

Canadian
Forces
College

Collège
des
Forces
Canadiennes



Moral Injury: Combatting the Unresolved Remnants of Our Actions and Decisions

Major Trevor J. Cadeau

JCSP 47

Master of Defence Studies

Disclaimer

Opinions expressed remain those of the author and do not represent Department of National Defence or Canadian Forces policy. This paper may not be used without written permission.

© Her Majesty the Queen in Right of Canada, as represented by the Minister of National Defence, 2021.

PCEMI 47

Maîtrise en études de la défense

Avertissement

Les opinions exprimées n'engagent que leurs auteurs et ne reflètent aucunement des politiques du Ministère de la Défense nationale ou des Forces canadiennes. Ce papier ne peut être reproduit sans autorisation écrite.

© Sa Majesté la Reine du Chef du Canada, représentée par le ministre de la Défense nationale, 2021.

CANADIAN FORCES COLLEGE – COLLÈGE DES FORCES CANADIENNES

JCSP 47 – PCEMI 47

2020 – 2021

MASTER OF DEFENCE STUDIES – MAÎTRISE EN ÉTUDES DE LA DÉFENSE

**MORAL INJURY: COMBATTING THE UNRESOLVED REMINANTS OF OUR
ACTIONS AND DECISIONS**

By Lieutenant-Colonel T.J. Cadeau

"This paper was written by a candidate attending the Canadian Forces College in fulfilment of one of the requirements of the Course of Studies. The paper is a scholastic document, and thus contains facts and opinions, which the author alone considered appropriate and correct for the subject. It does not necessarily reflect the policy or the opinion of any agency, including the Government of Canada and the Canadian Department of National Defence. This paper may not be released, quoted or copied, except with the express permission of the Canadian Department of National Defence."

« La présente étude a été rédigée par un stagiaire du Collège des Forces canadiennes pour satisfaire à l'une des exigences du cours. L'étude est un document qui se rapporte au cours et contient donc des faits et des opinions que seul l'auteur considère appropriés et convenables au sujet. Elle ne reflète pas nécessairement la politique ou l'opinion d'un organisme quelconque, y compris le gouvernement du Canada et le ministère de la Défense nationale du Canada. Il est défendu de diffuser, de citer ou de reproduire cette étude sans la permission expresse du ministère de la Défense nationale. »

TABLE OF CONTENTS

TABLE OF CONTENTS	i
ABSTRACT	ii
CHAPTER 1: INTRODUCTION	1
CHAPTER 2: UNDERSTANDING MORAL INJURY AS A CONCEPT	6
Introduction	6
PTSD and the Conceptualization of Moral Injury	6
Moral Injury – Closing the Gap on PTSD	12
Non-Combat Dimensions of Moral Injury	18
Vignettes	28
Conclusion	39
CHAPTER 3: CONTEXTUALIZING THE APPLICABILITY OF MORAL INJURY	41
Introduction	41
Moral Injury Beyond the Army	42
Moral Injury Theory Beyond Operations	50
Conclusion	57
CHAPTER 4: RESPONDING TO MORAL INJURY	59
Introduction	59
Departmental Programs and Policies	60
Rigidity of Values	65
Dialogue	70
An Ethical Framework to Contemplate	73
Conclusion	78
CHAPTER 5: CONCLUSION	79
Future Study	82
BIBLIOGRAPHY	86

ABSTRACT

While it shares several characteristics in common with PTSD, moral injury is a separate and distinct affliction that must be better understood and conceptualized toward the achievement of improved mental health outcomes and resiliency of Canadian Armed Forces personnel. Rather than the victimization that results from experiencing trauma, moral injury is associated with feelings of guilt and shame derived from one's actual or perceived agency in the infliction of trauma or harm. Moral injury is most readily understood through an association with combat-specific scenarios; however, this can lead to the false assumption that the condition is predominantly exclusive to the army. Moral injury applies to every element of the military and, more broadly, afflicts professions external to the profession of arms. Associations between civilian professions and the military are explored to more deeply understand the concept and its applicability to military personnel. Developing resiliency to prevent the onset of moral injury is preferable over treating those whom the condition has afflicted. As such, this paper provides several practical recommendations toward achieving an institutional culture more resistant to the onset of the adverse effects attributable to the condition.

CHAPTER 1: INTRODUCTION

There are good reasons why the military profession has been regarded as a noble profession, perhaps the noblest of all. Duty and honour play a greater role in the military than in any other occupation. Self-interest cannot be given the same play in the life of a soldier as in the life of others. Yet there is no office in society that is more morally ambiguous or more morally hazardous to one than the military.

- E.M. Adams, *The Moral Dilemmas of the Military Profession*

Leadership from the highest levels within the Canadian Armed Forces (CAF) colloquially refer to people as the institution's most valuable resource.¹ The emphasis on people underpins many initiatives within the CAF, whether it be retention strategies such as the Royal Canadian Air Force's (RCAF) Operation Experience, recruitment programs, enhancements to the release process, eradicating harmful and inappropriate sexualized behaviour, improving access to family health support, as well as housing and cost of living initiatives. Despite technological advances in artificial intelligence and autonomous weapons, people will remain the key enabler to all operations undertaken by the department. Promoting and maintaining the welfare of personnel and their families is a principal objective behind many of the CAF's initiatives.² Achieving that objective necessitates an increased focus and emphasis on mental health.

The increase in mental health diagnoses and rates of suicide following Canada's combat mission in Afghanistan³ has served to highlight the importance of mental health

¹ Department of National Defence, "People are the most important thing," says new Army Commander," *The Maple Leaf*, 2 September 2019. <https://www.canada.ca/en/department-national-defence/maple-leaf/defence/2019/09/people-most-important-thing.html>

² Department of National Defence, *Strong Secure Engaged: Canada's Defence Policy* (Ottawa: Canada Communication Group, 2017), 19-30.

³ House of Commons, Report of the Standing Committee on Veterans Affairs, *Mental Health of Canadian Veterans: A Family Purpose* (Ottawa: Canada Communication Group, 2017), 2-3; Lee Berthiaume, "More than 6,700 Afghan war veterans receiving federal assistance for PTSD," CTV, 22 April 2019.

in contributing to the operational readiness of the military. Mental health has and continues to be a difficult topic for many, whether from the perspective of those afflicted who fear the potential of stigma or from the perspective of the supportive who struggle to relate to health conditions for which they have no experience or knowledge. The CAF has responded by providing access to a multitude of resources and instituting new programs to support both members and their families.⁴ The organization's efforts to support the mental well-being of its personnel adequately are complicated by the breadth and rapidly evolving nature of this field of research. The relatively recent conceptualization of moral injury is one such example, with the bulk of the research and literature on the topic spanning the last decade. Moral injury is of particular relevance to the CAF, given it is a concept that arose from attempts to characterize mental health complications resulting from military service.

The predicted future operating environment spanning a more diverse moral spectrum further substantiates the importance and relevance of this topic. Evolving non-traditional and asymmetric forms of conflict comprising non-state actors who seek to exploit threats resulting from an adherence to the Law of Armed Conflict (LOAC) pose significant challenges in distinguishing between combatants and non-combatants.⁵ The eroding stability and human security mandate that has characterized recent operations are anticipated to persist.⁶ Often, soldiers who intervene in these humanitarian crises confront extreme deviations to their cultural norms, including the employment of child soldiers,

⁴ Canadian Forces Morale and Welfare Services, "Mental Health Resources," last accessed 3 March 2021, <https://www.cafconnection.ca/National/Programs-Services/Mental-Health/Mental-Health-Resources.aspx>

⁵ Department of National Defence, *Strong Secure Engaged* . . . , 50-54.

⁶ Department of National Defence, *Duty with Honour, The Profession of Arms in Canada* (Ottawa: Canada Communications Group, 2009), 65, 70-71.

the sexual exploitation of women and children, and ethnically motivated violence.⁷

“Dilemmas, both intellectual and moral, are the norm in complex operational and socio-cultural environments in which the military professional functions today and into the future.”⁸ While the prevalence of mental health concerns substantiates the relevance of this topic to the CAF today, the expanding moral complexity predicted for tomorrow’s operations indicates its increasing relevance into the future.

Moral injury is a complex phenomenon lacking formal diagnostic criteria and categorization as either a natural response mechanism or as a medical condition. Despite its infancy, the concept has quickly garnered interest and attention given the ease with which one can relate to it. This study aims to understand the concept further, identify the particular areas of relevance to the profession of arms and recommend practical measures that the CAF can adopt to mitigate the potential of moral injury amongst its personnel. Achieving improved mental health outcomes through prevention is aligned with the CAF’s institutional priorities⁹ and is preferable over treating those afflicted by the condition.

This study is divided into three parts. Chapter 2 will introduce and explore the theory of moral injury. It commences with the genesis for moral injury theory by examining the accepted diagnostic criteria for Post-Traumatic Stress Disorder (PTSD) and identifies gaps in that theory that necessitate a distinct concept. PTSD is a fear-based response to traumatic events, and there are instances where an individual’s mental health is disrupted by circumstances for which fear is an illogical source. Further, many veterans

⁷ Department of National Defence, *Strong Secure Engaged* . . . , 54-55.

⁸ Department of National Defence, *Duty with Honour*. . . , 59.

⁹ Department of National Defence, *Strong Secure Engaged* . . . , 19.

are known to struggle with their actions or their failure to act in high-stakes situations, such as what is experienced in combat. While they may experience fear at different times throughout an event, their actions are the predominant moral issue that persists well beyond the event. Finally, moral injury itself is complex, and various dimensions lead to the onset of mental health complications: leadership, political, societal and spiritual. Each is explored individually as part of examining the full scope of the theory. A series of vignettes provide a working knowledge of the concept and solidify the theory.

Much of the literature utilizes operationally specific examples unique to ground operations. While the probability of experiencing morally injurious scenarios is likely highest for the army, Chapter 3 examines the relevance of this theory to the CAF as a whole. Vignettes specific to the air force and navy are included to provide the necessary context. Another inaccurate assumption that one may draw from the operationally specific scenarios within much of the literature is that combat is a necessary constituent of moral injury. Moral injury applies to occupations besides the military. Professions and their customary legislation of a system of values are examined as a source of moral complexity that can act as a catalyst to moral injury.

Finally, Chapter 4 will provide proactive moral resiliency recommendations to better equip the CAF and reduce the probability of its personnel from affliction by moral injury. Departmental policy and programs, specifically the Defence Ethics Programme, will be reviewed to assess its adequacy to foster moral resiliency. A brief analysis of an ethical decision-making instructional manual is also provided to evaluate its pertinence to this topic. Building on the exploration of values in the previous chapter, the rigidity of the CAF's military ethos follows. The merits and challenges with achieving an appropriate

balance between rules and values-based ethics are explored. Finally, the potential of leadership-driven peer and team-based dialogue is considered for its applicability as a moral resiliency enabler. Enculturing natural discourse that provides tangential resiliency benefits affords idyllic organizational outcomes.

CHAPTER 2: UNDERSTANDING MORAL INJURY AS A CONCEPT

For some of our soldiers, it took years for them to recover some semblance of normal humanity. You cannot just plunge people into this hell of violence and expect them to come back as if nothing had happened.

- Vanderbilt University News (Interview with John Bess), *Moral ambiguities of World War II explored in Choices Under Fire*, *Moral issues remain relevant with Iraq war*

Introduction

Mental health is essential, both in sustaining the operational readiness of a military force and in responsibly returning strong and productive veterans capable of contributing positively to society post service. In response to an increased awareness of operationally related psychological trauma and rising rates of post-combat veterans seeking mental health services, the CAF has expanded access to various services and instituted a number of initiatives to promote resiliency amongst its members.¹⁰ Through treatment and research related to PTSD, the concept of moral injury has arisen to fill some of the gaps identified with the clinical criteria defining PTSD. Following its distinction from PTSD and a review of moral injury theory, this chapter will explore the non-combat dimensions of moral injury, including leadership, political, societal and spiritual. It will close with a series of vignettes used to support the theory and illustrate the various dimensions' association and contribution to the onset of moral injury.

¹⁰ Canadian Forces Morale and Welfare Services, "Programs and Services," last accessed 4 May 2021, <https://www.cafconnection.ca/National/Programs-Services.aspx>; Department of National Defence, "Staying healthy and active," last accessed 4 May 2021, <https://www.canada.ca/en/department-national-defence/services/benefits-military/health-support/staying-healthy-active.html>

PTSD and the Conceptualization of Moral Injury

Moral injury is a resurgent area of study that is not constrained by a specific body of medical knowledge. It is, however, closely associated with PTSD, which is a recognized mental health diagnosis that acknowledges and treats the psychological impacts resulting from exposure to traumatic events. PTSD is defined within the American Psychiatric Association's (APA) Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5). Given the concept's close association, it is appropriate to discuss PTSD as part of an exploration of moral injury. Not only does this provide for a more thorough understanding of the concept, it will promote the ability to distinguish it from PTSD.

The fact that exposure to combat stress can lead to suffering is well established. In the military context, PTSD is derived from earlier concepts, such as shell shock, combat fatigue and combat stress reaction.¹¹ The DSM-5 criteria for the diagnosis of PTSD necessitates exposure to actual or threatened death, serious injury, or sexual violence. Such an event may be experienced directly, witnessed, learned about from a close family member or friend, or through repeated exposure to unpleasant particulars associated with the event (such as police officers exposed to details of child abuse).¹² Therefore, a diagnosis of PTSD is reliant upon events that may be expected to evoke a Pavlovian fear response conditioned by one's neural fear circuitry.¹³ A distinguishing factor of PTSD

¹¹ Tine Molendijk, "Soldiers in Conflict: Moral Injury, Political Practices and Public Perceptions" (PhD thesis, Radboud University, 2019), 29.

¹² Substance Abuse and Mental Health Services Administration (US). "Exhibit 1.3-4, DSM-5 Diagnostic Criteria for PTSD", accessed 12 Nov 2020.
https://www.ncbi.nlm.nih.gov/books/NBK207191/box/part1_ch3.box16/.

¹³ William P. Nash and Brett T. Litz, "Moral Injury: A Mechanism for War-Related Psychological Trauma in Military Family Members," *Clinical Child and Family Psychology Review* 16, no. 4 (2013), 367; Psychology Today. "The Neural Circuitry of Fear", accessed 12 Nov 2020.

from that of its earlier psychological concepts (such as shell shock) is a shift in cause from that of internal factors (an individual is predisposed to mental illness by way of their personality or background) to external factors; such as a traumatic event.¹⁴ The concept has evolved recognizing PTSD as a normal reaction to an abnormal event.¹⁵

In those afflicted by PTSD, various experiences during the traumatic event become cues associated with “intense fear, helplessness, or horror and acquire the capacity to evoke strong emotional responses on subsequent occasions when the traumatic event is no longer occurring.”¹⁶ “To a large degree, PTSD can be represented as a disorder of intense remembering, where traumatic events return unbidden to survivors along with the strong emotional reactions present at the time of the trauma.”¹⁷ Quickly, individuals learn to avoid these cues, but the avoidance prevents natural extinction from occurring.¹⁸ Unpleasant memories and nightmares (intrusions) result in extreme arousal and distress, incentivizing avoidance as a mechanism to avoid thoughts, memories, and situations likely to trigger recall. Avoidance affords temporary relief but interferes with the coping and recovery process. It enables the unresolved emotions to persist and

<https://www.psychologytoday.com/ca/blog/the-athletes-way/202003/the-neural-circuitry-fear>; Molendijk, “Soldiers in Conflict: Moral Injury . . . , 29; Stephen Maren, “Neurobiology of Pavlovian Fear Conditioning,” *Annual Review of Neuroscience* 24 (2001), 897.

¹⁴ Molendijk, “Soldiers in Conflict: Moral Injury . . . , 29.

¹⁵ William P. Nash, Caroline Silva, and Brett Litz, “The Historic Origins of Military and Veteran Mental Health Stigma and the Stress Injury Model as a Means to Reduce It,” *Psychiatric Annals* 39, no. 8 (2009), 791.

¹⁶ Brett T. Litz *et al*, “Moral injury and moral repair in war veterans: A preliminary model and intervention strategy,” *Clinical Psychology Review* 29, (2009): 698.

¹⁷ Kent Drescher and D.W. Foy, “When they come home: Posttraumatic stress, moral injury, and spiritual consequences for veterans,” *Reflective Practice: Formation and Supervision in Ministry* 28: 88.

¹⁸ Litz *et al*, “Moral injury and moral repair . . . , 698.

amplify in frequency and intensity (through a lack of extinction and habituation), resulting in PTSD.¹⁹

Other symptoms/behaviours associated with the event that must accompany the intrusions as part of a diagnosis include negative alterations in cognitions and mood, as well as marked alterations in arousal and reactivity.²⁰ Some examples include persistent and exaggerated negative beliefs or expectations about oneself, others, or the world (e.g., “I am bad,” “No one can be trusted,” “The world is completely dangerous”), persistent distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame himself/herself or others, irritable behaviour and angry outbursts (with little or no provocation) and reckless or self-destructive behaviour.²¹ In some ways, PTSD is a psychological sentence resulting from a soldier's combat experience. Much like one cannot turn back the clock, a soldier cannot choose to disassociate a traumatic event. A soldier must find a means to cope with and come to terms with what they have experienced.

From a medical standpoint, the diagnostic criteria are clear that PTSD must correlate to a particular traumatic event(s).²² However, not all facets associated with PTSD are universally endorsed. The disorder is complex, and research continues on various aspects, including understanding why different soldiers, who experience the same trauma, do not respond the same.²³ Given the continued study of the disorder, some

¹⁹ *Ibid.*

²⁰ Substance Abuse and Mental Health . . . , https://www.ncbi.nlm.nih.gov/books/NBK207191/box/part1_ch3.box16/.

²¹ *Ibid.*

²² *Ibid.*

²³ Drescher, “When they come . . . , 88; Molendijk, “Soldiers in Conflict: Moral Injury . . . , 30.

variations in interpretation are natural and expected as researchers continue to challenge the theory to conceptualize the disorder further. One such example offers a slightly more liberal interpretation of the potential source of PTSD:

In this sense, the primary psychological injury from war is the persistence into civilian life (or life in garrison) of the valid physiological, psychological, and social adaptations that promoted survival in the face of other human beings trying to kill you. Measured against the descriptive criteria for a diagnosis of PTSD, the fit is pretty good: the mobilization of the mind and body for lethal danger, the shutting down of activities, thoughts, and emotions that do not directly support survival in the fight, the intrusive hyper-remembering of what the danger looks, smells, or sounds like, to never be taken unprepared.²⁴

The theory of moral injury has arisen from efforts to conceptualize the psychological effects of combat better and distinguish PTSD from other disorders appropriately.

Research has identified gaps in the accepted medical framework for PTSD that are difficult to explain through the conventional understanding of the disorder. One example pertains to war-related trauma developed by military family members. Nash and Litz explore the question of how family members can be sufficiently fear conditioned by war-zone events to which they have had no direct personal exposure. “We believe that a larger question is whether fear conditioning is the only mechanism by which events can be traumatic – and more to the point for this article – whether war-zone events can precipitate PTSD symptoms in military family members through some mechanism other than fear.”²⁵ Nash and Litz offer the concept of moral injury as a more plausible explanation for the psychological trauma developed by some military spouses and children. “To the extent they participate morally in military operations and their

²⁴ Jonathan Shay, "Casualties," *Daedalus* (Cambridge, Mass.) 140, no. 3 (2011), 181.

²⁵ Nash, "Moral Injury: A Mechanism for . . . , 367.

aftermath, while subscribing to military values and ideals, military spouses and children may be as vulnerable to moral injury as military service members.”²⁶ The likelihood that stories told about the atrocities of war can disrupt deeply held moral and ethical beliefs is more plausible than developing a fear-conditioned response to unexperienced circumstances.

Another gap in the clinical framework for PTSD that most can easily relate to pertains to the psychological impact associated with perpetrating trauma. Those forcefully imposing the political will of their nation in warfare violate universally accepted societal principles, such as the sanctity of life. Most recognized forms of trauma are cultivated by some form of victimization, such as is the case with PTSD, with little attention to the psychological consequences of inflicting trauma:

Yet combat is one of the very few experiences where trauma exposure comes not only through being the direct or indirect victim of violence and witnessing the aftermath and human toll of violence but also through inflicting (perpetrating) violence and destruction upon others (generally with societal sanction).²⁷

While many can relate to the fact that directly witnessing the trauma a soldier inflicts upon others can be psychologically disruptive, disruptions may also occur indirectly. The psychological effects experienced by those involved in the World War II bombing campaigns, best highlight the indirect effects associated with the violation of moral codes through one's action or inaction.²⁸ The bomber crew's isolation from witnessing the result of their actions directly initially guarded them against distress. However, they were not

²⁶ *Ibid.*, 375.

²⁷ Kent D. Drescher et al., "An Exploration of the Viability and Usefulness of the Construct of Moral Injury in War Veterans," *Traumatology (Tallahassee, Fla.)* 17, no. 1 (2011), 8.

²⁸ Nash, "Moral Injury: A Mechanism for . . . , 368.

insulated from learning of and viewing the civilian toll and suffering associated with their bombing raids. This awareness precipitated an enduring moral guilt linked to their role in enabling the suffering of others that became traumatically disruptive for some. If these crews were victims, they were victims only to exercising the political will of their nation. Their primary source of dissonance is associated with their actions as opposed to an injustice inflicted upon them.

Moral Injury – Closing the Gap on PTSD

A soldier's battle experiences have long been associated with psychological consequences. Moral injury, specifically the role guilt can play in leading to dissonance, is resurgent given that in a previous iteration of the APA DSM (version III), guilt about surviving while others had not or about the behaviour required for survival was characterized as a symptom of PTSD.²⁹ For some reason, these symptoms have not persisted within the current medical literature defining PTSD. Yet, the horrors of warfare are well known. In self-defence, soldiers must make decisions and take actions not condoned in day-to-day society. Particularly for actions that transgress societal norms, it should be anticipated that a soldier may struggle with their actions. This is especially the case once a soldier is removed from the immediate threat environment and the primacy of one's survival no longer dominates one's thoughts and actions.

Moral injury acknowledges an alternative source for the genesis of the enduring psychological effects of warfare that some cannot reconcile independently through

²⁹ Shay, "Casualties," . . ., 183; Litz *et al*, "Moral injury and moral repair . . ., 696; Nash, "Moral Injury: A Mechanism for . . ., 367.

normal cognitive processes (such as extinction and habituation). Dissonance and a loss of trust result from witnessing or perpetrating acts, or failing to act, in circumstances that violate deeply shared moral beliefs and expectations.³⁰ Cognitive dissonance “refers to the mental conflict that occurs when a person’s behaviors and beliefs do not align. It may also happen when a person holds two beliefs that contradict one another.”³¹ The degree of dissonance experienced depends upon how high a particular belief is valued and the degree to which the beliefs are inconsistent. Dissonance can result in extreme discomfort if the behaviour is not aligned with one's values. It also can lead to negative self-esteem and self-worth by influencing how people feel about and view themselves. Avoiding discomfort can be a powerful motivator, influencing how people act, think and make decisions.³² People experiencing cognitive dissonance may notice feelings of anxiousness, guilt and shame.³³

Enduring dissonance is common to both the theory of moral injury and PTSD.

The primary differentiator between the two pertains to the root motivating cause of distress, morals versus fear. Comprehensively, moral injury is defined as:

. . . changes in biological, psychological, social, or spiritual functioning resulting from witnessing or perpetrating acts or failures to act that transgress deeply held, communally shared moral beliefs and expectations. Potentially morally injurious events are analogously defined as acts or

³⁰ William P. Nash *et al*, “Consensus Recommendations for Common Data Elements for Operational Stress Research and Surveillance: Report of a Federal Interagency Working Group,” *Archives of Physical Medicine and Rehabilitation* 91 no. 11 (November 2010), 1676.

³¹ Medical News Today. “Cognitive dissonance: What to know”, accessed 13 Nov 2020.
<https://www.medicalnewstoday.com/articles/326738>

³² Very Well Mind. “What Is Cognitive Dissonance?”, accessed 13 Nov 2020.
<https://www.verywellmind.com/what-is-cognitive-dissonance-2795012#:~:text=The%20term%20cognitive%20dissonance%20is,feelings%20of%20unease%20or%20discomfort.>

³³ Medical News Today. “Cognitive dissonance: What to know”, accessed 13 Nov 2020.
<https://www.medicalnewstoday.com/articles/326738>

failures to act that have the potential to damage trust in one's own or others' ability to behave morally.³⁴

In a working group convened by the Marine Corps, four possible sources of stress injuries were identified, including threats to life and safety, losses, potentially morally injurious events and the cumulative effects of all three.³⁵ The nuance between PTSD (threats to life and safety, losses) and moral injury pertains to the fact that the dissonance derived from a morally injurious event is not a result of fear. Emotional responses of guilt and shame associated with one's morals account for the inner conflict that leads to psychological disruption. Nash and Litz identify that several studies identify significant PTSD symptoms in individuals whose major stressors do not involve a close brush with death or serious injury. "Studies in military populations have found PTSD to correlate with a number of stressor types other than threats to personal safety, including participation in or witnessing atrocities, the loss of close personal friends, malevolent environments, and the act of killing, itself."³⁶ Of interest, Nash and Litz note that in the Navy and Marine Corps doctrinal publication *Combat and Operational Stress Control*, the term *inner conflict* is utilized to define the equivalent of moral injury. It is preferred for use in the training of the Marine Corps, given the stigma that some associate with a combat stress injury.³⁷ Given the primary source of dissonance within a morally injured individual is guilt and shame, stigma is an essential consideration in providing an environment conducive to recovery, as is the case for several mental illnesses such as

³⁴ Nash *et al*, "Consensus Recommendations for . . .", 1676.

³⁵ *Ibid.*, 1675.

³⁶ Nash, "Moral Injury: A Mechanism for . . .", 367.

³⁷ *Ibid.*, 368.

PTSD. Stigma is of the utmost importance with moral injury as it can directly compound a morally injured individual's source of distress (guilt and shame).

In current PTSD models, “. . . feelings of guilt, shame and anger are readily approached as misplaced emotions that need to be corrected, in the concept of moral injury they are understood as possibly appropriate.”³⁸ Not only is this important in terms of understanding the concept, but it also has important implications in terms of treatment. Those who are morally injured must come to terms with their associated guilt and shame rather than learn how to suppress, avoid or rationalize away inappropriate feelings and emotions. To summarize, moral injury can be differentiated from PTSD in three distinct phases associated with the experienced stress, “. . . moral injuries may be distinguished from traumatic stress states by the types of events that cause them, the forms of distress and dysfunction they typically produce, and their responses to treatment.”³⁹ What implications does acknowledging the gaps identified in the published conceptual theory for PTSD provide for the field of psychology?

While researchers have endeavoured to distinguish between PTSD and moral injury, their motivation has not necessarily been to advocate for a newly recognized disorder.⁴⁰ “We are not arguing for a new diagnostic category, per se, nor do we want to medicalize or pathologize the moral and ethical distress that service members and veterans may experience.”⁴¹ Some researchers have pressed for a new diagnosable condition unique to the concept of moral injury. However, it does not appear to be the

³⁸ Molendijk, “Soldiers in Conflict: Moral Injury . . .”, 19.

³⁹ Nash *et al*, “Consensus Recommendations for . . .”, 1676.

⁴⁰ Litz *et al*, “Moral injury and moral repair . . .”, 696; Drescher *et al.*, “An Exploration of the Viability . . .”, 9.

⁴¹ Litz *et al*, “Moral injury and moral repair . . .”, 696.

prevailing motivation for research in this field of study.⁴² What does appear to be relatively universal to this field of research is that the clinical and research literature on PTSD is very limited as it pertains to moral conflict or disruption serving either as the source or contributing to the stress disorder.⁴³ From a review of the literature, it appears that this places both the clinician and patient at risk. The clinician may lack the tools and know-how to address a patient's symptoms appropriately. The patient may continue to struggle to resolve their dissonance and loss of trust without the appropriately targeted treatment to cope with their feelings and emotions.

While the concept of moral injury and its association with other recognized mental health conditions is yet to be conclusively defined, there is less uncertainty as to its importance and relevance as an area of study. Motivated by symptoms reported by PTSD treatment-seeking soldiers, which are not defined within PTSD diagnostic criteria, Drescher et al. 2011 convened a study to gauge professional input on the viability and usefulness of moral injury as a field of research. The symptoms motivating their study included: negative changes in ethical attitudes and behaviour; change in or loss of spirituality; guilt, shame, or forgiveness problems; inability to feel pleasure (anhedonia) and a feeling of dissatisfaction, anxiety, and restlessness (dysphoria); reduced trust in others and in social/cultural contracts; aggressive behaviours; and poor self-care or self-harm.⁴⁴ Twenty-three professionals, including mental health providers, academic

⁴² Kent D. Drescher et al., "A Qualitative Examination of VA Chaplains' Understandings and Interventions Related to Moral Injury in Military Veterans," *Journal of Religion and Health* 57, no. 6 (2018), 2445; Drescher et al., "An Exploration of the Viability . . . , 9; Lindsay B. Carey and Timothy J. Hodgson "Chaplaincy, Spiritual Care and Moral Injury: Considerations Regarding Screening and Treatment," *Frontiers in Psychiatry* 9 no. 619 (December 2018), 2.

⁴³ Litz et al., "Moral injury and moral repair . . . , 697.

⁴⁴ Drescher et al., "An Exploration of the Viability . . . , 9

researchers, chaplains and policymakers, universally agreed that the concept of moral injury is needed and that the PTSD diagnostic criteria does not adequately cover it.⁴⁵

Studies involving soldiers and veterans afflicted by PTSD have demonstrated a correlation with morally injurious events. In 2013, a Moral Injury Events Scale (MIES) was developed by Nash et al. and evaluated as part of a broader Marine Resiliency Study (MRS).⁴⁶ In support of the model, the researchers found that "... higher levels of self-reported exposure to potentially morally injurious events, ... correlated positively and significantly with depression, anxiety, and PTSD symptom burden, and negatively with perceived interpersonal support."⁴⁷ While more research is needed to assess the determinants (epidemiology) of moral injury, Nash and Litz identified two behavioural therapy studies that elicit correlations with PTSD treatment-seeking service members and veterans.⁴⁸ A 2018 Canadian Armed Forces (CAF) study examined the prevalence of exposure to Potentially Morally Injurious Events (PMIEs) and the correlation between PMIEs and the likelihood of developing past-year PTSD and Major Depressive Disorder (MDD) for those who served on the CAF's deployment to Afghanistan from 2001 – 2013.⁴⁹ The study considered three different types of PMIEs experienced by deployed personnel and the associated likelihood to present with PTSD in the past year. The PMIEs, along with their associated likelihood of resulting in PTSD, are difficulty distinguishing between combatants and non-combatants (+1.7x), feeling responsible for

⁴⁵ *Ibid.*, 10.

⁴⁶ William P. Nash et al., "Psychometric Evaluation of the Moral Injury Events Scale," *Military Medicine* 178, no. 6 (2013), 646-652.

⁴⁷ Nash, "Moral Injury: A Mechanism for . . .", 371.

⁴⁸ *Ibid.*, 369.

⁴⁹ A. Nazarov et al., "Greater Prevalence of Post-Traumatic Stress Disorder and Depression in Deployed Canadian Armed Forces Personnel at Risk for Moral Injury," *Acta Psychiatrica Scandinavica* 137, no. 4 (2018), 1.

the death of an ally or CAF member (+3x) and observed ill or injured women or children whom they were unable to help (1.5x). Acknowledging that the levels of threat and hostility experienced in Afghanistan were uncharacteristically high compared to other recent operations, the study found that over half of the population reported at least one deployment-related PMIE.⁵⁰ The likelihood of exposure to PMIEs coupled with the correlation between PMIEs and developing past-year PTSD supports that there is value in the further study of moral injury. The principal priorities of the profession of arms should be both to foster a greater awareness of moral injury to facilitate the identification of morally injurious events and to equip soldiers with tools tailored to identify symptoms and enhance their resiliency.

Non-Combat Dimensions of Moral Injury

Returning to the source of distress, moral injury can result from a broad range of circumstances. Not only does acting in a morally unjust way (e.g. killing) have the potential to result in future dissonance and distress, failing to act (omission) or the inability to act (witnessing) can also lead to distress associated with a transgression of moral beliefs and expectations.⁵¹ All three are important elements to consider in understanding moral injury.

Nevertheless, the literature on moral injury focuses almost exclusively on conventional war and combat situations, particularly the impact of killing. In the two missions I examined, however, by far the most reported

⁵⁰ *Ibid.*, 6.

⁵¹ Molendijk, "Soldiers in Conflict: Moral Injury . . .", 174.

distressing experience was not active infliction of harm, but inability to act in the face of human suffering.⁵²

Perhaps the focus upon killing is due to the fact it is easy to relate to as a potentially moral injurious event given the permanence of the action, coupled with the fact that apart from warfare, there is a relatively universal agreement on such an act being unlawful.⁵³

Nevertheless, it is important not to constrain an examination of moral injury solely to violent acts within theatres of combat. Warfare can be traumatizing in a multitude of ways. The Shattered Assumptions Theory offers insights into what other aspects of warfare may be distressing. Soldiers may bear witness to extreme humanitarian crises where they're ability to preclude human suffering is limited, the employment of child soldiers, the sexual exploitation of women and children, and the abuse of power by individuals of authority, are all noteworthy examples. The theory provides that traumatic events are those that shatter core human assumptions that the self and the world are good and meaningful.⁵⁴ Individually, people possess and rely on an innate feeling that they are good and worthy of good things. The world is meaningful in that life makes sense, life is fair, and people get what they deserve.⁵⁵ In some instances, the injury resulting from the event may be deeply rooted, disrupting a basic individual assumption. "Second, the injury may have damaged the very moral frame of reference which he used to make judgments of right and wrong."⁵⁶ In such a case, an individual's moral compass may be entirely disoriented, leaving one ethically adrift struggling to reacquaint oneself with what is good

⁵² *Ibid.*

⁵³ Drescher et al., "An Exploration of the Viability . . . , 8.

⁵⁴ Litz *et al.*, "Moral injury and moral repair . . . , 698.

⁵⁵ Molendijk, "Soldiers in Conflict: Moral Injury . . . , 184.

⁵⁶ *Ibid.*, 185.

and bad. Given that events besides perpetrating acts oneself can lead to moral injury, it is appropriate to examine some other sources of potential distress. Some of these various sources (dimensions) of moral injury and the associated symptoms studied by researchers are included in Table 2.1. An examination of some of these non-combat-specific dimensions follows.

Table 2.1 – Biological, Psychological, Social & Spiritual Symptoms of Moral Injury

Biological/ physical injury	Psychological/ emotional injury	Social/ familial injury	Spiritual injury
<ul style="list-style-type: none"> • Insomnia • "Startle-reflex" • Alcohol abuse • Drug addiction • Loss of memory • Self-sabotage / • Self-harm • Suicide 	<ul style="list-style-type: none"> • Anger & Betrayal • Shame, Guilt, Sorrow • Loss of trust in self • Loss of trust in others • Fear and Anxiety • Re-experiencing the moral conflict/Flashbacks • Nightmares • Gambling addiction • Sexual/Porn Addiction • Self-deprecation • Loss of self-worth • Depression • Suicidal ideation 	<ul style="list-style-type: none"> • Spousal/Partner Disconnection • Child-Parent Disconnection • Family Disconnection • Collegial Disconnection • Occupational dysfunction • Professional Disconnection • Legal and disciplinary issues • Community/Cultural Disconnection • Social Alienation 	<ul style="list-style-type: none"> • Anger & Betrayal • Shame, Guilt, Sorrow • Loss of trust in self • Loss of trust in others • Loss of faith/ belief • Moral pain /dissonance • Questioning morality • Self-condemnation • Spiritual/existential crisis • Loss of purpose in life • Fatalism • Loss of caring • Ontological loss of meaning • Feeling "haunted"

Source: Carey and Hodgson, "Chaplaincy, Spiritual Care and Moral Injury . . .", 4.

Shay identifies leadership as a potential basis for injury, "My current most precise (and narrow) definition has three parts: moral injury is present when (1) there has been a betrayal of what's right (2) by someone who holds legitimate authority (3) in a high-stakes situation."⁵⁷ Shay hones in on leadership malpractice for two principle reasons; there is the potential to develop leadership, and its influence can reach broadly across an entire organization. In developing leadership, training and culture can inculcate good ethical leadership practices that resist morally injurious acts and orders. With respect to its broad reach, when a leader acts immorally, they demotivate all who serve under them,

⁵⁷ Shay, "Casualties," . . ., 183.

which can disrupt an entire unit's loyalty to the chain of command.”⁵⁸ Not only is it important to develop leaders to act ethically, but it is also important to develop their awareness of how their orders may impact those serving under them, thereby incentivizing ethical leadership by example.

Political decisions and societal perceptions of soldiers and the military are important as potential sources of moral injury.⁵⁹ Similar to the dimension of leadership, political decisions and orders can place soldiers in distressing situations. Political leadership must balance their obligation to act in response to various international security concerns with the risk to their soldier's safety and public opinion for the mission. Endeavouring to achieve this balance can lead political authorities to impose restrictive rules of engagement intended to minimize the potential for casualties while unintentionally creating a morally distressing environment for its soldiers. Overly restrictive and risk-averse rules of engagement (more appropriate to peacekeeping operations) can result in soldiers confronting ethical dilemmas where they are unable to act in an otherwise ethically unambiguous situation.⁶⁰ Commenting on parliamentary decisions associated with the Dutchbat experience with the UN's Protection Force (UNPROFOR) deployed to the former Yugoslavia, Molendijk concluded, “But the felt moral obligation to intervene gained the upper hand over concerns about adverse consequences, leading to a highly problematic mission in which soldiers felt utterly powerless. Clearly, good intentions are not enough.”⁶¹ Molendijk characterizes how a government may contribute to moral injury. “Generally, discrepancies and ambiguities in

⁵⁸ *Ibid.*

⁵⁹ Molendijk, “Soldiers in Conflict: Moral Injury . . .”, 172-175.

⁶⁰ *Ibid.*, 175, 192.

⁶¹ *Ibid.*, 191.

the why, what and how of a mission, and lack of political acknowledgment of such discrepancies and ambiguities seem to increase the risk of soldiers developing feelings of guilt, shame, moral disorientation and betrayal.”⁶² Today’s military interventions involve many parties besides the contributing government itself, including international partners and coalitions. This complexity further contributes to the potential for discrepancies and ambiguities related to the mission.

Further exacerbating injury associated with the political dimension can be a soldier's feeling of abandonment or betrayal. As previously discussed, abandonment toward the local population can be felt by way of omission or an inability to act. However, soldiers may also feel abandoned or betrayed by the political authorities responsible for sending them on their mission or the agency governing and supporting the mission, such as the UN. Elements that contributed to the sense of abandonment expressed by Dutchbat soldiers included: encountering dilemmas resulting from restrictions of their ROE, struggling to identify with the purpose of the mission and the value-added of their presence, supporting what is perceived as a mission impossible, and the lack of proper equipment and supply.⁶³ This feeling of abandonment can develop or intensify following the mission if appropriate support and services are not available to aid those in need of care for the physical and mental consequences resulting from their role in supporting the mission.⁶⁴ This feeling of abandonment is also a reoccurring theme in a number of General Dallaire’s personal accounts of his experience as UNAMIR commander, “Within the first 24 hours of the war, my mandate was dead. But we would

⁶² *Ibid.*, 175.

⁶³ *Ibid.*, 107-137.

⁶⁴ *Ibid.*, 117.

not have been able to live with the stigma of having abandoned the mission, even though the world had abandoned us. We on the ground could not see these people abandoned . . .”⁶⁵ The UNAMIR mission and Dallaire’s experiences are explored in greater detail, later within this Chapter.

Public perception and support for a mission can also play a role in moral distress. Societal misrecognition can be problematic by exacerbating moral tensions that result from a soldier’s experience. Public criticism and a lack of support for a mission where soldiers confront morally distressing events can lead to anger and doubt about the value of the mission and their role within it.⁶⁶ What may be less intuitive is that positive public opinion can also adversely affect veterans. Veterans troubled by a mission or their actions, but seen by the general public as a hero, may feel a sense of estrangement from the public and themselves. "Images of hero, perpetrator and victim all deny agency and responsibility on the side of either the veteran or others, and in doing so more generally misrecognize the moral complexity of what veterans did and failed to during their deployment.”⁶⁷ While societal factors are less likely to create a disruptive degree of dissonance alone, a misrecognition of experience can further exacerbate a soldier’s struggle to rationalize their experiences.

Spirituality is another dimension that plays an inter-related role in moral injury and is specifically acknowledged within the concept’s definition. Given the higher-order effect on one’s view or beliefs described within the Shattered Assumptions Theory (such

⁶⁵ Michael Enright, "Lost Mission to Rwanda: An Interview with General Romeo Dallaire." *Queen's Quarterly* 107, no. 3 (Fall, 2000): 417.

⁶⁶ Molendijk, "Soldiers in Conflict: Moral Injury . . . , 174.

⁶⁷ *Ibid.*, 175.

as the world is good and meaningful), it is not surprising that exposure to a morally injurious event may have an impact on one's faith or spirituality. For example, when a soldier encounters the brutality and irrationality associated with ethnic cleansing, it is common for most Western faiths to question how God can permit this to occur and why God put them in this position.⁶⁸ In times of despair and helplessness, most turn to faith and spirituality in search of meaning, particularly during the most stressful experiences in their lives.⁶⁹ With the general decline in overt measures of religious practice and beliefs, such as attendance and involvement within a religious community or parish, some may initially assume the spiritual dimension of moral injury is only relevant to actively practicing parishioners who routinely rely upon deeply rooted faith in their daily lives.⁷⁰ While the spiritual component of moral injury may not be relevant to all morally injurious events or affect everyone, it is particularly noteworthy that 90% of both veterans and the American public believe in a Higher Power.⁷¹ "Although not every Service Member has an explicit spiritual identity or will experience moral injury as spiritual distress, for those whose moral worldviews are based in spirituality, clinical attention to spiritual distress is essential."⁷² Particularly then for soldiers operating in hostile environments, the potential for witnessing, observing or the inability to stop acts of brutality are examples of scenarios where a soldier may turn to spiritual ideations for a sense of meaning or purpose.

⁶⁸ J. Irene Harris, *et al*, "Moral Injury and Psycho-Spiritual Development: Considering the Development Context," *Spirituality in Clinical Practice* (January 19, 2015): 2.

⁶⁹ *Ibid.*

⁷⁰ Joanne Benham Rennick, "Religion in the Ranks: Religion in the Canadian Forces in the 21st Century" (PhD thesis, University of Waterloo, 2008), 1-4.

⁷¹ Harris *et al*, "Moral Injury and Psycho-Spiritual . . .", 2.

⁷² *Ibid.*

In instances where a spiritual dimension to the injury exists, Lindsay et al. advocate for a multidisciplinary approach toward diagnosing and treating moral injury, including distinct support roles well suited to chaplains/clergy.⁷³ Drescher et al. summarize the moral injury transgressions that are most closely associated with the spiritual dimension, “These include changes in moral/ethical attitudes and behavior, change or loss of spirituality, reduced trust in others, and difficulties with meaning making.”⁷⁴ In society, the appropriateness and importance of a distinct role for clergy are likely to be subject to greater deliberation than within the military. This is because, within the military construct, the average soldier’s exposure to chaplains is more prevalent and routine than for the average citizen in society. Chaplains are typically embedded within units, fulfilling an integrated role and serving alongside those who seek their care. Irrespective of one’s religious beliefs, the familiarity and accessibility, combined with the fact that many chaplains have served in the military themselves, may lead to chaplains being a preferred source for disclosure.⁷⁵ Further contributing to chaplains being a preferred outlet for military personnel are both the security and social acceptance of engaging pastoral support. Chaplains provide confidential counselling services to personnel that are governed by clear and succinct orders by many militaries. This provides an outlet where a service person can be assured confidentiality, regardless of the degree by which the event or their actions may have diverged from morally accepted standards.⁷⁶ Concerning social acceptance, much the same as in society, militaries

⁷³ Lindsay B. Carey and Timothy J. Hodgson “Chaplaincy, Spiritual Care and Moral Injury: Considerations Regarding Screening and Treatment,” *Frontiers in Psychiatry* 9, no. 619 (December 2018): 4.

⁷⁴ Drescher *et al*, “A Qualitative Examination of . . .”, 2446.

⁷⁵ *Ibid.*, 2447.

⁷⁶ Carey and Hodgson “Chaplaincy, Spiritual Care . . .”, 5-6.

continue to work toward destigmatizing seeking the support of mental health services.⁷⁷ Despite these efforts, research on the help-seeking patterns of soldiers and veterans indicates that chaplains are a far more socially accepted source of help.⁷⁸ Once an individual seeks help, spirituality also has some important considerations in terms of the recovery process.

Spirituality can both complicate and facilitate the recovery process. Complicating recovery, research indicates that mental health symptoms are exacerbated by spiritual struggles within oneself (religious doubting), with others (feeling marginalized) and/or with God or the divine (feeling abandoned or punished for perceived transgressions).⁷⁹ Spiritual distress or abandoning one's faith in response to traumatic events leads toward the onset of more symptoms and poorer mental health outcomes.⁸⁰ However, religious teachings and culture offer a distinct value toward recovery for those whose moral dissonance is rooted in emotions of guilt and shame. A fundamental tenet of the world's major religions (Buddhism, Christianity, Hinduism, Islam and Judaism) entails unprejudiced forgiveness through the process of confession.⁸¹ Given that the healing process of morally injured individuals is predicated on coming to terms with guilt and shame, the experience and familiarity of clergy/chaplains may be ideally suited to provide the conciliatory step toward healing.⁸² Acknowledging that the application of religious practices may be inappropriate for many in today's society, Lindsay et al.

⁷⁷ Drescher, "When they come . . .", 96.

⁷⁸ Harris *et al*, "Moral Injury and Psycho-Spiritual . . .", 2.

⁷⁹ Drescher *et al*, "A Qualitative Examination of . . .", 2447.

⁸⁰ Harris *et al*, "Moral Injury and Psycho-Spiritual . . .", 2.

⁸¹ Saul M. Kassin and Gisli H. Gudjonsson, "The Psychology of Confessions," *Psychological Science in the Public Interest* 5, no. 2 (November 2004): 35.

⁸² Carey and Hodgson "Chaplaincy, Spiritual Care . . .", 5.

advocate for the adaptation of traditional practices, the utilization of new terminology indiscriminate of faith and spirituality, toward the advent of practices tailored to help treat and address moral injury.⁸³

One final dimension to moral injury that can contribute to an individual's moral dissonance pertains to luck or happenstance. In the case of many morally injurious war-related events, the soldier who confronts an ethical dilemma has fallen victim to moral back luck.⁸⁴ Many factors could contribute to a soldier not experiencing the morally disruptive event. Yet, it is a combination of factors (time, location, assigned task) that together lead to the soldier's experience. The mental struggle and stress resulting from a soldier's effort to rationalize the traumatic event naturally lead to questions like 'why me?' Whether the individual turns to spiritual sources in search of an answer or otherwise, it is natural to seek meaning and purpose. The inability to derive meaning and purpose are important contributing elements associated with the concept of moral injury.⁸⁵ "Unfortunately, war itself creates an abundance of 'moral (bad) luck' that cannot be completely prevented short of ending the human practice of war - which many combat veterans in and out of uniform long for."⁸⁶ This inextricable linkage serves to substantiate the importance of the concept of moral injury to the military profession.

⁸³ *Ibid.*

⁸⁴ Shay, "Casualties," . . . , 184.

⁸⁵ Drescher *et al*, "A Qualitative Examination of . . . , 2452.

⁸⁶ Shay, "Casualties," . . . , 184.

Vignettes

To illustrate how moral injury is associated with military service, a series of vignettes will follow. Each story describes morally disruptive events, where the potential exists for the experience to be injurious if the individual is unable to extinguish the dissonance associated with the event appropriately. While these events are not representative of a soldier's typical day-to-day experience, they are examples of the dire circumstances that soldiers can confront while exercising the political will on behalf of their country. Fortunately, not all who serve in the profession of arms will experience such traumatizing events, but there is a higher likelihood of encountering these types of scenarios while serving on behalf of one's country.⁸⁷

Shay provides the story of a Marine marksman in Fallujah who was supporting an engaged infantry unit, receiving fire from a well-concealed enemy sniper. The marksman eventually managed to locate and positively identify the enemy sniper responsible for killing and wounding several fellow Marines from his unit.⁸⁸ Observing the enemy through his scope, the Marine realized the sniper had a baby strapped to his chest in a carrier (similar to a snuggly). In the Marine's judgement, the baby was being used as a human shield, and in accordance with the marksman's Rules of Engagement (ROE), it was permissible to engage the enemy. Knowing it was probable that the baby would die, the Marine shot and killed the enemy sniper. The event still haunts the Marine and likely will for the rest of his life. He observed the round strike through his scope, which also

⁸⁷ Richard Gabriel, *The Warrior's Way: A Treatise on Military Ethics* (Kingston, ON: Canadian Defence Academy Press, 2007), 21.

⁸⁸ Robert Emmet Meagher and Douglas A. Pryer, *War and Moral Injury: A Reader* (Wipf and Stock Publishers, 2018), 304.

killed the baby. This is a combat-specific example presenting a grave ethical dilemma for the Marine sniper. The Marine's obligations to his profession were satisfied in that his actions were within his ROE, and the enemy combatant posed a direct and immediate threat to his unit. However, engaging the enemy included the potential consequence of killing an innocent infant who posed no threat to his forces. In this example, it is the soldier's direct actions, congruent with his professional responsibilities, which present the potential for moral injury. The marksman had a duty and loyalty to his fellow Marines to fire but understandably struggles with the associated consequence of upholding his duty.

A discussion on moral injury could be considered incomplete without a review of events associated with the Rwandan genocide. More recent than the Holocaust, the Rwandan genocide is fraught with examples of extreme horror and human suffering, providing an appreciation for many of the dimensions associated with moral injury that persist in modern warfare. Examples of morally disruptive acts witnessed in Rwanda will be provided to highlight some of the moral and ethical tensions associated with the inability to act, from the perspective of the operational commander for the United Nations Assistance Mission for Rwanda (UNAMIR), General Roméo Dallaire. Civilians, and particularly women and children, are regarded as sanctities of warfare in that every effort should be made to protect and safeguard them from violence. The soldiers supporting UNAMIR encountered women carrying children on their backs, hacking to death by machete other women carrying children on their backs. In sharing his memories of witnessing these acts, Dallaire raised some of the moral transgressions experienced by his soldiers who were constrained by the UN Chapter VI (self-defence) ROE, "Do the soldier's open fire? On Whom? What are the moral implications if they do not try to stop

the killing?”⁸⁹ The UNAMIR soldiers witnessed other deeply difficult acts, including the efficiencies innovated by those responsible for the ethnic cleansing to maximize their daily carnage. Killing by machete takes a great deal more effort than with more conventional weapons, so the aggressors learned to incapacitate their victims (including children) just enough, so they were unable to move and would leave them to bleed to death.⁹⁰

They realized that, ‘Hey, why just try to kill them? It’s such a hell of a lot of hard work, and there are so many of them.’ So they would cut breasts off, Achilles heel, they’d hit them around the neck – enough for them to just not be able to move, to stay in the sun and bleed to death. They would do that even with children . . . It wasn’t just wanting to kill them. They wanted them to suffer.⁹¹

As the commander for the mission, General Dallaire faced morally demanding situations throughout his time in Rwanda. Dallaire is one of the highest-profile soldiers to speak out on the impact that his combat experience has had on him and the struggles resulting from his diagnosis of PTSD. This review of his experience as commander will center on the morally specific transgressions evident from the Rwandan mission. In contrast to the scenario of the Marine sniper who struggled with his action, the moral dissonance experienced by Dallaire was associated with witnessing and failures/inability to act in response to the ethnic violence. Further, Dallaire’s injury is directly associated with his roles and responsibilities as a leader, “Very soon he also was aware of the moral

⁸⁹ R.A. Dallaire, “Command Experiences in Rwanda,” in *The Human in Command: Exploring the Modern Military Experience*, ed. Ross Pigeau and Carol McCann (Kluwer Academic/Plenum Publishers, 2000), 39.

⁹⁰ CBC Radio, “My Soul is Still in Rwanda: 25 Years After the Genocide, Roméo Dallaire Still Grapples with Guilt,” accessed 2 December 2020, <https://www.cbc.ca/radio/sunday/the-sunday-edition-for-april-7-2019-1.5086008/my-soul-is-still-in-rwanda-25-years-after-the-genocide-rom%C3%A9o-dallaire-still-grapples-with-guilt-1.5086075>.

⁹¹ *Ibid.*

implications of his leadership - as well towards his troops, as well as towards the Rwandan population.”⁹² Dallaire has been criticized for decisions he was solely responsible for, such as his decision not to forcibly secure the return of ten Belgian paratroopers who were later killed at the hands of Hutu extremists.⁹³ While confronting such decisions and living with the consequences would likely be troubling for many, Dallaire's prevailing guilt is associated with his inability to influence the outcome of the genocide. “When the war ended, when the genocide was over, as Force commander I had to grapple with the fact that I had not been able to convince the UN to bring in the necessary forces.”⁹⁴ Despite encouragement by others that he cannot hold himself responsible for every death, for every life not saved, and for the mission's failure, Dallaire expresses a sense of failure and shame in the fulfillment of his leadership obligations. “I was the commander of the mission, and the mission failed. We were not successful. I failed. This was not just an exercise failure: our failure in Rwanda meant that hundreds of thousands of people were killed.”⁹⁵

The political dimension of moral injury addresses the criticisms associated with Dallaire’s decision not to forcibly intervene in an effort to stop the genocide. As tensions escalated in the six months preceding the genocide, Dallaire sought approval from the UN for exceptions or a change to the ROE. His requests were routinely denied, and the mandate of the mission reinforced from UN mission command that UNAMIR was only

⁹² Colonel Dr. Klaus Buschmann, “Powerlessness in the Face of Responsibility: LtGen Romeo Dallaire’s Military Leadership during UNAMIR” (National Security Studies Course Paper, Canadian Forces College, 2000), 36.

⁹³ George Koch and John Weissenberger. “The Myth of St. Romeo,” *National Post*, 12 April 2005.

⁹⁴ Richard Cobbold, “Interview with Roméo Dallaire: Royal United Services Institute for Defense Studies,” *RUSI Journal* 150, no. 5 (October 2005): 31.

⁹⁵ Michael Enright, “Lost Mission to Rwanda: An Interview with General Romeo Dallaire.” *Queen's Quarterly* 107, no. 3 (Fall, 2000): 423; Cobbold, “Interview with Roméo Dallaire . . .”, 31.

permitted to use force for self-defence.⁹⁶ This, coupled with the lack of a combat-capable force that would be sure to suffer heavy casualties if not a total collapse, precluded Dallaire from taking decisive action to disrupt the violence.⁹⁷ Commenting on the impact of the inability to act, Dallaire stated:

Secondly, there is the intense moral obligation and responsibility you feel to do something, to intervene - but you can't, because of your legal mandate and the limitations placed on your ability to act. This creates extraordinary moral and ethical dilemmas which build up pressure and stress.”⁹⁸

Further exacerbating the political dimension of the UNAMIR mission was the sense of abandonment felt by Dallaire and his troops, “Then, ultimately, there is the realization that you've been abandoned, that the UN, the member states, have totally abandoned you to your fate. So total was our abandonment that we, a UN force, literally ran out of fuel, medical supplies, food.”⁹⁹

The spiritual dimension of moral injury is also evident in Dallaire’s accounts of his experience in Rwanda. General Dallaire was raised a Catholic and so had some specific religious ideations going into his mission. While he does not express questioning or a loss of faith as part of his experience, he did rely upon it for a sense of hope and purpose as the mission devolved from peace to violence. “Only one thing gave him hope: if the Devil was there, God must be as well.”¹⁰⁰ Sidelined and predominantly a passive

⁹⁶ *Ibid*, 420.

⁹⁷ Carol Off, “Do the Right Thing! Lieutenant-General Romeo Dallaire in the 1990s,” in *Warrior Chiefs: Perspectives on Senior Canadian Military Leaders*, ed. Lieutenant-Colonel Bernd Horn and Stephen Harris (Toronto: Dundurn Press, 2001), 336.

⁹⁸ Cobbold, “Interview with Roméo Dallaire . . .”, 31.

⁹⁹ *Ibid*.

¹⁰⁰ Carol Off, *The Lion, The Fox and The Eagle: A Story of Generals and Justice in Rwanda and Yugoslavia* (Toronto: Random House, 2000), 83.

observer to the outbreak in violence, Dallaire confronted another dilemma. Following the execution of the ten paratroopers, Belgium ordered the withdrawal of Dallaire's best-trained soldiers, and the UN struggled to retain the security council's political will. This resulted in the UN's decision to withdraw from the UNAMIR mission. Brigadier General Henry Anyidoho, Dallaire's right-hand man when the order to withdraw was received, recalls the pact they made together. "The order has to be lawful, and I thought what they were telling us at that moment by the dictates of my conscience was not lawful, it was not the right thing. And if we have to disobey that in order to save lives, then that was it. And we were prepared to face the consequences."¹⁰¹ In making this decision, the two had to weigh the potential outcomes of disobeying the order. The preeminent consequence to weigh was the risk to the lives of their personnel and their own. Already desperately short of essential supplies, such as food and water, they risked being further abandoned. Compounding this risk were the poorly trained and equipped soldiers and dwindling arms supplies available to safeguard themselves from falling victim to the ethnic strife. Facing yet another ethical quandary, Dallaire speaks to the moral foundation that framed their decision to assume the risk and remain in theatre:

But you don't, you don't just say... damn, I did what I could, and it's too bad. Not this stuff. I don't think I'm allowed to do that, morally. Just like I wasn't allowed to leave the prime minister to be killed, and not try to give her the opportunity to speak to her country. Just like we continued for weeks and weeks and weeks and I took casualties and risked the lives of my troops and myself at times to try to do something to stall it, stop it, control it, save people, until a mandate came out.¹⁰²

¹⁰¹ Off, *The Lion, The Fox and The Eagle* . . . , 73.

¹⁰² Enright, "Lost Mission to Rwanda . . . , 412.

Closing out this discussion on the Rwandan genocide, Carol Off provides a perspective on the morally injurious environment that characterized Dallaire's experience as UNAMIR commander and his resulting struggles. "What emerges is a picture of a man who is in many ways is the author of his fate: he made his own decisions, relying on his own moral core, and now he suffers the consequences."¹⁰³ While Dallaire has been diagnosed and undergone treatment for his enduring struggles with PTSD, it is clear that there are moral dimensions deeply rooted in his experience as commander. Carrying the burden of responsibility for decisions with such polarized lose-lose outcomes results in extraordinary dissonance that can be problematic for some to extinguish independently.

The final story is that of Captain Robert Semrau, who, while fulfilling a mentorship role with the Afghan National Army (ANA) in October 2008, encountered a severely injured Taliban fighter who had been shot out of a tree by an Apache helicopter and was dying of wounds to the abdomen and legs.¹⁰⁴ The Afghan officer (to whom Capt Semrau was subordinate in his mentorship role) decided the man was too wounded to save, leaving the injured man to die. This decision contravenes international conventions and Canadian rules of conduct, where the primary responsibility is to administer first aid and arrange for medical evacuation of the injured combatant.¹⁰⁵ In light of the man's injuries and based on the decision of the Afghan Commander to leave the injured man, Capt Semrau chose to end the injured fighter's suffering in an act commonly referred to

¹⁰³ Off, *The Lion, The Fox and The Eagle* . . . , 12.

¹⁰⁴ Rémi Landry, "Was Former Captain Robert Semrau Solely Responsible, from an Ethical Point of View, for Killing an Injured Man?," *Canadian Military Journal* 12, no. 2 (Spring 2012): 55; Michael Friscolanti, "Capt. Robert Semrau dismissed from the Forces: Canadian soldier avoids jail time for shooting a wounded insurgent in Afghanistan (Updated)," *Macleans*, 5 October 2010.
<https://www.macleans.ca/news/canada/capt-robert-semrau-dismissed-from-the-forces/>

¹⁰⁵ Landry, "Was Former Captain Robert Semrau . . . , 55.

as *mercy killing*. The topic of mercy killing can incite much debate and is beyond the scope of this paper. To examine this situation from the perspective of moral injury, it will be assumed that only one of two options were at Capt Semrau's disposal, leave the man to continue to suffer and succumb to his mortal wounds or end the man's suffering. To examine this situation in this context, one must also assume the Taliban fighter's wounds were indeed mortal, and there was insufficient time to permit any form of medical intervention to care for or ease the man's suffering. While not medically qualified to make such a determination, witness accounts suggest this was likely to be the case; he was "98 per cent [sic] dead."¹⁰⁶

Capt Semrau was confronted with a lose-lose situation in the context described above, commonly referred to as a *harm dilemma*, which addresses circumstances where all possible solutions will cause harm or injury.¹⁰⁷ In his review of the events, Landry addresses the moral aspects of situations such as this, asking whether the Canadian military's ethics are too strict. He explores the question of what Canada wants from its soldiers. Should soldiers be trained from a programmatic standpoint, such that grey areas in decision-making should be avoided and all situations should be distilled into black and white to the greatest extent possible? From that standpoint, the situation confronted by Capt Semrau was simple. The man was injured, his code of conduct clear, administering first aid and arranging for medical evacuation were the only acceptable courses of action. His efforts should have been concentrated toward convincing the Afghan commander not to leave the injured man and, if unable to convince otherwise, adhere to the orders of his

¹⁰⁶ Friscolanti, "Capt. Robert Semrau dismissed from . . .

¹⁰⁷ Landry, "Was Former Captain Robert Semrau . . .", 53.

commander. The judge presiding over Capt Semrau's courts martial reinforced such a rigid approach to decision making, where orders shall supersede a soldier's own moral code, stating, "Decisions based on personal values cannot prevail over lawful commands."¹⁰⁸

How each responds and resolves deeply rooted moral dilemmas and decision-making is very much individualized. For whatever reason, Capt Semrau believed the right decision in this particular instance was to end the injured Taliban fighters suffering. This could have been based solely on his own personal moral code; however, it may also have been a result of external factors such as experience and training. Whatever the reason, Capt Semrau was likely to have felt quite convicted about what he believed was the right thing to do. In arriving at his decision, he had to backtrack to the dying insurgent after the Afghan rifle accompany to which he was attached had left him.¹⁰⁹ Not only did the action he decided upon contravene the Canadian code of conduct, but he also sidestepped the authority of the ANA commander, "In his capacity as a mentor, Semrau had no authority to overrule the ANA commander."¹¹⁰ While the judge was clear in the expectations of soldiers facing such morally dissident situations, others have argued that soldiers do have an obligation not to set aside their personal values and beliefs in the conduct of their duties. Gabriel discusses the role that obligations play in ethical decision-making:

An act of ethical obligation implies the ability not to do what one ought to do... observing obligations does not always mean taking action in compliance with the norms of a profession. If one imparts an ethical

¹⁰⁸ Friscolanti, "Capt. Robert Semrau dismissed from . . .

¹⁰⁹ Andrew Duffy, "No appeal for soldier convicted of shooting wounded Taliban fighter," *Ottawa Citizen*, 1 January 2011.

¹¹⁰ *Ibid.*

quality to the notion of obligation, the course of action chosen must be undertaken because it is believed to be ethically right.¹¹¹

Given the unblemished and exemplary service record preceding this action, it is reasonable to assume that Capt Semrau was either doing what he believed was the best thing given the circumstances or doing what he had been conditioned to understand as the right thing to do.¹¹² Interviewed on the Capt Semrau case and conviction, Lieutenant General (Ret'd) MacKenzie acknowledged that such grave circumstances as Capt Semrau confronted are rare and not something soldiers are prepared to deal with.¹¹³ MacKenzie further stated that the “. . . complicated battlefield context makes them all extremely difficult to judge – especially in a peaceful Canadian court – and they are best left unreported.”¹¹⁴

Notwithstanding the ethical debate, the purpose of introducing this story is to gain an appreciation for how it relates to the concept of moral injury and how the situation could be morally injurious. Foremost, this example highlights aspects related to moral bad luck whereby Capt Semrau and the rifle company he was attached to, based on several variables such as time and location, encountered the injured man. If the only two viable options were to leave the man or take action to end his suffering, both options provided unenviable choices likely to result in dissonance. Do nothing and leave the man to continue suffering or take his life to alleviate his suffering given the projected outcome. For one reason or another, Capt Semrau could not accept the former and was

¹¹¹ Gabriel, *The Warrior's Way: A Treatise on . . .*, 19, 22.

¹¹² Landry, “Was Former Captain Robert Semrau . . .”, 55.

¹¹³ Bryn Weese, “Former general backs soldier's decision,” *The Toronto Sun*, 20 July 2010.

¹¹⁴ *Ibid.*

compelled toward the alternative perceived lesser of evils. It was a lose-lose situation as he could not accept leaving the man, but in intervening, he deliberately took another man's life. As a result, he faced confronting societal aspects of moral injury, wherein his actions were put to question and deliberated, not only by the courts martial but also by the public.

Further, this situation illustrates how tension can develop between the various cause factors believed to lead to moral injury, perpetration, omission, and the inability to act. Capt Semrau could not accept the choice of omission, in otherward, taking no action and allowing events to run their course. Therefore, he was left with a choice between an inability to act by strictly adhering to orders and policy, which would have obligated him to adhere to the Afghan commander's decision to leave the suffering man, or perpetrating an act of violence to end the man's suffering. Whether Capt Semrau perceived the situation correctly, it is reasonable to assume that in his mind, he was faced with a choice contracted between two undesirable outcomes. He resolved to act in the manner that with the brief period he had to contemplate his choice, was the action he would most be able to accept upon reflecting on his actions in the future.

Conclusion

Associated with but distinct from PTSD, moral injury is a guilt or shame-based response to the action, inaction or inability to act to violations of deeply held, communally shared moral beliefs and expectations. Both are instigated from traumatic events, but as opposed to the fear associated with PTSD, unextinguished guilt and shame is the principal cause of dissonance with moral injury. Over time, the dissonance associated with the inability to extinguish these emotions linked to deeply held beliefs intensifies. This results in disrupting one's capacity to function and alters their character.

Various dimensions can contribute to and exacerbate the dissonance derived from an event. Poor, ineffective or immoral leadership can taint an organization and enable toxic deviant group behaviour that violates norms. Imposing political will on an adversary can be morally disruptive. Both because imposing will requires soldiers to act in ways that would be unlawful in any other context, and soldiers may be precluded from intervening in acts that contravene their beliefs as a result of the ROE imposed on their mission. Societal expectations and the criticism of an operation can negatively affect a soldier's perception of value for the mission and their actions. A commonly held societal belief that the mission was ineffective or a failure can exacerbate feelings of guilt and shame pertaining to one's actions in support of that mission. Spirituality can be similarly disrupted by one's actions but may also provide insights into potential treatment options for those who are morally injured. Each dimension has an important role in furthering the characterization of this condition and contributing to prevention and treatment.

Finally, vignettes were provided to support the theory and illustrate the concept of moral injury. Each of the examples was specific to ground force operations, which could

lead one to conclude that moral injury is limited in relevance to the army. The next chapter will expand on these vignettes to demonstrate that moral injury is pertinent to the other elements of the military, as well as occupations common within society.

CHAPTER 3: CONTEXTUALIZING THE APPLICABILITY OF MORAL INJURY

... The problem we confronted in a lot of the operations that we did was [that it was] a lose-lose situation, a wrong-wrong. Its where no matter what you decide to do someone is going to die. And you're basically confronted with choosing the lesser of two evils. And that puts you into an enormous ethical dilemma and enormous stress that I think is at the root of much of the psychological problems that a lot of people suffered on operations ...

- Megan M. Thompson, Michael H. Thomson and Barbara D. Adams, *Moral and ethical dilemmas in Canadian Forces military operations: Qualitative and descriptive analyses of commanders' operational experiences*

Introduction

Much of the research literature pertaining to moral injury is focused upon the military and utilizes ground force operational examples to provide context to facilitate the conceptualization of the theory. Given that ground force operations involve a more intimate form of combat, it is reasonable to conclude that, specific to operations, army personnel are most likely to experience morally injurious events. However, the engagement in military operations also set morally disruptive conditions for the air force and naval personnel. This chapter will provide for that context while deepening the theoretical understanding of the condition.

Given the similarities of moral injury theory with that of PTSD, it is natural that much of the research has centred upon military personnel. Is moral injury isolated to engagement in military operations? Other occupations and individuals within society are not immune to encountering traumatic events and complex ethical dilemmas. The applicability of moral injury to other occupations and common theoretical linkages will be explored. In so doing, the CAF's vulnerability to the effects of moral injury will be better contextualized.

Moral Injury Beyond the Army

Similar to the contrast in the propensity for experiencing morally injurious events between society and those serving in the military, a similar disparity is likely to exist between the army and that of the air force and navy.¹¹⁵ This conclusion is drawn from the fact that many of the most ethically transgressing events provided in the literature are associated with army/land warfare. This is likely the result of the very nature of land warfare in contrast to that of the air and sea. It provides a more intimate and engaged setting between combatants requiring soldiers to project violence and kill within relatively close range to one another. However, moral injury is not exclusive to the army and should be a topic of interest and concern for the other elements as well.

Deakin provides for the story of Robert Stanford Tuck of the Royal Air Force, who faced a similar dilemma as that confronted by Capt Semrau.¹¹⁶ After shooting down a German plane at sea, Tuck concluded that the lone survivor was sure to freeze and die slowly with nothing other than a life jacket to keep him afloat in the wintry waters, so far from shore and with no ships in sight. After ordering the other pilots to return to base, Tuck reasoned that if it were him in the same position, he would be praying for someone to end his suffering, and so he shot the German airman. "God knows this is what I would want to happen! Yes, I am sure. I am sure. And so I will do it. ... It was the right thing to do, the only thing to do. But I will tell no one, for some may not understand."¹¹⁷ This decision was not an easy one for Tuck. There was relatively little time available for him to contemplate alternatives. He perceived a choice between leaving the German airman to

¹¹⁵ Gabriel, *The Warrior's Way: A Treatise on . . .*, 21.

¹¹⁶ Stephen Deakin, "Mercy Killing in Battle," *Journal of Military Ethics* 12, no. 2 (7 August 2013), 167.

¹¹⁷ *Ibid.*

die slowly or putting an end to his suffering. Deakin's article outlines two principles (or values) typically contemplated by and utilized by soldiers to arrive at and justify their decision in such scenarios; last resort and good faith. Last resort, in that there are no other possible alternatives to save the individual, and good faith, in that they act in the best interest of the individual (friend or foe) given the circumstances.¹¹⁸ Despite military veteran's efforts to substantiate their actions, often the impact of the difficult decisions they make endures. Such as was the case for Tuck, who, when discussing the incident 14 years later, stated, "All I know is I couldn't bear to fly away and leave him ... and I couldn't bear just to watch him, either."¹¹⁹

NATO's Kosovo air targeting and strike campaign offers a second example of potentially morally injurious circumstances particular to the air force. During the NATO bombing campaign against the Federal Republic of Yugoslavia, NATO flew 10,484 strike sorties resulting in approximately 500 civilian deaths.¹²⁰ A comparatively small number of strikes came under scrutiny, a list of which was provided in a letter to NATO Secretary-General Javier Solana by Human Rights Watch.¹²¹ Two strikes, in particular, drew considerable attention and questions associated with whether the strikes violated international humanitarian law. One involved a civilian passenger train inadvertently struck as it crossed a bridge on 12 April 1999, and the second involved a Serbian Television and Radio station on 23 April 1999. While there are potentially morally

¹¹⁸ *Ibid.*, 173.

¹¹⁹ *Ibid.*, 168.

¹²⁰ Carla Del Ponte, "International Criminal Tribunal for the Former Yugoslavia (ICTY): Final Report to the Prosecutor by the Committee Established to Review the NATO Bombing Campaign Against the Federal Republic of Yugoslavia," *International Legal Materials* 39, no. 5 (8 June 2000): 1272.

¹²¹ Human Rights Watch, "Human Rights Watch Letter to NATO Secretary General Javier Solana," last accessed 9 January 2021, <https://www.hrw.org/legacy/campaigns/kosovo98/solana.shtml>

injurious events associated with the first, only the second incident will be explored in detail.

NATO came under considerable scrutiny for its targeting of the civilian television and radio station from Amnesty International and Human Rights Watch.¹²² NATO was accused of violating international laws intended to protect civilians in the strike of civilian infrastructure that resulted in sixteen deaths and only interrupted broadcasting for approximately three hours. Concerns were also raised that NATO had violated Article 57(2) of international humanitarian law, which stipulates the requirement to provide “effective warning of attacks which may affect the civilian population, unless circumstances do not permit.”¹²³ For NATO’s part, they claimed the civilian transmitting station had a dual purpose (as did most of the Yugoslavian communication infrastructure), wherein it was an integral part of the adversary’s command, control and communications network. With respect to advance warning of the attack, there exists contradictory evidence and accounts. Amnesty International alleged that NATO officials stated they did not provide a specific warning as it would have endangered the pilots flying the sorties. However, foreign media were warned and aware to stay away from the television station and therefore, it would be probable that Yugoslav officials would have expected the building was about to be struck.¹²⁴ UK Prime Minister Tony Blair went further, accusing Yugoslav officials of deliberately not evacuating the building “. . . they

¹²² Steven Erlander, “Rights Group Says NATO Bombings in Yugoslavia Violated Law,” *New York Times*, 8 June 2000.

¹²³ Del Ponte, “International Criminal Tribunal for . . . , 1279.

¹²⁴ *Ibid.*

could have moved those people out of the building. They knew it was a target and they didn't . . . it was probably for . . . very clear propaganda reasons."¹²⁵

The International Criminal Tribunal concluded that although NATO made some mistakes throughout the airstrike campaign, there was ". . . no deliberate targeting of civilians or unlawful military targets."¹²⁶ While the report was conclusive about the campaign overall, it is less decisive about the individual targeting campaigns, including the strike on Radio and Television Serbia. Behind each of these questionable strikes are the decision-makers and, in particular, the pilots who are ultimately responsible for releasing their stores and delivering their weapons on target. While anonymity within the public domain is generally afforded, given the widespread coverage of the questions associated with events such as this, the aircrew are likely to be intimately aware of the societal concerns and condemnation. Besides their faith and trust in the allied campaign, what information or support is offered to the pilots to assure them of the righteousness of their actions? Further, when targeting errors are made, organizations such as NATO face scrutiny and are pressured to address their mistakes and take measures to prevent a reoccurrence. The organization serves as the face of public scrutiny. However, the pilots responsible for the strikes know who they are and have to reconcile their role and responsibility in the death of innocent people. While similar circumstances confronted pilots of ages past, such as those involved in the allied bombing campaign of World War II, in the information age of today, the death toll and impact of each strike is closely accounted for and publicly scrutinized to an unprecedented degree. In instances where

¹²⁵ *Ibid.*

¹²⁶ Erlander, "Rights Group Says NATO Bombings in Yugoslavia . . .

there are mistakes or the collateral damage is significant, this is likely to result in dissonance for the aircrew, some of whom may require support in resolving their role and responsibility to extinguish their association with the event appropriately.

The U.S. approach to submarine warfare invoked as part of World War II is riddled with potential morally injurious events. Despite the progress made as a result of the First World War with the establishment of treaties to safeguard merchant ships and their crews, “Within hours of the attack on Pearl Harbor, the chief of naval operations, Admiral Harold Stark, ordered unrestricted air and submarine warfare against Japan.”¹²⁷ This lackadaisical and liberal application of international law was likely due to the strong reaction evoked by the Japanese attack on Pearl Harbor and remained in force throughout the allied campaign. As the war progressed, a significant decline in Japanese merchant ships combined with the declining threat of aerial assault resulted in submarines increasingly engaged in surface gun attacks of smaller vessels of questionable military significance.¹²⁸ Contrasting the experience of submariners to that of allied bomber command, Sturma explains the more profound transgressions associated with the battle in the open sea:

As with many other modes of twentieth-century warfare, the technical and impersonal nature of a torpedo attack dehumanized the enemy and made killing easier. Many submariners habitually thought of ships sunk simply as a ‘target’, rather than the loss of life entailed. Compared with firing torpedoes at Japanese ships, attacks on smaller craft often brought submarine crews into close proximity with their victims and forced them to witness the lethal consequences of their actions with a discomforting intimacy.¹²⁹

¹²⁷ Michael Sturma, “Atrocities, Conscience, and Unrestricted Warfare: US Submarines during the Second World War,” *War In History* 16, no. 4 (November 2009), 449.

¹²⁸ *Ibid.*, 448, 451.

¹²⁹ *Ibid.*, 452.

Further contributing to the individualized moral component of their actions, naval commanders were not insulated by orders from higher command as those in the air war. Submariner superior command never ordered Captains to attack smaller vessels and rather deemed it preferred to provide autonomy and individual discretion to the commanding officers to determine which vessels to target.

While faith and discretion of command is coveted in modern doctrine,¹³⁰ the lack of bounds in targeting led to a diverse interpretation for which commanders alone were accountable and left to rationalize their decisions on their own. Although there were instances of small craft contributing to the war effort, whether by acting as pickets to report sightings of allied vessels to the Japanese or transporting cargo in support of sustaining the war effort. Similarly, there were reports of attacks mainly inspired by anger toward Japanese actions, boredom, frustration, or an attempt to raise morale.¹³¹ The most egregious of actions are associated with the USS Wahoo, responsible for the sinking of the Buyo Maru, a large Japanese troop ship on 26 January 1943. With hundreds of soldiers remaining in the water and lifeboats, the Captain (Dudley Morton) ordered his crew to open fire. While some claimed the survivors had opened fire on the Wahoo, the Wahoo's war patrol report indicates the Japanese soldiers returned fire only after the Wahoo commenced sinking the lifeboats.¹³² Acknowledging that such heinous acts are rare, Sturma speaks to the spectrum of moral conduct during the Second World War.

¹³⁰ Department of National Defence, *Joint Doctrine Note 02-2014 – Command & Control* (Ottawa: DND Canada, 2014), 2; Department of National Defence, B-GL-300-003FP-001, *Command in Land Operations* (Ottawa: DND Canada, 2007), 2-4.

¹³¹ Sturma, "Atrocities, Conscience, and Unrestricted Warfare . . .", 455, 458.

¹³² Charles A. Lockwood and Eric Martin, *Sink 'Em all: Submarine Warfare in the Pacific* (New York, 1951), 65; Sturma, "Atrocities, Conscience, and Unrestricted Warfare . . .", 448.

"Under the Geneva Convention of 1929, survivors of a sinking ship were to be protected from further harm. Mush Morton's shooting at lifeboats and men in life jackets after sinking the Buyo Maru, however, represented one end of the continuum rather than an isolated incident."¹³³

On a much smaller scale, submarine crews frequently demonstrated little reservation toward the suffering or killing of the Japanese. In certain instances, this involved inaction, leaving survivors of sunken craft to succumb to the elements at sea. In others, it involved the slaying of civilians, such as was the case with the USS Barb. After the boarding party returned with two bags of confiscated items from a small weather-reporting vessel, eight Japanese ran out on deck fleeing the diesel tanks that had caught fire. The Barb's four-inch gun was turned on the Japanese attempting to flee the fire, with the entire event filmed from the bridge with a movie camera.¹³⁴ Despite the questionable need for violence associated with many of these acts, some submariners managed to reconcile the events. Others experienced remorse for these actions, some during the hostilities and many not until after the war. Experiencing regret for following orders to sink several fishing trawlers as a crewmember aboard the USS Seahorse based on his officer's insistence that it was their duty to attack all enemy vessels encountered, Slade Cutter struggled with his actions as a crewmember. To resolve his dissonance, Cutter sought the advice of Charles Lockwood (commander of submarines Pacific), who advised him to let his conscience be his guide.¹³⁵ Cutter resolved to no longer engage fishing trawlers. Those who did not come to terms with their remorse until later likely suffered

¹³³ Sturma, "Atrocities, Conscience, and Unrestricted Warfare . . .", 457.

¹³⁴ *Ibid.*

¹³⁵ *Ibid.*, 453.

and experienced significant disruption to their moral frame of reference. Such was the case for the commander of the USS Bowfin (Walter Thomas Griffith). After sinking four schooners, he watched along with his crew, men, women and children struggling in the water after their ships sank. Reportedly, ". . . Griffith became profoundly depressed over the attacks in later life."¹³⁶

It is likely that the strong resolve prompted by the Japanese attack on Pearl Harbor and stories of ill-treatment of fellow allies throughout the war, provided sufficient justification for some. These violent actions would permeate to others and be exacerbated by group dynamics known to lead individuals in a group setting to depart from their private moral standards.¹³⁷ Given time can play a role in providing a healing factor and that most soldiers departed their military group upon the conclusion of the war's hostilities, it is reasonable to assume that the justification for these acts (retribution) would diminish with time; however, the memory of their individual actions would persist. It is not difficult to appreciate how one may feel some degree of guilt and shame for neglecting to intervene to prevent suffering or for perpetrating such acts of violence, particularly in those instances where there was no evidence of wrongdoing by the individuals whom the violence was levied upon. To whom would one be comfortable enough to confide in and discuss such actions as part of their attempt to extinguish or mitigate their dissonance, and would those individuals be capable of understanding? For those sailors who neglected to save soldiers and civilians struggling for survival following the sinking of their ship, they perhaps have a preferable means to rationalize

¹³⁶ *Ibid.*

¹³⁷ Massachusetts Institute of Technology, "When good people do bad things: Being in a group makes some people lose touch with their personal moral beliefs," last accessed 14 January 2021, <https://www.sciencedaily.com/releases/2014/06/140612104950.htm>

not intervening. Either the potential for enemy attack by remaining on station too long or the lack of space aboard (particularly with submarines) to accommodate prisoners of war or civilians. While these factors may provide some shielding of guilt or shame, it is probable that these circumstances would likely be morally disruptive for most.

Akin with the army, combat places airpersons and sailors in precarious situations where there is potential to experience morally injurious events. The failure to act or actions that transgress deeply held beliefs can result in moral conflict and perpetuate when individuals cannot resolve their actions and appropriately extinguish the event. Somewhat unique to the navy is the breadth to which such events may affect individuals, as combat and forced boarding events are generally supported and witnessed by significant proportions of a vessel's personnel. Given an appreciation that moral injury may affect each military element, one area of exploration that remains, is to understand whether moral injury is isolated to operational experiences where a nation's will is imposed on an adversary.

Moral Injury Theory Beyond Operations

Besides being equally relevant to each military element, it is important to consider another commonality between the morally injurious events explored. Each of the examples provided involves scenarios associated with combat operations and engagements with an adversary. Undeniably, engagements in military operations increase the probability of individuals encountering morally ambiguous and distressing scenarios. "Yet there is no office in society that is more morally ambiguous or more morally

hazardous to one than the military.”¹³⁸ Some moral injury researchers have focused exclusively on military operations, almost to a degree of exclusivity, where military service may be perceived as a pre-condition to moral injury. “. . . moral injury as I have defined it is a byproduct of war as long as war has existed.”¹³⁹ To further our understanding of moral injury and to avoid inaccurate assumptions about how it afflicts and disrupts individuals, it is vital to appreciate that moral injury is not unique and exclusive to operational dilemmas encountered as part of military service.

Various occupations are coming to terms with the disruptive risks posed by their employee’s roles and tasks. Nurses and other healthcare professions, particularly amidst the current global pandemic, are conflicted with their oath to put the needs of patients first and the increase in likelihood that they may not be able to do so due to circumstances beyond their control.¹⁴⁰ In the most challenging circumstances, some workers will face intense stress while making difficult decisions, such as triaging life-saving care due to limited resources.¹⁴¹ Police work and law enforcement may experience a variety of distressing circumstances in their line of duty. They can experience conflict between their own morals and their responsibility and duty to the organization. Such as what could be experienced in crowd control situations, where an officer may be ordered to use force on women and youth. Similar to the inability to act conundrum experienced in healthcare, police may confront circumstances of domestic abuse or suspected violence

¹³⁸ E.M. Adams, “The Moral Dilemmas of the Military Profession,” *Public Affairs Quarterly* 3, no. 2 (April 1989), 1.

¹³⁹ Jonathon Shay, “Moral Injury,” *Psychometric Psychology* 31, no. 2 (2014): 190.

¹⁴⁰ Wendy Dean, Simon Talbot and Austin Dean, “Reframing Clinician Distress: Moral Injury Not Burnout,” *Federal Practitioner* 36, no. 9 (September 2019): 401.

¹⁴¹ Moral Injury Guide, “Moral Stress Amongst Healthcare Workers During COVID-19: A Guide to Moral Injury,” accessed 25 January 2021, <https://www.moralinjuryguide.ca/>

toward children, where they are unable to respond quickly enough.¹⁴² Further, departmental policies and the law may preclude the police from intervening to the extent they suspect is appropriate (such as removing children from a perceived threatening environment), only for their intuition to be validated when significant adverse outcomes are reported at that address in the future. Moral injury is also understood not to be associated with one's occupation specifically. Examples of personal life decisions where one has departed from their values and what they know to be correct may also lead to guilt and shame that one is incapable of extinguishing. Dombo et al. provide three such examples. A woman who reluctantly ended her pregnancy to preserve her marriage, a minister whose affair with a fellow parishioner became public, and an individual who, despite cautions from friends to rest before departing, fell asleep at the wheel, killing a passenger in an oncoming vehicle.¹⁴³

Many of the examples used to illustrate moral injury are those that deal with death, serious injury, or a severe breach of trust, all outcomes for which there is a considerable degree of permanence. "More typical with moral injury is an appraisal that the behaviour caused irreparable damage to self and others that cannot be undone and cannot be repaid."¹⁴⁴ These extreme examples serve as the best means to illustrate the concept, as they are associated with transgressions of common societal morals and values that most can easily relate to. However, not all moral injuries result from such severe

¹⁴² Konstantinos Papazoglou and Brian Chopko, "The Role of Moral Suffering (Moral Distress and Moral Injury) in Police Compassion Fatigue and PTSD: An Unexplored Topic," *Frontiers in Psychology* 8 (15 November 2017): 3.

¹⁴³ Eileen A. Dombo, Cathleen Gray and Barbara P. Early, "The Trauma of Moral Injury: Beyond the Battlefield," *Journal of Religion & Spirituality in Social Work: Social Thought* 32, no. 3 (23 July 2013): 202-206.

¹⁴⁴ *Ibid.*, 202.

circumstances, nor is it easy to imagine how the experience was traumatizing. The following example serves to illustrate this aspect. While the experience did occur during a military operation, the morally injurious event could be experienced outside the context of a military operation. Castro provides a story about treating a soldier who had seen considerable combat in Afghanistan.¹⁴⁵ He assumed that the combat experiences were likely at the root of the soldier's struggles. After many sessions, he discovered that the combat experiences were not at the root of the soldier's distress; rather, it was his actions related to an encounter with a little boy begging for candy. Motivated by frustrations with their recent struggles in fighting an adversary that employed strike and hide tactics, the soldier handed the child an empty candy bar wrapper that appeared full as they drove away. He recalls the big smile on the child's face while handing him the bar, but also the subsequent extreme look of disappointment on the child's face when he realized the wrapper was empty. The soldier's struggles, predominantly associated with shame related to an action for which he is deeply embarrassed, were rooted in how he exploited the little boy's innocence. While one can appreciate that the soldier may be ashamed of his action, similarly, not everyone would experience the degree of disruption that this resulted in for the soldier. Like PTSD and other trauma-related injuries, there is an element to moral injury that is individualized; what is morally injurious to one may not be injurious to another.

What then is the common thread among the scenarios explored that accounts for the pan-occupational applicability and the individualized aspects of moral injury? The

¹⁴⁵ Defence Ethics Programme, "Understanding moral injury from a character disruption perspective," accessed 20 January 2021, http://ethics.mil.ca/videos/injury_en.html

experiences are injurious because they disrupt the deeply rooted value framework of an individual. An individual's values are shaped from many sources, family, friends, mentors, communities, experience, and so forth.¹⁴⁶ Individuals begin to construct their personal value systems at a very young age. While it remains subject to influence, it is understood to become quite firmly fixed as part of childhood.¹⁴⁷ Since values are influenced by individual personal experiences and come from many sources, how and the degree events transgress them is also individualized. This, therefore, can account for some rationale for the differing degrees of dissonance experienced by individual soldiers who have experienced the same event.

Professions such as the military have distinctive professional codes of conduct and institutional values that the organization endeavours to interlace within one's pre-existing personal moral conscience and system of values.¹⁴⁸ This has been referred to as a *braided identity*, which results from the combination of a soldier's personal values with that of the military's professional ethics.¹⁴⁹ While one's personal values are understood to be relatively rigid, as argued by Shay, an individual's values are subject to influence¹⁵⁰, particularly in group settings or as a member of a team.¹⁵¹ Ideally, through the institutionalization of its ethos, the military, as with other professions that espouse values and a code of conduct, endeavours to smooth out variations within the moral fabric that each of its members have developed prior to joining the organization.

¹⁴⁶ Duane Larson and Jeff Zusto, *Care for the Sorrowing Soul* (Eugene OR: Cascade Books, 2017), 16.

¹⁴⁷ Shay, "Moral Injury," *Psychometric Psychology* . . . , 184.

¹⁴⁸ Department of National Defence, *Duty with Honour, The Profession of Arms in Canada* (Ottawa: Canada Communications Group, 2009), 24-35.

¹⁴⁹ Larson and Zusto, *Care for the Sorrowing Soul* . . . , 16.

¹⁵⁰ Shay, "Moral Injury," *Psychometric Psychology* . . . , 184.

¹⁵¹ Craig Haney and Philip Zimbardo, "The Past and Future of U.S. Prison Policy: Twenty-Five Years After the Stanford Prison Experiment," *The American Psychologist* 53, no. 7 (1998), 709.

Interweaving the organization's code of conduct into the moral fabric of its members to establish a *braided identity* is an essential responsibility of professions. A profession is obligated to equip its members with a firm understanding of its code of conduct to ensure they can discern right-from-wrong and uphold the values to which the profession espouses. This is of particular relevance in the case of the military, where deciphering right-from-wrong for grave actions can vary depending on the circumstances. "During war, service members are at times required (e.g., for survival, to accomplish a mission objective) to perform acts that would be illegal in most other contexts (i.e., killing)."¹⁵² However, in some circumstances, overlaying a professional code of conduct over one's personal values and beliefs can complicate an individual's value system and lead to the inability to satisfy both their personal and professional ideals. Akin to how a group can negatively influence someone to depart from their private moral standards, upholding one's professional responsibility and duty can result in a similar conflict with one's personal beliefs.¹⁵³

For some military occupations, the potential for conflict in values is exacerbated by the duality of their professional obligations. Besides their membership in the profession of arms, they are obligated by other professional responsibilities and codes of conduct. Doctors, lawyers, chaplains and engineers are but some of the occupations whose braided identity comprises three systems of values that can come into conflict. *Duty with Honour* provides the example of a doctor who may experience a conflict of interest between maintaining doctor/patient confidentiality and the operational readiness

¹⁵² Drescher et al., "An Exploration of the Viability . . .", 8.

¹⁵³ Massachusetts Institute of Technology, "When good people do bad things . . ."

of a unit.¹⁵⁴ The conundrum of values can be intensified by other factors that have been explored earlier in this paper, such as societal expectations. For example, consider the adage/tradition associated with a Captain going down with the ship. Despite saving those who are rescuable, a Captain may still feel guilt and be shamed by others for not having gone down with the ship along with those who were not savable.

Values are essential underpinnings of character.¹⁵⁵ As a result of this association, an incongruence between values and a departure from deeply rooted values can lead to a crisis of character. This crisis left unchecked “. . . deteriorates their character, their ideals, ambitions, and attachments begin to change and shrink.”¹⁵⁶ An inability to come to terms with and distinguish the internal struggle that disrupts an individual’s sense of oneself is moral injury:

Moral injury is the complex ‘soul’ wound that results from a person’s inability to resolve the difference between one’s idealized values and one’s perceived experiences. This wound produces a chain of emotions and maladaptive behaviors that corrode character and damage an individual’s capacity for living.¹⁵⁷

A soldier (or anyone) left to their own to come to terms with actions they have taken or witnessed and not intervened may struggle with their identity. The person they knew or believed they knew could not do such things. While time is often touted as a form of healing for some traumatic events (such as the loss of a loved one), it plays an inverse role with the disruption of character related to moral injury. A soldier's disrupted self-

¹⁵⁴ Department of National Defence, *Duty with Honour*. . . , 12.

¹⁵⁵ Mary Crossan, Daina Mazutis and Gerard Seijts, “In Search of Virtue: The Role of Virtues, Values and Character Strengths in Ethical Decision Making,” *Journal of Business Ethics* 113, no. 4 (April 2013): 568.

¹⁵⁶ Shay, “Moral Injury,” *Psychometric Psychology* . . . , 186.

¹⁵⁷ Larson and Zust, *Care for the Sorrowing Soul* . . . , 18.

identity often does not “. . . arise until years after the war: ‘What kind of person am I to have done this?’”¹⁵⁸

It should be emphasized then that moral injury is of particular relevance to the military for reasons beyond the likelihood that operations will present morally distressful events. The nature of the role that the military fulfills makes it, at times, morally paradoxical to that of society. More so than that of many other professions, the military requires a professional code of conduct to shape and guide members of the organization. While these values are essential to govern the behaviour and expectations of its members, a rigid set of values overlaid atop their personal ones, can result in seams leading to the inability to satisfy both. Since the value system is so integral to the profession of arms and deeply ingrained within personnel, when circumstances that conflict with these values arise, they can be that much more distressing.

Conclusion

While the army is likely to encounter morally disruptive events most frequently, moral injury can afflict members of all military elements. The air force (predominantly aircrew) engage in the delivery of kinetic effects. In order to achieve those effects, the aircrew may be required to engage and kill their adversaries. Additionally, while great efforts to prevent collateral damage are involved with the targeting process, civilian casualties do result. Naval personnel may also witness morally disruptive events. While naval engagements have been less frequent in recent years, an aggravating factor

¹⁵⁸ *Ibid.*, 28.

associated with maritime events is that they often involve significant numbers of casualties. While they each have their nuances, personnel from each element are susceptible to moral injury.

Although the events associated with military operations present morally disruptive circumstances, operations are not an essential constituent. Other occupations and some complex life circumstances may also lead to moral injury. One characteristic common to professions that increases the potential for moral injury is their legislated system of values. A profession endeavours to weave its values system amongst one's personal value set into a harmonious braided identity to establish a predictable standard of conduct. In most circumstances, this can be readily achieved. However, given the distinctive personal values of each individual, there are circumstances where conflict arises between one's professional and personal values and the predictable outcome desired by the profession is disrupted.

In the subsequent chapter, the theoretical knowledge developed herein will be applied toward developing CAF-specific recommendations to enhance the resiliency of its personnel to moral injury. The treatment of personnel afflicted by moral injury can be complex, resource-intensive and lengthy. The development and adoption of organic resiliency strategies is consistent with the CAF's institutional priorities and will enhance the operational readiness of the force.

CHAPTER 4: RESPONDING TO MORAL INJURY

Air Marshal Arthur Harris, who headed Bomber Command in Britain, stated that those with 'sensitive minds' were not suited to leadership in the bombing force. American General Curtis LeMay declared his belief that 'every soldier thinks something of the moral aspects of what he is doing. But all war is immoral and if you let that bother you, you're not a good soldier.'

- Michael Sturma, *Atrocities, Conscience, and Unrestricted Warfare – US Submarines during the Second World War*

Introduction

An examination of moral injury would be incomplete without discussing how to respond to or treat moral injury. As identified earlier in this paper, moral injury remains relatively uncharacterized and undefined within medical literature compared with ailments such as PTSD. Whether it is an ailment for which a medical diagnosis is appropriate remains to be determined through continued research and deliberation amongst clinical experts, chaplains, researchers and other professionals.¹⁵⁹ An analysis of this is beyond the scope of this paper, but from the research examined, it does seem likely that moral injury can play a role in contributing to a patient's PTSD symptoms and therefore has the potential of influencing the diagnosis and treatment for PTSD.

Rather than examine how to treat moral injury, this paper will focus on organizational preventative strategies that could help reduce the potential for its onset. Given the propensity for which military personnel are likely to encounter morally ambiguous scenarios and the greater risk of moral injury that stems from this, it behooves the organization to develop exemplary moral and ethical standards and practices that

¹⁵⁹ Defence Ethics Programme, "Understanding moral injury from a character disruption perspective," accessed 20 January 2021, http://ethics.mil.ca/videos/injury_en.html

serve as a model for other institutions to emulate. Good departmental programs and policies exist to support the attainment of these high standards; however, some areas for improvement are necessary. Values play an integral role, both within the profession of arms and in the onset of moral injury. The rigidity of values and the ethical framework which soldiers utilize to respond when faced with ethical dilemmas requires careful and detailed consideration, particularly given the growing complexity of today's operating environment and that anticipated in the future.¹⁶⁰ Inculcating a culture of shared and open dialogue, driven and practiced by all levels of leadership, is an essential element toward enhancing resiliency and combatting moral injury. While treating moral injury remains an important field of research, developing strategies and equipping the CAF to address the underlying causes of dissonance that festers into moral injury is a preemptive and preferred approach that should commence in earnest.

Departmental Programs and Policies

Since moral injury results from transgressions of *commonly shared* deeply held moral beliefs, it should be possible to equip soldiers better to handle and respond to these trying circumstances. Moral injury is frequently associated with ethical dilemmas, and therefore, a review of the joint Department of National Defence and Canadian Forces *Code of Values and Ethics* is appropriate.¹⁶¹ The Table of Contents appears promising. In addition to the first chapter devoted to corporate-based values and ethics, it acknowledges

¹⁶⁰ Department of National Defence, *Duty with Honour*. . ., 74.

¹⁶¹ Department of National Defence, "Department of National Defence and Canadian Forces Code of Values and Ethics," last accessed 12 February 2021, <https://www.canada.ca/en/departement-national-defence/services/benefits-military/defence-ethics/policies-publications/code-value-ethics.html>

the unique aspects associated with military service with the code's second chapter, reserved to address *Values and ethics in operations*. However, in selecting this chapter, the user is provided with the following prompt. "This Chapter is to be developed by the CRS through the Director Defence Ethics Programme in partnership with Level One stakeholders from the Canadian Forces and the Department of National Defence that are significantly involved in military operations at home and abroad."¹⁶² An acknowledgement that the application of values and ethics in operations can be complex and therefore necessitates specific attention is positive. Unfortunately, it appears this chapter has been outstanding for quite some time as its status came under scrutiny within an article published in 2016.¹⁶³ The programme's applicability shortcomings in support of operations were noted as early as 2006 in a comprehensive review of the programme.¹⁶⁴

Examining the *Code of Values and Ethics* further, in conjunction with the Defence Ethics Programme website,¹⁶⁵ the critique of the program's utility to military personnel providing direct support to operations becomes apparent. The Chief of Review Services (CRS) is responsible for the Defence Ethics Programme, of which the *Code of Values and Ethics* is an integral component. The programme is a combined one, supporting both the civilian support structure (DND) as well as that for military personnel (CAF). The CRS is a predominantly business-oriented directorate with little experience or expertise associated with military operations (as the user prompt for Chapter II of the

¹⁶² *Ibid.*

¹⁶³ Allan English, "Cultural dissonance: ethical considerations from Afghanistan," *Canadian Foreign Policy Journal* 22, no. 2 (June 2016): 170.

¹⁶⁴ Col D.R. Sanschagrin, "The Defence Ethics Program in CF Operations" (Advanced Military Studies Programme, Canadian Forces College, 2006), 2.

¹⁶⁵ Department of National Defence, "Defence Ethics Programme," accessed 14 February 2021, <http://ethics.mil.ca/index-eng.aspx>

code acknowledges). A review of the ethics programme yields very little in terms of operational context. For example, Chapter I of the code includes a table of the values and expected behaviours. All of the expected behaviours represent everyday workplace/business ethics and are heavily weighted toward members being good financial stewards on behalf of the Government of Canada. The acknowledgement of the importance of providing a values-based framework to guide ethical decision-making in operations is excellent, but the framework to support the unique aspects and pressures of operational decisions remains outstanding.

One contributing factor to the failure to prioritize the development of operational ethics may be the cyclical nature of significant combat deployments. A Defence Research and Development Canada (DRDC) study identified both a geographic and time dependency associated with CAF personnel's exposure to potential morally injurious experiences during the mission in Afghanistan.¹⁶⁶ Those who deployed to regions that experienced heavy combat, such as Kabul and Kandahar, and those who deployed in earlier years of the mission where active hostilities were at their greatest, reported the highest exposure to potentially injurious events. Such large missions within actively hostile environments are relatively infrequent for the CAF. While this is very positive for limiting the probability of casualties, it may result in difficulties with maintaining momentum for initiatives that are most prevalent with combat operations. As a tightly resource-constrained branch of the government, when the CAF is not heavily involved in

¹⁶⁶ Anthony Nazarov, et al., *Greater prevalence of post-traumatic stress disorder and depression in deployed Canadian Armed Forces personnel at risk for moral injury* (Defence Research and Development Canada: DND Canada, 2018), 8.

combat operations, it is natural for priority and focus to shift elsewhere, impeding progress on task-specific objectives such as this.

Within Chapter 3, the potential for professional and personal values to come into conflict was identified. Further, the added complexity for military occupations that also subscribe to the professional obligations of a civilian profession (such as doctors) was also introduced. The publication *Duty with Honour* acknowledges this unique predicament referring to it as a dual professional status, “Resolving these potential conflicts between competing professional requirements is one of the key functions of the officers who lead these specialist branches. (See Section Three for a more detailed treatment of dual professional status.)”¹⁶⁷ Similar to the preceding observation pertaining to the *Defence Ethics Programme*, while the concept is acknowledged and accountability established, a review of Section Three of the document, unfortunately, does not provide a more detailed treatment of the dual professional status.

The failure to publish Chapter II to the *Code of Values and Ethics* along with the observation associated with the dual professional status could provide a rather bleak picture of DND and the CAF’s acknowledgement of the responsibility to equip soldiers for encounters with grave dilemmas that transgress deeply held beliefs. However, one document, in particular, provides for some optimism, *Ethics in the CF: Making Tough Choices*.¹⁶⁸ It is an instructor's manual that provides 40 ethical case studies, 20 operational (deployed settings) and 20 in garrison (workplace/office setting). The balance between the two types of scenarios is of interest given that operations do not represent

¹⁶⁷ Department of National Defence, *Duty with Honour*. . . , 12.

¹⁶⁸ Department of National Defence, A-PA-050-000/AP-002, *Ethics in the CF: Making Tough Choices* (Ottawa: DND Canada, 2006), 1-151.

half of the activity performed by the CAF. This appears to be an acknowledgement of what has been identified throughout this paper. Operational situations can provide a highly demanding and complex decision-making environment, involving scenarios that are relatively unique to the military. Owing to the extreme nature presented by operational predicaments and the fact that guidance for these dilemmas would be difficult to source externally given the scenarios are relatively unique to the profession of arms, tutelage and coaching pertaining to operational scenarios is deserving of a greater emphasis despite the infrequency and lower probability of encountering such grave circumstances. By way of a quick scan of the operational scenarios included within, it becomes evident that they have been developed through engagement and interaction with those who have served, providing value and realism to each scenario.

With respect to critiques associated with the manual, the first pertains to this author's lack of awareness or familiarity with it. A 24-year career in the RCAF, spanning the entire period of this publication's existence in print, performing research for this paper has provided for this author's first exposure to the publication. Referring to a primary resource for appointed unit ethics coordinators,¹⁶⁹ while there is a recommended ethics-reading list, a link or reference to this manual appears to be absent. Determining how widespread this manual is utilized within the CAF is beyond the scope of this paper. However, it would be of value in support of Professional Military Education (PME), pre-deployment training and annual unit ethics briefings. Specifically, concerning pre-deployment ethics training, it should be co-facilitated by personnel who have recently

¹⁶⁹ Department of National Defence, "Defence Ethics Programme," accessed 14 February 2021, <http://ethics.mil.ca/index-eng.aspx>

completed tours of duty within the planned theatre of operations to provide context-specific preparedness. The authors of *Ethics in the CF: Making Tough Choices* point to the value of context in providing scenario-specific training¹⁷⁰ and this would prepare soldiers to approach the kinds of morally transgressing events common to a specific theatre more confidently. Another potential shortfall with this manual is that it provides a range of responses to each scenario provided. Whether this is a shortfall, strength or otherwise, depends on the approach to ethical decision-making the CAF wishes to impart on its personnel, *rules* or *values*-based.¹⁷¹ A rules-based form of decision-making would imply a single acceptable response; whereas, a values-based approach would be tolerant and encourage a range of acceptable responses. The role values play in decision-making is important and can have implications that must be weighed in arriving at the CAF's institutional model.

Rigidity of Values

Much like the complex decision-making that soldiers encounter, the CAF faces the complex challenge of codifying a military ethos that equips, enables and yields predictable ethically based actions and decisions amongst its cadre of personnel. A significant contributor to the complexity lies in differentiating between *rules* and *values*-based ethics. The tension between the two was examined earlier in this paper as part of the review of Capt Semrau's case, where the military judge concluded it is unacceptable

¹⁷⁰ Department of National Defence, A-PA-050-000/AP-002, *Ethics in the CF*. . . , 146.

¹⁷¹ Laura Masson and Rene Moelker, "Teaching Gender, Teaching Culture: A Comparative Study of Gendered Dilemmas in Culturally Complex Situations," in *Warriors or Peacekeepers? Building Military Cultural Competence*, ed. Kjetil Enstad and Paula Holmes-Eber (Gwerbestrasse CH: Springer Nature, 2020), 180.

for personal values to supersede lawful commands. Nevertheless, there are instances where military personnel should set aside orders to do what is right. Larson and Zust provide for the contrasting story between two naval commanders operating in the vicinity of Vietnam in 1992.¹⁷² The CO of the USS Morton disobeyed direct orders and US policy to bring aboard and rescue 52 Vietnamese lost at sea while the CO of the USS Dubuque adhered to his orders, coming to the aid of 110 refugees his ship encountered by providing them food and water but did not permit them to board. For deviating from orders in favour of his conscience, the CO of the Morton was decorated by the Navy for his actions and thanked by survivors and their families for the rest of his life.¹⁷³ Whereas the CO of the Dubuque was convicted of dereliction of duty and submitted his resignation soon after his sentencing.

It would be a fair critique that this naval example is specific to the US and that both the Canadian and US militaries have their unique professional codes of conduct. However, the tension between rules and values is evident within CAF documentation. One of the four essential Canadian military values provided within Annex A to the department's code of values and ethics is duty.¹⁷⁴ While duty is provided as a value, it obligates soldiers to uphold and strictly adhere to the law (rules). Further, it is the value that requires soldiers to accept the precept of unlimited liability wherein they may be lawfully ordered into situations that could lead to the loss of their lives.¹⁷⁵ While in a warfighting context, it is understandable that there are circumstances that cannot tolerate

¹⁷² Larson and Zust, *Care for the Sorrowing Soul* . . . , 15.

¹⁷³ *Ibid.*

¹⁷⁴ Department of National Defence, "Department of National Defence and Canadian Forces Code of Values and Ethics," last accessed 12 February 2021, <https://www.canada.ca/en/department-national-defence/services/benefits-military/defence-ethics/policies-publications/code-value-ethics.html>

¹⁷⁵ Department of National Defence, *Duty with Honour*. . . , 27.

values conflicting with orders, *Duty with Honour* acknowledges the importance of developing values-based decision making:

Early development is basically rules-based. Members acquire initial skills in which the need for keen judgement is not as pronounced. The fundamental basis for development must quickly evolve into a principles-based approach, however, so development for military professionals thereafter consists of encouraging them to think critically, to be innovative and to carefully weigh courses of action.¹⁷⁶

Interestingly, as somewhat of a contrast concerning new members of the military and their basis for decision-making, a cross-cultural study of the Netherlands and Argentinean military concluded that older soldiers are more apt to rely on rule-based ethics while younger ones prefer virtue or values-based ethics.¹⁷⁷ Given the experience of the older students, they were inclined to integrate their personal experiences to form the basis of their decisions as a form of rules or learned ethics, as opposed to relying upon their values to chart their course of action.

The expectation for CAF personnel to develop a values-based approach, as stipulated within *Duty with Honour*, is consistent with a citation provided earlier in this paper from *The Warrior's Way*, also a CAF publication. However, a framework for applying values-based decision-making within these publications is relatively imprecise, non-specific and inexact. This is likely, in part, because embracing a values-based model is a challenging proposition for an organization to codify. There are occasions where commanders or soldiers have violated ROE or Laws of Armed Conflict (LOAC) and been rewarded for the strength in character they demonstrated. However, qualifying

¹⁷⁶ *Ibid.*, 59.

¹⁷⁷ Masson and Moelker, "Teaching Gener, Teaching Culture: A Comparative Study . . .", 180.

bounds for when this is permissible without the context particular to each situation can be extremely difficult and risky for an organization so reliant upon discipline.¹⁷⁸ While discipline is provided with a rather liberal definition within *Duty with Honour*, to most servicepersons, conceptually, it implies the strict adherence to rules and regulations. This interpretation is supported by the fact that militaries are customarily associated with a rigid form of discipline, coupled with the fact that institutionally, strict adherence is generally implied by the term. For instance, corrective measures within the CAF are referred to as *disciplinary measures* governed by a document that emphasizes this same term, the *Code of Service Discipline*.¹⁷⁹ Exacerbating a preponderance toward a rules-based methodology, administration within the CAF is strictly controlled and regulated. The rationale for the establishment of a closely monitored and restrictive authority and accountability structure has historical underpinnings.¹⁸⁰ While such a system is essential toward maintaining good governance and stewardship, it can result in the adverse consequence of inculcating leadership accustomed to relying upon policies and procedures to formulate decisions instead of intuition and good judgment predicated on values.

Finally, to formally architect and institutionalize a values-based approach, an organization must be willing for its reputation to face scrutiny. To inculcate values-based decision-making, an organization must stand behind their personnel when they make

¹⁷⁸ Department of National Defence, *Duty with Honour*. . . , 28.

¹⁷⁹ Department of National Defence, “The Code of Service Discipline and Me,” last accessed 16 March 2021, <https://www.canada.ca/en/department-national-defence/corporate/reports-publications/military-law/code-of-service-discipline.html>

¹⁸⁰ Captain(N) R. Westwood, “Authority, responsibility and accountability: the key to the effective functioning of National Defence headquarters” (National Security Studies Course Paper, Canadian Forces College, 2002), 2.

errors in judgement, share in the responsibility, and be open to facing public criticism for those errors. The organization must also embrace responsibility for addressing and correcting both the individual and the institutional factors that may have contributed to the error. Such an approach imposes risk, particularly for public institutions such as the armed forces. The public opinion of a nation's military can be a rather tenuous balance, and a strong opinion is crucial to maintaining governmental attention and consistent funding.¹⁸¹ This results in a considerably challenging dichotomy polarized between amicably addressing public criticism and concern while supporting its people and the institution's value-based system of development.

The case of Capt Semrau will be used to further the discussion related to a values-based approach. It must be emphasized that using his case as an example should not be considered as an attempt to advocate for Capt Semrau's chosen course of action, but his case serves well to illustrate this point further. An organization wholly committed to values-based decision-making would be obligated to have responded differently to his sentencing. The organization would have had to acknowledge a tolerance, and the deliberate training of its soldiers, to exercise independent judgment when facing complex decisions. Most notably, with no other indication of values that contravene or deviate from that of the institution, the organization would be obliged to look inward, reflect upon organizational factors that may have contributed to his decision, and commit to remediating as opposed to discharging him.

¹⁸¹ Scott Fitzsimmons, Allan Craigie and Marc André Bodet, "Canadian Public Opinion about the Military: Assessing the Influences on Attitudes toward Defence Spending and Participation in Overseas Combat Operations," *Canadian Journal of Political Science* 47, no. 3 (September 2014) 504.

Based on the importance of values in underpinning the military ethos and the role they play in contributing to moral injury, the CAF should place specific emphasis on training soldiers in how to respond in morally complex scenarios. The CAF should also explore and contemplate its balance between rules and values-based ethics. A healthy balance between the two is desirable¹⁸² and appears to be the intent of both the code and professional ethos. Achieving this aim may require the CAF to adopt a more flexible and malleable system of values, one that acknowledges and is permissive to the unique influence of personal values. Such a system would develop the capacity for soldiers to become adept at integrating the organization's values amongst their personal ones by routinely exercising and challenging their judgement, resulting in a better and more consistent harmony between the two. However, this ideal cannot be realized through publications alone. It must be practiced and rehearsed, the same as any other skill. Given that militaries are renowned for placing their members into the gravest of moral circumstances, the CAF should be a forerunner amongst other professions in both the training and the practiced application of ethically based decision-making.

Dialogue

Encouraging and fostering an organizational culture that embraces dialogue is crucial for building resiliency and combatting the potential of moral injury amongst soldiers. Given that moral injury results from an inability to extinguish dissonance, the importance of dialogue is clear, as it offers the injured an opportunity to explore

¹⁸² Masson and Moelker, "Teaching Gender, Teaching Culture: A Comparative . . .", 180.

alternative viewpoints related to their experiences, which they may not conceive on their own. One of the most notable examples of the value placed on discourse toward fostering positive mental health is associated with the *Bell Let's Talk* program.¹⁸³ However, by whom the opportunity for dialogue should be facilitated is more complicated given the disclosure apprehensions that some associate with confiding in the military chain of command, such as the fear of stigma and reprisal.¹⁸⁴ Further, recall the decision reached by Robert Stanford Tuck (RAF) shared in Chapter 3. As part of his deliberations about which action to take, he concluded, "But I will tell no one, for some may not understand."¹⁸⁵

Despite these reservations, familiarity and a shared military experience can provide considerable benefit in establishing a comfort level conducive for a soldier to confide and disclose their emotions.¹⁸⁶ Can such a simple and non-specific approach provided by comrades, as opposed to trained medical or mental health professionals, be an effective tool to address moral injury? Some researchers have expressed strong viewpoints in this regard. "The key to clinical success in working with such veterans and service members is their peers . . . Credentialed mental health professionals, myself included, have no business taking center stage in the drama of recovery from moral injury."¹⁸⁷ Fellow service members, and particularly those who have fulfilled the same role as one another, have a shared experience and associated level of comfort from which to appreciate and sympathize with each other's experience. As evident through the

¹⁸³ Bell Canada, "Bell Let's Talk," last accessed 22 February 2021. <https://letstalk.bell.ca/en/>

¹⁸⁴ Carey and Hodgson "Chaplaincy, Spiritual Care . . . , 5.

¹⁸⁵ Deakin, "Mercy Killing in Battle . . . , 167.

¹⁸⁶ Drescher *et al*, "A Qualitative Examination of . . . , 2446.

¹⁸⁷ Shay, "Casualties," . . . , 185.

various examples provided within this paper, several circumstances that can lead to the onset of moral injury are rather unique to military service. Those who have released from the CAF or must seek care external to the military (such as Reservists) may struggle to find common ground and comfort with someone they feel sufficiently comfortable disclosing their experiences and emotions.

For those traumatic events known to the chain of command, a common response of leadership is to engage the unit chaplain to offer support to those who witnessed or are affected by a severe incident. While this is a crucial support mechanism, in this author's non-combat experiences with traumatic events that impact a unit, healthy discourse amongst unit members can be impeded by primarily concentrating upon professional support services (such as a chaplain). Therapeutic discourse amongst coworkers can be hindered by the presumption that if one needs to talk about the events, that correlates to the requirement to speak to a health or spiritual professional, which implies one is unhealthy and requires professional support. What should be understood as a natural human need to discuss a traumatic event and rationalize what often is a new or infrequent experience can be ill-perceived as something applicable only to those struggling or who require professional help. Further, there are events or close calls that may go unreported and thereby do not result in the explicit referral of the chaplain to offer support.

Leadership at all levels must be appraised and taught the importance of generating dialogue as a central process toward assuring the continued well-being of their staff and subordinates. This must be emphasized and occur across multiple layers of the chain of command to provide safe disclosure mechanisms, free from the bias and prejudice that some associate with engaging the chain of command for support. Another fundamental

challenge associated with leadership providing effective support is not losing touch with the emotions experienced the first time the leader themselves experienced the same or similar event. Acknowledging the transgressing experience and sharing the emotions associated with the event is crucial, particularly for those experiencing an event for the first time. Dismissing it as just a routine part of the job or ignoring one's instinctual response tendencies does nothing to assist junior personnel in learning to cope with and process their experiences. Akin to the approach taken with inexperienced personnel scrupulously supervised when trained to perform critical or hazardous tasks, leaders must remain conscious of the innate responses toward transgressing events and provide forums to generate healthy discourse. In so doing, the leader provides a support mechanism to all, particularly to junior members, without the requirement for them to request or self-actualize their innate need to engage in discourse as part of naturally extinguishing the impact of the event. The recommendations within the preceding two paragraphs possess no reference to published literature. They were derived by applying principles gleaned from research performed in support of this paper, combined with this author's career in the military and more limited experience as a volunteer firefighter.

An Ethical Framework to Contemplate

A model to encourage ethically based dialogue and improve soldier's confidence, proficiency and performance when confronting ethical dilemmas and morally ambiguous circumstances may already exist within the CAF. The basis of the Royal Canadian Air Force's (RCAF) Flight Safety Program (FSP) is predicated on the primacy of a *just*

culture.¹⁸⁸ The principal intent of the flight safety program is to prevent aircraft occurrences (accidents or incidents). One of the primary means by which the program promotes prevention is by investigating all flight safety occurrences and concerns from the standpoint of a just culture. A just culture acknowledges that punitive measures do not solve the problem. While individuals may be at fault, often the organization, along with processes and procedures, may also be at fault. In order to be able to investigate all occurrences and concerns, the program is dependent upon personnel to voluntarily acknowledge errors and freely report them. “. . . the FSP does not assign blame. Personnel involved in a FS occurrence are de-identified in the final report and the report itself cannot be used for legal, administrative, disciplinary or other proceedings.”¹⁸⁹ However, embracing a just culture does not oblige an organization to accept a blame and reprisal-free philosophy (see Figure 4.1).¹⁹⁰ The FSP acknowledges that while a non-punitive environment encourages the desired propensity toward reporting, the program’s just culture does not obligate management to accept negligence or willful, deliberate deviations from norms, standards and practices.¹⁹¹ Given the program’s promise of anonymity, this is achieved by operating separate and distinct from management. In instances where negligence or deliberate acts are suspected, management may conduct parallel investigations into the incident, but those investigations remain separate and distinct from the flight safety program.

¹⁸⁸ Department of National Defence, A-GA-135-001/AA-001, *Flight Safety for the Canadian Armed Forces* (Ottawa: DND Canada, 03 August 2020), 1-5/12.

¹⁸⁹ *Ibid.*

¹⁹⁰ Philip G 2nd. Boysen, “Just Culture: A Foundation for Balanced Accountability and Patient Safety,” *The Ochsner Journal* 13, no. 3 (Fall 2013): 400.

¹⁹¹ Department of National Defence, A-GA-135-001/AA-001, *Flight Safety for . . .*, 1-5/12.

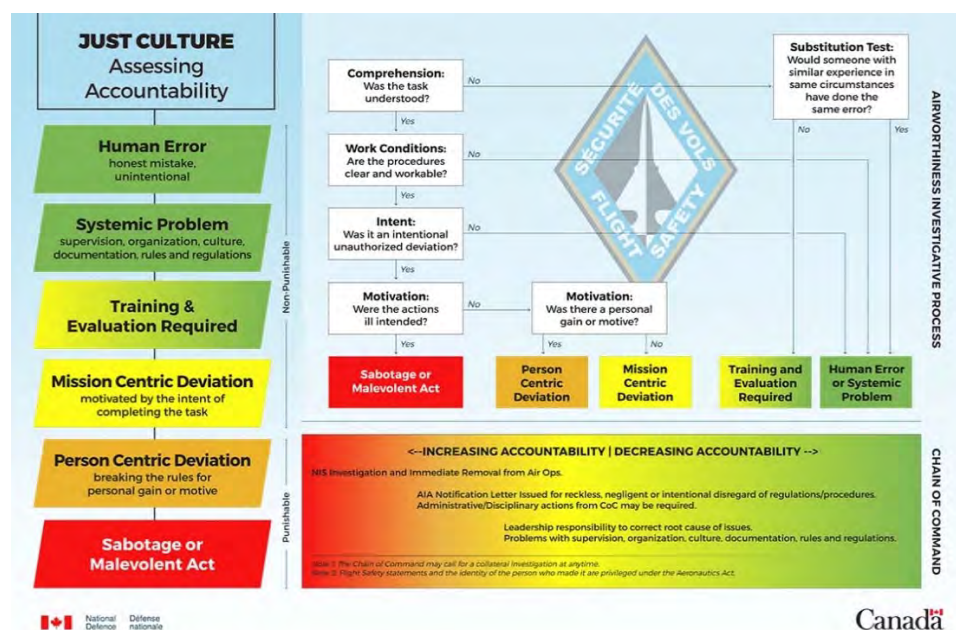


Figure 4.1 – Directorate of Flight Safety Just Culture Framework

Source: Department of National Defence, A-GA-135-001/AA-001, Flight Safety for . . . , 1-5/12.

Embodying a just culture provides incentives beyond the opportunity for the organization to appreciate how the organization and its processes/procedures may have contributed to an error. One incentive of particular importance pertains to education, “A just culture balances the need for an open and honest reporting environment with the end of a quality learning environment and culture.”¹⁹² The FSP's foremost prevention activity is education. One of the principal ways this occurs for those directly involved with the conduct and sustainment of flight operations is through briefings stipulated as a preventive measure derived from the investigation. Preventive measures are developed to address the hazards found to have contributed to the occurrence and are the means by which the FSP contributes to managing the risk inherent in flying operations.¹⁹³ The anonymity afforded by the FSP allows the flight safety team to leverage experiences and

¹⁹² Boysen, “Just Culture: A Foundation for Balanced . . . , 400.

¹⁹³ Department of National Defence, A-GA-135-001/AA-001, Flight Safety for . . . , 1A-2/3.

lessons learned by individuals, with all, without fear of sanction or embarrassment for those involved with the incident. Further, the reports are freely accessible, permitting the reports to benefit other units and amongst the greater RCAF. The just culture has become so strong amongst aircrew that, when the flight safety team is briefing an incident to their fellow airpersons, the anonymous aircrew will often freely and openly speak up to the group, sharing specifics about the incident and what they learned from it.

How might a just culture be beneficial to moral injury? Foremost, it would encourage a permissive environment for moral dialogue amongst fellow soldiers, those with whom they have a shared understanding and bond. In treating veterans for moral injury, Shay reported that much of the healing effort associated with the treatment program resulted from informal discussion and engagements between soldiers outside the formal structure provided by the program. “. . . support and recognition by peers is an essential ingredient of recovery from moral injury. You don’t get recovery without social connection. ‘Recovery happens only in community’ was our slogan at VIP, where community was initially the community of other veterans . . .”¹⁹⁴ While these reported benefits involved soldiers experiencing symptoms, creating an environment that builds resilience toward the onset of moral injury is equally important. “Further, an adequate model will aid in the mitigation of MI before it happens as well as help heal MI after it happens.”¹⁹⁵

Beyond simply adopting the principle of just culture from the FSP, the program itself adapted to morally complex situations could provide significant benefit to

¹⁹⁴ Shay, “Moral Injury,” *Psychometric Psychology* . . . , 189.

¹⁹⁵ Larson and Züst, *Care for the Sorrowing Soul* . . . , 23.

individual soldiers and the organization itself. While adopting such a program requires a relatively significant investment and commitment by the organization, an ethically based reporting program has considerable potential benefits. The program would encourage others to report dilemmas they confront in service openly. The anonymity of reporting would help avoid exacerbating feelings of guilt and shame, which are recognized as cause factors/symptoms of moral injury. Further, the virtue of sharing one's own experience such that others may benefit and learn would serve to provide a moral counterbalance to the dissonance associated with the event, where a soldier may otherwise struggle with resolving what good resulted from their contribution to a specific situation. Briefings on reported dilemmas and lessons learned would provide more regular professional development concurrently throughout each reporting period, as opposed to the present-day approach that involves one annual ethics briefing, most often delivered in conjunction with many other briefings, as part of unit-wide professional development days. Over time, the program would develop a repository of actual in-service dilemmas encountered, how the individual(s) handled the situation, along with recommendations as to how the situation could have been handled differently in accordance with the profession's values, military ethos and the *Defence Code of Ethics*. Not only would this repository be valuable for individuals who have encountered dilemmas, to examine similar scenarios and appreciate that they are not alone in their experience. It would provide the organization immeasurable benefit in appreciating what dilemmas are being encountered and how personnel are responding to them. This information could be used to identify trends and appreciate where professional development emphasis may be

appropriate to improve the capacity of soldiers to make decisions congruent with the organization's values without neglecting their personal ideals.

Conclusion

While instituting a comprehensive program mirroring the Flight Safety program would take time and likely involve the re-prioritization of constrained resources, the need for dialogue and a supportive construct aimed at developing critical ethically based decision making is crucial for the CAF. Military personnel confront the most demanding of dilemmas and therefore are at a higher risk of developing moral injury attributable to their employment than most other occupations. Departmental programs and policies specifically targeted toward operationally based ethics are required to complement the business-oriented Defence Ethics Programme. Achieving the right balance between rules and values-based ethics remains a formidable challenge to codify and requires frequent practice to equip soldiers with the means to make spontaneous decisions consistent with what, at times, are competing systems of values. Finally, leadership needs to be appraised of the significance of peer-to-peer dialogue and assume responsibility for enculturing healthy moral discourse that instils comfort and an atmosphere that welcomes personnel to interact as a productive means of coping with transgressing circumstances. The individualized nature of moral injury can make treatment complex and lengthy. While some individuals will require specialist intervention irrespective of the CAF's efforts to preclude moral injury, educating personnel and modifying departmental programs will foster resilience and limit the impact of moral injury to its personnel.

CHAPTER 5: CONCLUSION

A moral injury might be something done that was right but it was not something a person wishes they had done.

- StriveCares.com, *Steps to Address Moral Injury in First Responders*

Moral injury is a complex phenomenon that requires continued research and attention toward achieving a universal understanding of its association with commonly recognized ailments. This study aimed to differentiate moral injury from PTSD, garner an appreciation for why it is so commonly associated with military service, and examine mechanisms that the CAF can leverage to embody resilience amongst its personnel. While the most advanced effects impede the day-to-day functioning of a relatively small percentage of personnel, moral injury can affect a wide range of individuals, altering their life experiences and their sense of fulfillment from the service provided to their country.

Distinguishing the fear-based conditioning commonly associated with PTSD from the guilt and shame that characterizes moral injury is a central tenet that differentiates the resultant effects of these two conditions. The many commonalities between the two, including the fact that they both often result from traumatic events, may explain the lack of differentiation between these two phenomena until recently. Several circumstances and experiences are found to generate dissonance and anguish, for which fear is unlikely to be the principal causal factor. Moral injury provides an explanation for the enduring distress that results from an individual's actions or their failure to act. In those most deeply afflicted, the distress intensifies and impairs their functioning and alters their character. Moral injury is commonly associated with military service, but this is not because violence or combat is an essential constituent of the condition. Soldiers confront extreme

moral and ethical predicaments, particularly in combat situations. Military personnel are conditioned to and must make difficult choices instantaneously. Further, at times, they must act in a manner inconsistent with normal day-to-day societal values. These predicaments are likely to result in varying degrees of dissonance. Some cannot extinguish this independently, leading to a variety of complications that disrupt their capacity to function effectively.

Within the literature, many examples of moral injury pertain to combat situations, primarily associated with ground operations supported by the army. While the probability of experiencing deeply transgressing events during operations is likely highest in the army, moral injury is equally applicable and relevant to the navy and air force. Military service calls upon individuals to deviate from societal norms in imposing the national will of their government and its people. In so doing, the potential for involvement in or witnessing events that transgress deeply held moral beliefs or expectations is greater than that for most other occupations. However, it is important to appreciate that moral injury applies to other occupations and some non-occupational complex life circumstances. Professions that legislate a system of values and ethics upon their members can exacerbate the probability of the onset of moral injury. Members of professions must overlay the organization's values over their own personal ones. Ideologically, organizations endeavour to weave both sets of values into one. However, there are circumstances where these values will be at odds, and a professional cannot satisfy both. Over time, shame, guilt, and regret over deviating from one's personal or professional values can fester, disrupting the ability to function, find meaning and fulfillment.

The CAF must prioritize the moral resiliency of its personnel, given that experiencing deeply transgressing events is inherently more probable in military operations, and a rigid professional ethos binds its personnel. Administered by DND, the Defence Ethics Programme provides a framework to educate and establish expectations associated with frequently encountered corporate and government-based dilemmas. While it moulds good financial stewards on behalf of the government, its value to the CAF is limited given it does not address the unique complexities associated with military service. Rules and values-based decision-making both have their place in the profession of arms. While it is impractical to provide direction for every scenario given the unique context of each situation, developing, and most importantly maintaining, each soldier's capacity to make sound ethically based decisions is crucial. Given the complex and unenviable decisions encountered in operations, the capacity to make difficult values-based decisions should be a skill commonly attributable to military service. Leadership must be skilled at identifying morally transgressing circumstances, particularly those to which they have been acclimatized, and engender meaningful dialogue as a standard routine amongst peers and teammates.

Despite the fact that much remains to be learned and understood about moral injury, it is appropriate for CAF personnel and leadership to be familiar with the concept and adopt approaches to combat its detrimental effects. Further, the CAF should prioritize and support efforts to characterize this condition. The resiliency approach achieved through the engagement of fellow service persons advocated within this paper is ideally suited to today's fiscally and resource-constrained environment. By educating and encouraging discourse as a form of moral supervision and a fundamental component of

good leadership, soldiers will build resilience while maintaining cohesion. While there are challenges with inculcating good practices most essential to operations, militaries are revered for their discipline toward maintaining a readiness to respond. Similar to other operationally driven priorities, such as physical fitness, the promotion and maintenance of moral resiliency need to be enshrined as an identifiable characteristic of military service.

Future Study

There are three areas recommended for future study unable to be explored as part of this research paper. The first pertains to a more comprehensive analysis of the aspects of moral injury that apply to non-operational scenarios. While operations distinguish the profession of arms and exacerbate its member's susceptibility, generally, a far greater proportion of a military member's service occurs in garrison. Garrison activities involve non-operational roles commensurate with their civilian equivalents and generally do not involve deep morally transgressing decisions. A more thorough and detailed analysis of how moral injury may percolate from the cumulative exposure to scenarios more limited in *moral intensity*¹⁹⁶ is imperative, both in further appreciating the applicability of the condition to the military, but more generally, to society as a whole. Repeated exposure to less ominous circumstances that have the potential to incite self-doubt and a perceived failure to uphold righteous ideals may cumulatively corrode character and lead some to

¹⁹⁶ Megan M. Thompson, Michael H. Thomson and Barbara D. Adams, *Moral and ethical dilemmas in Canadian Forces military operations: Qualitative and descriptive analyses of commanders' operational experiences* (Defence Research and Development Canada: DND Canada, 2008), 2.

fixate neurotically on what one could or should have done differently. As one former soldier expressed to this author in discussing this topic, “I think I would describe it as excessive rumination over the could haves, would haves, should haves.”¹⁹⁷ Researchers allude to the fact that the condition likely does apply quite broadly, “Their [soldier’s] experiences may serve as ‘the canary in the coal mine’ to alert us to the moral wounding many others are experiencing in our larger culture.”¹⁹⁸ Broadening the condition’s applicability to include more common work and life stressors may have important implications to society and, more specifically, to service life. Demands commonly associated with military service include frequent and prolonged absences from home, as well as frequent relocations that can result in various potential familial stressors, such as job insecurity for spouses, financial stability, disrupting children’s social networks, and healthcare inconsistency. A more fulsome exploration of the condition’s applicability to less ominous scenarios would provide a benchmark to examine whether other aspects characteristic of service life may contribute toward an increased probability in the onset of moral injury.

The second area for exploration pertains to time. Time has an inverse relationship with moral injury, which is in contrast to its colloquial association with healing. Rather than facilitate healing, in the case of moral injury, time often serves as a catalyst. Is this simply a result of the fact that the condition takes time to develop, or once removed from the traumatic event, do memories of the environment and what drove decision-making dissipate, while recollections of one’s actions remain vivid? If the latter is true, over time,

¹⁹⁷ Eric Watkin, conversation with author, 11 March 2021.

¹⁹⁸ Larson and Zust, *Care for the Sorrowing Soul* . . . , 30.

the individual may lose the context that framed their decision-making and, therein, judge their own actions or failure to act more harshly. Further, time is often credited with the capacity to forgive. When interacting with a number of world war veterans at a young age, this author recalls observing some veterans' lack of forgiveness and tolerance for the nations and people who served as their adversaries in combat. For a number of these veterans, time did not empower forgiveness. Perhaps their struggle or inability to forgive has *moral survival* underpinnings, central to their ability to justify and live with their wartime actions. A more thorough understanding of this condition's time dependency may help develop appropriate resiliency strategies to implement immediately following an event, as well as inform treatment approaches for those who eventually suffer from the unextinguished dissonance associated with their actions and decisions.

The third and final area recommended for study pertains to trust and its association with moral injury. Moral injury can result in the loss of trust in oneself or others, as is supported by several literature references provided within this paper. The potential for a loss of trust should be of particular concern to the military given its unique importance:

The second role of cohesion is to provide the confidence and assurance that someone soldiers could trust was 'watching their back'. This is not simply trusting in the competence, training, or commitment to the mission of another soldier, but trusting in someone regarded as closer than a friend who was motivated to look out for their welfare.¹⁹⁹

¹⁹⁹ Leonard Wong and Army War College (U.S.). Strategic Studies Institute, *Why they Fight: Combat Motivation in the Iraq War* (Carlisle Barracks, PA: Strategic Studies Institute, U.S. Army War College, 2003), 10-11.

In an organization so dependent upon trust, any threat with the potential to damage it must be understood, controlled and mitigated. Trust plays an important role in other conditions, such as PTSD. Appropriately delineating the risk to trust relationships posed specifically by moral injury is crucial in substantiating and differentiating the condition.

The importance of doing so is apparent within the following excerpt:

Nevertheless, the differences between victim and perpetrator are important for distinguishing MI from other post-traumatic wounds such as PTSD and TBI. One receives either PTSD or TBI from being attacked ('the terror of vulnerability') . . . there are important distinctions between the wounding that results from unwilling participation in an event and the type of wounding that results from one's own active agency by *attacking, aiding an attack, or perceiving oneself as part of the attack.*"²⁰⁰

Based on this interpretation, some may conclude that trust is predominantly a concern of PTSD and TBI rather than moral injury. This is because erosion of trust is most often associated with the experiences of a victim, vice a perpetrator. A comprehensive examination from the perspective of moral injury would clarify how trust can be altered by the experiences of a perpetrator, further the affliction's conceptualization, and supplement its relevance to the military.

²⁰⁰ Larson and Zust, *Care for the Sorrowing Soul* . . . , 23.

BIBLIOGRAPHY

- Bell Canada, "Bell Let's Talk." last accessed 22 February 2021. <https://letstalk.bell.ca/en/>
- Berthiaume, Lee, "More than 6,700 Afghan war veterans receiving federal assistance for PTSD." CTV, 22 April 2019. <https://www.ctvnews.ca/canada/more-than-6-700-afghan-war-veterans-receiving-federal-assistance-for-ptsd-1.4389499>
- Canada. Department of National Defence. "Defence Ethics Programme." accessed 14 February 2021. <http://ethics.mil.ca/index-eng.aspx>
- Canada. Defence Ethics Programme. "Understanding moral injury from a character disruption perspective." accessed 20 January 2021. <http://ethics.mil.ca/videos/injuryen.html>
- Canada. Department of National Defence. "Department of National Defence and Canadian Forces Code of Values and Ethics." last accessed 12 February 2021. <https://www.canada.ca/en/department-national-defence/services/benefits-military/defence-ethics/policies-publications/code-value-ethics.html>
- Canada. Department of National Defence. "'People are the most important thing,' says new Army Commander." *The Maple Leaf*, 2 September 2019. <https://www.canada.ca/en/department-national-defence/maple-leaf/defence/2019/09/people-most-important-thing.html>
- Canada. Department of National Defence, "Staying healthy and active." last accessed 4 May 2021. <https://www.canada.ca/en/department-national-defence/services/benefits-military/health-support/staying-healthy-active.html>
- Canada. Department of National Defence. "The Code of Service Discipline and Me." last accessed 16 March 2021. <https://www.canada.ca/en/department-national-defence/corporate/reports-publications/military-law/code-of-service-discipline.html>
- Canadian Forces Morale and Welfare Services. "Mental Health Resources." accessed 3 March 2021. <https://www.cafconnection.ca/National/Programs-Services/Mental-Health/Mental-Health-Resources.aspx>
- Canadian Forces Morale and Welfare Services, "Programs and Services." last accessed 4 May 2021. <https://www.cafconnection.ca/National/Programs-Services.aspx>
- CBC Radio. "My Soul is Still in Rwanda: 25 Years After the Genocide, Roméo Dallaire Still Grapples with Guilt." accessed 2 December 2020, <https://www.cbc.ca/radio/sunday/the-sunday-edition-for-april-7-2019-1.5086008/my-soul-is-still-in-rwanda-25-years-after-the-genocide-rom%C3%A9o-dallaire-still-grapples-with-guilt-1.5086075>.
- Human Rights Watch. "Human Rights Watch Letter to NATO Secretary General Javier Solana." last accessed 9 January 2021. <https://www.hrw.org/legacy/campaigns/kosovo98/solana.shtml>

- International Committee of the Red Cross. "ICRC Casebook - Amnesty International, NATO Intervention in Yugoslavia, "Collateral Damage" or Unlawful Killings?"." <https://casebook.icrc.org/case-study/federal-republic-yugoslavia-nato-intervention>.
- Massachusetts Institute of Technology. "When good people do bad things: Being in a group makes some people lose touch with their personal moral beliefs." last accessed 14 January 2021.
<https://www.sciencedaily.com/releases/2014/06/140612104950.htm>
- Moral Injury Guide. "Moral Stress Amongst Healthcare Workers During COVID-19: A Guide to Moral Injury." accessed 25 January 2021.
<https://www.moralinjuryguide.ca/>
- Substance Abuse and Mental Health Services Administration (US). "Exhibit 1.3-4, DSM-5 Diagnostic Criteria for PTSD", accessed 12 Nov 2020.
<https://www.ncbi.nlm.nih.gov/books/NBK207191/>
- Psychology Today. "The Neural Circuitry of Fear." accessed 13 November 2020. <https://www.psychologytoday.com/blog/the-athletes-way/202003/the-neural-circuitry-fear>.
- Strive Cares. "Steps to Address Moral Injury in First Responders." accessed 15 January 2021. <https://www.strivecares.com/steps-to-address-moral-injury-in-first-responders/>.
- Science Daily. "When Good People do Bad Things: Being in a Group Makes some People Lose Touch with their Personal Moral Beliefs." accessed 15 January 2021. <https://www.sciencedaily.com/releases/2014/06/140612104950.htm>.
- Adams, E.M. "The Moral Dilemmas of the Military Profession." *Public Affairs Quarterly* 3, no. 2 (April 1989), 1-14.
- Bess, Michael, Inc OverDrive, and OverDrive ebook. *Choices Under Fire: Moral Dimensions of World War II*. 1st ed. New York: A.A. Knopf, 2006.
- Boysen, Philip G 2nd, "Just Culture: A Foundation for Balanced Accountability and Patient Safety." *The Ochsner Journal* 13, no. 3 (Fall 2013): 400-406.
- Buschmann, Colonel Dr. Klaus. "Powerlessness in the Face of Responsibility: LtGen Romeo Dallaire's Military Leadership during UNAMIR." National Security Studies Course Paper, Canadian Forces College, 2000.
- Canada. Department of National Defence, A-GA-135-001/AA-001, *Flight Safety for the Canadian Armed Forces*. Ottawa: DND Canada, 03 August 2020.
- Canada. Department of National Defence. A-PA-050-000/AP-002, *Ethics in the CF: Making Tough Choices*. Ottawa: DND Canada, 2006.
- Canada. Department of National Defence. B-GL-300-003FP-001, *Command in Land Operations*. Ottawa: DND Canada, 2007.

- Canada. Department of National Defence. *Duty with Honour, The Profession of Arms in Canada*. Ottawa: Canada Communications Group, 2009.
- Canada. Department of National Defence. *Joint Doctrine Note 02-2014 – Command & Control*. Ottawa: DND Canada, 2014.
- Canada. Department of National Defence. *Strong Secure Engaged: Canada's Defence Policy*. Ottawa: Canada Communication Group, 2017.
- Canada. House of Commons. Report of the Standing Committee on Veterans Affairs. *Mental Health of Canadian Veterans: A Family Purpose*, Ottawa: Canada Communication Group, 2017.
- Carey, Lindsay B, and Timothy J. Hodgson. "Chaplaincy, Spiritual Care and Moral Injury: Considerations Regarding Screening and Treatment." *Frontiers in Psychiatry* 9 no. 619 (December 2018): 1-10.
- Castro, Carl A, and Dennis McGurk. "Battlefield Ethics." *Traumatology* 13, no. 4 (2007): 24-31.
- Cobbold, Richard. "Interview with Roméo Dallaire: Royal United Services Institute for Defense Studies." *RUSI Journal* 150, no. 5 (October 2005): 24-31.
- Crossan, Mary, Daina Mazutis, and Gerard Seijts. "In Search of Virtue: The Role of Virtues, Values and Character Strengths in Ethical Decision Making." *Journal of Business Ethics* 113, no. 4 (2013): 567-581.
- Dallaire, R.A. "Command Experiences in Rwanda." in *The Human in Command: Exploring the Modern Military Experience*, edited by Ross Pigeau and Carol McCann, 29-50. New York: Kluwer Academic/Plenum Publishers, 2000.
- Deakin, Stephen. "Mercy Killing in Battle." *Journal of Military Ethics* 12, no. 2 (2013): 162-180.
- Dean, Wendy, Simon Talbot and Austin Dean, "Reframing Clinician Distress: Moral Injury Not Burnout." *Federal Practitioner* 36, no. 9 (September 2019): 400-402.
- Del Ponte, Carla. "International Criminal Tribunal for the Former Yugoslavia (ICTY): Final Report to the Prosecutor by the Committee Established to Review the NATO Bombing Campaign Against the Federal Republic of Yugoslavia." *International Legal Materials* 39, no. 5 (8 June 2000): 1257-1283.
- Dombo, Eileen A., Cathleen Gray, and Barbara P. Early. "The Trauma of Moral Injury: Beyond the Battlefield." *Journal of Religion & Spirituality in Social Work* 32, no. 3 (2013): 197-210.
- Drescher, Kent D., Joseph M. Currier, Jason A. Nieuwsma, Wesley McCormick, Timothy D. Carroll, Brook M. Sims, and Christine Cauteruccio. "A Qualitative Examination of VA Chaplains' Understandings and Interventions Related to Moral Injury in Military Veterans." *Journal of Religion and Health* 57, no. 6 (2018): 2444-2460.

- Drescher, Kent D., David W. Foy, Caroline Kelly, Anna Leshner, Kerrie Schutz, and Brett Litz. "An Exploration of the Viability and Usefulness of the Construct of Moral Injury in War Veterans." *Traumatology* 17, no. 1 (2011): 8-13.
- Drescher, Kent and D.W. Foy, "When they come home: Posttraumatic stress, moral injury, and spiritual consequences for veterans." *Reflective Practice: Formation and Supervision in Ministry* 28: 85-102.
- English, Allan. "Cultural dissonance: ethical considerations from Afghanistan." *Canadian Foreign Policy Journal* 22, no. 2 (June 2016): 163-172.
- Enright, Michael. "Lost Mission to Rwanda: An Interview with General Romeo Dallaire." *Queen's Quarterly* 107, no. 3 (Fall, 2000): 412-425.
- Ferrajão, Paulo Correia and Rui Aragão Oliveira. "Portuguese War Veterans: Moral Injury and Factors Related to Recovery from PTSD." *Qualitative Health Research* 26, no. 2 (2016): 204-214.
- Fitzsimmons, Scott, Allan Craigie and Marc André Bodet. "Canadian Public Opinion about the Military: Assessing the Influences on Attitudes toward Defence Spending and Participation in Overseas Combat Operations." *Canadian Journal of Political Science* 47, no. 3 (September 2014): 503-518.
- Friscolanti, Michael. "Capt. Robert Semrau dismissed from the Forces: Canadian soldier avoids jail time for shooting a wounded insurgent in Afghanistan (Updated)." *Macleans*, 5 October 2010.
- Gabriel, Richard. *The Warrior's Way: A Treatise on Military Ethics*. Kingston, ON: Canadian Defence Academy Press, 2007.
- Haney, Craig and Philip Zimbardo. "The Past and Future of U.S. Prison Policy: Twenty-Five Years After the Stanford Prison Experiment." *The American Psychologist* 53, no. 7 (1998): 709-727.
- Harris, J. Irene, Crystal L. Park, Joseph Currier, and Timothy Usset. "Moral Injury and Psycho-Spiritual Development: Considering the Development Context." *Spirituality in Clinical Practice* (January 19, 2015): 1-11.
- Hooft, Francesca Baukje. "Legal Framework Versus Moral Framework: Military Physicians and Nurses Coping with Practical and Ethical Dilemmas." *Journal of the Royal Army Medical Corps* 165, no. 4 (2019): 279.
- Kassin, Saul M. and Gisli H. Gudjonsson, "The Psychology of Confessions." *Psychological Science in the Public Interest* 5, no. 2 (November 2004): 33-67.
- Koenig, Harold G., Donna Ames, Nagy A. Youssef, John P. Oliver, Fred Volk, Ellen J. Teng, and Kerry Haynes. "The Moral Injury Symptom Scale-Military Version." *Journal of Religion and Health* 57, no. 1 (2018): 249-265.

- Koenig, Harold G., Nagy A. Youssef, and Michelle Pearce. "Assessment of Moral Injury in Veterans and Active Duty Military Personnel with PTSD: A Review." *Frontiers in Psychiatry* 10, no. 443 (June 2019): 1-15.
- Landry, Rémi. "Was Former Captain Robert Semrau Solely Responsible, from an Ethical Point of View, for Killing an Injured Man?" *Canadian Military Journal* 12, no. 2 (Spring 2012): 53-60.
- Larson, Duane, and Jeff Zust. *Care for the Sorrowing Soul*. Eugene OR: Cascade Books, 2017.
- Litz, Brett T, Nathan Stein, Eileen Delaney, Leslie Lebowitz, William P. Nash, Caroline Silva and Shira Maguen, "Moral injury and moral repair in war veterans: A preliminary model and intervention strategy," *Clinical Psychology Review* 29, (2009): 695-706.
- Lockwood, Charles A., and Eric Martin. *Sink 'Em all: Submarine Warfare in the Pacific*. New York, 1951.
- Maren, Stephen. "Neurobiology of Pavlovian Fear Conditioning." *Annual Review of Neuroscience* 24 (2001): 897-931.
- Masson, Laura, and Rene Moelker. "Teaching Gender, Teaching Culture: A Comparative Study of Gendered Dilemmas in Culturally Complex Situations." In *Warriors or Peacekeepers? Building Military Cultural Competence*, edited by Kjetil Enstad and Paula Holmes-Eber, 161-182. Gewerbestrasse CH: Springer Nature, 2020.
- Meagher, Robert Emmet, and Douglas A. Pryer. *War and Moral Injury: A Reader*. Wipf and Stock Publishers, 2018.
- Molendijk, Tine, "Soldiers in Conflict: Moral Injury, Political Practices and Public Perceptions." PhD thesis, Radboud University, 2019.
- Nash, William P. and Brett T. Litz. "Moral Injury: A Mechanism for War-Related Psychological Trauma in Military Family Members." *Clinical Child and Family Psychology Review* 16, no. 4 (2013): 365-375.
- Nash, William P., Caroline Silva, and Brett Litz, "The Historic Origins of Military and Veteran Mental Health Stigma and the Stress Injury Model as a Means to Reduce It," *Psychiatric Annals* 39, no. 8 (2009), 789-794.
- Nash, William P., Teresa L. Marino Carper, Mary Alice Mills, Teresa Au, Abigail Goldsmith, and Brett T. Litz. "Psychometric Evaluation of the Moral Injury Events Scale." *Military Medicine* 178, no. 6 (2013): 646-652.
- Nazarov, A., D. Fikretoglu, A. Liu, M. Thompson, and M. A. Zamorski. "Greater Prevalence of Post-Traumatic Stress Disorder and Depression in Deployed Canadian Armed Forces Personnel at Risk for Moral Injury." *Acta Psychiatrica Scandinavica* 137, no. 4 (2018): 342-354.

- Off, Carol. "Do the Right Thing! Lieutenant-General Romeo Dallaire in the 1990s." In *Warrior Chiefs: Perspectives on Senior Canadian Military Leaders*, edited by Lieutenant-Colonel Bernd Horn and Stephen Harris, 335-346. Toronto: Dundurn Press, 2001.
- Off, Carol. *The Lion, The Fox and The Eagle: A Story of Generals and Justice in Rwanda and Yugoslavia*. Toronto: Random House, 2000.
- Papazoglou, Konstantinos and Brian Chopko. "The Role of Moral Suffering (Moral Distress and Moral Injury) in Police Compassion Fatigue and PTSD: An Unexplored Topic." *Frontiers in Psychology* 8, (15 November 2017): 1-5.
- Rebera, Andrew P. and Chaim Rafalowski. "On the Spot Ethical Decision-Making in CBRN (Chemical, Biological, Radiological Or Nuclear Event) Response: Approaches to on the Spot Ethical Decision-Making for First Responders to Large-Scale Chemical Incidents." *Science and Engineering Ethics* 20, no. 3 (2014): 735-52.
- Rennick, Joanne Benham. "Religion in the Ranks: Religion in the Canadian Forces in the 21st Century." PhD thesis, University of Waterloo, 2008.
- Sanschagrin, Col D.R. "The Defence Ethics Program in CF Operations." Advanced Military Studies Programme, Canadian Forces College, 2006.
- Shay, Jonathan. "Casualties." *Daedalus (Cambridge, Mass.)* 140, no. 3 (2011): 179-188.
- Shay, Jonathan. "Moral Injury." *Psychoanalytic Psychology* 31, no. 2 (2014): 182-191.
- Sturma, Michael. "Atrocities, Conscience, and Unrestricted Warfare: US Submarines during the Second World War." *War In History* 16, no. 4 (November 2009), 447-468.
- Thompson, Megan M, Michael H. Thomson and Barbara D. Adams, *Moral and ethical dilemmas in Canadian Forces military operations: Qualitative and descriptive analyses of commanders' operational experiences*. Defence Research and Development Canada: DND Canada, 2008.
- Weese, Bryn. "Former General Backs Soldier's Decision." *The Toronto Sun*, 2010. <https://search-proquest-com.cfc.idm.oclc.org/newspapers/former-general-backs-soldiers-decision/docview/2222809278/se-2?accountid=9867>.
- Westwood, Captain(N) R. "Authority, responsibility and accountability: the key to the effective functioning of National Defence headquarters." National Security Studies Course Paper, Canadian Forces College, 2002.
- Williamson, Victoria, Dominic Murphy, Sharon A. M. Stevelink, Shannon Allen, Edgar Jones, and Neil Greenberg. "The Impact of Trauma Exposure and Moral Injury on UK Military Veterans: A Qualitative Study." *European Journal of Psychotraumatology* 11, no. 1 (2020): 1704554.

Wong, Leonard, and Army War College (U.S.). Strategic Studies Institute, *Why they Fight: Combat Motivation in the Iraq War*. Carlisle Barracks, PA: Strategic Studies Institute, U.S. Army War College, 2003.

Zust, Jeffrey and Stephen Krauss. "Force Protection from Moral Injury: Three Objectives for Military Leaders." *Joint Force Quarterly* : *JFQ* no. 92 (2019): 44-49.