

Wounds of Suffering: Soul Injury - Moral Injury – PTSD

A Historical Perspective

Soul Injury Five Department of Veterans Affairs (VA) nurses who cared for 10,000 dying Veterans over 30 years discovered the phenomenon of *Soul Injury*, a condition that did not quite fit the category of either PTSD or Moral Injury. They saw insidiously-acquired wounds that interfered with the Veteran's sense of self and resulted in a loss of personhood. The Veterans often identified how hiding behind a façade like this had subtly and not-so-subtly sabotaged their relationships, their accomplishments, and their dreams; they sometimes called this loss of self a "Soul Injury." Using this term facilitated meaningful conversations that unburdened Veterans from their wounds of unmourned loss/hurt and unforgiven guilt/shame. Armed with these discoveries, in 2013 the five nurses started Opus Peace, a 501(c)3 non-profit organization, to bring the *Soul Injury* recovery process to Veterans, non-Veterans, and non-dying people who have become separated from their sense of self. Since then, Opus Peace has advanced the *Soul Injury* movement nation-wide by providing education and training for healthcare professionals in the concept of *Soul Injury* using non-pathologized language and self-help tools.

Moral Injury Although morals and ethics have been recorded by philosophers for centuries, it was not until the 1900s that psychologists like Jean Piaget, and later Lawrence Kohlberg and Carol Gilligan started to study and report on moral development in professional publications. Andrew Jameton first conceptualized the term *moral distress* in 1984. The term *moral injury* was coined by VA psychiatrist Jonathan Shay and colleagues in the 1990s based on numerous discussions they had with Veterans. Dr. Shay recognized the moral damage experienced by Veterans and believed that much of the distress they suffered represented an inner conflict between their moral beliefs and their actions during military service. Both the VA and the Department of Defense have adopted the term moral injury. Furthermore, the concept has become recognized by healthcare providers in non-military populations as well.

Post-Traumatic Stress Disorder (PTSD) Although not labeled as "PTSD", symptoms of PTSD have been described since early recorded history. In the Bible, Job reports his response to the trauma of losing his children, wealth, and health. He describes the classic nightmares of PTSD: "My bed shall comfort me, my couch shall ease my complaint. Then, God, you affright me with dreams and visions terrify me, so that *I should prefer choking and death rather than my pains.*" In more recent decades, the aftermath of war was often described as "battle fatigue," "shell shock," or "soldier's heart." It was not until 1980 that the Diagnostic and Statistical Manual (DSM) codified PTSD as a diagnostic category with identified symptoms to meet the criteria.

Distinguishing Soul Injury, Moral Injury, and PTSD is important because they each have causative factors that require different approaches to maximize effectiveness of treatment. All three might have overlapping symptoms such as anxiety, depression, uncontrolled anger. Two or all three diagnoses may exist simultaneously. An example might help to clarify. John Drinkard is a Marine Corps Veteran who has studied and lived Soul Injury, Moral Injury, and PTSD. In speaking to an audience of hospice workers, he said: "I could tell you about the three helicopter crashes I was in and the PTSD I have suffered after Vietnam. But I won't because PTSD treatments have taught me how to manage my triggers and calm my mind. I could tell you about the moral injury I suffered because I felt betrayed by my country. I had joined the Marine Corps to go to Vietnam and fight for God and Country. When I got there, I discovered there was no God and Country in that war. But working with a group of other Veterans who also had moral injury helped me release my bitterness. If I was dying and if you came to visit *me*, the issue that might surprise you is my "father wound" – a wound that occurred when I was 9 years old. I had just been discharged from the hospital with a diagnosis of an enlarged heart. On the way home, my Dad stopped to socialize with a friend. I told him I didn't feel good and wanted to go home. My father attacked me for expressing my needs, completely devaluing and degrading me. The John I knew *disappeared* that day. The loss of self and the shame I felt from my father's onslaught created an insidious Soul Injury that was much greater than the 'enlarged heart' I had just suffered. That incident does not meet the criteria for PTSD nor Moral Injury; it *does* meet the criteria for Soul Injury – a wound I had buried alive because it paled in comparison to all the traumas I experienced in the war. In my 70s, I learned about Soul Injury and how to grieve the losses of that 9-year-old boy, and to learn how to extend self-compassion."

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Soul Injury	Moral Injury	PTSD
<p>Definition An overlooked, unassessed emotional, spiritual, or psychosocial wound that traumatically or insidiously separates one from their own sense of self. Soul Injury is not listed in the Diagnostic and Statistical Manual (DSM) because it does not indicate a pathological diagnosis.</p>	<p>Definition Violation of deepest-held beliefs and expectations, causing moral confusion. Moral Injury is not listed in the Diagnostic and Statistical Manual (DSM) because it does not indicate a pathological diagnosis.</p>	<p>Definition A mental health issue that some people develop after experiencing or witnessing a life-threatening event such as combat, a natural disaster, a car accident, or sexual assault. PTSD is well defined and outlined in the DSM-V and has been well researched for decades.</p>
<p>Impacts Personhood, causing one to fear being real and/or experience their full potential so they can be who they are meant to be</p>	<p>Impacts Beliefs and values, separating one from a sense of trust in others and/or themselves</p>	<p>Impacts The brain (especially the amygdala and limbic system) separating one from a sense of safety in the world</p>
<p>Caused by Barriers that interfere with accessing a person’s deepest self. Releasing the barriers restores wholeness. The primary barriers are:</p> <ul style="list-style-type: none"> • Unmourned loss and hurt • Unforgiven guilt and shame • Fear of Helplessness and Loss of Control 	<p>Caused by Situations or events:</p> <ul style="list-style-type: none"> • Without clear right/wrong choices • Overt or covert coercion to act against one’s moral beliefs • Trusting people who fail to do the right thing • Surviving in ways that violate personal conscience 	<p>Caused by Events that result in identified symptoms that meet DSM-V diagnostic criteria from:</p> <ul style="list-style-type: none"> • Exposure to actual or threatened violence, death, serious injury, or sexual assault via direct experience • In-person witnessing, or learning about a loved one’s traumatic event
<p>Examples of Adverse Events that Can Cause Soul Injury</p> <ul style="list-style-type: none"> • Name-calling (“fat-so”, “lazy,” “fag,” “n____,” etc.), which was incorporated into personal identity • Birth issues: a girl whose parents wanted a boy; parent who abandoned them; born with the “wrong” sexual orientation; adopted, raised by a non-parental relative • Young adult who cannot get “launched,” older adult with a mid-life crisis, loss of dreams, etc. • Personal identity issue with a life transition (feeling “lost,” “forgotten who I am”) after divorce, death of a loved one, retirement, lay-off from a job, etc. • Perfectionism to prove one is “good enough” • Snobbish behaviors or bullying with feelings of superiority • Having PTSD or other mental health issues and feeling worthless, defective, or inadequate • Elderly: feeling useless, non-productive, invisible, etc. 	<p>Examples of Adverse Events that can cause Moral Injury</p> <ul style="list-style-type: none"> • Military combatant accidentally or intentionally kills a child, civilian, unarmed enemy • Military combatant betrayed by his/her country (called “murderer,” “baby killer,” spit upon, etc.) • Victim of being falsely accused. • Woman aborts a pregnancy in spite of her moral beliefs • Victims of crime; perpetrators of crime with remorse • A supervisor who has to lay off good, loyal workers to meet fiscal responsibilities • A healthcare worker who has to compromise patient care due to under-staffing or lack of supplies 	<p>Examples of Trauma that can cause PTSD</p> <p>The DSM-V lists the following examples of at-risk populations:</p> <ul style="list-style-type: none"> • Military combat • Violent personal assault (sexual, physical, robbery, mugging) • Kidnapping or taken hostage • Terrorist attack • Torture • POW or concentration camp prisoners • Natural or man-made disasters • Severe auto accidents • Terminal diagnosis

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<p>Symptoms (Commonly develops <i>insidiously</i> before the wound becomes recognizable):</p> <ul style="list-style-type: none"> • Lying, hiding, masking personal thoughts and feelings from others and/or self • Disconnecting from a perception of one’s own inner goodness and beauty • Feeling empty or that a part of self is missing • Having a vague or profound sense of worthlessness, inadequacy, or loss of meaning • Yearning to be someone else, belong, approved of, “normal”, “good enough,” etc. • Using numbing agents to shut down the part of self holding loss, hurt, guilt, or shame 	<p>Symptoms (Can develop with one serious breach of trust or a series of smaller betrayals):</p> <ul style="list-style-type: none"> • Feelings of grief, guilt, remorse, shame, outrage, despair • Loss of trust in others and/or themselves due to betrayal • Self-isolation • Fear of being judged • Bitterness due to “unfairness” in a world that should be “fair” 	<p>Symptoms (Often develop suddenly after trauma, but can occur gradually over time):</p> <ul style="list-style-type: none"> • Intrusive memories, distressing dreams, dissociative reactions, physiological and psychological distress when triggered • Avoidance of memories and external reminders • Adverse changes in cognitions and mood (exaggerated negative beliefs about self and others, persistent negative emotional state and inability to experience positive emotions, feeling detached from people and activities) • Irritability, angry outbursts, recklessness, hypervigilance, sleep disturbances, etc.
<p>Treatment</p> <ul style="list-style-type: none"> • <i>Soul Injury Self-Awareness Inventory</i> to identify unresolved losses and hurts • <i>Anchoring Heart Technique</i>: a body-awareness tool that allows an experience of immediate integration of emotional pain and peace • Experiential <i>Soul Connection</i> exercises to identify the impact of “favorite numbing agents” • <i>Self-Compassioning</i> Tools that address guilt, shame, and helplessness. • Integrative letter-writing to <i>re-own</i>, <i>re-home</i>, and <i>re-vitalize</i> scattered pieces of self 	<p>Treatment</p> <ul style="list-style-type: none"> • Discussion with a trusted other who will not judge the action • Dialogue with a benevolent moral authority • Methods for forgiveness and self-forgiveness • Guided imagery • Meditation • Collective rituals 	<p>Treatment</p> <ul style="list-style-type: none"> • Individual Psychotherapy • Group Psychotherapy • Antidepressant and Anti-anxiety medications • Exposure/de-sensitization Therapy • Somatic Therapies (bio-feedback, Eye Movement Desensitization Reprocessing (EMDR), yoga, etc.) to re-train the stress response of the amygdala <div style="text-align: right; margin-top: 20px;">  </div>