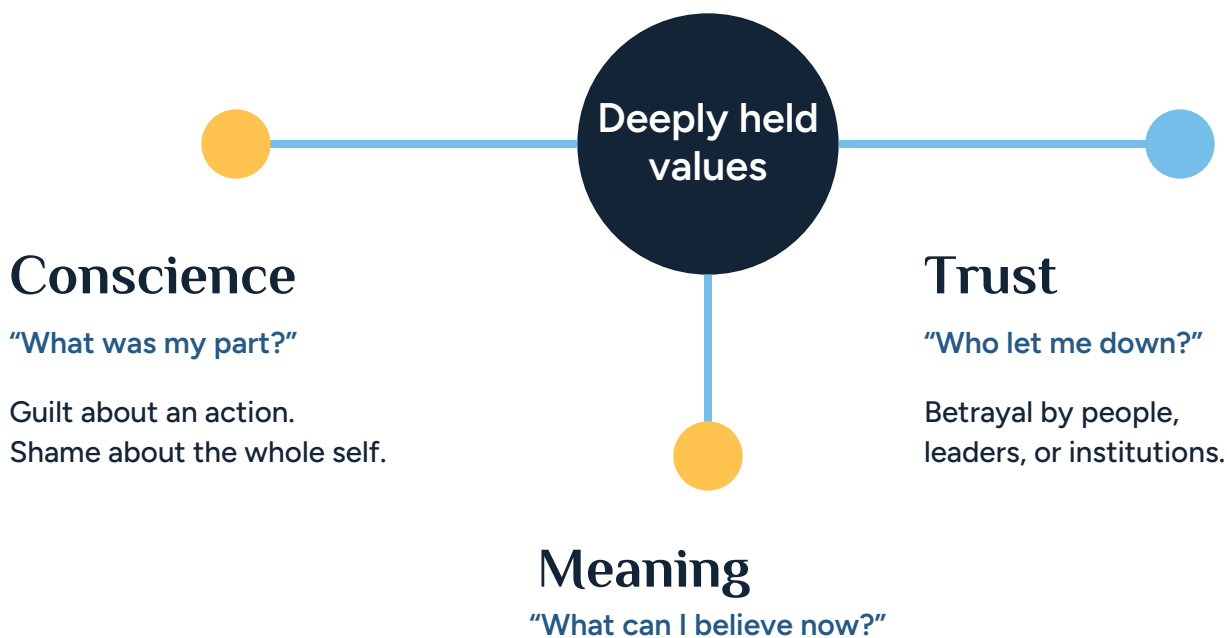


Moral injury

Understanding values, responsibility, trust, and a way forward.

An experience can collide with your deepest values and leave lasting distress. Moral injury names this kind of suffering. It is not itself a mental-health diagnosis.

Where the pain may land



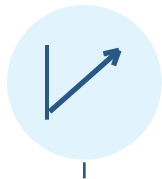
A map of possible experiences, not a test

Moral injury can occur with or without PTSD. Distress does not, by itself, establish blame. You can read this guide without retelling what happened.

An event is not the outcome

Separate what happened, how it is understood, and what life feels like afterward.

POTENTIALLY MORALLY INJURIOUS EXPERIENCES



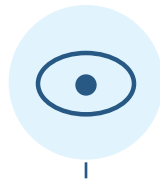
Doing

An action you took.



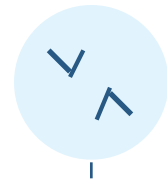
Not preventing

Something you did not or could not stop or provide.



Witnessing

Seeing harm or a violation.



Betrayal

A trusted person or system failing you.



Context changes the meaning

What was known? What power was available?
Were there threats, scarce resources, or conflicting duties?

Distress may persist, ease, or change over time.

Research links these experiences with several kinds of distress. It does not show that every exposure causes moral injury or predict an individual's future.

Why the distinction matters

A 2025 measurement review found inconsistent definitions and measures. A 2026 review included only cross-sectional studies, which cannot establish cause.

[M3 Griffin et al.](#) • [M4 Kakouris et al.](#)

Similar pain, different questions

These experiences can overlap. A useful label opens a conversation; it does not settle it.

Moral injury

Values, responsibility, betrayal, or meaning feel wounded.

What feels violated? What needs care or repair?

PTSD

A defined trauma-related pattern affects memories, avoidance, mood, and alertness.

Do the full diagnostic criteria fit?

Burnout

WHO's work-specific concept concerns chronic workplace stress and exhaustion, distance, or reduced efficacy.

What needs to change in the work environment?

Grief

A loss may bring sorrow, yearning, anger, or changed meaning.

What has been lost, and what support is needed?

One person may need more than one kind of help

Persistent distress, sleep problems, depression, substance use, and relationship strain deserve assessment on their own terms. You do not need a perfect label first.

[M1 VA National Center for PTSD](#) • [M9 World Health Organization](#) • [P1 VA National Center for PTSD](#) • [P2 National Institute of Mental Health](#)

Feelings carry information

They can signal what matters. They are not a complete verdict on what happened.

Guilt

"I did something wrong."

May focus on an action or omission.
Responsibility still needs context.

Shame

"I am beyond repair."

Can turn a painful event into a global judgment of the self.

AND

Anger / betrayal

"This should not have happened."

May point to a violated boundary, failed duty, or need for protection.

Grief / disorientation

"What remains meaningful?"

Loss can affect identity, belonging, hope, or chosen spiritual beliefs.

**Several feelings can be present together.
Numbness or uncertainty is also possible.**

A gentler, more accurate sentence

"I'm having a painful judgment about myself. I can take it seriously and still examine the facts with someone qualified to help." This is an example, not a required script.

Responsibility needs context

A balanced account can hold real accountability and real limits at the same time.

FOUR LENSES FOR A PROFESSIONAL CONVERSATION

1

What was known then?

Separate information available at the time from what became clear later.

2

What choices existed?

Consider authority, threats, training, resources, and competing obligations.

3

What was your part?

Distinguish your decisions from other people's actions and system failures.

4

What is possible now?

Identify a safe, proportionate next step without pretending certainty.

A brief example

A clinician regrets an outcome during a shortage. Review may identify a personal decision to improve and a staffing failure to address. Neither automatic self-blame nor automatic absolution is required.

[M2 Norman & Maguen](#) • [M3 Griffin et al.](#)

Repair can take several forms

Repair is a choice to consider carefully, not a demand to contact someone or obtain forgiveness.

Would a step be safe and appropriate?

NO / UNCERTAIN

**Pause. Seek advice.
Protect boundaries.**

POSSIBLY

**Check consent, privacy,
power, and relevant duties.**



POSSIBLE PATHS, NOT A REQUIRED SEQUENCE



Direct

An appropriate apology or action, only with safety and consent.



Indirect

Change a practice, support prevention, or contribute in a bounded way.



No contact

Care, accountability, and values-based action can proceed without contact.

Forgiveness and reconciliation remain voluntary

You do not owe forgiveness, disclosure, or unsafe contact. Other people do not owe reassurance, reconciliation, or a response. Ask about professional or legal duties when relevant.

Support has several levels

Individual care matters. So do the conditions around a person.

SYSTEMS / CONDITIONS

Safer staffing • fair processes • protection from retaliation
Clear responsibilities • access to practical resources

PEOPLE / BELONGING

A trusted person, peer group, or chosen community.
A chaplain or spiritual adviser if that fits your values.

PERSON / CARE

Rest, food, connection, boundaries.
Professional help for distress and daily functioning.
Evidence-based PTSD care when PTSD is present.

These levels can be addressed together.

Support does not require a shared worldview

"I need someone to listen without deciding what I should believe or whether I should forgive." Chosen spiritual care is optional; secular care is equally valid.

[M1 VA National Center for PTSD](#) • [M2 Norman & Maguen](#)

Treatment research is growing

Promising findings are useful. Their limits are part of the finding.

2022

Trauma-Informed Guilt Reduction (TrlGR)

145 veterans. Greater reduction in trauma-related guilt than supportive care. Most participants were men; the guilt concerned deployment.

2024

Adaptive Disclosure–Enhanced • 174 veterans

Greater post-treatment gains in functioning and PTSD than present-centered therapy. Advantages were not maintained at follow-up.

2026

ACT-MI / PCT-MI pilot • 74 veterans

Acceptance and commitment therapy for moral injury versus present-centered therapy for moral injury. Supported feasibility and acceptability, not definitive efficacy or superiority.

Ask what the evidence actually covers

Different trials target different problems. Veteran results do not automatically generalize to every setting. A full ACT-MI efficacy trial was still described as underway in September 2026.

[M5 Norman et al.](#) • [M6 Litz et al.](#) • [M7 Borges et al.](#) • [M8 Borges, Farnsworth, Barnes & Walser](#)

Getting help without a full story

A first conversation can focus on present needs and what you want from care.

YOU CAN START WITH

“Something happened that changed how I see myself, other people, or what matters. It is affecting my sleep and relationships. I want help, but I’m not ready for details.”

1

Ask about approach

“How do you work with guilt, shame, betrayal, or moral injury? How would you assess PTSD or depression too?”

2

Set boundaries

Ask what is confidential, what its limits are, and how consent and pace will be handled. You can ask for explanations and alternatives.

3

Choose one practical support

A scheduled meal, a medical appointment, or a trusted person accompanying you may be a useful first step while larger questions remain open.

If distress is persistent, intensifying, or disrupting daily life, seek qualified care. In immediate danger or unable to stay safe, use local emergency care. In the U.S., call or text [988](tel:988).

[M1 VA National Center for PTSD](#) • [P15 VA National Center for PTSD](#)

Read the research clearly

A study's design tells you which conclusions it can support.

QUESTION

WHAT THE STUDY CAN TELL US

Measurement review

2025 • 104 articles



How moral injury has been measured, and where definitions or tools differ. It is not a collection of 104 treatment trials.

Association review

2026 • 15 studies



Whether exposures and distress were linked at one point in time. All included studies were cross-sectional, so causation remains uncertain.

Randomized pilot

2026 • 74 veterans



Whether a larger treatment study is workable and acceptable. A small feasibility trial is not definitive proof of benefit.

What this guide can reasonably say

Research can inform care, and important questions remain. No infographic, questionnaire score, or single study can decide your responsibility or choose the right treatment for you.

[M3 Griffin et al.](#) • [M4 Kakouris et al.](#) • [M7 Borges et al.](#)

Sources and scope

Research and official guidance checked 14 October 2026.

This adult educational guide is a curated synthesis, not a diagnostic tool, treatment manual, or exhaustive systematic review. Diagrams organize ideas; they do not establish biological mechanisms or causal pathways. Examples are fictional. Source labels on each page are clickable.

M1 · VA National Center for PTSD

[Moral injury and PTSD](#)

Current web guidance; checked 2026-10-14.

M2 · Norman & Maguen; VA National Center for PTSD

[Moral injury](#)

Current web guidance; checked 2026-10-14.

M3 · Griffin et al.

[A Systematic Review and Meta-Analysis of Moral Injury Outcome Measures](#)

2025-01-18; search February 2024.

M4 · Kakouris et al.

[Evaluating the association between potentially morally injurious events \(PMIEs\) and types of psychological distress. A systematic review](#)

2026-07-31; search through 2026-05-27.

M5 · Norman et al.

[A clinical trial comparing trauma-informed guilt reduction therapy \(TrIGR\), a brief intervention for trauma-related guilt, to supportive care therapy](#)

2022-01-25 online.

M6 · Litz et al.

[A Controlled Trial of Adaptive Disclosure—Enhanced to Improve Functioning and Treat Posttraumatic Stress Disorder](#)

2024; Journal of Consulting and Clinical Psychology 92(3):150–164.

M7 · Borges et al.

[Acceptance and commitment therapy for moral injury \(ACT-MI\) and present-centered therapy for moral injury \(PCT-MI\): Results from a randomized controlled pilot trial with war zone deployed veterans](#)
2026-07-27 online; September 2026 issue.

M8 · Borges, Farnsworth, Barnes & Walser

[Acceptance and commitment therapy for moral injury: conceptualizing and intervening on moral injury through the lens of contextual behavioral science](#)
2026-09-09.

M9 · World Health Organization

[Burn-out an occupational phenomenon: International Classification of Diseases](#)
2019-05-28.

Also used for overlapping symptoms and help-seeking: [VA PTSD Basics](#), [NIMH PTSD overview](#), and [VA: What Is Good PTSD Care?](#). The linked sources provide further detail on study methods, limitations, and clinical guidance.