Presentation and correlates of moral injury as a response to Past transgression

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Abstract

The concept of moral injury has been researched mostly on military personnel who have either witnessed or engaged in acts generally deemed to be moral transgressions, during combat. Although, it is explored mostly among war veterans, moral injury among non-military personnel who have committed moral transgressions, too, ought to be investigated for the greater good of society. The purpose of this research was to qualitatively explore the presentation and the correlates of moral injury in a non-military prisoner sample, using a working model, postulated by Litz (2009) and his colleagues. Fifteen prisoners who had committed acts of manslaughter or pre-meditated murderspresently kept at the Welikada Prison, Colombo Sri Lanka were interviewed. Using the qualitative method helped to explore each step of the model in-depth. The research revealed that despite the sample experiencing cognitive dissonance, they did not progress to Litz's et.al.,(2009) next step; that is 'global, internal' attribution, but they engaged in 'moral justification and externalization' as attribution, which became a prevalent protective factor in the prevention of psychological, social and emotional impairment. According to the model shame and guilt are jointly expected to lead to social withdrawal. However, that was not observed in this sample. Interestingly though the use of the spiritual attribution both to justify and rationalize their actions as well as a mechanism in distress management was observed frequently among the subjects.

Keywords: Moral injury, justification, moral transgression, spirituality

I. INTRODUCTION

The concept and the theory of moral injury are currently used in understanding the mental health of military personnel who have witnessed or engaged in morally transgressing acts in combat operations. Although it is mostly used among war veterans, it is applicable to moral transgressions committed by non-military personnel. There is a scarcity of research on moral injury among non-military populations. Moral injury being a new concept, it has a working conceptual model that was developed by Litz, Stein, Delaney, Lebowitz, Nash, Silva, & Maguen (2009). The intention of the current research was to study the applicability of Litz et al. (2009) working conceptual model in a sample of Sri Lankan prisoners convicted of murder.

Many researchers believe that moral injury is often misdiagnosed to be Post Traumatic Stress Disorder (PTSD) probably because there is similarity in the trigger factors and the symptoms in both cases. However in moral injury, the focus is on the perpetrator, while Post-Traumatic Stress Disorder (PTSD) is focused on the victim; the person who has witnessed or had been exposed to a traumatic event. Furthermore, unlike PTSD being a diagnosable disorder, moral injury is a concept that has still no demarcation for diagnosis.

The concept of moral injury was first defined by Shay (1994) as the psychological consequence of a betrayal of what's right by someone who holds legitimate power in a high-stake situation. According to Litz et al. (2009), "Potentially morally injurious events, such as perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations may be deleterious in the long-term, emotionally, psychologically, behaviourally, spiritually, and socially" (p.1). One shared idea in these definitions is that 'transgression of moral values' causes emotional, psychological and social effect. Moral injury happens subsequently to a transgression of one's own moral values. Shay (2002) introduced the idea of 'high stake situation'. High stake situation' is defined as a situation that has a lot of risk and in which someone is likely to either get or lose an advantage (Cambridge dictionaries

online, 2011). According to Shay's definition, moral injury happens in a high stake situation where the person is under pressure to make a decision. When we review Litz et al. (2009) definition, it does not talk about the concept of 'high stake situation'. Shay (2002) described that moral injury takes place due to an act of moral transgression that causes profound emotional shame. What Shay also defines as "moral injury is something that causes psychological distress". Even though there are slight differences among definitions, it appears that most contain the common idea that moral injury causes damage to the person's psychological wellbeing and subsequently to the transgression of moral values.

It's important to review how mental health professionals have tried to make a distinction between Post-traumatic stress disorder (PTSD) and moral injury. Shay (2010) explains Post-traumatic stress disorder as the primary injury, the "uncomplicated injury" and Moral Injury as the infection; it's the haemorrhaging. Shay(1994) explained that moral injury can happen when there is a betrayal of what's right by someone who holds legitimate authority in a high-stakes situation. Gibbons-Neff (2015) describes a distressful combat experience of a veteran who was deployed in Afghanistan who had killed a kid and carrying difficult emotions, memories, thoughts even 10 years later. Gibbons-Neff (2015) explains that about ten years ago, above situation could have been diagnosed aspost-traumatic stress disorder and sixty years ago, it would have been combat fatigue. According to above example, it appears to be a clear example of how it has affected making the correct diagnosis of mental disorder.

Litz et al. (2009) argue that serious exploration is needed to make a distinction between PTSD and Moral injury, because, according to their experience, service members and veterans can suffer long-term scars that are not well captured by the current conceptualizations of PTSD or other adjustment difficulties. He further explains that they are not arguing for a new diagnostic category, per se, nor do they want to medicalize or pathologize the moral and ethical distress that service members and veterans may experience. Nevertheless, Litz et al. (2009) believe that the clinical and research dialogue is very limited at present because questions about moral injury are not being addressed, comprehensively.

In order to describe moral injury further, and to stimulate a dialogue on the subject, Litz et al. (2009) have presented a working conceptual model on moral injury. According to this model, cognitive dissonance occurs after a perceived moral transgression resulting in stable, internal and global attributions of blame, followed by the experience of shame, guilt, or anxiety, causing the individual to withdraw from other people and society. Withdrawal leads to failure of self-forgiveness and self-condemnation. The final result is an increased risk of suicide due to demoralization, self-harming, and self-handicapping behaviours. This model which is described below is a working conceptual model that was presented to stimulate more research in this area.

According to Litz et al. (2009) model, cognitive dissonance occurs after a perceived moral transgression resulting in stable internal global attributions of blame, followed by the experience of shame, guilt, or anxiety, causing the individual to withdraw from other people and society. Withdrawal leads to failure of self-forgiveness and self-condemnation. The final result is an increased risk of suicide due to demoralization, self-harming, and self-handicapping behaviours. This model is a working conceptual model that was presented to stimulate more research.

A good understanding of the manifestation of moral injury would be beneficial during the application of clinical care model interventions. Hence, the researcher believes that conducting studies that examines the conceptual framework of Litz et al. (2009) with different populations is important. This would eventually help properly conceptualize the moral injury model and making the development of a psychometric tool to identify psychological, social and behavioural manifestation of moral injury. Further, it is important to understand how clinically relevant the concept of moral injury is and how manifestations and correlations of moral injury culturally differ. Below picture shows the model presented by Litz et al., 2009).

II. OBJECTIVES OF THE STUDY

a) To conduct a qualitative study in a prisoners sample to gain a better understanding of the presentation and correlates of moral injury based on the working conceptual model presented by Litz et al. (2009) on moral injury

b) To study difference in the presentation of moral injury in a prisoners sample than a military sample

c) To explore culturally different manifestation of moral transgression responses

III. METHODOLOGY

This study was conducted by interviewing a sample of fifteen (15) Sri Lankan prisoners who have been convicted for homicide (manslaughter and premeditated murders).

Qualitative research method was selected due to its ability to provide complex textual descriptions. Sensitive information on personal life of people who committed murders was explored in this research. Hence, the in-depth interview method found to be very suitable for the purpose of the research. The interviews were carried out at the rehabilitation section, Welikada Prison. Thematic analysis method was used to analyse data as it found to be the most common and suitable form of analysis method in qualitative research.

Ethical clearance was taken from ethical clearance board at University of Colombo. Permission to carry out this research at Welikada prison was taken from Commissioner General fo prisons, Prison Head Quarters. Only voluntary participants were recruited with a valid informed consent. Following points were included in the informed consent form:
a) Participation is voluntary
b) The participants are aware of what their participation involved in
c) The participants are aware of any potential risks (if there were any)
d) All questions concerning the study have been satisfactorily answered
e) The right to withdraw. (A documented consent was signed or initialled if participants wish to maintain anonymity).

IV.   RESULTS AND DISCUSSION

A. *presentation and correlates of moral injury with regard to the Litz et al. (2009) moral injury model*

Overall the pattern that is reflected among the participants with regard to the Litz et al. (2009) moral injury model was explored in this research. All participants had experienced moral transgression which is the first step in the Litz et al. (2009) conceptual model. All the participants stated that 'killing' was an act that does not match with their moral codes and sentiments. Statements that reflect the idea of 'cognitive dissonance' appeared as a major theme among fourteen participants out of fifteen. The working causal framework of moral injury by Litz et al. (2009) suggests that cognitive dissonance in post transgression is a key factor of moral injury. Litz et al. (2009) work has further stated that the individual must be (or become) aware of the discrepancy between his or her morals and the experience (i.e., moral violation), that causes dissonance and inner conflict.

"Actually, I am someone who does not like to harm anybody. I have not done harm to anybody previously. What happened is something that does not match my character. Who will be benefited by killing somebody else???...I feel that I am a fair person that had done no

harm to any. I have nothing to think, it's difficult to think, I am not sure…I do not know what I did…"

Above extraction from the data shows this discrepancy.

Litz et al. (2009) model on moral injury posits that the type of attributions made about moral violation greatly affects the outcome of moral transgression. Attribution is the process by which individuals explain the causes of behaviour and events. In the current research, attribution types, moral justification and externalization appeared to be major attribution types that do not fall into the three attribution types (global, internal and stable) suggested by Litz et al. (2009). The extractions ascertained from the interviews show how they have externalized reasons for the transgression.

"It happened also due to what influences the world out there. I would not have gone to them if they did not persuade me, and this would not have happened…"

It appears that moral justification and externalization have acted act as protective factors that have helped the participants to reconcile with the cognitive dissonance. The following is a example of how a participant has described his ideas with their own words.

"He does not behave according to his age. He has women everywhere. His wife came for the funeral and asked "son, why did you do this? You should have broken his limbs. The main reason for the death is his vulgarity…"

B. *Religious explanations as a way of attribution*

Other than moral justification and externalization, religious explanations such as attributing to 'karmic factors' also appeared as a type of attribution made by this sample. Seven participants shared such religious and astrological explanation for the perpetration made by them. Attributing to Karmic factors appears to be a practice that has spiritual relevance. Some people have used the word "karma" while others use the word 'bad time'. 'Bad time' can be described as 'inauspicious time' in astrology. Faith in the auspicious and inauspicious times is a cultural tenet in Sri Lanka. Both these concepts appear to have a spiritual content even though Buddhism in theory rejects as such could lead one to unwholesome conduct when one is on the path to attain one's main objective in Buddhist thought. Hence, it's important to ascertain at this point that attributions could also be due to the fact that 'moral transgression' has a close link with religious values. The use of the concepts of 'karma' is a Buddhist perspective.   Also,   concepts   of 'auspicious/inauspicious' time is a culturally specific belief. Hence, these findings are particular to Sri Lankan context.

C. Forgiving as a protective factors

The moral injury framework posed by Litz et al. (2009) suggested that forgiving is an important part of the process of moral injury. Participants shared their views on self-forgiveness. Thirteen participants out of fifteen forgave themselves for their acts committed.

"I forgive myself. I forgive because, when we forgive, we will not make the same mistake again. We feel happy. Therefore, I would like to forgive. If we do not forgive, we fall back into same trouble again. Then, we are not free. If we forgive ourselves, when we get released from the prison, we can live like a new-born child…"

The above participant has explained that if he forgives himself, it helps to refrain from future wrongdoing. It appears to be a very good example for a practical experience /reflection of a real life situation from a person with a prison sentence who had been involved in a culpable homicide. Further he described that he could not move forward if he does not forgive himself. Below are some other extractions.

"I forgive myself. I am not angry. I have made up my mind and feeling calm with myself…"

This statement resonates with the definition above by Hall and Fincham (2005).The above person says that he is not angry and he feels calm about himself, which is described in the definition as "…decreasingly motivated to retaliate against the self (e.g., punish the self, engage in self-destructive behaviours, etc.), and increasingly motivated to act benevolently toward oneself.."

"Now I forgive. I accept the mistake because I have gone through prison term I need not worry once I am released by the courts with a punishment, I do not have to worry…"

In this quote, the definition provided by Hall and Fincham (2005) is reflected as well. They have defined self-forgiveness as "….increasingly motivated to act benevolently toward oneself…" The above participant says that "*I need not worry once again...I do not have to worry…*" (p.622). these thought show the motivation to act benevolently toward oneself.

D. Shame and guilt

When proceeding into next levels of the model, it suggests by Litz et al. (2009) that 'shame' and 'guilt" are major emotions that could lead someone to develop a moral injury. In the current research, 'shame' did not appear as a major theme. Yet, 'Guilt' was expressed by ten participants. According to motivational traits of 'shame' and 'guilt', shame leads to desire to hide, escapes or strikes back while 'guilt' has motivational desire to confess, apologies or repair (Tangney & Dearing, 2003).

E. Social withdrawal

Litz et al. (2009) model also suggests that 'shame' leads to social withdrawal. However, social withdrawal did not appear as a major theme among the participants. Eight participants out of fifteen indicated that they have a positive connection with the larger society. Only two people indicated that they voluntarily withdrew from social networks and society. They said that they have continued their relationships with their own families as well. The theme 'family relationships' was identified as a an important theme that was highlighted by almost all the participants. All participants mentioned that they are looking forward to reintegrate with their families when they get released from the prison. Eleven participants in this sample said that they have a good and healthy connection with family via telephone and home visits. The statements they made during the interview revealed that they were satisfied with the relationship with family. Only four of them said that they have less connection with the family.

"Elder son does everything including the courts related issues. Also his younger brother's needs, he did everything for twenty months. Now, we have fewer burdens. My hope is to be released and live with my wife and children…"

According to the above quote, it appears that this person is less distressed due to having fewer burdens currently. He described that his elder son has taken up more responsibilities. So, he has a hope to live with his family once he is released which is good evidence for the future with strong family relationships which is a positive step for a psychologically disturbed person. Below is another example of satisfaction with family support.

"My parents did not ask about the incident. But they looked after me, cared me. Always my father is behind me. My brother looks after any issue that I face. I received a big relief from my parents. They always tried to rescue me. Even now, if I call and inform, they would do anything. The relative also come to see me…"

"I have taught my children what I have learned. I deeply trust my wife and the children…"

The above statements made by three participants show their satisfaction and joy with family relationships, less distressed about the status of family members. Only two people said that they withdrew from social networks. Five people said they were ostracized from social relations in the community. Considering the overall social

connections, it does not appear that social withdrawal as a major theme among the participants.

F. PTSD symptoms

According to the Litz's model some of the PTSD symptoms manifest as a moral injury. Only two participants revealed 'avoidance behaviours'. Other thirteen participants said that they do not avoid talking about the incident. Participants who consented only were interviewed in this research. Only One participant out of fifteen revealed that he had suicidal thoughts. Other self-harming behaviours were absent in fourteen participants out of fifteen. Self-condemnation was present in the same participant who indicated suicidal thoughts. Hence, it gives the impression that those fourteen participants out of fifteen have not gone through the latter steps of the Litz et al. (2009) working conceptual model though they had experienced cognitive dissonance and guilt.

G. Post moral transgression growth

Hence, findings of this research give an impression for the possible conditions that could prevent someone who had transgressed their own moral values, from developing negative mental health issues or functional impairments associated with moral transgression. Religious activities appeared to be having primarily helped them to understand the importance of 'forgiving' and value of 'corrective' approach. Two people revealed that they learnt more advanced lessons of Buddhism by reading Buddhist scriptures and achieve 'post moral transgression growth'. The religious books have helped them to find meaning in life, future, and concepts such as 'attachment'. Same two people revealed that their understanding of life changed positively after coming to the prison that could be similar as 'post crisis growth'. The concept of 'post crisis growth' is widely discussed in the literature on post trauma. Below are few extractions of their change in the prison.

"I met a brother who is knowledgeable on Buddhism and meditation. He advised me well. I did not know even five precepts properly. Now I am reading the 'Abhidharma' (Buddhist metaphysics) It's little difficult to understand. But, I am trying. It helps me to cope with the situation. The Buddhist path helped me…"

"Initially, I had distressing thoughts. I learnt Buddhism and meditation. I am going to the Hindu Kovila as well. I go to the temple to chant and for meditation…I do not feel sad. I learnt a lot at the prison. I learnt not to even harm an animal. I learnt in the prison, may be more than from a university…"

"When the thoughts of the incident come to my mind, I do not ruminate with the thought. I just tell that thought- 'Please; go away….I have something else to do'. I observe the thought in my mind. If the thought stays in the mind, I let it be. Then I think about virtues of the Buddha. Then that thought goes away. I attended three days meditation programmes. I attain sil (chanting in solitude and meditation) on every full moon poya days (a day of Buddhist religious observance). I know 'Yoga' meditation to some extent…"

"When I get distressing thoughts, I play ………..and play carom. I do something else. I try to shift my thoughts…"

The above participant revealed that sport activities helped him to reduce distressing thoughts.

Extractions above show the participants 'own reflections on their 'post moral transgression growth' in life. Religious activities and understanding appear to have a strong connection with 'post moral transgression growth' that reflect in the statements shared by above participants.

H. Protective factors

According to the information received from participants mainly, sport activities, religious activities, singing, dancing, yoga, writing poetry, and participating at other working parties at prison; carpentry, press and bakery are said to have helped with coping distress caused by the moral transgression and current difficulties. Here, they were guided to look at their cognitive dissonance with regard to moral transgression and they were asked what has helped them to cope up with distress. What they gained through above activities was also explored. Those who engaged in dancing and singing and then performed at events revealed that they could understand their skills and it helped them to develop self-esteem. The person who writes poetry said that he tries to give moral lessons to other people in the society by his poetry. Others who did sports activities such as daily exercise and games such as cricket, volleyball, and carom think that those activities have helped them to spent their time effectively and give them a relief when they felt distressful.

V. CONCLUSION

The current study explored presentation and correlates of moral injury based on the Litz et al.'s model in a prisoners' sample. However, according to this model, final result of the process of moral injury is 'self-harm', 'self-handicapping', 'demoralization' and 'PTSD symptoms'. Only one participant out of fifteen showed self harming thoughts in the current research sample. Hence, findings of this research give an impression for the possible

conditions that could prevent someone who had transgressed their own moral values, from developing negative mental health issues. Culturally specific attribution was identified during the interviews relating to certain incidents in life as a result of Karmic effect. Seven participants shared such religious and astrological explanation for the wrong doing. Attributing to Karmic factors appears to be a practice that has spiritual relevance.

The current research findings of post moral transgression positive change reflect the idea of 'post moral transgression growth'. Yet, more empirical research on 'post moral transgression growth' is needed to explore this concept. It is my view that the policy makers even at the political and administrative levels and in the fields of rehabilitation and prison reforms would benefit if such attempts are encouraged in research.

REFERENCES

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.).* Washington, DC: Author

Cambridge dictionaries online. (2011). Retrieved from http://dictionary.cambridge.org/ (Accessed 24 September 2015)

Hall, J. H., & Fincham, F. D. (2005). Self-forgiveness: The stepchild of forgiveness research. *Journal of Social and Clinical Psychology*, 24, 621-637.

Kassin, Fein & Markus (2010). Social Psychology (Eighth international ed.). Wadsworth: Cengage Learning.

Litz, B. T., 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 psychology review*, 29(8), 695-706. doi:10.1016/j.cpr.2009.07.003 Retrieved from http://www.sciencedirect.com/science/article/pii/S027273 5809000920 (Accessed 16 October 2015)

Maguen, S & Litz, B. (2012). Moral Injury in Veterans of War. *PTSD Research Quarterly*, 23(1), . Retrieved from http://www.ptsd.va.gov/professional/newsletters/researc h-quarterly/v23n1.pdf (Accessed 23 July 2015)

Maguen, S., Vogt, D. S., King, L. A., King, D. W., Litz, B. T., Knight, S. J., et al. (2011). *The impact of killing on mental health symptoms in Gulf War veterans. Psychological Trauma: Theory, Research, Practice, and Policy*, 3, 21-26. doi: 10.1037/a0019897. (Accessed 23 July 2015)

Shay, J. (1994) *Achilles in Vietnam: Combat trauma and the undoing of character*. Simon and Schuster. Retrieved from http://books.simonandschuster.com/Achilles-in-Vietnam/Jonathan-Shay/9780684813219 (Accessed 28 November 2015)

Shay, J. (2002) *Odysseus in America: Combat Trauma and the Trials of Homecoming*. New York: Scribner Retrieved from http://www.pacifica.edu/pdf/ShayOdysseusReview.pdf (Accessed 03 November 2015)

Tangney, J. P., & Dearing, R. L. (2003).*Shame and guilt.Guilford Press*. Retrieved from https://books.google.lk/books?hl=en&lr=&id=ZdeK6TK6p AoC&oi=fnd&pg=PA1&dq=Tangney,+J.+P.,+%26+Dearing, +R.+L.+(2003).+Shame+and+guilt.+Guilford+Press&ots=gI Aas5h2Kh&sig=21ikBWA4GatUejVah7iHHAiI9pY&redir_es c=y#v=onepage&q&f=false (Accessed 13 July 2015)

Tsang, (2002) Moral rationalization and the integration of situational factors and psychological processes in immoral behaviour. *Review of General Psychology* 6(1):25–50, 2002 Retrieved from http://www.baylor.edu/content/services/document.php/ 25042.pd (Accessed 21 August 2015)