



Military Moral Injury: An Evidence-Based and Intercultural Approach to Spiritual Care

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Abstract How can spiritual care help veterans struggling with military moral injury? An evidence-based, intercultural approach to spiritual care is proposed. Evidence-based care uses research on military moral injury and religious and spiritual struggles to understand when religious and spiritual practices, beliefs, and values are helping or harming veterans. Intercultural spiritual care recognizes the complex, distinctive ways veterans' values, beliefs, coping, and spiritual practices are shaped by interacting cultural systems, especially military training and cultures. Pastoral theologian Larry Graham's (*Sacred Spaces: The E-Journal of the American Association of Pastoral Counselors* 5, 146–171, 2017) writing on moral injury and lamentation is used to develop two spiritual care strategies: sharing anguish and interrogating suffering. Spiritual care begins with lamenting the shared anguish of moral injury using intrinsically meaningful spiritual practices to help veterans compassionately accept the emotions arising from moral injury so intensely felt in their bodies. The second strategy is sharing the lament of interrogating suffering through exploring values, beliefs, and coping arising from moral injury. A literary case study of a young female veteran based on Cara Hoffman's (2014) novel *Be Safe, I Love You* illustrates this evidence-based intercultural approach to spiritual care of military moral injury.

Keywords Military moral injury · Veteran care · Religious and spiritual struggles · Spiritual orienting systems · Intercultural spiritual care · Evidence-based spiritual care · Lamentation

Introduction

How can spiritual care help veterans struggling with military moral injury? Moral stress and injuries often arise from struggles with God/the divine and from interpersonal struggles with moral and religious authorities and communities (Exline et al. 2014). The key to understanding

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such struggles lies in a veteran's particular spiritual orienting system “comprised of values, beliefs, practices, emotions, and relationships” that determine whether struggles lead to wholeness or brokenness (Pargament et al. 2016, p. 379). Emerging research on military moral injury and religious struggles in a sample of 155 veterans has demonstrated that religious and spiritual struggles fully mediate the relationship between potentially morally injurious events and anxiety as well as PTSD (Evans et al. 2017). Given the potential for spiritual care to alleviate the religious and spiritual struggles that give rise to moral injury, intercultural spiritual care within a religiously diverse military context helps those struggling with moral injury use the unique and distinctive resources of their religious and spiritual traditions, communities, and practices. Such care is evidence-based when it utilizes current research on military moral injury and religious and spiritual struggles.

In this paper, I draw upon pastoral theologian Larry Graham's work on moral injury and lamentation (2017) to describe two intercultural spiritual strategies—sharing anguish and interrogating suffering—that fully respect the unique existential orienting systems of veterans. Spiritual care begins with lamenting the shared anguish of moral injury using intrinsically meaningful spiritual practices to help veterans compassionately accept the emotions arising from moral injury so intensely felt in their bodies. Once veterans can experience their bodies and emotions as good, then pastoral caregivers can move to the second strategy of care: sharing the lament of suffering through exploring values, beliefs, and coping arising from moral injury. This co-creative process helps veterans find life-giving values, beliefs, spiritual practices, and ways of coping for collectively bearing and sharing the burdens of military moral injury. “Sharing our moral burdens helps us bear them,” as Graham (2017, p. xiii) succinctly notes. A literary case study of a young female veteran based on Cara Hoffman's (2014) novel *Be Safe, I Love You* illustrates this evidence-based intercultural approach to spiritual care of military moral injury.

Military moral injury

Military moral injury has been defined diagnostically as “the emotional, spiritual, and psychological wounds that stem from the ethical and moral challenges that warriors face in combat, especially nontraditional forms of combat, such as guerilla war in urban environments” (Drescher et al. 2011, p. 8). Military personnel deployed in war-torn countries often have to make quick decisions about using lethal force in encounters with civilians who may pose a threat. Moral anguish may arise from transgressing “deeply held moral beliefs and expectations” by causing harm to others, especially civilians; failing to prevent harm; or witnessing harm (Litz et al. 2009, p. 700).¹ For example, for some military personnel, witnessing the carnage of war by caring for the bodies of injured or dead military personnel can give rise to moral conflicts.² At the heart of military moral injury is guilt, which is a mediating factor between exposure to potentially morally injurious events and distress (Marx et al. 2010). This guilt often prevents many veterans from seeking social and spiritual support. Without such support, veterans will remain stuck in guilt, and less able to co-create more complex meanings about morally injurious events.

¹ Hodgson and Carey (2017) review evolving definitions of military moral injury, noting that in Shay's early (Shay 2002) definition the moral stressor is betrayal by those in legitimate authority.

² Marine veteran Jess Goodell (2011) describes moral injuries arising from her deployment to a military mortuary in Iraq. Her memoir has been referenced recently in a number of dissertations on war trauma and military moral injury (see, for example, Moon 2016a).

Meaning making—the functional interaction between one’s values, sense of purpose, and situational appraisal of events—is associated with lower levels of psychological distress and higher levels of well-being . . . and also partially accounts for the relation between PMIE exposure [potentially morally injurious events] and psychological distress. (Evans et al. 2017, p. 2)

The moral anguish experienced by military service members has been historically understood as a dimension of the posttraumatic stress of combat, as religious studies scholars Brock and Lettini (2012) note. Diagnostic criteria for posttraumatic stress disorder (PTSD) formulated in the 1980s included survivor guilt but focused on the fear of life threat rather than the guilt of moral transgressions. The biological sequelae of fear and terror have been researched, measured, and treated by behavioral health providers, but guilt arising from moral struggles was, until recently, considered beyond behavioral health care and more in the realm of spiritual care, as Litz et al. note (2009, p. 696). Although Jonathan Shay (1995) and others have described the ways moral struggles shape the stories of veterans, psychologists have only recently defined moral injury diagnostically, measured it empirically, and treated it in various forms of behavioral health therapy.³

Among pastoral theologians, moral injury is defined in personal, interpersonal, and collective ways as “the erosive diminishment of our souls because our moral actions and the actions of others against us sometimes have harmful outcomes” (Graham 2017, p. xi). Deeply held moral values and beliefs threatened or transgressed in moral injury are part of moral orienting systems shaped by many relational networks, as pastoral theologian and Marine Reserve chaplain Zachary Moon (2016a) notes. Family and cultural systems shape childhood values and beliefs that form a bedrock orienting system often re-energized emotionally under stress (Doehring 2015a, b), either by positive relational moral emotions such as love and compassion or by negative moral emotions that make people feel judged (particularly by God) or shunned (Haidt 2002). Depending on one’s cultural context, these childhood values and beliefs become more or less differentiated from those of one’s family of origin during adolescence and young adulthood. Each branch of the military has its own culture and instills its own values and beliefs during the intensity of basic training, when military service personnel learn to respond under high stress as a unit.⁴ Moral stress and injury may not become problematic until post-deployment or discharge when “irreconcilable dissonances between military moral orienting systems and the moral worlds of civilian life” emerge in cognitive, emotional, and relational ways (Moon 2016a, p. 3). Civilians often cannot appreciate the complex dynamics of military culture, which is why civilian spiritual caregivers need to develop military cultural competency.⁵

³ Current therapeutic approaches include adaptive disclosure (Litz et al. 2015), a six-session individual cognitive behavioral intervention; building spiritual strength, an eight-session group therapy for use in faith-based settings for military personnel suffering from military moral injury (Harris et al. 2015), and acceptance and commitment therapy (ACT) for moral injury (Nieuwsma et al. 2015).

⁴ “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” (Moon 2016a, p. 2).

⁵ Litz et al. (2015), among others, argue for the need for military cultural competency among therapists treating military moral injury and include a helpful appendix on the diversity of military missions, organizations, and relationships (pp. 169–180).

Religious and spiritual struggles

The moral questioning and anguish of moral injury is one of three types of religious and spiritual struggles measured by the Religious and Spiritual Struggles (RSS) Scale (Exline et al. 2014):

- divine struggles with a judging and distant God, anger at God;
- interpersonal struggles (fear of being judged/shunned; anger about religious hypocrisy and moral betrayal); and
- intrapsychic struggles (moral struggles, self-condemnation, feeling unforgivable, doubts about ultimate meanings).

The RSS builds upon extensive research over many decades using Kenneth Pargament's negative religious coping scale (Pargament et al. 1998). Recent research using the RSS has found that religious and spiritual struggles are frequent in many major religious orientations, including atheism (Abu-Raiya, Pargament, Krause, and Ironson 2015; Abu-Raiya et al. 2016; Desai and Pargament 2015). Research demonstrates links between religious struggles and decreased immune functioning, increased emotional distress, depression, and risk of mortality. Research also links religious struggles and growth, notably when people find meaning from struggles, use positive religious coping, and experience religious assimilation (see Abu-Raiya, Pargament, and Exline [2015] for a review of research on risks and potential for growth). Pargament et al. (2016) propose that religious and spiritual orienting systems play a key role in whether struggles lead to wholeness or brokenness.

Ample research has demonstrated how religion and spirituality can support or impede stress-related growth (Abu-Raiya et al. 2015b; Kusner and Pargament 2012; Pargament and Cummings 2010; Pargament et al. 2006; Pargament et al. 2013; Werdel et al. 2014). Recent research on moral injury and religious and spiritual struggles with a sample of 155 veterans has demonstrated that religious and spiritual struggles fully mediate the relationship between potentially morally injurious events and anxiety as well as PTSD (Evans et al. 2017). This research suggests that religious and spiritual struggles are not a symptom of moral injury; rather, they are a predictive factor in the development of anxiety, PTSD, and moral injury following exposure to potentially morally injurious events. This research, the first to link military moral injury with religious and spiritual struggles, highlights the ways that religion and spirituality may help or further harm military personnel and veterans struggling with potentially morally injurious events. Evidence of the mediating role of religious and spiritual struggles in moral injury supports the role of spiritual care in alleviating military moral injury. What is needed within the religiously diverse context of the military is intercultural spiritual care that respects the particularities of each person's orienting system by exploring intrinsically meaningful spiritual practices that mediate complex spiritual orienting systems that include, for example, beliefs in a loving and just God.⁶ Without ongoing experiences of the goodness of their bodies, creation, and a creator (for theists), veterans will have difficulty spiritually integrating their experience of moral injury in more flexible and differentiated ways—essential dimensions of life-giving spiritual integration and wholeness, as research has demonstrated (Pargament et al. 2006; Pargament et al. 2016).

This brief review of the research on moral injury and religious and spiritual struggles demonstrates the need for an evidence-based approach to spiritual care of military moral injury. Recent movements in health care chaplaincy are calling for chaplain competency in research

⁶ See, for example, Graham's (2017) discussion of God as moral conundrum (pp. 43–54).

literacy⁷ but are often short-sighted due to measuring the chaplain's role solely in terms of health care contexts and outcomes instead of within faith traditions and their particular goals for pastoral or spiritual care. Relying only on psychological research on military moral injury without drawing upon religious and theological studies, especially pastoral theology, runs the risk of medicalizing moral injury, as Graham notes (2017, pp. 15–16). Theologically educated care providers such as chaplains, pastoral counselors, and religious leaders have the expertise to explore the religious and spiritual struggles that are often part of military moral injury (see, for example, Brock and Lettini 2012; Carey et al. 2016; Graham 2017; Hodgson and Carey 2017; Kinghorn 2012; Moon 2015, 2016a, b; Stallinga 2013). Spiritual care of military moral injury needs to bring evidence from research on military moral injury and religious struggles into an intercultural approach that is exquisitely respectful of the particularities of a veteran's unique religious world and spiritual orienting system.⁸ An intercultural approach to spiritual care takes into account the multilayered hybrid spiritual and religious identities common among people today, even among members of the same religious community. This intercultural approach recognizes the unique contextual ways that each service member and veteran may be living out spiritual orienting systems—values, beliefs, and practices—emotionally energized by the anger, guilt, and shame of military moral injury. As Graham (2013) notes,

Pastors are in a unique position to curiously inquire about the moral weights carried by veterans and their families and to fashion a conversation that may help the veteran bear the moral weight of guilt and shame by sharing it with an emotionally available conversation partner. (p. 71)

Given the intercultural differences between civilian and military life, civilian spiritual caregivers will need to become culturally educated about each veteran they encounter, especially the particular ways veterans internalize their experience of military cultures during basic training and throughout their military service (Moon 2016a). Civilian caregivers might not be able to imagine, for example, the intense relational bonds formed in military service.⁹ Some service members differentiate from their initial experience of their military culture by becoming an *unconventional warrior*, a term used by pastoral theologian Ryan LaMothe (2017) for service members who, “after encountering the harsh realities of military life, the horrors and chaos of combat, and the machinations of political leaders, . . . enter a process of disillusionment and mourning” (p. 834). Whereas some might reject the identity of warrior, others might become unconventional warriors who, while “remaining attached to the warrior ethos, [are] critical toward a government that uses its military to further the aims of political and economic elites” (p. 820). Understanding the unique ways a veteran's moral orienting system is shaped by his or her particular military training, service, and relationships is an important aspect of intercultural spiritual care.¹⁰ The complexities of intercultural spiritual care are compounded by the ways spiritual caregivers have to try to step into the multiple worlds of veterans—the before-basic training world, the military world

⁷ See Research, HealthCare Chaplaincy Network, <https://www.healthcarechaplaincy.org/research.html>.

⁸ Pastoral theologian Emmanuel Lartey (2003) first proposed the term *intercultural pastoral care* “to capture the complex nature of the interaction between people who have been influenced by different cultures, social contexts and origins, and who themselves are enigmatic composites of various strands of ethnicity, race, geography, culture and socio-economic setting” (p. 13).

⁹ “Despite widespread recognition of the strong attachment bonds that develop between service members during war. . . , grief associated with the death of a friend in combat has been surprisingly overlooked in the study of trauma” (Steenkamp et al. 2011, p. 99).

¹⁰ See, for example, Yandell's (2018) and Hosein's (2018) reflections on their moral injuries from military service.

generated by basic training, the unconventional warrior world arising from moral struggles, and then the re-entry into civilian life world.

Depending on their education and training, pastoral and spiritual care practitioners may be more or less able to combine intercultural and evidence-based approaches in providing spiritual care to veterans with military moral injury. Pastoral caregivers and religious leaders educated exclusively within the beliefs and congregations of their faith traditions will likely use an historical or tradition-specific approach to pastoral care oriented around their tradition's religious goals, sacred texts, doctrines, and religious practices (see, for example, Geringer and Wiener 2018, Hosein 2018, MacDonald 2017, and Wiener and Hirschmann 2014). Many seminaries now teach intercultural approaches that pay attention to how family, culture, and political systems shape religion and spirituality (for example, the ways religion can reinforce oppression—in colonialism and neoliberalism—or confront injustice—in liberation theologies and social justice movements). Contextual education experiences such as clinical pastoral education (CPE) form chaplains and religious leaders who are adept at using intercultural approaches in multifaith contexts.

Those who seek ordination or endorsement as religious leaders or chaplains will often need to use a tradition-specific approach to pastoral and spiritual care within their own faith tradition and then shift to an intercultural approach in multifaith contexts. Chaplains working in research hospitals will often be required to use emerging evidence-based approaches to spiritual care. Chaplains and religious leaders working with veterans in military, health care, and veteran administrative contexts will need to be competent in both evidence-based and intercultural spiritual care. What would such care look like? How can such care help veterans struggling with military moral injury? I will begin to answer these questions through a case study in order to illustrate the ways that the intercultural dynamics of military moral injury are expressed within a particular veteran's story.

Intercultural spiritual care always begins with the stories of care seekers. My description of intercultural evidence-based care begins, then, with a lived experience of military moral injury artistically portrayed in Hoffman's (2014) novel, *Be Safe I Love You*. This literary work depicts the transition from military to civilian life of Lauren Clay, a recently discharged, young, White female Army sergeant struggling with traumatic memories and moral injury. Hoffman writes as a civilian who extensively researched accounts of women in combat in order to realistically portray a woman's experience of military moral injury. I found her account credible as the basis for a case study in which *religion is both helpful and harmful* in the aftermath of military moral injury.¹¹ After I summarize the story of this veteran's first week at home, I use her story to imagine strategies for evidence-based intercultural care that utilize lament, drawing upon the work of Graham (2017).

Be Safe I Love You: A literary case study

When Lauren Clay graduated from high school, she could have accepted a music scholarship to study vocal performance. Instead, she enlisted in the Army to prevent a looming foreclosure on the home where she, her younger brother Danny, and their depressed, unemployed father lived in upstate New York. Throughout her deployment, Danny's letters to her always closed with the words, "Be safe I love you," conveying the bonds of love and survival fused through

¹¹ Although literary critics have paid attention to the ways that Hoffman portrays a woman veteran's return home (Goodman 2017; Hosey and Hoffman 2014), none have commented on the role of religion in this story.

coping with their father's psychological struggles and their mother's departure many years ago. At first while she was deployed, Lauren worried about Danny's safety. Over time, she began to emotionally detach, a strategy in her "new war economy, the new austerity plan she instituted in her soul" (Hoffman 2014, p. 12).

The novel opens on Christmas Day when Lauren returns home unannounced, having been honorably discharged after her tour of duty as a sergeant in Iraq at a forward operating base (FOB) outside of an oil field. The novel tells the story of her escalating stress in her first week stateside as she struggles with morally haunting memories and nightmares about a traumatic event that she has trouble fully recalling. Readers are given narrative fragments here and there of a ten-minute episode when, as Sergeant Clay, Lauren was in charge on sentry duty outside the FOB with her closest Army buddy Daryl. The full details of what happened are not disclosed until the end of the novel, when Lauren puts the fragmented trauma memories together and faces the reality that Daryl was killed under her watch. An Army psychiatrist who had initially determined Lauren to be a model soldier, based solely on the online Post Deployment Health Assessment forms Lauren filled out, realizes belatedly that something Lauren had reported was a red flag. Lauren had shared that she wanted to "reconnect" with Daryl, implying that she was thinking of killing herself in order to reunite with her deceased friend. Throughout the novel, the psychiatrist repeatedly tries to contact Lauren, but to no avail; Lauren refuses to return her calls.

In the week following her return home, Lauren struggles to adjust to civilian life, often feeling angry with family and friends who now seem so different from her. She misses Daryl and thinks of him often. They had become close when they realized they had shared values and were different from the other soldiers in their unit in terms of not complaining about the hardships of deployment, seeking out educational courses to supplement their military training, and reading about politics and culture. Daryl and she became critical observers of Army culture, questioning many of its ideals and seeing the oil field they were protecting as the reason for their military presence.

Lauren's disillusionment both with military and civilian life surfaces repeatedly in her first week home, especially in her responses to questions and comments about her military service. When a friend asks whether she had saved anybody's life, she replies sarcastically that she "saved" people from the "inconvenience of taking public transportation" while also saving enough money to cover her brother's college tuition (Hoffman 2014, p. 71).¹² She scorns her military medal as a fake, cheap trinket (p. 35). Her hometown feels like a movie set of facades viewed through a rifle scope that removes "surprise or empathy" (p. 74). She suspects people of watching her for signs that her training in using lethal force will make her do something wrong (p. 73).

Lauren has a hunch that Troy, her music mentor and organist at her church who returned from military service in 1990 to study music, may understand her anger, guilt, and cynicism. She senses his "reconciled sorrow. .. self-mocking abnegation [and the] weight of [his] being alive, being a victim of the killing [he might have] done" (p. 60). Though tempted to talk with him about their military experiences, she fears that a gulf will open between them or that his traumatic memories are too terrible to mourn together (p. 60).

¹² As literary critic Goodman (2017) notes, "For Hoffman, the end of war and the exit from the field of war mean the extension of the war front into every aspect of civilian life. The war is called upon to heal the economic violence that violates, damages, and disbands the family" (p. 34).

Lauren can no longer find solace in the classical sacred music she once sung. She visits the church where she had spent every afternoon from the age of 14 until she joined the Army practicing her singing in the resonant space surrounded by stained glass windows she loved (p. 52). Now, she cynically sees the stations of the cross as yet another war story. She is reminded of the hypocrisy of soldiers in her unit who became religious, demanding battlefield baptisms in order to secure God's reward through forgiveness and absolution for unforgivable acts of war (pp. 51–52). She now likens the mystery of religion to the senselessness of war: "that impenetrable false logic was necessary to make people do stupid things" (p. 52). The sanctuary's smells and sights that once combined with music to instill a sense of mystery now represent "fixed melancholic nostalgia, hopeful birthday cries of 'make a wish' and the faint odor of wreckage" (p. 53). A few days after Christmas, Lauren comes upon a children's choir singing "O Holy Night" at the mall. She remembers the physical experience of singing the solo as she hears the girl whose voice is "a golden bell" beckoning Lauren out of her guilt-filled memories (p. 149). As soon as Lauren feels a yearning to sing, her vocal chords constrict and close (p. 63).

The week culminates in her making a kind of sacred pilgrimage to Daryl's home in Canada. Pretending to pack for a car trip to visit their mother, she takes her brother Danny into the far north of Canada, to an old hunting lodge near the home of Daryl's wife. The arctic landscape has a breath-taking beauty that reminds Lauren of the minimalist sacred music of Arvo Pärt that she used to sing. Struck by such beauty, she momentarily transcends her body, with its "instinctual chemical flood of being [a] hunted, hunting animal," and remembers the "grounded yet soaring feeling that comes from using your body to sing" (p. 201). This self-transcendence reveals to her how much military experience has changed her world—like the shattering of a mirror (p. 207). In turn, the image of a broken mirror reminds her of a childhood story she and Danny loved—"The Snow Queen"—in which a piece from the devil's distorting mirror turns everything bad, then lodges in a boy's eye until his sister rescues him and cries over him, washing the fragment out (pp. 127–129).

Lauren's journey north is her own way of reconnecting with Daryl and rescuing Danny from his continual escapism into social media. In the bitter cold of the abandoned hunting lodge, she initiates Danny into her own version of boot camp with exercise drills and survivalist training but without military ideals. She drives him to look at an enormous oil rig rising from the floor of the ocean—a symbol of the god of capitalism and the war she fought: "busily sucking the past up from the ground and melting the future, burning [peoples'] lives before they could live them" (p. 251).

In the complete darkness and freezing cold of the night, Lauren finds her voice and begins to sing, at Danny's anxious urging, a song about homecoming: "My Heart's in the Highlands, Wherever I Go." To Danny, her voice conveys a reality of goodness "filled with friendship and older than memories," and now he realizes their common existential bond in "some code that was twisted beyond repair. .. a new way of being [which] even if it killed them. .. was impossibly, imponderably right" (pp. 254–255).

Lauren drives from the hunting lodge to Daryl's home to meet his wife Camille. When Lauren asks after Daryl, Camille explodes with anger at Lauren's willful denial of her husband's death. This is the moment when Lauren is forced to face the traumatic memory of Daryl's death in its entirety. Now she fully recalls how their encounter with the car speeding toward them at the FOB ended in her killing a driver trying to get medical care for his pregnant wife in labor and how the pregnant woman grabbed Daryl's weapon and killed him as he reached down to help her (pp. 259–262). The suicidal nature of this pilgrimage to pay for

Daryl's death is now explicit as a plan to join Daryl beyond the grave (p. 269). After leaving Danny at a hotel in a nearby town, Lauren heads back to the oil rig to lie down in the snow and freeze to death. Danny finds her just as the sun rises, and she is rescued.

Lamenting military moral injury

Let us imagine that we are chaplains on a behavioral health team offering spiritual care to Lauren during her subsequent hospitalization. We will be doing evidenced-based spiritual care by employing research on military moral injury and religious struggles. We will be drawing upon our theological education and training in intercultural spiritual care as we prepare to step into Lauren's moral orienting system with its particular values, beliefs, and ways of coping and connecting with the sacred, shaped by family, religious, and military cultures and now reshaped by moral injury amidst her return to civilian life. Where would such care begin?

Intercultural, evidence-based care of military moral injury needs to begin with spiritual practices that foster self-compassion. Veterans experiencing military moral injury will often have a hard time revisiting memories or exploring meanings until they can tolerate the intense emotions—typically anger and guilt—at the heart of military moral injury.¹³ Mindfulness practices and yoga have been used extensively with both trauma survivors and veterans to help them experience and not dissociate from or avoid emotions arising from painful memories (see, for example, van der Kolk 2014). Liebert (2018) details the ways specific practices can inform spiritual care to veterans experiencing military moral injury.

As research on religious struggles (reviewed above) suggests, explicitly religious practices may not be initially helpful for veterans like Lauren who are struggling with anger at God and their religious communities and are experiencing religious doubts, especially when their moral orienting systems have been radically reconstructed by military training (Moon 2016a) and moral injury. In Lauren's case, her religious struggles with God, along with her interpersonal religious and moral struggles, have generated a life-limiting, potentially fatal spiritual orientation to her moral injury that is rigid, inflexible, and cut off from God's benevolence and the goodness of humanity and creation. Life-giving aspects of her formative religious experiences are no longer resources. This toxic religious orientation to her moral injury is similar to what suicidologist Shneidman (1993, 1996) identifies as tunnel vision created by a suicidal constriction of the mind. Ryan Hall (2017) found evidence for this tunnel vision in her research on participants' stories of how positive religious resources became unavailable in the final stages of their near-lethal suicide attempts. For Lauren, religious and spiritual practices and meanings that once had fostered wholeness became harmful when her tunnel vision enlisted religious meanings in support of suicide as a way of "coping" with moral injury.

How can spiritual practices be reconstructed when religious and spiritual struggles invalidate them, as happened to Lauren? One possible route through such struggles toward wholeness is to give voice to anger, protest, and disillusionment through lamentation. Graham's research on the impact of war on families convinced him that lamentation is "a

¹³ Bessel van der Kolk (2014), a preeminent trauma researcher and psychiatrist, began his research and clinical practice in the U.S. Department of Veterans Affairs with veterans experiencing both PTSD and military moral injury. Research with this population demonstrates the need for establishing a sense of safety and emotional containment at the outset of care. In her seminal work *Trauma and Recovery* (1992), Judith Herman's three-part process of recovery begins with survivors experiencing safety before they can explore memories without re-traumatization.

strong personal and communal spiritual and ritual resource for reclaiming lives from war, including healing moral injury” (personal communication, July 26, 2017). Graham (2017) identifies “three interacting poles of lamentation—sharing anguish, interrogating causes, and reinvesting hope” (p. 139)—that are similar to Herman’s (1992) three phases—establishing safety, mourning memories and exploring meanings, and reconnecting with ordinary goodness. I will now apply Graham’s spiritual care strategies in imagining intercultural and evidence-based care for Lauren.

The lament of sharing anguish

Sharing anguish must begin in veterans’ bodies with spiritual practices that foster compassion while allowing their bodies to experience the angry grief arising from spiritual orienting systems broken by war, especially for “unconventional warriors” such as Lauren. Using an intercultural approach, chaplains and religious leaders can help veterans explore and possibly reclaim spiritual practices that lovingly hold the emotional energy of guilt, anger, and shame. An intercultural spiritual caregiver, for example, would be able to appreciate Lauren’s ability to sing a lament of shared anguish in the song “My Heart’s in the Highlands” that she sang to Danny in the arctic night. Knowing how church choral music used to connect Lauren with sacred beauty and a loving God, a spiritual caregiver might suggest that she and Lauren listen together in a meditative way to Pärt’s setting of “My Heart’s in the Highlands”¹⁴ and pay attention to what it feels like in Lauren’s body. Lauren could then focus compassionately on how her body responds to this music. In a welcoming prayer (Vennard 2013) led by her spiritual caregiver, Lauren could invite this constriction and its related emotions to communicate its bodily wisdom to her. If these emotions involve the anger, guilt, and shame of moral injury, then she would try listening again and allowing the lament of the music to hold her feelings with compassion and so hold the Lauren whose body witnesses “the suffering that remains . . . the ways in which death pervades life” (Rambo 2010, p. 15).

Given Lauren’s artistic sensibilities, she may find poetry a meaningful way to share anguish. Fawson (2016, 2018) demonstrates how the witness poetry of veterans “can help name and lament the grievous losses of moral injury in ways no other genre of literature can” (in press). She describes and illustrates how spiritual caregivers and religious leaders can “facilitate lamentation in processing moral injury in the context of small groups of military service members, veterans and/or their families” (in press) by studying poems by veterans who have experienced military moral injury. Fawson uses poetic studies to explore how Walt Whitman’s poetry has “wrestled with experience, ideas, history, the speaker’s own psychic drama in a way that transforms it, and utters the complex and varying emotional responses we have” (in press). Fawson suggests ways that a spiritual caregiver could share the anguish of war through reading Whitman’s poetry. Musical settings of Whitman’s poems by Ned Rorem and Ralph Vaughan Williams, for example, could be especially evocative for a singer like Lauren.

¹⁴ Pärt’s unique musical style seems particularly conducive for the lament of sharing anguish. Unlike traditional classical music, Pärt’s music does not move from tension to resolution. It has been likened to contemplative prayer: “meditative, repetitive, filled with silences, using simple combinations of notes. The effect is a feeling of being suspended in time” (Heffern 2002, p. 27). Many listeners experience a physiological sense of comfort from his music. Musicologist Robert Sholl (2012) wonders, could “the spirituality of Pärt’s music can be located in the body itself? Through its delicacy, and its sensitivity to the preciousness and freshness of organized sound itself, his music could be understood and experienced as embodied” (p. 154).

In fact, Vaughan Williams himself could be described as an unconventional warrior. He enlisted in the British army at the age of 42 during the First World War and was part of an ambulance team that brought the wounded out of the Third Battle of Ypres at Flanders, which went on for months, with one and a quarter million British, French, and German soldiers killed and many wounded. He wrote *Dona Nobis Pacem: Sancta Civitas* in 1936 as a way of sharing the anguish of lamentation for the suffering of the First World War amidst the threatening atmosphere of further war. The movement “Reconciliation” is like a lullaby sung by a soprano using a text from Whitman:

Word over all, beautiful as the sky,
 Beautiful that war and all its deeds of carnage must in time be utterly lost,
 That the hands of the sisters Death and Night incessantly softly wash again
 and ever again, this soiled world;
 For my enemy is dead, a man divine as myself is dead,
 I look where he lies white-faced and still in the coffin—I draw near,
 Bend down and touch lightly with my lips the white face in the coffin. (Whitman 1855,
 p. 521)

Lauren is an artist who knows what it is like to perform beautiful sacred music. Her suicidal mission was going to be a way to experience fragments of her military moral injury in the midst of the beauty of the arctic, reminding her of the music of Pärt. In a spiritual care context, she might well experience shared anguish in the artistic witness of Whitman and Vaughan Williams. The poetry of the music she listens to and sings might open ways for her to use art to share the anguish of lament.

The lament of interrogating causes

If Lauren is able to use music and poetry to experience the goodness of shared lament in her body and within trusted relationships, then her embodied, relational experience of compassion could reveal the role of guilt or anger in her life-limiting spiritual orientation to her moral injury. For example, Lauren’s embedded theology of feeling solely responsible for her brother’s survival has likely been shaped by intersecting sexism and classism (Ramsay 2013) in ways that have now cut her off from the interconnected responsibility shared with God and others in her relational webs of life. It is possible that Lauren’s socialization as a girl and young woman in a vulnerable economic or precarious economic situation shaped the drastic ways she tries to take care of her younger brother. Parsing out the complex interacting aspects of a person’s social identity is difficult, and research is not helpful here. Research on military moral injury has not yet fully taken into account the role of gender, let alone social class, sexual orientation, and other formative aspects of social identity.¹⁵ Exploring the ways Lauren’s values, beliefs, and ways of coping have been shaped by her gender and social class would be part of intercultural spiritual care, especially the ways she experiences her female

¹⁵ Although there is research on gender and military sexual trauma, the relationship of gender to military moral stress has been understudied except in recent doctoral dissertations such as Moon’s (2016a). Other publications have missed the opportunity to explore this issue. For instance, Gray et al.’s (2012) initial testing of a treatment approach to military moral injury called “adaptive disclosure” makes no mention of gender differences, though it included 2 female and 40 male Marine Corps and Navy personnel. Litz et al.’s (2015) book *Adaptive Disclosure: A New Treatment for Military Trauma, Loss, and Moral Injury* uses male and female pronouns when referring to service members but has no case studies about women.

body as she uses spiritual practices to stay connected with a loving God when she experiences anger, guilt, and grief.

Lauren's religious doubts and struggles have been a private lament that needs to be shared through spiritual care that helps her and others "question, complain, protest, and assess responsibility for what happened . . . [so that] we devise ways to name and frame what happened so that we might bear the costs and heal from the consequences of the wounds to our souls and communities" (Graham 2017, p. 142). Lauren's unconventional warriorism expresses her anger about the capitalistic nature of militarism and her disillusionment with naive patriotism. Intercultural spiritual caregivers will need to be theologically empathic to the narrative truth of Lauren's angry interrogation of religious symbols such as the stations of the cross and the crucified Christ. Music from Holy Week commemorating the gospel stories of the Passion narratives could help her theologically interrogate her suffering. The gospel narratives recounted on Maundy Thursday of Jesus tenderly washing the feet of his disciples even though he knew the ways they would betray him and experience their own moral injuries could provide a kind of meditation for Lauren in which she imagines Jesus' compassionate presence with her throughout her military service, homecoming, and suicide attempt. Commentaries on the Passion narratives (e.g., Borg and Crossan 2008)¹⁶ might help her experience the crucified Jesus used by Roman authorities for military purposes. She might experience a sense of reconciliation with Jesus and God as "our co-creative partner in healing, sustaining, and guiding the shaken, shattered, exploded, bombed, bulleted, and drowning human community" (Graham 2017, p. 144). Reconciliation may, in turn, lead to ritual ways of experiencing forgiveness. Meditative use of religious images, music, and poetry could spiritually engage Lauren imaginatively with the dead in ways similar to counseling strategies for military moral injury described by Litz et al. (2015) and spiritual care strategies elaborated in Fawson (2018), Geringer and Wiener (2018), and Moon (2017).

Reinvesting hope

In an intercultural spiritual care encounter, Lauren would likely experience hope when the beauty of music and poetry or other life-giving spiritual resources that come to light help her share anguish about and meanings of suffering. The hope glimpsed in moments of beauty on her journey north could now point to life and not death.

As these strategies for intercultural spiritual care suggest, spiritual care of military moral injury is distinct from behavioral health care in its engendering hope through

- the use of spiritual practices to somatically foster lament, self-compassion, and the capacity for relational connection in ways that reveal life-limiting spiritual orienting systems energized by the guilt, anger, and grief of military moral injury and
- the co-creating of intentional values, beliefs, and ways of coping that foster spiritual integration and wholeness (Doehring 2015b).

Lauren seems particularly ready for spiritual care that helps her use religious practices and meanings to share anguish, interrogate suffering, and reinvest hope. At the conclusion of the

¹⁶ A recently published New Testament biblical study uses moral injury as a hermeneutical lens for considering the construction of Peter as a character in the Gospels of Matthew and John (Carter 2017).

novel, Lauren is recovering in the hospital and constructing her own stations of the cross out of the vivid sequence of events in her traumatic memory, peopled by

the still bodies and the falling bodies; the mother the son and the weight of the never born all pulling, blood pooling, toward the earth where Lauren stood armored, the color of desert dust, holding tight the same kind of instrument that had cut them down. The cathedral in her head shone with this iconography. . . . What sacred song could pass through her lips now? (Hoffman 2014, p. 286)

In this imagery and her confession to her music mentor Troy that she did terrible things, we sense the movement through lament made possible by spiritual practices and meanings that Troy, as a religiously committed unconventional warrior, along with intercultural spiritual caregivers could facilitate.

If Lauren is able to use intrinsically meaningful spiritual practices to sustain lamentation and interrogate her suffering, she is more likely to reconnect with her childhood experience of God and her Roman Catholic religious tradition, now with a second naïveté (Ricouer 1967).¹⁷ She may now be able to experience the ordinary goodness of life through her childhood Roman Catholic sacraments. Religious rituals offer a sensory, communal way of tangibly experiencing transcendence and goodness, especially within the beauty of sacred spaces and music.

Conclusion

The poignant literary case study based on Hoffman's (2014) novel illustrates how a chaplain or religious leader could combine evidence-based and intercultural spiritual care to understand the unique religious and spiritual features of a veteran's spiritual orienting system energized by the angry guilt of military moral injury. The chaplain's and religious leader's own process of spiritual integration will help them stand with veterans in the shared anguish of their lamentation. Chaplains and religious leaders may become unconventional representatives of their faith tradition if they go through their own process of what Carlin (2014) calls 'religious mourning' that parallels, as LaMothe (2017) notes, the process of becoming an unconventional warrior. Indeed, the religious mourning of religious leaders and chaplains may bring them face to face with their religious, spiritual, and moral struggles. Like the veterans to whom they minister, they may need to find their own spiritual and religious practices to share the anguish of lament while seeking partners and communities for interrogating suffering.

The chaplain's and religious leader's theological education and intercultural training and personal journeys toward spiritual wholeness will help them explore with veterans how intrinsically meaningful beliefs, values, and practices can bear the weight of their moral injury in a lifelong process of spiritual integration. Providing spiritual care to those who are morally wounded is challenging, as research and case studies tell us. Chaplains and religious leaders have a unique role to play in the search for spiritual practices and meanings that can help them collectively share with veterans the burdens of military moral injury through lament and hope.

¹⁷ Religious struggles lead many people to reject their childhood religious faith and traditions and become spiritual seekers who turn to nontheistic spiritual practices such as Buddhism that do not engage childhood experiences of a punitive God. Although for many this can be a path to spiritual wholeness, for Lauren this would mean leaving behind the sacred religious music at the core of her childhood experiences of beauty and holiness.

References

- Abu-Raiya, H., Pargament, K., & Exline, J. J. (2015a). Understanding and addressing religious and spiritual struggles in health care. *Health & Social Work*, 40(4), 126–134. <https://doi.org/10.1093/hsw/hlv055>.
- Abu-Raiya, H., Pargament, K., & Krause, N. (2015b). Religion as problem, religion as solution: Religious buffers of the links between religious/spiritual struggles and well-being/mental health. *Quality of Life Research*, 25(5), 1265–1274. <https://doi.org/10.1007/s11136-015-1163-8>.
- Abu-Raiya, H., Pargament, K., Krause, N., & Ironson, G. (2015c). Robust links between religious/spiritual struggles, psychological distress, and well-being in a national sample of American adults. *American Journal of Orthopsychiatry*, 85(6), 565–575. <https://doi.org/10.1037/ort0000084>.
- Abu-Raiya, H., Pargament, K., Weissberger, A., & Exline, J. (2016). An empirical examination of religious/spiritual struggle among Israeli Jews. *International Journal for the Psychology of Religion*, 26(1), 61–79. <https://doi.org/10.1080/10508619.2014.1003519>.
- Borg, M. J., & Crossan, J. D. (2008). *The last week: What the gospels really teach about Jesus' final days in Jerusalem*. London: SPCK.
- Brock, R. N., & Lettini, G. (2012). *Soul repair: Recovering from moral injury after war*. Boston: Beacon Press.
- Carey, L. B., Hodgson, T. J., Krikheli, L., Soh, R. Y., Armour, A.-R., Singh, T. K., & Impiombato, C. G. (2016). Moral injury, spiritual care and the role of chaplains: An exploratory scoping review of literature and resources. *Journal of Religion and Health*, 55(4), 1218–1245. <https://doi.org/10.1007/s10943-016-0231-x>.
- Carlin, N. (2014). *Religious mourning: Reversals and restorations in psychological portraits of religious leaders*. Eugene: Wipf & Stock.
- Carter, W. (2017). Peter and Judas: Moral injury and repair. In J. MacDonald (Ed.), *Exploring moral injury in sacred texts* (pp. 151–168). Philadelphia: Jessica Kingsley.
- Desai, K. M., & Pargament, K. (2015). Predictors of growth and decline following spiritual struggles. *International Journal for the Psychology of Religion*, 25(1), 42–56. <https://doi.org/10.1080/10508619.2013.847697>.
- Doehring, C. (2015a). *The practice of pastoral care: A postmodern approach (rev. and expanded ed.)*. Louisville: Westminster John Knox.
- Doehring, C. (2015b). Resilience as the relational ability to spiritually integrate moral stress. *Pastoral Psychology*, 64(5), 635–649. <https://doi.org/10.1007/s11089-015-0643-7>.
- Drescher, K. D., Foy, D. W., Kelly, C., Leshner, A., Schutz, K., & Litz, B. (2011). An exploration of the usefulness of the construct of moral injury in war veterans. *Traumatology*, 17(8), 8–13. <https://doi.org/10.1177/1534765610395615>.
- Evans, W. R., Stanley, M. A., Barrera, T. L., Exline, J. J., Pargament, K., & Teng, E. J. (2017). Morally injurious events and psychological distress among Veterans: Examining the mediating role of religious and spiritual struggles. *Psychological Trauma*. <https://doi.org/10.1037/tra0000347>.
- Exline, J. J., Pargament, K., Grubbs, J. B., & Yali, A. M. (2014). The Religious and Spiritual Struggles Scale: Development and initial validation. *Psychology of Religion and Spirituality*, 6(3), 208–222. <https://doi.org/10.1037/a0036465.supp>.
- Fawson, S. (2016). *The contemporary elegy and the poetics of grief: Sustaining lamentation. Presentation at the 2016*. San Antonio: American Academy of Religion.
- Fawson, S. (2018). Sustaining lamentation for military moral injury: Witness poetry and naming the traces of extremity. *Pastoral Psychology*.
- Geringer, K. S., & Wiener, N. H. (2018). Insights into moral injury and soul repair from classical Jewish texts. *Pastoral Psychology*.
- Goodell, J. (2011). *Shade it black: Death and after in Iraq*. Philadelphia: Casemate Publishers.
- Goodman, R. T. (2017). *Gender for the warfare state: Literature of women in combat*. New York: Routledge.
- Graham, L. K. (2013). Exploring forgiveness of veteran guilt through collaborative pastoral conversation. *Sacred Spaces: The E-Journal of the American Association of Pastoral Counselors*, 5, 146–171.
- Graham, L. K. (2017). *Moral injury: Restoring wounded souls*. Nashville: Abingdon.
- Gray, M. J., Schorr, Y., Nash, W., Lebowitz, L., Amidon, A., Lansing, A., et al. (2012). Adaptive disclosure: An open trial of a novel exposure-based intervention for service members with combat-related psychological stress injuries. *Behavior Therapy*, 43(2), 407–415. <https://doi.org/10.1016/j.beth.2011.09.001>.
- Haidt, J. (2002). The moral emotions. In R. J. Davidson, K. R. Scherer, & H. H. Goldsmith (Eds.), *Handbook of affective sciences* (pp. 852–870). New York: Oxford University Press.
- Hall, E. R. (2017). “Maybe Jesus was suicidal too”: A qualitative inquiry into religion and spirituality in suicide attempts. (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses database.
- Harris, J. I., Park, C. L., Currier, J. M., Usset, T. J., & Voecks, C. D. (2015). Moral injury and psycho-spiritual development: Considering the developmental context. *Spirituality in Clinical Practice*, 2(4), 256–266. <https://doi.org/10.1037/scp0000045>.

- Heffern, R. (2002). Spirit in sound: New sacred music. *National Catholic Reporter*, 39(7), 25–29.
- Herman, J. (1992). *Trauma and recovery*. New York: Basic Books.
- Hodgson, T. J., & Carey, L. B. (2017). Moral injury and definitional clarity: Betrayal, spirituality and the role of chaplains. *Journal of Religion and Health*, 56(4), 1212–1228. <https://doi.org/10.1007/s10943-017-0407-z>.
- Hoffman, C. (2014). *Be safe I love you*. Simon & Schuster: New York.
- Hosein, S. (2018). Muslims in the U.S. military: Eroding rights and moral injury. *Pastoral Psychology*.
- Hosey, S., & Hoffman, C. (2014). “Hiding in plain sight”: An interview with Cara Hoffman. *Feminist Teacher*, 24(1), 32–42.
- Kinghorn, W. (2012). Combat trauma and moral fragmentation: A theological account of moral injury. *Journal of the Society of Christian Ethics*, 32(2), 57–74.
- van der Kolk, B. A. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York: Viking.
- Kusner, K. G., & Pargament, K. (2012). Shaken to the core: Understanding and addressing the spiritual dimension of trauma. In R. A. McMackin, E. Newman, J. M. Fogler, & T. M. Keane (Eds.), *Trauma therapy in context: The science and craft of evidence-based practice* (pp. 211–230). Washington, DC: American Psychological Association.
- LaMothe, R. (2017). Men, warriorism, and mourning: The development of unconventional warriors. *Pastoral Psychology*, 66(6), 819–836. <https://doi.org/10.1007/s11089-017-0756-2>.
- Lartey, E. Y. (2003). *In living color: An intercultural approach to pastoral care and counseling* (2nd ed.). London: Jessica Kingsley.
- Liebert, E. (2018). Accessible spiritual practices to aid in recovery from moral injury. *Pastoral Psychology*.
- Litz, B., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009). Moral injury and moral repair in war veterans: A preliminary model and intervention strategy. *Clinical Psychological Review*, 29(8), 695–706. <https://doi.org/10.1016/j.cpr.2009.07.003>.
- Litz, B. T., Lebowitz, L., Gray, M. J., & Nash, W. P. (2015). Adaptive disclosure: A new treatment for military trauma, loss. In *and moral injury*. New York: Guilford.
- MacDonald, J. (2017). *Exploring moral injury in sacred texts*. Philadelphia: Jessica Kingsley.
- Marx, B. P., Foley, K. M., Feinstein, B. A., Wolf, E. J., Kaloupek, D. G., & Keane, T. M. (2010). Combat-related guilt mediates the relations between exposure to combat-related abusive violence and psychiatric diagnoses. *Depression and Anxiety*, 27(3), 287–293. <https://doi.org/10.1002/da.2065>.
- Moon, Z. (2015). Coming home: Military service, reintegration, and the role of the church. In St. Louis: Chalice Press.
- Moon, Z. (2016a). *(Re)turning warriors: A practical theology of military moral stress* (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses database. (UMI No. 10133601).
- Moon, Z. (2016b). Pastoral care and counseling with military families. *Journal of Pastoral Care & Counseling*, 70(2), 128–135. <https://doi.org/10.1177/1542305016633663>.
- Moon, Z. (2017). “Turn now, my vindication is at stake”: Military moral injury and communities of faith. *Pastoral Psychology*. <https://doi.org/10.1007/s11089-017-0795-8>.
- Nieuwsma, J., Walser, R., Farnsworth, J., Drescher, K., Meador, K., & Nash, W. (2015). Possibilities within acceptance and commitment therapy for approaching moral injury. *Current Psychiatry Reviews*, 11, 193–206. <https://doi.org/10.2174/1573400511666150629105234>.
- Pargament, K., & Cummings, J. (2010). Anchored by faith: Religion as a resilience factor. In J. W. Reich, A. J. Zautra, & J. S. Hall (Eds.), *Handbook of adult resilience* (pp. 193–210). New York: Guilford Press.
- Pargament, K., Smith, B. W., Koenig, H. G., & Perez, L. (1998). Patterns of positive and negative religious coping with major life stressors. *Journal for the Scientific Study of Religion*, 37(4), 710–724. <https://doi.org/10.2307/138815>.
- Pargament, K., Desai, K. M., & McConnell, K. M. (2006). Spirituality: A pathway to posttraumatic growth or decline? In L. G. Calhoun & R. G. Tedeschi (Eds.), *Handbook of posttraumatic growth: Research and practice* (pp. 121–135). Mahwah: Erlbaum.
- Pargament, K., Mahoney, A., Exline, J., Jones Jr., J., & Shafranske, E. (2013). Envisioning an integrative paradigm for the psychology of religion and spirituality: An introduction to the *APA Handbook of Psychology, Religion and Spirituality*. In K. Pargament, A. Mahoney, J. Exline, J. Jones Jr., & E. Shafranske (Eds.), *APA handbook of psychology, religion and spirituality* (Vol. 1, pp. 3–19). Washington, DC: American Psychological Association.
- Pargament, K., Wong, S., & Exline, J. (2016). Wholeness and holiness: The spiritual dimension of eudaimonics. In J. Vittersø (Ed.), *The handbook of eudaimonic wellbeing* (pp. 379–394). Switzerland: Springer International.
- Rambo, S. (2010). *Spirit and trauma: A theology of remaining*. Louisville: Westminster John Knox Press.
- Ramsay, N. J. (2013). Intersectionality: A model for addressing the complexity of oppression and privilege. *Pastoral Psychology*, 63(4), 453–469. <https://doi.org/10.1007/s11089-013-0570-4>.

- Ricouer, P. (1967). *The symbolism of evil* (E. Buchanan, Trans.). New York: Harper & Row.
- Shay, J. (1995). *Achilles in Vietnam: Combat trauma and the undoing of character*. New York: Simon & Schuster.
- Shay, J. (2002). *Odysseus in America: Combat trauma and the trials of homecoming*. New York: Scribner.
- Shneidman, E. S. (1993). *Suicide as psychache: A clinical approach to self-destructive behavior*. Northvale: Jason Aronson.
- Shneidman, E. S. (1996). *The suicidal mind*. New York: Oxford University Press.
- Sholl, R. (2012). Arvo Pärt and spirituality. In A. Shenton (Ed.), *The Cambridge companion to Arvo Pärt* (pp. 140–158). New York: Cambridge University Press.
- Stallinga, B. A. (2013). What spills blood wounds spirit: Chaplains, spiritual care, and operational stress injury. *Reflective Practice: Formation and Supervision in Ministry*, 33, 13–30.
- Steenkamp, M. M., Litz, B. T., Gray, M. J., Lebowitz, L., Nash, W., Conoscenti, L., .. Lang, A. (2011). A brief exposure-based intervention for service members with PTSD. *Cognitive and Behavioral Practice*, 18(1), 98–107. <https://doi.org/10.1016/j.cbpra.2009.08.006>.
- Vennard, J. E. (2013). *Fully awake and truly alive: Spiritual practices to nurture your soul*. Woodstock: SkyLight Paths.
- Werdell, M. B., Dy-Liacco, G. S., Ciarrocchi, J. W., Wicks, R. J., & Breslford, G. M. (2014). The unique role of spirituality in the process of growth following stress and trauma. *Pastoral Psychology*, 63(1), 57–71. <https://doi.org/10.1007/s11089-013-0538-4>.
- Whitman, W. (1855). *Leaves of grass*. Auckland, New Zealand: The Floating Press.
- Wiener, N., & Hirschmann, J. (2014). *Maps and meaning: Levitical models for contemporary care*. Minneapolis: Fortress.
- Yandell, M. (2018). Moral injury and human relationship: A conversation. *Pastoral Psychology*. <https://doi.org/10.1007/s11089-018-0800-x>.