War has a way of exposing what is best and what is worst about the human spirit: it can uplift the soul in moments of courage; it can strip one of a belief in human goodness in moments of cruelty. As Frankl long ago observed, war experiences hit the core of existential experience. It can serve as a basis toward understanding that even in great sorrow and suffering, there is meaning. Given their life and death nature, traumatic battlefield events are particularly situated to provoke moral questioning among soldiers. For some soldiers, war-zone events can lead to an existential crisis, a crisis in meaning. This concept of a clash between battlefield actions and personal values has been termed “moral injury.”

Moral injury moves beyond psychopathological views of reactions to war, such as Posttraumatic Stress Disorder (PTSD). Understanding moral combat-based conflicts within a meaning-based perspective addresses core existential issues omitted by a psychopathological framework. The purpose of this paper is to provide a brief overview of the war context, review moral injury as a construct that is discussed in recent scientific literature, and present the meaning-based transpersonal approach developed by the authors that has much in common with traditional logotherapy. We developed this approach specifically working with veterans of the USA Operation Iraqi Freedom (O.I.F.) and Operation Enduring Freedom (O.E.F.), though its applicability to veterans elsewhere is obvious.

Context for the Development of the Transpersonal-Existential Meaning-Based Model

Spanning a decade, O.I.F. and O.E.F. have involved hazardous front-line missions under asymmetrical battlefield conditions (i.e., those without an established front line). These missions have been fought against enemy
combatants represented as insurgents and affiliates of groups that are not readily identified as enemy personnel (i.e., not part of an organized military of the enemy country). Rather, enemy combatants may be indistinguishable from civilians and may use individuals who are not commonly considered dangerous (e.g., the elderly or children) as methods of conveyance for explosives. Moreover, as Litz et al. and Nash note, despite a military culture that fosters an intense moral and ethical code of conduct as well as battlefield ethics and training, the unconventional aspects of the war zone can lead to ambiguity in terms of how to react to possible civilian combatants or non-combatants.7,10 Under such war-zone circumstances, one source of stress experienced by the soldier is the conflict between moral/ethical beliefs held and actions taken in the battlefield (e.g., having to fire upon civilians). Consequently, the transition back to civilian life for the combat veteran can be fraught with emotional turbulence. It may also be driven by losses: that of camaraderie, the adrenaline-charged intensity associated with dangerous missions, and perhaps most importantly, the loss of a compelling and life-changing purpose (i.e., as in the “Warrior Creed” of defending democratic values).

**Defining Moral Injury**

As a concept, moral injury may be elusive. Litz et al. have suggested that it represents cognitive dissonance stimulated by acts of commission or omission that transgress deeply held morals and beliefs.7 The term itself may be controversial.2 For example, Nash et al. note that the phrase “moral injury” may evoke negative judgments and emotions and that armed service members may inappropriately equate moral injury with moral wrong-doing.11 Conflicts that can arise encompass those between civilian values and military action; between fear and the military value of courage; between the impulse toward self-preservation versus bravery and risking one’s life for others. Therefore, some individuals find neutral terms such as “beliefs injury” or “inner conflict” as one source of stress injury related to inner conflict preferable to the term “moral injury.” A corollary issue has been the psychometric evaluation of military moral injury as a method to validate the construct and its associations with negative outcomes such as depression, suicide risk, and co-morbidity with specific symptom clusters of PTSD.1 Still others have raised questions about where to delineate the line between moral injury as an Adjustment Disorder versus PTSD versus a natural aftermath of war.7 Mental health clinicians may be drawn toward viewing moral injury through the lens of psychopathology (i.e., a symptom-based perspective). With such an approach, moral injury as a construct risks becoming lost in a “checklist” of symptoms of PTSD.

Over 50 years ago, the existential psychologist, Rollo May, warned that categories and techniques compromise an understanding of the patient from their reality and become a projection of clinician theories.8 Moral injury may be something beyond PTSD, something beyond diagnosis that cannot be
fully captured by most psychological theories and constructs. Jonathan Shay noted the arduous journey of Vietnam Veterans’ homecoming and observed that those who are sent to battle may return home with their hearts and souls riddled by distrust. Nakashima-Brock and Lettini commented that such injury is hardly new, reflecting instead an ancient, but often unaddressed, wound of war. Philosophers and theologians like Paul Tillich’s discussion of existential anxiety offers another layer of understanding about moral injury in the form of spiritual anxiety – that of emptiness and loss of meaning. Moral injury, therefore, may represent an existential, spiritual “hit” taken by the soldier. It may more accurately be thought of as an injury to the larger sense of self. If so, what is the route to repair?

Transpersonal-Existential Meaning-Based Model
Frankl emphasized that crucial to human life is meaning. Less understood/emphasized in trauma work is the impact of moral injury upon loss of existential meaning. Two routes in the war zone may lead to loss of existential meaning: disillusionment about the goodness of human nature, and guilt or shame for one’s actions or lack of actions. How does a combat soldier recapture meaning from disturbing war events once in the civilian world? How does he or she overcome existential anxiety? The transpersonal-existential model offered by Osran, Smee, Sreenivasan, and Weinberger has been offered as one process of assisting a combat veteran with moral injury. The model encompasses these elements:

• Identify Signature Strengths from combat story (self-efficacy and positive attributes that move the individual away from emotional distress, typically anger and guilt; emphasize the meaningful aspects of the event as anchored in the context of the larger self)
• Identify Event’s Meaning in Larger Context (in terms of purpose of one’s role as a soldier, marine, or sailor in the context of serving one’s country and anchored in the context of sense of purpose being larger than oneself)
• Address the Spiritual Context (in the context of spiritual anxiety and forgiveness both towards others and self, as well as placing it within the soldier’s spiritual and/or religious beliefs; or towards addressing how to overcome cynicism)
• Promote Resilience by identifying pitfalls/traps to avoid (such as holding onto anger or resentment, or shame and guilt)

Tillich noted that when human beings fall short in their sense of moral self-affirmation this results in guilt, anxiety, and emptiness, which in turn lead to self-rejection. Self-rejection or a sense of non-being is similar to what Frankl termed the “existential vacuum.” Frankl observed that the key to enduring negative events is finding meaning. Moral injury is despair. Despair is suffering without meaning. Recapturing meaning is a way to repair moral injury. Adverse war-zone events that cause moral conflict offer the
opportunity for the development of sustained and deep meaning, and have the potential to transform the soldier’s life from disengagement (alienation) to engagement, from emptiness to fulfillment. One example of promoting meaning may be through the Warrior Creed that underscores the soldier’s actions as serving a purpose larger than the self (i.e., as a guardian of freedom).

Another aspect of combat moral injury is that of survivor guilt. Frankl expressed that those who survived the concentration camps believed that the best among them did not return.\(^5\) For combat veterans this can be the core of their survivor guilt and associated with the persistence of lack of meaning and emptiness. For that guilt to be understood and overcome, the event may need to be turned over and over until its larger meaning to the combat veteran’s purpose in life becomes apparent. Such meaning may only come after the veteran engages in forgiveness. Forgiveness is a morally complex issue, and is even more profound in the context of combat moral injury as it involves in the same individual the dualities of forgiving others as well as self-forgiveness. Both require the individual to give up something – giving up anger and resentment in forgiveness of others; giving up guilt and self-condemnation in self-pardon. In the process of recapturing meaning through forgiveness, the combat veteran re-establishes relationships: with self, with others, with society, and/or with their Higher Power. Non-forgiveness leads to a festering of negative emotions and stymies psychological and spiritual growth; as Frankl observed, it is suffering without meaning.

Spirituality is rarely central to mental health treatment, however, Fontana and Rosenheck found that veterans’ motives for treatment were deeply spiritual; that is, searching for meaning and purpose as related to their traumatic events.\(^4\) The Transpersonal-Existential Meaning-Based Model addresses the spiritual context of combat moral injury from the perspective of a loss of existential meaning or a spiritual crisis. Tillich described spiritual anxiety as a threat to the whole being that leads to the anxiety of emptiness, that of meaninglessness.\(^14\) Clearly, such reactions are painful. However, they also offer the potential for the development of spiritual depth. Traditional mental health interventions largely conceptualize the soldier’s reactions to moral conflicts in terms of pathology (e.g., emotional distress that needs to be quelled).\(^3,10,12\) An alternate view is that the ability for a combat soldier to feel spiritual anxiety heralds what Nakashima-Brock and Lettini characterize as healthy human beings asking difficult ethical questions after participation in war.\(^9\) Moral injury, therefore, can be viewed as a healthy reaction – one reflecting a contact with conscience as well as a process offering the opportunity to find meaning in terrible events.
Conclusion

Combat moral injury causes moral dissonance. It violates assumptions and beliefs about right/wrong, good/evil, and leads to a crisis in meaning. Clearly, the need for finding meaning is heightened in war where human empathy is limited, where orders to engage in firing upon others are followed, and where death and dying are not abstractions, but daily occurrences. The combat experience forces the combatant to consider issues of life and death; in the war zone they must confront the reality that each day could be their last or that they may survive death when the person next to them does not. While cognitive models (as those traditionally used in Cognitive Behavioral Therapy) can explain distress related to the dissonance (negative self-appraisal, attributions of transgression), they cannot address emptiness of meaning and the attendant spiritual anxiety associated with the moral injury. Our transpersonal-existential model emphasizes a meaning-based process and offers returning combat veterans a means to address the rift created by adverse war events that underlie moral conflicts.

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