

# Force Protection from Moral Injury

# Three Objectives for Military Leaders

By Jeffrey Zust and Stephen Krauss

War makes us killers. We must confront this horror directly if we're honest about the true costs of war. . . . I'm no longer the "good" person I once thought I was. There's nothing that can change that; it's impossible to forget what happened, and the only people who can forgive me are dead.<sup>1</sup>

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oral injury is an invisible wound that disrupts a Servicemembers' character, leaving them feeling "sad, mad, had, and/or bad." Specifically, moral injury is a complex "soul" wound caused by Servicemembers judging that their actions, or inactions,

are contrary to their core values.<sup>2</sup> We cannot see the internal core of a person's being, but his narratives reveal the hidden contradictions that wound him. Research shows that the resulting effects from these hidden wounds are separable from post-traumatic stress

disorder (PTSD) and extend beyond the battlefield into units, families, and communities.3 Servicemembers inherently make value-based, life and death decisions in the performance of their duties. These decisions are, in effect, moral decisions, and the contradictions within these decisions form a moral dissonance that alters the way Servicemembers view their existence. Thus, moral injury becomes a force protection threat that senior leaders can mitigate by preparing Servicemembers psychologically, socially, and spiritually for the moral risks and realities they will encounter in combat; embedding moral reasoning within mission command processes to provide clear moral "red lines" that guide professional practice; and building healing processes into postcombat actions that help Servicemembers address perceived moral contradictions.

# Background

Leaders can influence, but not control, how Servicemembers will morally perceive traumatic events, either cognitively or emotionally. Veterans frequently take responsibility for even unintended contradictions of their core values and can react with guilt or anger to circumstances that they could not have influenced. Consider the example of a wounded squad leader who continually blames himself for failing to rescue his Soldier trapped in a burning vehicle. The squad leader had reservations about the chosen route for the mission, but he followed the order that led to the Soldier's death. He believes he should have done more as a "good" leader and feels guilty for breaking his promise to bring his total team home alive. His situation is just one of the cruel realities of combat. His perceptions may or may not be accurate, but they are his new reality. How will he recover? Can he find new meaning that helps him recover his sense of self, without denying the reality of what he experienced?

Leaders can aid their subordinates in this process by setting the conditions for how subordinates act, interpret, and process combat experiences. The moral effects of combat can be severe. As one Air Force drone operator reflects, "I felt like I was haunted by a legion of the dead. My physical health was gone, and my mental health was crumbled. I was in so much pain, I was ready to eat a bullet myself." A senior officer summarizes his service, "It is clear to me today that I, and others, sometimes failed to make wise choices. To our shame, we should have known better." Leaders can mitigate the sources for these severe effects by incorporating moral reasoning into training, operating, and healing.

We are apt to focus more on the physical and psychological effects from traumatic events rather than the moral contradictions that contribute to moral injury. Moral injuries are not fear-based reactions to traumatic stress.<sup>7</sup> For example, one drone operator successfully killed a terrorist facilitator while sparing his child. He then watched through the screen as the child picked up the pieces of his father and, to his utter horror, placed them back into human shape.<sup>8</sup>

Evidence suggests that moral dissonance from unresolved contradictions between core values and perceptions of their experiences cause moral injury. Moral dissonance is a normal response to perceived failure to live up to core values. It is experienced as a range of emotions such as doubt, anger, betrayal, regret, embitterment, shame, or guilt. High levels of prolonged moral dissonance build into moral injury.

# Prepare Servicemembers for Moral Risks

The majority of Servicemembers exposed to the harshest realities of combat are also the youngest and least experienced. It is therefore imperative that junior officers and enlisted troops receive training that prepares them to respond morally as well as kinetically in combat. But research on moral decisionmaking does not fully support how morality is traditionally taught.

Research suggests that instead of formal moral systems guiding intuitive, gut-level responses to moral issues, people tend to use formal moral systems simply to justify their intuitive responses. <sup>10</sup> These responses develop similarly to how we developed our tastes for food or clothing—through life experience, not classroom instruction. Thus, George Washington was correct when he stated that when we took our oaths and donned our uniforms, we did not lay aside our sense of right and wrong. <sup>11</sup>

Servicemembers use their moral intuitions in both training and combat. They will do this regardless of whether abstract moral systems are addressed in our training doctrine, curriculum, and schedules. Therefore, if we want to help warfighters develop resiliency to combat stress, we need to help them develop the gut-level moral reasoning they will need to discern among the shades of gray they will encounter in war. This can be done through more fully integrating moral issues into skills training.

Leaders at all levels are in unique positions to develop moral reasoning within their subordinates, beginning with the incorporation of moral reasoning into the training of combat skills. Consider the following example of a commander introducing moral reasoning into a platoon live-fire range. During a movement to contact, his Soldiers intentionally killed a jackrabbit that hopped onto the objective. Technically, the Soldiers successfully completed their mission by taking the objective and shooting the designated "enemy" targets without firing upon the "civilian" targets. However, the commander took the lesson a step further. After completing the technical portion of the after-action review, the commander used the targeting of a "noncombatant" rabbit as a teaching moment to connect his unit's moral reasoning with their actions. He literally had his junior leaders and Soldiers walk through their reasoning as to why they were unable to refrain from killing a live, unarmed creature that posed no threat, under conditions where they were not in danger. In doing so, he directed them to consider their future targeting decisions and hopefully mitigated future behaviors that could morally harm his Soldiers. 12

Combat is filled with complex events that warfighters may judge as contrary

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to their core values. For example, one intelligence operative called in an airstrike on a house that had sustained gunfire coming out of a single window. He later found nine women and eight children among the dead. He relives seeing those 17 bodies almost daily.

Unresolved moral dissonance formed from moral judgments causes moral injuries. These unresolved moral contradictions are painful reminders that fuel negative judgments of personal character and military service. <sup>13</sup> Roughly 18.6 percent of combat veterans experience symptoms of PTSD. <sup>14</sup> However, a growing number of veterans who do not qualify for this psychiatric diagnosis still report ongoing suffering related to their moral judgments of their service. <sup>15</sup>

Not all Servicemembers experience harmful levels of moral dissonance from combat.16 Research suggests that alignment of our values with our behavior helps protect combatants against a wide range of negative outcomes such as moral injury, PTSD, depression, and suicide.<sup>17</sup> In addition, we send units, not individuals, to war. Research suggests that cohesive units, and units with high morale, have lower levels of behavioral health problems regardless of amount of combat exposure.<sup>18</sup> Both cohesion and morale are formed within the social bonds that units develop during training. These bonds include the core values of the individuals forming them, mitigating the conditions that create moral injuries. In short, unit cohesion and morale protect Servicemembers from moral injury.

Leaders at all levels can shape training to help Servicemembers sharpen the moral reasoning that supports the standards they will practice in combat. During training, leaders also build the cohesive unit relationships that support how individuals resolve the harmful moral dissonance they may experience. However, these benefits can be destroyed by how units operate in combat.

# **Embed Moral Reasoning**

After years of counseling morally wounded veterans, Department of Veterans Affairs' psychiatrist Jonathon Shay identifies failed leadership as one

of the primary causes of moral injury.<sup>19</sup> When Soldiers burned a library as a reprisal during the Philippine insurrection, a young lieutenant named George C. Marshall told a fellow officer, "Once an army is involved in war, there is a beast in every fighting man which begins tugging at its chains. And a good officer must learn early on how to keep the beast under control, both in his men and himself."20 This quotation has often been used to convey the moral responsibility that leaders possess in order to control how their orders influence behavior. Thus, controlling the beast within is a matter of describing how moral reasoning affects mission standards.

The exercise of moral reasoning goes deeper than setting a positive command climate. Sociologist Stjepan Mestrovic, a specialist in war crimes, believes that we can predict deviant, even criminal behaviors in combat units by the presence of dysfunctional command leadership. Fixing the blame for moral failures on rogue or bad actors often does not fix the larger picture of what really happens when combatants violate moral standards.<sup>21</sup> The effects of poor leadership spread throughout units.

In 2010, Soldiers from a Stryker platoon serving in Afghanistan were accused of intentionally killing an unarmed mullah. The prosecution focused on the leadership of a staff sergeant who had a "recruiting poster" military bearing and "sinister" motivations. However, the command investigation also described the greater effects caused by failed mission command that allowed the killing to happen. The investigator, Brigadier General Stephen Twitty, focused on the moral difference between a command causing criminal behavior and failing to prevent it. He wrote, "While the alleged criminal acts may have been identified earlier or perhaps prevented with stronger leader presence, I found nothing to indicate that the alleged criminal acts occurred as a result of the command climate set by the leaders above them. . . . At the same time, under different leadership, the crimes might never have happened."22

Not all moral failures are criminal. Research suggests that combatants

will hold themselves accountable for group and personal events they failed to prevent or change.<sup>23</sup> They will also accept responsibility for their association with events in which they did not directly participate. This personal moral judgment leaves Servicemembers questioning their worth.<sup>24</sup> Resiliency against these types of moral injuries requires a mission command that links critical thinking and moral reasoning skills with operational practices.<sup>25</sup>

In the early phases of Operation Iragi Freedom, a Marine platoon received orders prior to its mission that stated all personnel on the objective were considered hostile. Consequentially, the Marines wounded two unarmed shepherd boys. After the fight, the platoon leader regretted not clarifying what he believed to be an immoral order. He also believed that his orders contributed to his Marines' actions as an unintended consequence within the rules of engagement. However, he also knew that he and his Marines were reconciling their actions against a higher standard. Therefore, after the boys were treated and evacuated, he told his platoon: "Fellas, today was f\_\_\_d up, completely insane. But we can't control the missions we get, only how we execute them. . . . I failed you this morning by allowing that 'declared hostile' call to stand. My failure put you in an impossible position."26

Later, when asked to explain his reasoning, he responded, "I tried to draw out those lessons for the platoon. First, we made a mistake this morning. . . . We don't shoot kids. When we do, we acknowledge the tragedy and learn from it."27 Through a simple battlefield afteraction review, this platoon leader hoped to shape his Marines' perceptions of the event by acknowledging their values, accepting responsibility for the past, and correcting a problem to shape future actions. Research suggests this type of transparent reasoning may help Servicemembers make sense out of their experiences, resolve their moral dissonance, and focus on their future in a healthy manner. This reformation of combat narratives helps reduce damaging effects from the moral dissonance formed during traumatic events.28

When commanders encourage combatants to "engage their brains before engaging their weapons," they are mitigating the potential for moral injury by linking their core values with target acquisition, a key warrior competency.<sup>29</sup> However, it does not necessarily establish the moral red lines combatants need to control their conduct in combat. Leaders often instruct subordinates to follow their moral compass without understanding that moral reasoning typically relies on gut-level intuitions that functions like a Global Positioning System to provide instant orientation without complex calculations.

Moral intuitions are influenced by repeated exposure, which is a process called habituation. In other words, moral intuitions are changed through repeated exposures to others' actions and by repeated commission of behaviors (both good and bad). In commands where "getting the job done" is the most important thing, this habituation can mean that immoral acts may no longer even be viewed as moral decisions. This is called moral fading. A recent U.S. Army War College report stated that moral fading is the result of a desensitization that "allows what should be an ethical decision to fade into just another way the Army does business."30 As one captain proudly reported, to maintain a platoon leader on the battlefield, "I falsified the [traumatic brain injury] report that changed a distance from the [improvised explosive device] strike [to where] one person was standing."31 What would happen if this platoon leader subsequently had issues from the brain trauma? Will this sort of moral event habituate the command toward more violations of Army values, further endangering trust in mission command?

Leaders can combat moral fading by focusing on moral reasoning that aligns mission orders, command intent, situational awareness, and good character. This type of mission command establishes red lines that contribute to mission success and guard combatants' character. Conversely, moral fading and misalignments within mission command degrade the essential links between core



Grief-stricken American Infantryman whose buddy was killed in action is comforted by another Soldier, August 28, 1950, Haktong-ni area, Korea (U.S. Army/Al Chang)

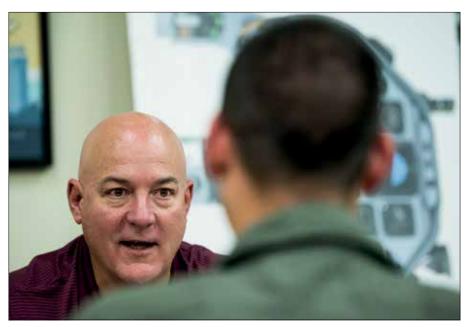
values and behavior that mitigate moral dissonance. Imagine the fading and misalignments that led the following decorated Ranger to describe his reasons for leaving military service: "The only two times where I personally was in a position to see where the Army had the choice to do the right thing or the wrong thing, both times they chose to do the wrong thing. . . . It made me realize that the Army does what suits the Army. That's why I won't put that uniform back on. I'm done." 32

This Ranger was personally involved in the events surrounding the death of Corporal Pat Tillman, and he experienced subsequent moral effects from how the military dealt with his unit, Tillman's family, and the American public *after* Tillman's death by friendly fire. Notice how his complaint is not based on traumatic affects from combat. Instead his complaint is focused on what he believes to be to be a failure within mission command based on what he perceives as a violation of both his and the Army's core values.

Each decision establishes some type of red line that controls the beast in every warfighter and forms some type of green light that permits warfighters to act. The very nature of the military profession is to win. In doing so, we fight in complex environments where combatants operate in situations that can easily lead to moral fading, blurring the moral red lines that guard their characters and identities.33 Inevitably, misalignments and moral fading within mission command increase the likelihood that combatants ignore moral red lines in order to obtain a competitive advantage.34 When this happens, moral injury becomes the likely consequence, as combatants' unresolved moral dissonance injures them, their units, their families, and their communities.

However, moral injuries are not the inevitable consequence of combat. Good military leadership incorporates moral reasoning within all phases of training and mission command. Incorporating moral reasoning into training and operations helps build resiliency and provide protections that mitigate the formation of moral injuries. Leaders at all levels can also facilitate recovery and healing processes, but postcombat resolution of moral dissonance is not a substitute for developing sound moral judgment during training and exercising it within mission command.

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Remotely piloted aircraft qualification instructor pilot (left) conducts debrief of training mission with enlisted RPA student at 558<sup>th</sup> Flying Training Squadron, Joint Base San Antonio, Texas, July 17, 2018 (U.S. Air Force/Bennie J. Davis III)

### **Building Healing Processes**

Combat produces moral dilemmas, and resolving the resulting dissonance is an essential part of the healing process. If Servicemembers can create positive meaning from their hardships, they may struggle, but they can avoid most, if not all, of the long-term behavioral health consequences associated with moral injuries.35 The existence of moral dissonance implies the presence of a healthy conscience wrestling with the inevitable conflicts between core values and perceptions that occur during combat.36 The resulting moral dissonance only develops into an injury if Servicemembers cannot successfully resolve this conflict.

Human beings have an innate need to understand, interpret, and judge traumatic events through iterative meaning-making processes in order to heal.<sup>37</sup> These cognitive and emotional healing processes begin spontaneously during traumatic experiences. The critical question is whether these processes help Servicemembers form an adaptive or maladaptive meaning for their lives.<sup>38</sup> This is likely why Air Force squadrons with social gathering places, called Heritage Rooms, have improved behavioral health outcomes over squadrons without such gathering places.<sup>39</sup> The same may be true

for every unit that takes pride in its heritage. Good battle buddies or wingmen not only increase unit cohesiveness, but also aid in developing and maintaining a command climate that helps individuals resolve their moral dissonance and traumatic stress.

Direct access to professional help is essential in both deployed and garrison environments. Therefore, leaders must encourage their subordinates to get the help they need and work to dispel stigmas that prevent seeking professional help. Research is currently examining promising treatments for moral injuries involving cognitive and narrative therapies to help combat veterans harmonize their moral dissonance by assimilating and accommodating new meaning.40 This harmonization results in a renewed sense of purpose for living. These types of therapies accomplish healing by focusing on adaptive practices that use core values to address damaging combat perceptions.41

Military leaders shape the future for defining and treating moral injury. Currently, moral injury does not have a universally accepted definition and to date, no research project has connected all the dynamics that happen when combat veterans experience harmful levels of moral dissonance. The most systematic

and comprehensive look at the effects of combat stress on veterans from current operations derives from the Mental Health Advisory Team (MHAT). The MHAT collected data from Soldiers and Marines in nine studies conducted between 2003 and 2013. The surveys found that combatants reported negative perceptions of specific events that occurred during their deployments. However, the MHAT surveys did not ask Soldiers and Marines about the standards and core values they used in judging their perceptions or how their judgments affected their present behaviors and identities.

Leaders can help prevent moral injury and set the conditions for healing. The first step is to equip subordinates with the training and good moral leadership needed to mitigate and resolve their moral dissonance. The second step is to provide systemic resources to help identify, understand, and address moral concerns from training to battlefield and back home. This resourcing could range from conducting unit visitations and providing solid rules of engagement at the tactical level and providing embedded healers such as chaplains and combat stress teams at the operational level to establishing ongoing research and force protection policy at the strategic level. The objective is to create a military that integrates moral reasoning with mission command and healing practices that help warfighters serve honorably and return home ready for the future.42

Moral injury is a complex force protection issue that involves how warfighters prepare and return from combat. All combatants are moral actors because they make life and death decisions influenced by their core values and lethal skills. Leaders need to understand how combatants develop and use core values to judge perceptions of their military service and how unresolved moral dissonance from these judgments leads to maladaptive emotions, thoughts, and behaviors that become moral injuries.

Leaders can mitigate the risk for moral injury by establishing realistic training that prepares Servicemembers for the moral dilemmas they will encounter in combat, embedding moral reasoning processes within mission command to establish clear boundaries for how combatants will operate, and providing healing resources to help them adopt adaptive practices to resolve their moral dissonance. Today's leaders cannot control all of the traumatic effects from combat, but they do set the conditions for moral reasoning, mission command, and the healing process that ensure our forces are ready for tomorrow's missions. JFQ

# Notes

<sup>1</sup>Timothy Kudo, "I Killed People in Afghanistan. Was I Right or Wrong?" *Washington Post*, January 25, 2013.

<sup>2</sup> Duane Larson and Jeff Zust, *Care for the Sorrowing Soul* (Eugene, OR: Cascade Books, 2017)

<sup>3</sup> Joseph M. Currier, Jason M. Holland, and Jesse Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans," Journal of Clinical Psychology 71, no. 3 (2015), 229-240; Brett T. Litz et al., "Moral Injury and Moral Repair in War Veterans: A Preliminary Model and Intervention Strategy," Clinical Psychology Review 29, no. 8 (2009), 695-706; William P. Nash et al., "Psychometric Evaluation of the Moral Injury Events Scale," Military Medicine 178, no. 6 (2013), 646-652; Crystal L. Park, "Making Sense of the Meaning Literature: An Integrative Review of Meaning Making and Its Effects on Adjustment to Stressful Life Events," Psychological Bulletin 136, no. 2 (2010), 257.

<sup>4</sup>Timothy J. Hodgson and Lindsay B. Carey, "Moral Injury and Definitional Clarity: Betrayal, Spirituality, and the Role of Chaplains," *Journal of Religion and Health* 56, no. 4 (2017), 1212–1228.

<sup>5</sup> Pratrap Chatterjee, "American Drone Operators Are Quitting in Record Numbers," *The Nation*, March 5, 2015.

<sup>6</sup> Douglas A. Pryer, "Moral Injury: What Leaders Don't Mention When They Talk of War," Association of the United States Army, August 14, 2014.

<sup>7</sup> Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans"; Litz, "Moral Injury and Moral Repair in War Veterans"; Nash, "Psychometric Evaluation of the Moral Injury Events Scale."

<sup>8</sup> Eyal Press, "The Wounds of the Drone Warrior," *New York Times*, June 13, 2018.

<sup>9</sup> Larson and Zust, *Care for the Sorrowing Soul.* 

<sup>10</sup> Jonathan Haidt, *The Righteous Mind:* Why Good People Are Divided by Politics and Religion (New York: Vintage, 2012).

<sup>11</sup> George Washington, "Letter to the New York Provincial Congress, 26 June 1775," in *The Writings of George Washington from the Original Manuscript Sources, 1745–1799*, vol. 6., ed. John Clement Fitzpatrick and David Maydole Matteson (Washington, DC: Government Printing Office, 1931).

<sup>12</sup>Witnessed by Chaplain Zust during his Operation *Iraqi Freedom* tour with the 2<sup>nd</sup> Stryker Brigade Combat Team, 2<sup>nd</sup> Infantry Division, 2006–2008.

<sup>13</sup> Jacob K. Farnsworth et al., "The Role of Moral Emotions in Military Trauma: Implications for the Study and Treatment of Moral Injury," *Review of General Psychology* 18, no. 4 (2014), 249; Ronnie Janoff-Bulman, *Shattered Assumptions: Towards a New Psychology of Trauma* (New York: Simon and Schuster, 2010).

<sup>14</sup> Charles W. Hoge et al., "Combat Duty in Iraq and Afghanistan, Mental Health Problems, and Barriers to Care," *New England Journal of Medicine* 351, no. 1 (2004), 13–22.

<sup>15</sup> Terri Tanielian, Assessing Combat Exposure and Post-Traumatic Stress Disorders in Troops and Estimating the Costs to Society, Testimony Before the House Veterans' Affairs Committee, Subcommittee on Disability Assistance and Memorial Affairs, March 24, 2009, available at <www.rand.org/content/dam/ rand/pubs/testimonies/2009/RAND\_CT321. pdf>.

<sup>16</sup> Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans."

<sup>17</sup> Crystal L. Park et al., *Trauma, Meaning, and Spirituality: Translating Research into Clinical Practice* (Washington, DC: American Psychological Association, 2017); Craig J. Bryan et al., "Meaning in Life, Emotional Distress, Suicidal Ideation, and Life Functioning in an Active Duty Military Sample," *The Journal of Positive Psychology* 8, no. 5 (2013), 444–452; Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans."

<sup>18</sup> Yinyin Zang et al., "The Impact of Social Support, Unit Cohesion, and Trait Resilience on PTSD in Treatment-Seeking Military Personnel with PTSD: The Role of Post-Traumatic Cognitions," *Journal of Psychiatric Research* 86 (2017), 18–25.

<sup>19</sup> Jonathan Shay, "Trust: Touchstone for a Practical Military Ethos," in *Spirit*, *Blood and Treasure: The American Cost of Battle in the 21<sup>st</sup> Century*, ed. Donald E. Vandergriff (New York: Presidio Press, 2001), 3–20; Jonathan Shay, *Achilles in Vietnam: Combat Trauma and the Undoing of Character* (New York: Simon and Schuster, 2010).

<sup>20</sup> H. Paul Jeffers and Alan Axelrod, *Marshall: Lessons in Leadership* (New York: St. Martin's Press, 2010).

<sup>21</sup> Lieutenant General Stephen Twitty, USA, quoted in Luke Mogleson, "A Beast in the Heart of Every Fighting Man," *New York Times*, April 27, 2011.

22 Ibid.

<sup>23</sup> Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans"; Litz, "Moral Injury and Moral Repair in War Veterans."

<sup>24</sup> Carrie Doehring, "Resilience as the Relational Ability to Spiritually Integrate Moral Stress," *Pastoral Psychology* 64, no. 5 (2015), 635–649.

<sup>25</sup> Dick Couch, *A Tactical Ethic: Moral Conduct in the Insurgent Battlespace* (Annapolis, MD: Naval Institute Press, 2013).

<sup>26</sup> Nathaniel Fick, *One Bullet Away: The Making of a Marine Officer* (New York: Houghton Mifflin, 2006).

<sup>27</sup> Ibid.

<sup>28</sup> Park et al., *Trauma*, *Meaning*, and *Spirituality*.

<sup>29</sup> This quotation is from the instructions Lieutenant General James Mattis issued to each of his Marines on March 19, 2003, prior to engaging Iraqi forces.

<sup>30</sup> Leonard Wong and Stephen J. Gerras, *Lying to Ourselves: Dishonesty in the Army Profession* (Carlisle Barracks, PA: U.S. Army War College Press, 2015).

31 Ibid.

<sup>32</sup> Jon Krakauer, Where Men Win Glory: The Odyssey of Pat Tillman (Norwell, MA: Anchor, 2010).

<sup>33</sup> Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans."

<sup>34</sup> Dean C. Ludwig and Clinton O. Longenecker, "The Bathsheba Syndrome: The Ethical Failure of Successful Leaders," *Journal of Business Ethics* 12, no. 4 (1993), 265–273; Wong and Gerras, *Lying to Ourselves*, Dennis R. Balch and Robert W. Armstrong, "Ethical Marginality: The Icarus Syndrome and Banality of Wrongdoing," *Journal of Business Ethics* 92, no. 2 (2010), 291–303.

<sup>35</sup> Currier, Holland, and Malott, "Moral Injury, Meaning Making, and Mental Health in Returning Veterans"; Park, "Making Sense of the Meaning Literature."

<sup>36</sup> Larson and Zust, Care for the Sorrowing Soul

<sup>37</sup> Park, "Making Sense of the Meaning Literature," 257.

<sup>38</sup> Park et al., Trauma, Meaning, and Spirituality.

<sup>39</sup> Wayne Chappelle, "Applied Status Report," presentation to the Consortium for Health and Military Performance and Walter Reed Army Institute of Research Center for Military Psychiatry and Neuroscience Performance Psychology Summit, February 26, 2018.

 $^{\rm 40}\,\rm Litz,$  "Moral Injury and Moral Repair in War Veterans."

<sup>41</sup> Brett T. Litz et al., Adaptive Disclosure: A New Testament for Military Trauma, Loss, Moral Injury (New York: Guilford Press, 2016).

<sup>42</sup> Farnsworth et al., "The Role of Moral Emotions in Military Trauma," 249.

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