Introduction

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Moral injury and unseen wounds

There is nothing new in the claim that human beings are affected by armed conflict, as either combatants or civilians. For millennia, most societies have had a certain regard for those who served in the nation's wars, mindful that what they have seen and heard will leave not just visible scars on their bodies, but also wounds of the mind and the spirit. In the modern era, there has been close and continuing study of the effects of sending mainly younger people abroad to represent the nation and its interests in armed conflict, peacekeeping missions, humanitarian aid and disaster relief. While many wounds to the physical body can heal and leave no continuing legacy, unseen wounds to the mind and the spirit are often deeply felt and long lasting.

Following the Great War of 1914–18, the focus of post-conflict care was on serious physical wounds, despite a growing recognition that the horrors of twentieth-century mechanised warfare deeply affected the inner being of those who served. After the Second World War, and the repatriation of many prisoners of war, there was an increasing awareness of, and sympathy for, those displaying the signs of inner stress and moral turmoil derived from memories of events that persisted in causing grief and anxiety. This was recognised as an injury and led observers to ask: how were these injuries caused and how are they best addressed? Why had some veterans sustained paralysing inner injuries that altered their personalities and changed their outlook, while others could put aside the war years largely unaffected morally and socially by their experiences?

In the wake of the Vietnam Conflict (1962–75), psychologists applied the broad term Post Traumatic Stress Disorder (PTSD) to define the experience of veterans who found it difficult to reintegrate into civilian society after war service in Vietnam. Notably, PTSD was not restricted to military personnel. People employed in civilian policing and emergency services were also susceptible to PTSD, as was anyone who had experienced

a traumatic event which they constantly relived and were unable to transcend in their everyday life.

The term moral injury gained currency from the late 2000s among researchers in the United States who believed that something distinct, and perhaps new, was adversely affecting American service personnel returning from combat operations. Initially, moral injury was seen as a subset of PTSD that manifested itself principally in a disordered personal values system. Sufferers of a moral injury struggle to discern good and bad, right and wrong in personal morality and social conventions after being somewhere when the norms of civilised society were collapsing, or after engaging with a people displaying little or no regard for basic human rights and entitlements. American researchers now argue that moral injury might exist apart from PTSD because an individual can be morally injured without experiencing a traumatic event; and PTSD is not necessarily associated with any affront to moral principles or social conventions. Some researchers share a growing concern that applying the term PTSD unhelpfully to all unseen wounds has obscured the particular force and effect of moral injury as a distinct experience needing to be addressed in a specific way. To say a person has incurred a moral injury is not to suggest they have a mental illness or a psychological disorder. The health of a person's soul and state of their moral being are not the privileged possessions of behavioural scientists.

Since 2013 the term moral injury has been gaining currency in the popular press with feature articles in the *New York Times*, *National Geographic* and the *Huffington Post*. An uninformed reader would be excused for thinking that the concept is undisputed; its meaning uncontested; and that the research underpinning moral injury unproblematic. Moral injury is, however, still a relatively new and largely unexplored term. In the extant literature, moral injury appears to be a phrase lacking precision, a concept looking for consensus and a notion seeking a parent discipline. At the moment, it appears to be a foster child still hoping that someone will call it their own and to give it a name that fits its face.

In contrast to heightened community concern about the purported escalation of PTSD and growing interest in moral injury among practitioners in North America, moral

injury is neither regularly reported nor widely studied in Australia. Media reports contend that unseen wounds – predominantly PTSD but also moral injury – have affected Australian men and women who have struggled to come to terms with what they have seen, heard and done while deployed. The community senses that unseen wounds may be more debilitating than physical injuries because both their causes and consequences are more difficult to identify and address. The press has given forceful expression to community concerns that the Commonwealth Government could do more for returning servicemen and women, drawing on public criticism from veterans of the care they have received for their unseen wounds. Nevertheless, there are relatively few local responses to moral injury at the present time with the lead being taken by individuals and groups motivated by compassion.

An age of barbarism

The collapse of the Soviet Union and the end of the Cold War in late 1991 changed the complexion of international relations and the nature of armed conflict. In the four decades after the Second World War, democratic and developed nations (like Britain, Germany and France) have not launched military attacks on other democratic and developed nations. They have learned from bitter experience that wars are extraordinarily costly, incredibly destructive and rarely enhance the material interests of affluent people. They also respect and observe a whole body of international law that restrains violence across national borders even as it provides some political and diplomatic mechanisms for dispute resolution. But this is not a global trend. In Africa, for instance, poor nations yoked with undemocratic regimes are still inclined to attack their poorer neighbours without provocation. Examples include Rwanda and Burundi, the Congo and Zaire, Uganda and Tanzania.

Indeed, freed from the gridlock imposed by the Cold War and the interference of the United States and the Soviet Union in the affairs of many nations, the last 25 years has witnessed the proliferation of intrastate or civil wars. These conflicts are usually brutal and bloody affairs. In addition to an expanding set of grievances fuelled by historical enmities, they divide families and kinship groups and often strain personal loyalties. Every individual who is injured or killed becomes a focal point for further

violence as family and friends seek revenge, or strive for what they believe is justice. Soldiers whose friends and relatives are injured or killed in 'civil war' are more likely to kill indiscriminately and commit atrocities. Each act of violence eats away at the fabric of the society like a cancer, spreading and reproducing itself in ever-expanding cycles of horror and destruction. This has been the tragic outcome of events in places like Cyprus, Zaire, Sudan, Nigeria, Rwanda, Bosnia, Libya, Syria and Iraq. The worst part of these civil wars is the prevalence of genocide, ethnic cleansing and mass deportation. Since 1945, many more people have been killed during 'intra-state' or 'civil' wars across the globe than in conflicts between sovereign states.

There are two broad responses to this global trend. The first is to intervene in the affairs of sovereign nations. The international community is more prepared to do this than ever before. In January 2000, the British Foreign Secretary Robin Cook remarked that 'when faced with an overwhelming humanitarian catastrophe and a government that has demonstrated itself unwilling or unable to halt and prevent it, the international community should act'. The United Nations Secretary General, Kofi Annan, has argued that military interventions are, in fact, more justifiable than inactivity in the face of gross injustice and mass murder. He states:

> As we have seen in Bosnia and Herzegovina and elsewhere, of all UN activities, military interventions in *international* armed conflicts are particularly fraught with vexing choices and questions. But we also saw in Rwanda in 1994 … inaction has grave perils of its own … It seems to me far better to accept the risk of error or failure than to remain on the sidelines; there is no purity in the abstract, and only disgrace and worse in retreat toward some imaginary safe harbour.

As citizens of a politically stable and materially affluent nation, Australians have generally supported intervention to prevent continuing human slaughter usually with substantial public backing. Over the last quarter century, Australian uniformed personnel have been involved in a diverse range of deployments now generally known as 'peace operations'. They include Namibia, Rwanda, Somalia, Mozambique, Cambodia, Bougainville, East Timor and the Solomon Islands.

The second response is a broader one. In addition to ending violence, there have been concerted international efforts to build a more just order in countries judged to be the breeding grounds for terrorism such as in Afghanistan – Australia's longest war.

Military force and armed intervention is very much subordinate to a larger political solution. The root causes of violence are more varied and profound including the availability of guns and drugs, and the prevalence of racism and sexism together with the dissipation of the family. These are just some of the factors that diminish respect for human life and lead in some instances to crimes against humanity. These crimes usually occur in places of acute poverty. It is apparent that poverty breeds instability, instability breeds fanaticism, fanaticism breeds hatred, hatred breeds terrorism, and terrorism leads to barbarism. Hence, the focus of this book is the descent into barbarism that has drawn into its wake mainly young men and women from stable and prosperous Western democracies who have been tasked with preventing anarchy, restoring order and offering hope. But their work has come at a heavy price to them, their families and the community.

The Australian experience

In response to growing interest in the subject of unseen wounds within and beyond the Australian Defence Force (ADF), the Australian Centre for the Study of Armed Conflict and Society (ACSACS), one of five research centres hosted by UNSW Canberra at the Australian Defence Force Academy campus in Canberra, initiated a major multi-disciplinary study of moral injury in July 2014. By way of background, the Centre's vision is to be an internationally recognised venue for interpreting the causes, conduct and consequences of armed conflict. The Centre's mission is to assess the past, present and likely future impact of armed conflict on institutions and individuals in order to enhance public policy and raise community awareness. To that end, the Centre is engaged in a number of research projects across a range of academic disciplines.

The UNSW Canberra Moral Injury Project seeks, in the first instance, to provide a conceptual framework for understanding moral injury to assist families, community groups, ADF units and commanders in gaining a fuller appreciation of deployment and post-deployment experience and more of its enduring legacies. Given the lack of definitional clarity with respect to moral injury and noting the growing body of American writing on the subject, ACSACS hosted an invited group of scholars and practitioners working in the field of veteran wellbeing for the first Australian moral injury symposium

in February 2015. Participants were drawn from a range of academic disciplines including history, sociology, philosophy, psychology, theology and pastoral care, and from diverse community organisations.

The symposium considered two related questions. First, what evidence supports the existence of moral injury and is moral injury a new experience or simply a new name? Second, if moral injury does exist, how does any Australian experience of moral injury compare with that sustained by the personnel of its operating partners? At the conference there was consensus across the disciplines and professional groups in relation to these two principal questions. First, that those returning from recent operations abroad have been affected morally by their experiences. These unseen wounds are one of the unavoidable consequences of both the circumstances and the conflicts in which they are being deployed. While some of those serving in previous conflicts (pre-1990) were deeply affected morally by their experience, it may be that the forms and features of contemporary Western culture, and the politically contested nature and the specific character of recent operations, have made uniformed men and women more susceptible to moral injury. This is a contention rather than a conclusion that needs further research to determine whether it is supported by evidence.

Second, as the experience of moral injury is largely restricted to uniformed personnel who are deployed by their national governments, the culture from which an individual is deployed (particularly the social, ethical and religious conventions regulating the conduct of individuals and groups) has an immediate and important influence on the likelihood of a person being injured morally. The character of that culture also increases the possibility that the wound incurred will be debilitating in terms of the injured person maintaining a coherent personal narrative and being able to function morally and socially after the worldview has been disrupted by an experience of deploying to a place where everything they knew was absent or ignored.

If Australian uniformed personnel sustain a moral injury during their service abroad, the fact that they were sent by the Australian Government and have been personally shaped by Australian popular culture and social conventions will have a direct bearing on how they are affected and how they respond to their injury. Given that the

majority of deploying personnel confronted with acute moral challenges are aged under thirty when notions of personal identity and destiny are most fluid, there is a reasonable expectation that young Australians will interpret their service overseas in the context of the values and virtues that characterise Australian life and the conduct that Australians consider to be acceptable. In sum, the way Australians deal with moral injury will reflect an Australian outlook on life and living. Although there is an expectation that experiences of moral injury among Australian, Canadian, British and American uniformed personnel will have common elements, the influence of culture on an individual's self-perception and on their personal narrative militates against generalised definitions of moral injury that do not take country of origin into account.

Both observations were naturally tentative given the symposium was the first such gathering of scholars. There was, however, a significant merging of minds and a shared realisation that moral injury was worthy of a detailed, multi-disciplinary study that would examine: i) the full range of unseen wounds (other than PTSD) experienced by deployed personnel; ii) the defining features of moral injury within Australian experience; iii) the relationship between moral injury and PTSD; iv) the place of moral injury as an impediment to ADF capacity building and resilience training; v) the inclusion of moral injury in ADF character development and moral leadership programs; vi) the acknowledgment of moral injury in national and community commemorative activity; and vii) refining post-deployment care to include the possible experience of moral injury.

The temptation in a society gripped by an increasingly therapeutic culture in which social stresses and moral dilemmas are frequently medicalised, is to classify non-physical conditions as 'mental health issues' and to believe that the discipline of psychology is the proper, and perhaps the only domain, in which these matters ought to be considered. This kind of reductionism ought to be resisted. Psychologists know their discipline is not the font of all wisdom or the provider of every answer, and welcome the insights of other disciplines. This book confirms that several disciplines have something to contribute to the discussion of moral injury that other disciplines ought to hear and need to heed lest every discipline suffer the fate of generalising about something that might afflict the entirety of the human condition and not just the part of being human that is the priority

interest of that discipline's particular field of study. To ignore historians and philosophers, theologians and sociologists is to destine one's conclusions to partiality.

The chapters that follow have been arranged by discipline. The *first* section is devoted to historical perspectives. To assess the inner experiences of those who fought in the Great War, Michael Tyquin looks at some of the medical data from Gallipoli and the Western Front to outline the number and the nature of unseen wounds incurred a century ago and how the wounds and the wounded were regarded by those who recorded and treated them. Emily Robertson examines the use of propaganda as a recruiting tool and as a lens through which both the conflict and enemy combatants were viewed, and the effect of these images on those who produced them and those whose views were shaped by them. These two chapters show that unseen wounds are a feature of modern warfare although the exploration of the origins and the outcomes of inner injuries was in its infancy in the first twenty years after the Great War.

The *second* section shares some personal perspectives. To discuss what happens to people when they are placed in situations of barbarism and not hear from those with first-hand experience is to engage in an academic exercise of the worst kind, increasing the likelihood that those studied will be obliged to conform to the prejudices and the preferences of those conducting the study. Mark Evans gives us the perspective of a commander who believes that his responsibility for those he leads extends to their moral wellbeing as well as their physical and mental needs. He stresses the importance of the mission given to uniformed personnel being consistent not just with the laws of armed conflict but with the principles of just war theory. The second perspective from an officer who prefers to remain anonymous reveals the moral complexity of modern warfare and the extent to which split-second decisions can have devastating human consequences. This officer, who came from a family with a long tradition of war service, details his difficulties in coming to terms with contrasting feelings and competing emotions on returning to Australia and a society largely untouched by the 'global war on terror'. The chaplain's perspective by Haydn Swinbourn offers a window into how a person of deep faith comes to terms with fear and brutality in three different settings: Bali after the 2002 terrorist bombings, Baghdad after the 2003 Coalition invasion and Timor Leste after the 2006 military insurrection. While his faith provided strength and resilience, it also posed

difficult questions about the force and effect of good and evil in the world, and the need to avoid easy answers and simple slogans.

In the *third* section, four philosophers with expertise in the ethics of armed conflict attempt to identify the contexts and to describe the circumstances in which uniformed personnel might be affected by their service. Deane-Peter Baker contrasts the experience of the Anzacs in Turkey during 1915 with more recent operations in Afghanistan and Iraq and notes the ethical complexity of multi-national interventions in anti-terrorism campaigns and counter-insurgency operations. Matt Beard looks at different types of moral injury in an attempt to determine whether two approaches – the therapeutic and the philosophical – manage to capture the full range of injuries that an individual might incur. He explores the important distinction between 'world directed' and 'self-directed' moral injuries. Ned Dobos offers an alternative conception of moral injury – that moral injury involves a corruption or a corrosion of the moral emotions. In this conception the combatant does *not* feel morally troubled by what they have done or failed to do, but they *should*, and he notes that individuals who fail to manifest moral emotions in an appropriate way may have been morally degraded by their experience. Rhiannon Neilsen attempts to distinguish moral injury from PTSD in terms of individual agency and personal liability by focusing on individual culpability and the need for reconciliation and forgiveness. These chapters reveal the wide variety of scenarios in which individuals may sustain wounds to their inner being and the importance of the right words being used to describe their experience accurately. Identifying an ethical dilemma is one thing; determining what is at stake for an individual and why they might be anxious, troubled, outraged or injured by what they have seen and heard in moral terms is clearly a more demanding exercise.

The *fourth* section contains psychological perspectives. Andrea Phelps and her colleagues in Phoenix Australia – Centre for Posttraumatic Mental Health have surveyed and critiqued recent literature on moral injury and note while the term is being used widely in the popular literature, detailed research is still in its infancy. They point to a risk in the concept being embraced and assumed to add value to the understanding and treatment of post-traumatic mental health problems before it is properly tested. Zachary Steel and Dominic Hilbrink, drawing on the insights of psychiatry, contend that the

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prevailing models and conceptualisations of PTSD have failed to adequately capture aspects of traumatic injury that arise from being exposed to overwhelming horror that may or may not involve a threat to life. They argue that the identification and description of moral injury forms an important corrective, allowing them to outline a horror-based pathway into traumatic neuroses where themes of inhumanity, gross injustice and moral culpability dominate rather than fear and terror.

The *fifth* section considers a number of practical perspectives. Rob Sutherland details the rise of interest in, and the provision of care for, those whose inner being has been adversely affected by their experience of armed conflict. He suggests that PTSD is not the most pressing issue within the veteran community; believing instead that moral injury might better describe the priority. Drawing on personal encounters with deployed personnel, he points to the importance of influencing worldviews and need for among those for whom life has lost its point and purpose. Nikki Coleman draws our attention to the 'special status' of the combatant and argues that it is the role and status of the soldier which makes them especially vulnerable to moral injury, a vulnerability that is compounded when holistic treatment strategies are not offered to assist in healing. She highlights the importance of reintegrative rituals and ceremonies that make space for returning personnel to speak candidly and conscientiously about what they have done and how this has left them feeling.

The *sixth* and final section is devoted to religious perspectives. Within the defence forces of most nations, morals and ethics have been the traditional domain of chaplains who have been considered the 'subject matter experts' on the inner being of human beings while the churches have been the mediators of community commentary on armed conflict and the defensibility of uniformed service. Sarah Gibson outlines where, when and how religious practitioners and spiritual counsellors who are formally part of the uniformed community might contribute to a common understanding of moral injury and a collaborative approach to addressing unseen wounds among both serving and ex-serving personnel. She notes that moral injury is not just a 'mental health' issue because it relates to much more than the mind. She contends that moral injury is also a state of the heart and a condition of the spirit. Tom Frame contends that the moral being of Australian uniformed personnel has been affected by the Christian metanarrative whether or not they

profess belief in God. He argues that when individuals are placed in environments where the values and virtues that ordered their world are absent, they can be adversely affected by challenges to the story animating their own life and accounting for the world as it is – or should be. In effect, they are injured morally by an environment containing toxic ideas and poisonous imperatives.

The range of disciplines represented in this book is expansive but by no means exhaustive. It is disappointing that we were not able to include insights from poetry, for instance, because poets have probably done a better job than anyone else in describing the experience of the Great War and identifying its legacies among those who fought and lived, and those who fought and died. There are scattered references to fiction but there remains the notable absence of perspectives from novelists who have been able to shine a light on the darker experiences of those who have seen orchestrated human depravity at close quarters. From Erich Maria Remarque's *All Quiet on the Western Front* to James Jones' *The Thin Red Line*, from George Johnston's *Mr Brother Jack* to Richard Flanagan's *The Narrow Road to the Deep North*, writers within and beyond Australia have sought to understand and to interpret what happens when people with different backgrounds and outlooks are caught up in struggles that trample underfoot all that had once been dear to them.

Similarly, while this book contains three first-hand experiences, those of a commander, a chaplain and an officer, we do not have the perspectives of senior non-commissioned officers or the most junior personnel, and we hear mainly from the army. It is wrong to suppose that those serving in the navy and the air force are not affected morally by their service. The navy's role in disrupting people smuggling networks and handling unauthorised boat arrivals has produced a set of dilemmas and difficulties no less complex than those associated with air force operations against Islamic State in northern Iraq. And the point has already been made that the Australian experience is different from that of its major operating partners.

Since the Vietnam Conflict, Australians have taken a specific approach to the management and conduct of armed conflict, peacekeeping missions, humanitarian aid and disaster relief. The American experience should be seen, at most, as a guide to the kinds

of wounds and injuries that Australians might sustain in their service but no more than that.. The fact that Americans and Australians speak the same language does not mean their outlook on life is the same. We do not generalise about the British and the French, inferring they are the same because they are near neighbours. We should not think for a moment that what applies to Americans easily, readily or reliably translates to Australians because of a shared language, especially in the conduct of operations.

I completed this introduction on the fiftieth anniversary of the deployment of the first Australian combat troops to South Vietnam. This was the beginning of nation's most unpopular war. On 27 May 1965, the First Royal Australian Regiment Battalion Group, embarked in HMAS *Sydney*, sailed from Australia bound for Vung Tau. The experience of these Australians and those who followed them to South Vietnam between 1965 and 1972 was very different from that of deployed American personnel. They fought a different kind of war; they were led by very different kinds of people. The war meant different things to Americans who gradually felt the conflict defined them as a people and delineated their place in the world. For Australia it was a continuing fear of isolation from friends and allies and containing further communist expansion into Southeast Asia. Returning Australian personnel were treated differently to their American counterparts. The personalised hostility to which they were subjected by a minority of the population was as painful for some as the sights and sounds that marked their time in South Vietnam. Many found it difficult to make sense of their service when the community was so divided about its moral character. It became an even more demanding activity when the nation of South Vietnam disappeared on 30 April 1975. The war had not been won. While some suffered from the aftermath of traumatic events, others struggled to construct a personal narrative that incorporated their operational service and redeemed their experiences from being a sheer waste of time and energy.

Asking 'what was it all for?' is not a sign of mental illness but of human maturity. To find the answers do not come all at once, or in an instant, does not signify that someone cannot cope with life. Rather, it is an affirmation that life is complex, insight is rare and wisdom is precious. Asking the best questions, challenging convenient answers and wondering whether the right words are being used to describe human emotions are

welcome signs that individuality is being respected and the totality of experience is taken seriously. The range of perspectives that follow shows there are no easy answers and no simple solutions. This book is, then, the first offering from a project that has much terrain to cover. But inasmuch as initial steps are usually tentative, the chapters that follow provide a series of pointers to where definitional clarity is needed, whether existing approaches are misguided, how a range of disciplines might contribute to the continuing discussion and what specific research is required if we are to gain a better sense of moral injury as one unseen way in which deployed personnel are wounded during the course of their service.