

Beyond the Uniform Module 1: Clinical Companion Resources

Emotional, Social, and Systemic Challenges Within the Military & Veteran Community

This companion document was developed to support mental health providers participating in Module 1 of the Beyond the Uniform Moral Injury Training focusing on Emotional, Social and Systemic Challenges within the Military and Veteran Community.

Rooted in trauma-informed care, this resource includes clinical tools and language guidance designed to:

- Normalize and validate the emotional experience of those affected by moral injury
- Support safe, shame-sensitive client engagement
- Equip providers with practical, evidence-informed interventions

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Usage

This document is designed for use alongside the Module 1 slide presentation and facilitator guide. It may be distributed to CE participants, clinical trainees, or supervisors seeking to implement trauma-informed support for rare disease patients.

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Contributor Note

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Moral Injury and Moral Distress

Understanding the Difference

What is Moral Injury?

Moral injury occurs when someone experiences or witnesses something that violates their deeply held values or sense of right and wrong.

It is not just about what happened, but how the experience is interpreted and carried internally.



The Three Core Components of Moral Injury

1

A traumatic or distressing event or *series of events* (accumulative)

2

A *violation* of moral beliefs, values, and/or identity

3

Difficulty integrating or *moving forward*: stuck, guilt, shame



Moral injury can sound like:

- “I should have done something differently.”
- “I failed. I’m irredeemable”
- “I’m not the person I thought I was.”



Moral injury can feel like:

- Guilt or shame
- Anger or betrayal
- Loss of trust (in self, others, or systems)
- Feeling disconnected or changed as a person
- Ongoing thoughts about what “should have” happened



Moral injury can come from:

What someone did
What someone failed to do
What someone witnessed
What was done to them
What leaders or systems allowed

Experiencing *moral injury* does not mean someone is weak or broken.

It often reflects *a strong moral compass* and a deep awareness of *right and wrong*.

What is Moral Distress?

Moral distress occurs when someone knows the right thing to do, but feels unable to act due to external constraints (rules, authority, systems, pressure). It often situational and the moral distress typically resolves once the person is removed from the environment.



Moral distress can sound like:

- “I knew it wasn’t right but I felt powerless.”
- “I didn’t have a choice.”
- “My hands were tied.”



Moral injury can be cumulative.

Repeated exposure to morally challenging situations can build over time. In some cases, ongoing moral distress may deepen into moral injury, especially when it begins to affect identity and self-perception.

Key Difference

Moral Distress → “This is wrong.” (focused on the situation)
Moral Injury → “I am wrong.” (focused on the self and identity)

Moral injury is not a mental health diagnosis. It is a human response to morally challenging experiences.

Recognizing Moral Injury: Clinical Indicators and Cues

A Quick Guide for Mental Health Professionals



Why This Matters

Moral injury is often missed or misinterpreted in clinical settings. Clients may present with symptoms that resemble depression, PTSD, or burnout, but the underlying issue is moral conflict, not just distress. You can treat the symptoms of trauma — but if you don't address the moral conflict underneath, people stay stuck.

Moral injury is not a diagnosis.

Recognizing moral injury allows clinicians to:

- 1** *Better understand the client's experience*
- 2** *Provide a framework to help clients understand their experience.*
- 3** *Respond with appropriate attunement and framing and avoid over-pathologizing*


Language Shifts to Listen for:

Moral Distress (situation-focused):

"That shouldn't have happened."
"I knew it was wrong but I felt powerless."
"I didn't have a choice."

Moral Injury (self-focused):

"I should have done something."
"I failed."
"I'm not who I thought I was."

 **When the narrative shifts from "this is wrong" → "I am wrong", moral injury may be present.**

Clinicians can help clients understand moral injury as a human response to morally complex experiences, often reflecting a strong moral framework.

Common Presenting Cues

Clients experiencing moral injury may say:

- "I don't deserve..."
- "I should have known better."
- "There's no coming back from that."
- "I can't forgive myself."
- "I'm a bad person."

These statements often reflect global self-judgment, not just regret.

Emotional Markers

- Shame (I am bad)
- Guilt (I did something wrong)
- Anger (at self, others, or systems)
- Betrayal (by leadership, institutions, or trusted others)

Shame and identity disruption are especially important signals.

Cognitive Patterns

Look for:

- Over-responsibility ("It's all on me")
- Black-and-white moral thinking
- Persistent "should have" or "if only" loops
- Difficulty integrating context or constraints

Behavioral Patterns

- Withdrawal or isolation
- Avoidance of reminders or relationships
- Overcompensation (e.g., perfectionism, over-functioning)
- Loss of engagement with previously meaningful roles

Moral Injury Clinical Reflection Tool

A Guided Framework for Understanding Moral Injury in Session

Purpose

This tool supports clinicians in exploring moral injury through a structured, non-judgmental lens. It is not an assessment or diagnostic tool.

It is designed to help:

- clarify the client's experience
- identify moral conflict
- support meaning-making and integration

What Happened? (Context & Event)

Using a narrative approach, invite the client to tell their story describing the situation in their own words.

What occurred?

What role did you play?

What was happening around you at the time?

What constraints or pressures were present?

Focus on understanding the full context, not just the outcome.

When Did This Happen? (Timeline and Context)

- When did this experience/ experiences occur?
- How old were you at the time?
- What was happening in your life during that period?
- What role or responsibilities did you have?

Helps ground the experience in developmental and situational context

What Were Your Thoughts and Beliefs at the Time?

- What did you believe was the "right" thing to do at that time?
- What did you expect of yourself in that situation?
- What options did you feel you had (or didn't have)?

Anchors the experience in the client's past perspective, not current hindsight

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How Do You View It Now? (Then vs Now)

- How do you think about this experience today?
- Have your values, beliefs, or expectations changed since then?
- Do you hold yourself to the same standards now as you did then?

Gently introduces perspective shift without forcing reframe

What Values Were Involved?

Explore the client's moral framework:

- What did you believe was the “right” thing to do?
- What values, beliefs, or expectations were important to you?
- What felt violated or conflicted?

This helps identify the moral dimension, not just the event.

How Is Responsibility Being Held?

Gently explore how the client is assigning responsibility:

- What do you feel responsible for?
- Who else may share responsibility? (individuals, leadership, systems)
- Were there factors outside your control?

Look for over-responsibility or lack of context.

Have Other Life Experiences Changed Your Perspective?

- Have there been experiences since then that changed how you see this?
- (e.g., illness, loss, parenthood, leadership roles, trauma, growth)
- Do you have more information or understanding now than you did then?

Recognizes that meaning evolves over time, often outside of therapy

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How Is This Affecting You Now?

- Do you feel stuck or unable to move past this?
- Are there thoughts that replay or won't settle?
- Are you experiencing:
 - Anxiety
 - Rumination
 - Sleeplessness
 - Guilt or shame
 - Emotional numbness or withdrawal

Centers the current impact, which is often why they're seeking help

What Feels Unresolved?

- What still feels unfinished or unsettled?
- What feels hardest to accept or understand?
- What keeps bringing you back to this experience?

Moral injury can emerge or intensify over time, not just immediately after an event.

How Has This Impacted Your View of Yourself?

- What do you believe this experience says about you?
- Has it changed how you see yourself as a person?
- Do you feel different from who you were before this happened?
- What beliefs about yourself have developed since then?

This is often where moral injury lives: in identity, self-perception, and internalized beliefs,

Clinical Note:

- Do not assume the client is ready for meaning-making
- Avoid premature reframing or cognitive restructuring
- Prioritize temporal context (then vs now)
- Watch for hindsight bias and self-judgment
- Stay grounded in curiosity, not correction