

The Battle Inside

Addressing
moral injury can
help prevent
veteran suicide.

By Dr. Rita Nakashima Brock





Illustrated by Steven P. Hughes

Moral injury occurs when a person or group's existing core moral foundations are so challenged by an experience, they are unable to justify, process, and integrate it into a reliable, meaningful system that sustains relationships and human flourishing. It results from being betrayed by people and/or institutions that should have been trusted to be moral and do the right thing; committing, witnessing, imagining, or failing to prevent acts or events that can be judged as harmful or evil; being involved in events or contexts where violations of taboos or acts of harm leave a person feeling contaminated by evil or "dirty"; or surviving conditions of degradation, oppression, and extremity.

To combat alarmingly high suicide rates among veterans, the devastation of moral injury must be properly addressed. According to the *VA National Suicide Data Report, 2005–2016*, released in September 2018, in 2016, the suicide rate was 1.5 times greater for veterans than for nonveteran adults, after adjusting for age and gender. Until the complexity of the transition from military to civilian life is properly understood, veteran suicides will continue.

THE ROOTS OF MORAL INJURY

The blast furnace of boot camp transforms enlistees for military service. In just a few months of training, enlistees who have entered as individuals become willing to die to save their comrades. Many develop friendships so deep, they supersede their other relationships — even marriages.

Ironically, the very success of military training in stoic fortitude prevents many veterans from seeking help immediately upon discharge, when it would be most effective in forestalling greater life crises.



When servicemembers go to war, their training often is tested beyond its limits. Combat can wreak havoc on those with healthy moral consciences and devastate their sense of being a good person worthy of respect and love. They learn disheartening lessons and discover war does not follow rules, fallible human beings can make fatal mistakes, and in a culture that prizes loyalty and respecting authority, toxic and incompetent leaders can have a devastating impact on those under their command. The closeness of military relationships means such devastations can't be shared with those who never see combat, and these relationships offer protection. The unit cohesion of military life can protect people from the emotional and mental threats of combat.

To prevent veterans from considering suicide, we must acknowledge the emotional, mental, physical, and spiritual complexity of military life and what happens to moral conscience and individual identity without the protective structures and relationships of life in service. Ironically, the very success of military training in stoic fortitude prevents many veterans from seeking help im-

The VA Can Help

The VA has multiple resources and initiatives to assist veterans experiencing emotional distress and their concerned friends and family.

If you're worried about yourself or a loved one, professional help for a mental health crisis is available through the **Veterans Crisis Line**. Call **(800) 273-8255** and press 1, send a text message to

838255, or chat online at **www.veteranscrisisline.net**.

If you're worried about another veteran, check out the **S.A.V.E.** (Signs, Ask, Validate, Encourage, and Expedite) online suicide prevention training video, made in collaboration with the PsychArmor Institute, to find out what simple steps you can take to help.

For inspiring stories about how other veterans persevered over their strug-

gles, visit **www.maketheconnection.net**, an online resource connecting veterans, their family members, and their friends with information and resources. You also can use the website to explore information about signs, symptoms, and conditions related to mental health and well-being.

A full directory of other VA mental health resources can be found at **www.mentalhealth.va.gov**.

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A BOOT CAMP FOR CIVILIAN LIFE

The thorough annealing of identity achieved by military service cannot be undone simply by taking off a uniform, turning in a weapon, filling out forms, spending an hour or so with a chaplain or clinician, and listening to hours of information on forms, life skills, and VA benefits.

Statistics on veteran distress and suffering show what is currently provided for transitions is woefully inadequate. Capt. William P. Nash, M.D., USN (Ret), an international expert on combat stress who studies moral injury; Jonathan Shay, M.D., a retired VA psychiatrist who broke open the current field of research on moral injury; Ron Self, a combat veteran and former Marine who supports veterans leaving prison as director of Veterans Healing Veterans from the Inside Out; Dr. Timothy Barth, a research psychologist who studies moral injury; and I have concluded there needs to be a boot camp for civilian life. Self has implemented some of the following strategies in his program of peer mentorship.

Congress should institute a required eight-to-10-week training process to reorient servicemembers, and it should be a process as sophisticated and comprehensive as military boot camp. For Guard and Reserve members, a shorter, abbreviated version might ease their return to their families after a deployment. It would include:

- Military-style, formal rituals for the relinquishment of weapons (or other significant objects) and uniforms, with civilian representatives present to offer gratitude for their service.
- Time for lamentation and grief processing to acknowledge the sorrows of leaving meaningful jobs, a profound sense of purpose and service, deep friendships, and a secure life. This component

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Dr. Rita Nakashima Brock is a reverend and the senior vice president and director of the Shay Moral Injury Center at Volunteers of America. She leads the organization's efforts to deepen understanding about moral injury in the many populations who experience it.

I am the daughter of a veteran from rural Mississippi who enlisted in the Army in 1943 at the age of 19. He was assigned to the First Infantry, the Big Red One, and his first military assignment was Normandy. He was for a time a POW, which resulted in his being given a medical discharge after electroshock treatments at Walter Reed Army Medical Center. After a year, he reenlisted and later served two tours as a medic in Vietnam.

He returned from his second tour just as I graduated from high school in 1968, and he was so changed from the loving father who raised me that I left my family rather than return home from college. In the past decade, as I have come to understand the concept of moral injury in veterans, I have come to see my life and my father in a different light.

He did not kill himself, but his coldness, controlling behavior, and emotional distance were hard on us all. He died of a heart attack eight years after coming home from war, and I did not learn until 2011 the devastating experience in Vietnam that broke his heart and, upon his return home, mine.

Surviving Moral Injury

Service-related emotional trauma can have many causes.

Interviews by Kelly Kennedy



Former Sgt. Steve Osborne, USA, served with A Company, 1st Battalion, 26th Infantry Regiment from 2004-05 and C Company, 2nd Battalion, 30th Infantry Regiment from 2005-09. He served in Iraq and Afghanistan. He lives in Columbus, Ohio.

One of the few times I thought about killing myself was probably the second-darkest time in my life. I'd lost my grandfather to Alzheimer's and a buddy to suicide within months of each other. I was having money problems, and I wasn't doing very well in college.

But then my wife saw *Eyes of Freedom* on TV. It's life-sized paintings of Lima Company, 3rd Battalion, 25th Marines, a reserve unit from Columbus. They lost 23 people between May and August of 2005. I went to high school with one of the guys portrayed in that memorial.

After I saw it, I felt like a huge burden had been lifted from my shoulders. I felt every emotion imaginable, from love to anger — it all meshed together and was sucked away. ...

I became good friends with the director of the memorial, who was with eight of the guys when they were killed. Every once in a while, we'll go volunteer with them. When you look at them, they're brought back to life. You can see your friends — your brothers and sisters that you've lost looking back at you. I've talked to all kinds of people, and I've been able to help them understand. That's helped more than anything.



Former Airman 1st Class Sarah Bonner served from 2004-06 and deployed to Iraq. She volunteers as a veteran ambassador with Vets4Warriors and as a mentor with the Tragedy Assistance Program for Survivors (TAPS). She lives in Lynchburg, Va.

I went out for drinks with [a military police officer]. I thought, "He's a nice guy; he's a cop." I had a few drinks, and then I asked for water. On the way home, I started feeling just weird. I closed my eyes and woke up the next morning.

I felt a lot of pain. He'd hit me several times. My clothes had been ripped off me. I thought, "The worst thing that could possibly have happened to a person has happened." The police said it was one of the worst assault cases they'd seen.

My unit moved me to a different dorm because I didn't feel safe, and I was very lonely. No one checked on me. One day, I was shaving my legs, and I thought, "I could end things right now." Thankfully, I cut the wrong way. As I was

cutting my arm, a group sent by the chaplain knocked on my door. They insisted I go to dinner with them, and then they asked — really asked — how I was doing. That was enough.

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Former Cpl. Dario DiBattista served in the first battle of Fallujah, then as a combat replacement with 3rd Battalion, 7th Marines in 2004 as a Marine Corps reservist. He is the editor of Retire the Colors: Veterans & Civilians on Iraq & Afghanistan (Excelsior College Press, 2016).



Kim Ruocco is the vice president of the TAPS Suicide Prevention and Postvention team. She is the surviving spouse of Maj. John Ruocco, USMC, a Cobra pilot who died by suicide Feb. 7, 2005.

Months after coming home, things got pretty bad. A lot of friends were killed. I was going through my first heartbreak. Drunk one night, I saw a picture of my ex on MySpace. It made me sad. I had a rifle. I had one round. I loaded it up.

Drinking and having guns is a bad combination. I was too [scared] to kill myself, though. At the end of the barrel, all I saw was my mom. My buddy Mike died about six months before, and I remembered how his mom looked at his funeral. I thought about how my mom would look at my funeral. I unloaded.

I started writing a blog, [and] writing made me feel pretty good. I wrote bad poetry; I wrote journal entries about wasted nights; I wrote about what happened in the war. I got a lot of encouragement, so I kept going. I've taught writing for eight years to vets. It's helped.

Now, when I write memoir, I feel like I'm not writing about myself. I'm writing about someone I used to know.

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Dario DiBattista

When my husband died by suicide, it was confusing and painful, but as a trained clinical social worker, I not only felt pain, I felt guilt. What could I have done to save him? ...

As a family member, your emotions get in the way of your logic. There's one conversation that I cannot forget: He said, "Can I talk about how I can't feel anything?" As a clinician, this would have raised concerns, and I would have asked probing questions about his thoughts. As a spouse, I wondered, "Can you love me if you can't feel anything?" and this distracted me from focusing on the real problem — my husband's pain and his mental health.

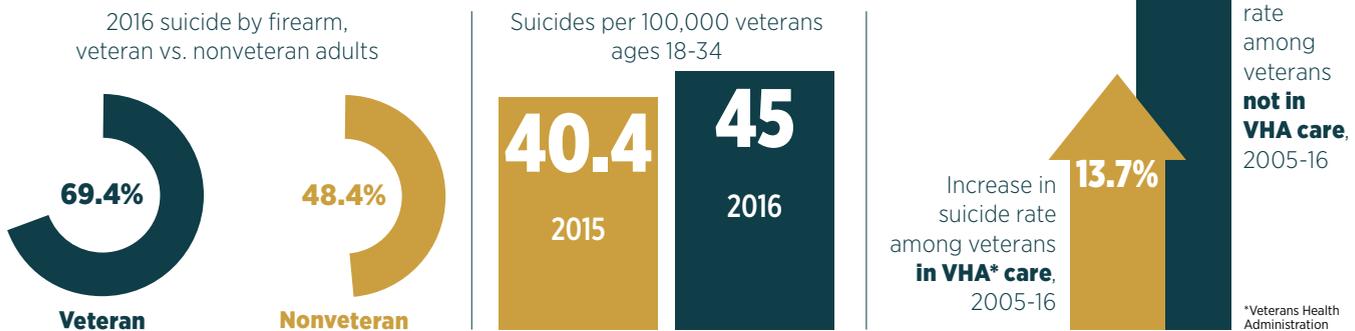
It's hard for me to talk about this, but I think others have to know what I have come to believe. Suicide is complicated. It happens when multiple factors come together at a perfect storm moment. I did the best I could with what I knew at the time.

As a leader, you have to be vulnerable with your challenges and use them as lessons. My husband was a leader. He was respected as a Marine and a pilot. ... If he had gotten help, he could have used what he learned about his own struggles to save lives. That's the saddest part of the story for me.

KEY FINDINGS FROM THE VA'S NATIONAL SUICIDE DATA REPORT, 2005-16

6,000

veteran suicides annually from 2008-16



SOURCE: VA NATIONAL SUICIDE DATA REPORT 2005-2016

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would include mindfulness, yoga, contemplative prayer, and other self-calming strategies.

- The use of writing and art to express trauma and moral injury, which involve intense feelings such as sorrow, guilt, shame, despair, self-condemnation, and anger.
- A chance to share intense feelings with trained peer specialists, chaplains, and clinicians.
- Time to learn and practice life skills such as self-care, relationship building and maintenance, and civic engagement.
- Guidance in reflecting on meaning and moral identities, and time to reflect on and consider the next steps in their lives as they form new identities.
- Information upon departure, currently delivered as informational briefings over a few days, that are offered in small, manageable segments with ample time to process both the information and the feelings that such information might elicit, such as overwhelm, anxiety, or despair.

For the past two years, Volunteers of America, a nonprofit serving vulnerable groups in the U.S., has conducted a pilot program for veterans called Resilience Strength Training (RST) with support from dedicated staff teams at its affiliates in New York and Los Angeles and a grant from the Bristol-Myers Squibb Foundation. RST incorporates

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many of the aforementioned reverse boot camp components. In the program, veterans who act as peer specialists co-facilitate groups of 10 at-risk veterans over a 60-hour process. They engage in activities like writing, storytelling, creating art, and daily spiritual practices to support their recovery from moral injury.

It's not everything veterans need, but it helps — and in some cases, it has helped a lot. Research data gathered from RST participants, many of whom were recently or chronically homeless, showed significant increases in self-worth, optimism, expectations for the future, and engagement with religion, as well as reductions in stress and trauma exposure.

If the military can provide a reverse boot camp of sorts as part of its process to acclimate servicemembers into civilian life, it's possible fewer veterans would give up on life, and fewer families would suffer the consequences of moral injury. Most important, more veterans would not just survive but thrive. ■■■

Dr. Rita Nakashima Brock is senior vice president and director of the Shay Moral Injury Center at Volunteers of America and coauthor of Soul Repair: Recovering from Moral Injury After War (Beacon, 2012).

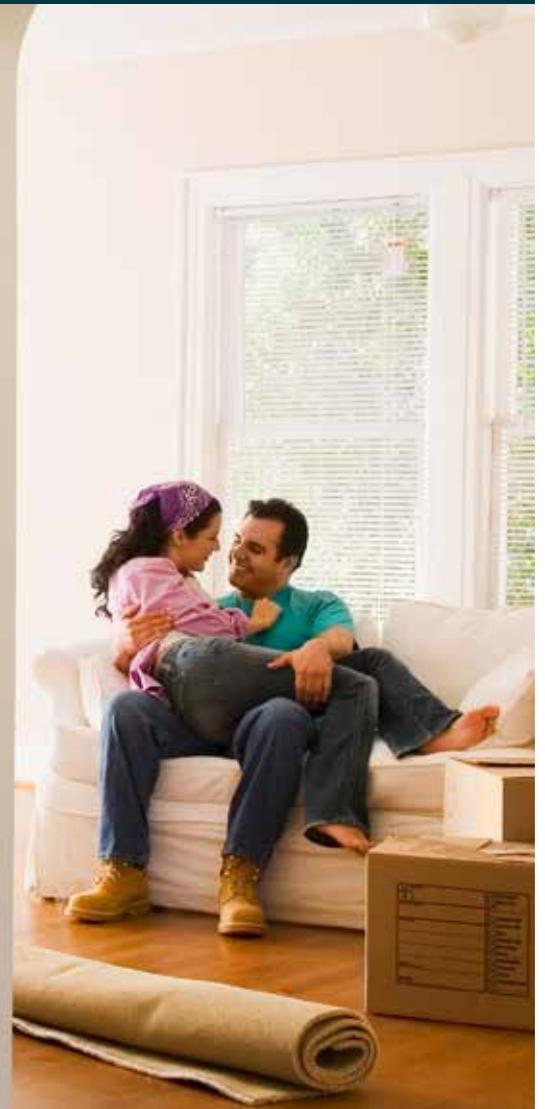
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