. As always, collaborations among members are highly encouraged. Submissions should be addressed to the SIG Chairs:

**Valentina Stoycheva, PhD**

[valentina.stoycheva@gmail.com](mailto:valentina.stoycheva@gmail.com)

**Barton Buechner, PhD**

[bbuechner@adler.edu](mailto:bbuechner@adler.edu)

**Anna Cole, M.A.**

[acole@nevada.unr.edu](mailto:acole@nevada.unr.edu)

# TRAINEE SECTION

Welcome to the trainee section! This corner covers various topics that arise as a trainee working with moral injury across disciplines. Every newsletter includes a spotlight and a list of training opportunities. If you'd like to nominate a trainee or spotlight your training site or if there's anything else you'd like to see covered here, please email Anna Cole (student chair) at [accole@nevada.unr.edu](mailto:accole@nevada.unr.edu).

## TRAINING OPPORTUNITIES

The following is an up-to-date list of sites that offer opportunities in moral injury (clinical, research, or otherwise) within the U.S. for trainees. If you would like your site listed here, please email Anna Cole (student chair) at [accole@nevada.unr.edu](mailto:accole@nevada.unr.edu).

Site	Training Level Offered
<b>Boston VA Health Care System</b> <i>Boston, MA</i>	Psychology Postdoctoral Fellow <i>*More opportunities available working in Dr. Brett Litz's laboratory</i>
<b>Road Home Program: Center for Veterans and Their Families (Rush University Medical Center)</b> <i>Chicago, IL</i>	Psychology Postdoctoral Fellow <i>*Email Dr. Brian Klassen for information about clinical &amp; research opportunities (brian_klassen@rush.edu)</i>
<b>Rocky Mountain Regional VA Medical Center</b> <i>Denver, CO</i>	Psychology Intern & Postdoctoral Fellow <i>*Email Dr. Jacob Farnsworth for more information (jacob.farnsworth@va.gov)</i>
<b>Loma Linda VA Medical Center</b> <i>Loma Linda, CA</i>	Psychology Postdoctoral Fellows via Holistic Mental Health focus area
<b>San Francisco VA Health Care System</b> <i>San Francisco, CA</i>	Psychology Intern & Postdoctoral Fellow <i>*Email Dr. Shira Maguen for more information (Shira.Maguen@va.gov)</i>
<b>VISN 17 Center of Excellence for Research on Returning War Veterans</b> <i>Waco, TX</i>	Psychology Postdoctoral Fellow <i>*Email Dr. Sheila Frankfurt for more information (sheila.frankfurt@va.gov)</i>
<b>Central Texas Veterans Healthcare System</b> <i>Temple, TX</i>	Psychology Intern <i>*Email Dr. Sheila Frankfurt for more information (sheila.frankfurt@va.gov)</i>
<b>VA North Texas Health Care System</b> <i>Dallas-Fort Worth, TX</i>	Psychology Externs, Interns, & Postdoctoral Fellows <i>*Email Dr. Wyatt Evans for more information (wyatt.evans@va.gov)</i>

# MORAL INJURY RESEARCH HIGHLIGHTS

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# MORAL INJURY SIG MISSION STATEMENT

The Moral Injury Special Interest Group (SIG) aims to bring together clinicians and researchers from across healing disciplines and related fields including philosophy and ethics, military culture and history, and religious/spiritual studies in order to provide a professional home for moral injury discourse and development. In gathering ISTSS members from across these disciplines and the world, this SIG will facilitate a rich scientific conversation and will advance the state of the science in conceptualization, assessment, and intervention for moral injury. Though the concept of moral injury has recently regained a great deal of popular interest, the field is in its infancy. At present, essential conceptual distinctions need refinement and the potential paths to moral healing require paving. Addressing these areas will be the primary objectives of the Moral Injury SIG, and will be approached in the following ways:

- Advocate for rigorous clinical and scholarly work that attends to cultural and contextual factors in this field
- Disseminate high quality scholarship in the moral injury field to ISTSS members and to the broader international community
- Support collaborative exploration of moral injury between members of the SIG, facilitating submission of proposals on moral injury and related topics to ISTSS Annual Meetings and other appropriate venues and nurturing research on moral injury and healing
- Establish and maintain an active SIG listserv to facilitate direct and wide-spread sharing of new and upcoming literature, training, etc. of interest to SIG membership



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