Predictors of Moral Struggles Among Veterans

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Moral struggles involve internal conflict regarding inconsistencies between one's higher values and the actions of the self and may include guilt, shame, contempt, disgust, and anger. Previous research in civilian populations revealed several factors that might predispose people to moral struggles. The current study sought to replicate and extend this research in a sample of 178 U.S. veterans (83% male) receiving care at a Veterans Affairs hospital and affiliated outpatient clinics. Regression analyses identified several concurrent predictors of moral struggles: higher religiousness, lower self-esteem, and attributing one's religious/spiritual struggles to oneself and the military. Moral struggles also showed a modest, positive association with a scale assessing morally injurious events and inner conflicts that arose from such events. Exploratory, longitudinal path analyses showed that, at a 6-month follow-up, lower self-esteem predicted increased moral struggles. Path analyses also showed that increases in religiousness, increases in attribution of one's religious/spiritual struggles to oneself, and increases in scores on a measure of potentially morally injurious experiences were related to increases in moral struggles. Taken together, these results point to a constellation of religious/spiritual, psychosocial, and military factors that play unique roles in the development and maintenance of moral struggles in a veteran sample.

Keywords: veterans, moral struggles, religious/spiritual struggles, morally injurious events, religiousness

Living up to one's moral values can be challenging. For example, common moral values such as selflessness and compassion may be challenging to uphold in situations that reward a cutthroat attitude, such as in a competitive workplace environment. Tension and turmoil that arise from inconsistencies between one's behaviors and one's moral principles are broadly encompassed by the term *moral struggles*, which may include negative emotions such as guilt, shame, contempt, disgust, and anger and may be related to perceived transgressions of moral values by the self (Exline, Pargament, Grubbs, & Yali, 2014; Pargament, Murray-Swank, Magyar, & Ano, 2005). People may experience moral struggles around transgressions in their past and when wrestling with current moral dilemmas. Among civilian samples, moral struggles predict poorer mental health in several

domains, such as more symptoms of anxiety and depression (Exline et al., 2014), as well as lower levels of life satisfaction and happiness (Abu-Raiya, Pargament, Krause, & Ironson, 2015).

It is plausible that the military veteran population may disproportionately experience events that may lead to moral struggles. Indeed, the high prevalence (41.8%) of exposure to potentially morally injurious events (PMIEs; Litz et al., 2009) may increase frequency and severity of moral struggles among veterans (Litz et al., 2009; Wisco et al., 2017). More specifically, war often mandates PMIEs such as violence and killing that are typically considered unethical outside the context of combat (Spelman, Hunt, Seal, & Burgo-Black, 2012). Furthermore, veterans may experience a range of PMIEs in noncombat situations, such as being

unable to assist wounded civilians, destroying civilian property, or witnessing mistreatment of civilians, or treating a noncombatant harshly (Bryan et al., 2016).

Our primary aim in the current study was to identify a broad constellation of psychological and situational factors, including PMIE exposure during wartime, that predict current moral struggles among military veterans. Our secondary aim was to explore factors predicting the maintenance or resolution of moral struggles over time.

An Overview of Moral Struggles

Moral struggles rest at the interface of morality, discernment, and self-control. In a particular moral struggle, a person is confronted with an issue or set of issues that are salient to their sense of right and wrong (morality). Deciding on the correct course of action is difficult or ambiguous (discernment), and navigating the issue requires consistently enacting self-control to resist immediate temptations or transgressions in the pursuit of moral goodness. Though there are rich bodies of literature concerning the broad topics of morality (Haidt, 2008) and self-control (Vohs & Baumeister, 2016), research connecting these two domains through the process of discernment is less prevalent. Some work spanning social and motivational psychology looks at specific instances where selfish desires are hard to resist or in particularly demanding, tempting situations (Hofmann, Kotabe, & Luhmann, 2013; Hofmann, Meindl, Mooijman, & Graham, 2018; Webb, 2014). This work has delineated possible causes for moral failures and the specific reasons that selfishness might be appealing. Other research touches on having inordinately high moral standards that do not allow for human error, which is a foundation for moral struggles (Exline & Rose, 2005). For instance, high personal standards of virtue, perhaps related to one's religious/spiritual (r/s) beliefs, may create unrealistic expectations of scrupulosity (Exline, 2002). Research on self-forgiveness and why this process is often difficult in the face of perceived moral transgressions is highly relevant (Exline, Wilt, Stauner, Harriott, & Saritoprak, 2017), as is work in the broader area of moral decision-making, that is, the process of discerning what is right and wrong and whether a transgression has actually been committed (Crockett, Kurth-Nelson, Siegel, Dayan, & Dolan, 2014).

Moral struggles no doubt can include situations that involve selfishness and temptations, and they encompass the processes of self-forgiveness and moral decision-making; however, moral struggles consist of issues that may stem from a broader constellation of situational, personal, and/or cultural factors. Morally ambiguous situations may cause uncertainty regarding what constitutes virtue and vice. Cultural behavioral norms and commonly espoused virtues may be in direct conflict with each other: For example, self-aggrandizement and personal achievement could conflict with selflessness and compassion. Moral struggles may also arise when attempting to evaluate whether a transgression has been committed and during the process of apportioning responsibility for the transgression among the self, others, institutions, and perhaps even supernatural entities such as the devil or evil spirits (Exline et al., 2017).

There is a natural connection between moral struggles and r/s beliefs. Though of course people need not have any r/s beliefs to struggle with morality, it is often the case that r/s individuals experience such turmoil when comparing their behaviors with moral standards of their particular r/s faith (Exline & Rose, 2005). Coming to terms with one's perceived moral shortcomings is perhaps a universal feature of religions. Trying to live up to lofty ideals set by r/s leaders can be a daunting process in which people are sure to experience failure. In contrast, r/s beliefs could provide a solid foundation upon which to frame moral struggles and scripts for redeeming immoral actions. The specific ways in which r/s involvement may relate to moral struggles are detailed in a later section of the introduction.

Moral Struggles in a Military Context

Military veterans may also have encountered unique moral dilemmas during service that could serve as the source of prolonged moral struggles: for example, deciding whether to attack an unidentified civilian vehicle owing to the threat of explosives and deciding whether to help civilians and thereby risk an enemy attack (Farnsworth, Drescher, Nieuwsma, Walser, & Currier, 2014). Assigning responsibility may be particularly difficult in a military context because one may have trouble deciding to what extent to blame the self and the military institution for harming others during wartime.

Upon returning home, moral struggles around these issues may intensify owing to social stigma and civilians' lack of understanding about wartime actions and codes of conduct (Farnsworth et al., 2014; Kopacz & Connery, 2015). A recent descriptive study of U.S. veterans, drawing on portions of the data set used in the present article, showed that veterans endorsed moral struggles at moderately high rates and at higher rates than other r/s struggles such as divine struggles, ultimate meaning struggles, and struggles related to r/s doubt (Breuninger et al., 2017).

Apart from military-specific experiences, it may be that being in the military exacerbates personal issues that civilians face. Being apart from family could increase tension in relationships that could touch upon morality. For example, veterans may feel guilty if they perceive that they have left their families unfairly. Normal life events missed may generate greater amounts of remorse and regret, and veterans may wonder if enlisting was the right thing to do.

Moral Struggles and Distress

Whether or not moral struggles are directly related to military service, they are likely to be upsetting. Facing up to possible transgressions could lead people to question their character or worth as a person (Exline et al., 2017). Furthermore, specific r/s beliefs and values may add to the distressing nature of moral struggles (Ano, Pargament, Wong, & Pomerleau, 2017; Exline, 2013; Pargament, 2007). People may believe that their transgressions make them unworthy of receiving God's love and, therefore, might feel higher levels of shame and depression. Beliefs in hell or karma could lead to fear about the consequences of immoral acts.

Associations between moral struggles and mental health attest to their distressing nature. Moral struggles are related to lower self-esteem (Mauger, Perry, Freeman, & Grove, 1992), higher levels of anxiety and depression (Abu-Raiya et al., 2015; Exline et al., 2014; Stauner, Exline, & Pargament, 2016; Toussaint, Williams, Musick, & Everson-Rose, 2008), and lower levels of life satisfaction and happiness (Abu-Raiya et al., 2015). In addition, among combat

veterans presenting for posttraumatic stress disorder (PTSD) treatment, moral struggles positively correlated with PTSD symptoms and suicidal ideation (Raines et al., 2016). Though we caution against causal claims owing to the correlational nature of this research, the results suggest that moral struggles may both arise from traumatic experiences and contribute to the lasting negative effects of trauma. Indeed, what experience could more severely call into question a person's notion of right and wrong than witnessing atrocities of war? It would be no surprise if experiences continue to haunt the minds of veterans and in some cases fill them with grief intense enough to bring up ideas that life would not be worth living.

Although moral struggles are robustly related to distress, they are not inherently pathological; moral struggles likely represent a normative and potentially growth-motivating response to perceived transgressions, and a lack of moral struggles might indicate lack of self-awareness or even callousness (Ano et al., 2017). Moral struggles may signify a chance to engage in the process of self-forgiveness, in which people hold themselves responsible for wrongdoings, make amends to those they can, make peace with an unchangeable past, and move forward stronger and more resilient (Exline et al., 2017; Fisher & Exline, 2010).

Situating Moral Struggles in a General Orienting System Framework

The concept of a general orienting system (GOS; Pargament, 1997, 2007) serves as our theoretical framework for identifying potential predictors of moral struggles in the current study. Broadly construed, the GOS constitutes the ways that a person views the world and adapts to life's challenges. The GOS is composed of more specific components such as personal beliefs and values (including r/s beliefs and values); specific ways of thinking about and coping with stress; characteristic patterns of thought, emotion, and behaviors (i.e., personality); and one's self-concept. The GOS is not just the sum of these parts; rather, it emerges holistically from their interaction. The function of the GOS is to filter and interpret life experiences as well as to organize responses in the service of meeting a person's needs and goals. The GOS is embedded in a broader sociocultural context and thus may be affected by past and present environmental and social conditions, events, and experiences (Pargament, Wong, & Exline, 2016). Though other theories have addressed moral self-control and temptation in specific moral dilemmas, the GOS is appealing for its ability to weave together a broader array of potential strengths and weaknesses as they pertain to the prediction of and adaptation to moral struggles.

The GOS is posited to be especially relevant when facing stress or trauma; people with a stronger GOS may be more resilient, in terms of their specific coping strategies that may be adaptive (Agaibi & Wilson, 2005), when faced with adversity, whereas those with a weaker GOS may have a more difficult time dealing with duress (Pargament, Falb, Ano, & Wachholtz, 2013). As applied to the moral domain, people with a stronger GOS might be better able to navigate moral challenges, whereas those with a weaker GOS might be more likely to develop moral struggles. Theoretically, the strength of a person's GOS does not reside in a single aspect but rather emerges from integration and cohesion across multiple dimensions. We next review several types of

variables thought to be reflective of the GOS as it pertains to moral struggles.

Religious/Spiritual Involvement

R/s involvement may contribute to individual differences in strength of one's GOS when faced with morally difficult situations. On the one hand, r/s beliefs and values may act as guides toward virtuous behaviors; on the other hand, the stricter moral codes and focus on transgression might lead people to focus more on their own moral shortcomings, especially when contrasted with morally exalted r/s leaders and models (Exline, 2002; Exline et al., 2017). Previous empirical work is consistent with the latter view, as greater r/s involvement predicted higher levels of moral struggles in undergraduate and adult samples (Exline et al., 2014; Stauner, Exline, Grubbs, et al., 2016). In the current study, we assessed various indicators of r/s involvement, such as the importance and significance (salience) one places on r/s beliefs, r/s participation, and extent of belief in God's existence.

Attributions of Responsibility for R/S Struggle

How people conceptualize a traumatic experience is pertinent to adaptation in general; when particular appraisals are discrepant from global meaning, distress may ensue (Park, 2010). Similarly, the ways in which people make sense of a stressful experience might associate with the degree to which the experience is characterized as moral in nature. Indeed, previous research among undergraduates indicated that moral struggles were predicted by attributing responsibility for the struggle to oneself, suggesting that self-attributions for struggles might reflect weakness in the GOS as it pertains to moral struggles (Exline et al., 2014). It is possible that assigning responsibility to oneself (i.e., self-blame) could indicate that the self is viewed as morally deficient, a meaning that is potentially discrepant from previously held global meanings about the self. In the current study, we assessed the degree to which veterans attributed their r/s struggles to various causes, such as the self, others, and the military, as well as supernatural (e.g., God, the devil, or karma) and natural (e.g., nature) forces.

Personality Traits and Individual Differences

Previous work has shown that individual differences in personality traits and self-esteem predict moral struggles in undergraduate and adult samples (Grubbs, Wilt, Stauner, Exline, & Pargament, 2016). Specifically, concurrent correlations showed that moral struggles were negatively related to several Big Five traits (agreeableness, conscientiousness, and emotional stability), which represent fundamental individual differences in personality (Saroglou, 2002), and self-esteem. Furthermore, agreeableness and self-esteem predicted decreased moral struggles over time. Lower levels of emotional stability and self-esteem associate with tendencies to engage in self-criticism (Bagby & Rector, 1998; Dunkley & Grilo, 2007) and thus may reflect weakness in the GOS as pertaining to moral struggles. Facets of agreeableness (e.g., compassion and fairness) and conscientiousness (e.g., self-discipline and duty) may promote moral behavior and thus reflect strengths in the GOS as pertaining to moral struggles. Another individual difference variable that falls outside of the Big Five framework but

that may be relevant to moral struggles is gratitude; higher gratitude, owing to its robust associations with prosocial virtues (McCullough & Tsang, 2004), may predict fewer moral struggles.

Military Experience

As noted previously, military experience commonly entails PMIEs. Combat experiences (e.g., injuring/killing others or witnessing violence and death) stand out as being especially detrimental to psychological and r/s functioning (Maguen et al., 2009) and, thus, likely have profound effects on subsequent moral struggles. People's concepts of safety and trust may be shattered after killing others or witnessing death (Gubkin, 2016). Beyond the threats related to combat, veterans often question and negatively judge the morality of their actions or decisions or those of leaders and other service members (Drescher & Foy, 2008). Outside of direct combat, PMIEs encountered during wartime include betrayals from military leaders and from trusted civilians, precipitating or witnessing harm to civilians, the inability to prevent suffering or death, and sexual trauma (Drescher et al., 2011).

A growing body of research suggests that wartime PMIE exposure predicts a wide range of negative mental health outcomes such as depression, anxiety, PTSD, suicidality, substance abuse, the presence of a mental disorder (as compared with absence of a disorder), and general distress (Bryan et al., 2016; Currier, Holland, Drescher, & Foy, 2015; Nash et al., 2013; Wisco et al., 2017). The constellation of psychological, social, and r/s impacts that may develop from exposure to PMIEs is encompassed by the evolving term of *moral injury* (Farnsworth et al., 2014).

It is important to distinguish moral injury and moral struggles. Moral struggles represent a construct that is both broader and narrower than moral injury. That is, moral struggles are broader in the sense that they are not necessarily anchored to exposure to a PMIE, whereas moral injury is understood as an outcome/consequence of this kind of exposure. Moral struggles are narrower than moral injury in that they are only a part of moral injury insomuch as moral injury represents a myriad of psychosocial–spiritual problems consequent of PMIE exposure.

Overview of Research and Summary of Hypotheses

The current study was conducted with the same participants from the descriptive study that was reviewed earlier (Breuninger et al., 2017). Whereas the primary purpose of that study was to describe the experience of r/s struggles among veterans, the aims of the current study were to predict moral struggles among veterans. Therefore, although there is some overlap in the descriptive statistics for this study and the Breuninger et al. article, all analyses predicting moral struggles are novel to the current study. We aimed to examine whether GOS variables from different domains—r/s involvement, attributions for the cause of the r/s struggle, personality traits and individual differences, and military experience—related to moral struggles.

In line with previous research and the rationale presented previously, we expected that moral struggles would be positively related to r/s involvement, self-attributions for the cause of the r/s struggle, combat experience, and PMIE exposure; we expected that moral struggles would be negatively related to emotional stability, agreeableness, conscientiousness, self-esteem, and gratitude. Many of these variables have been examined as predictors of moral struggles in civilian samples (see Table 5 for a summary); therefore, this study has the potential to examine the generalizability of previous findings to a veteran sample. Furthermore, because participants completed measures at baseline and again after a 6-month follow-up period, we were able to examine both concurrent and prospective relations between predictors and moral struggles. Longitudinal analyses were treated as exploratory; therefore, we did not make any specific predictions regarding longitudinal associations.

Method

Participants and Procedure

Veterans receiving care at a large Veterans Affairs hospital and affiliated outpatient clinics were recruited via self-referral through posted fliers and hospital newsletters. In total, 200 veterans were screened for an ongoing r/s struggle using an 11-item, clinician-administered screener adapted from the Religious and Spiritual Struggles Scale (Exline et al., 2014). An example item is "At this time, are you experiencing personal conflict regarding your religious or spiritual beliefs, doubts about religion or spirituality, or questions about God?" Out of the initial 200 veterans who were screened, 178 (148 men and 30 women, $M_{age} = 50.9$, $SD_{age} = 11.3$) completed the baseline (T1) survey. Twenty-two veterans were ineligible or withdrew from the study: 12 did not meet inclusion criteria on the screener, eight withdrew owing to time constraints, and two were lost to follow-up.

Race/ethnicities were African American (58.5%), Caucasian (27.3%), Hispanic/Latino (11.4%), and unspecified (2.8%). Religious affiliations included Christian-Protestant/unspecified ($n = 125$, 70%), Catholic ($n = 25$, 14%), Jewish ($n = 2$, 1.1%), Muslim ($n = 3$, 1.7%), and Buddhist ($n = 1$, .5%); others identified as spiritual ($n = 9$, 5.1%) or agnostic ($n = 2$, 1.1%) or identified their religious affiliation as other ($n = 6$, 3.4%) or none ($n = 5$, 2.8%). More details on sample demographics can be found in the article by Breuninger et al. (2017). At T1, all participants completed a large battery of questionnaires including measures of moral struggles and GOS predictor variables. Participants were contacted 6 months later to complete follow-up measures (T2), and 118 completed the same questionnaires that they completed at T1. Participants were compensated with a $20 gift card after each session of data collection.

Measures

Moral struggles. We used the Moral Struggles subscale of the Religious and Spiritual Struggles Scale (Exline et al., 2014) to assess moral struggles. Veterans read, "Within the past month, to what extent have you struggled with each of the following?", followed by items reflecting moral struggles. Responses were rated from 1 (*not at all*) to 5 (*a great deal*), and scores were calculated by averaging across items. Previous work has shown that scores from this subscale are internally consistent and predict psychological distress (Exline et al., 2014; Stauner et al., 2016).

General orienting system variables. Variables thought to reflect strengths and weakness in the GOS as it pertains to moral struggles were assessed across multiple domains. These variables

include religious involvement, attributions for the r/s struggle, personality and individual differences, and military experience.

Religiousness and belief in God. The survey included a four-item measure of religious belief salience (Blaine & Crocker, 1995). Veterans responded to four items (e.g., "Being a religious person is important to me") from 0 (*does not apply; I have no religious/spiritual beliefs*) to 10 (*strongly agree*). We omitted one item that assumed belief in God. Scores were calculated by averaging across items. This scale has been widely used, and its scores have shown reliability and validity in a large body of studies (Hackney & Sanders, 2003).

The survey also included a six-item measure of religious participation (Exline, Yali, & Sanderson, 2000). Veterans rated the frequency with which they had participated in six religious behaviors in the past week on a 6-point scale (1 = *not at all*, 2 = *once*, 3 = *a few times*, 4 = *on most days*, 5 = *daily or almost daily*, and 6 = *more than once a day*), and scores were calculated by averaging across items. Items included praying or meditating, reading r/s books, watching or listening to r/s programs, attending r/s services or meetings, thinking about r/s issues, and talking to others about r/s issues. Scores on this scale have shown internal consistency and criterion validity in studies of r/s struggles (Wilt, Exline, Lindberg, Park, & Pargament, 2017).

Scores on the religious belief salience measure and religious participation measure were highly correlated, $r = .68$, $p < .001$. As in previous studies (Exline et al., 2014), we formed an index of religiousness by standardizing and averaging scores on these two measures.

We measured the extent of belief in God with one item, "To what extent do you believe that God exists?". Veterans responded to this question on an 11-point scale from 0 (*not at all*) to 10 (*totally*).

Attributions of responsibility for r/s struggle. Veterans were presented with a list of possible causes and asked to rate the extent to which they held these various parties/entities/forces "responsible for the religious/spiritual struggle that you are experiencing." Possible causes were "you," "your experiences in the military," "fate/luck/chance," "another person or group," "nature," "God," "human evil/sinfulness," "the devil or evil spirits," and "karma." Responsibility for the struggle was measured on a scale ranging from 0 (*not at all*) to 10 (*extremely*). Similar items have been used and shown evidence of validity in undergraduate samples and adult Internet samples (Exline et al., 2014).

Personality and individual differences in self-esteem and gratitude. We used the Ten-Item Personality Inventory (TIPI; Gosling, Rentfrow, & Swann, 2003) measures of the Big Five traits: extraversion, agreeableness, conscientiousness, emotional stability, and openness to experience. Instructions read: "Here are a number of personality traits that may or may not apply to you. You should rate the extent to which each pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as . . ." Each trait was measured with two pairs of adjectives: for example, for extraversion, the pairs were "extraverted, enthusiastic" and "reserved, quiet" (reverse scored). Ratings were made on a 7-point scale from 1 (*disagree strongly*) to 7 (*agree strongly*). Scores were calculated by averaging across items. Scores from this scale have shown reliability and predictive validity across many diverse samples (Gosling, 2017).

We included the Rosenberg Self-Esteem Scale (Rosenberg, 1965) to assess self-esteem, which consists of 10 items (e.g., "On the whole, I am satisfied with myself"). Items were rated from 1 (*strongly disagree*) to 4 (*strongly agree*), and scores were calculated by averaging across items. This scale is perhaps the most widely validated measure of self-esteem (Robins, Hendin, & Trzesniewski, 2001). We assessed gratitude with a six-item measure (e.g., "I have so much in life to be thankful for") that has shown good evidence of internal consistency and criterion validity (McCullough, Emmons, & Tsang, 2002). Veterans responded to items on a scale from 1 (*strongly disagree*) to 7 (*strongly agree*), and scores were calculated by averaging across items.

Military experience. The 15-item Combat Experiences subscale (e.g., "I killed or think I killed the enemy in combat") and 15-item Aftermath of Battle subscale (e.g., "I took care of injured or dying people") from the Deployment Risk and Resilience Inventory (King, King, Vogt, Knight, & Samper, 2006) assessed combat experience and postbattle experience, respectively. Items were answered in "yes/no" format. Scores were calculated by treating "yes" scores as 1 and averaging responses across items. Subscale scores correlated very highly ($r = .87$) and so were combined into a composite index. Subscales from the Deployment Risk and Resilience Inventory have demonstrated reliability and criterion validity (Vogt, Proctor, King, King, & Vasterling, 2008).

The nine-item Moral Injury Events Scale (MIES; Nash et al., 2013) assessed exposure to PMIEs during wartime, including transgressions (e.g., "I acted in ways that violated my own moral code or values") and betrayals (e.g., "I feel betrayed by leaders who I once trusted"). Items were scored from 1 (*strongly disagree*) to 6 (*strongly agree*), and scores were calculated by averaging across items. The MIES has demonstrated satisfactory reliability and construct validity in military samples (Bryan et al., 2016; Nash et al., 2013).

Results

Descriptive Statistics for T1 Measures

Descriptive statistics for baseline measures (see Table 1) were computed using the *psych* package (Revelle, 2017) and base functions in R (R Core Team, 2017). Measures with more than two items showed high *alpha* levels (between .80 and .91), whereas the two-item TIPI traits showed relatively low *alphas*. Low alpha levels are expected for TIPI traits and are generally seen as acceptable trade-off for the brevity of this scale, given that it has achieved high levels of test–retest reliability, content validity, convergent validity, and criterion validity (Gosling et al., 2003). The sample was characterized by moderate levels of moral struggles and generally high levels of r/s involvement (i.e., high religious belief salience, religious participation, and belief in God). On average, veterans tended to assign high responsibility for r/s struggles (whether moral or not) to the self. They assigned moderate levels of responsibility to the military, human evil/sinfulness, the devil/supernatural evil, God, and other people, and they assigned relatively low levels of responsibility to luck, nature, and karma. Veterans tended to score moderately high on extraversion, agreeableness, conscientiousness, emotional stability, and openness, and reported high self-esteem and dispositional gratitude. Veterans endorsed just over half of the traumatic combat and aftermath of battle experiences and reported moderately high levels of PMIEs. Standard deviations for each measure indicate sub-

Table 1
Descriptive Statistics and Alpha Reliabilities for Baseline Measures (N = 178)

Variables	Number of items	Scale range	M	SD	α
Moral struggles	4	1 to 5	2.67	1.00	.80
Religious/spiritual variables					
Extent of belief in God's existence	1	0 to 10	9.10	2.08	—
Religious belief salience	4	0 to 10	7.89	2.44	.91
Religious participation	6	0 to 5	2.67	1.19	.88
Attributions of responsibility for struggle					
Self	1	0 to 10	7.09	3.07	—
Military	1	0 to 10	5.56	3.48	—
Luck	1	0 to 10	3.47	3.48	—
Another person	1	0 to 10	4.15	3.58	—
Nature	1	0 to 10	3.08	3.56	—
God	1	0 to 10	4.22	4.20	—
Human evil and sinfulness	1	0 to 10	5.86	3.71	—
The devil/supernatural evil	1	0 to 10	4.71	3.85	—
Karma	1	0 to 10	3.53	3.75	—
Personality and individual differences					
Extraversion	2	1 to 7	3.78	1.46	.41
Agreeableness	2	1 to 7	5.05	1.23	.32
Conscientiousness	2	1 to 7	5.35	1.29	.54
Emotional Stability	2	1 to 7	3.45	1.17	.36
Openness	2	1 to 7	5.19	1.23	.30
Self-esteem	10	1 to 4	3.00	.57	.85
Gratitude	6	1 to 7	5.47	1.25	.80
Military variables					
Combat experiences and aftermath of battle composite	30	Absent (0) or Present (1)	.57	.67	.97
Potentially morally injurious experiences	9	1 to 6	3.83	1.37	.91

stantial variability in moral struggles and GOS strength as it pertains to moral struggles.

Concurrent Associations Among Variables at T1

As we relied on correlational and regression analyses, preliminary exploration was conducted to detect whether violations occurred for the assumptions of normality, linearity, homoscedasticity, and independence of residuals. Diagnostic testing raised concerns regarding positive skew (>2) for the extent of belief in God variable; however, square root transformations did not result in significant improvement; thus, owing to ease of interpretation without transformation, this variable was left untransformed (Tabachnick & Fidell, 2007).

Pearson correlations. Bivariate Pearson correlations among variables at T1 are shown in Figure 1 as a heat map (created using the *psych* package). Consistent with expectations, moral struggles
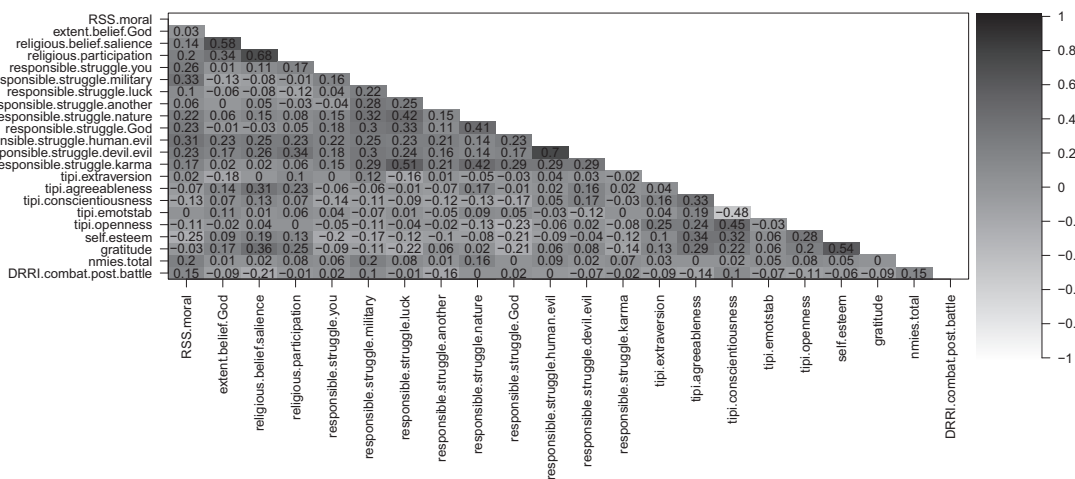

Figure 1. Heat map showing percentage bend correlations below the diagonal and Pearson correlations above the diagonal. Correlations $> |.14|$ have *p* values $< .05$.

were positively related to religious participation, attributing the struggle to the self, PMIE exposure, and traumatic combat/postbattle experiences; moral struggles were negatively related to conscientiousness and self-esteem. Though we expected that moral struggles would be positively associated with religious belief salience and belief in God and negatively associated with agreeableness, emotional stability, and gratitude, these correlations did not reach statistical significance. We did not predict associations between moral struggles and other attributions for responsibility for the struggle, yet we found positive associations for nature, God, human evil, the devil/supernatural evil, and karma.

Simultaneous multiple regressions. Bivariate correlations are limited as tests of our primary hypotheses, as they do not control statistically for covariation among predictor variables. This weakness is highlighted well by the correlation plot, as there are strong correlations evident within different groups of GOS variables, r/s involvement variables are highly intercorrelated with each other (particularly religious belief salience and religious participation), as are attributions of responsibility for the r/s struggle, traits and individual differences in self-esteem and gratitude, and military experience variables. Therefore, we conducted four simultaneous multiple regressions using the base functions in R, each predicting moral struggles from each of the four sets of predictors entered simultaneously (see Table 2. We used the standardized religiousness variable as a predic-

Table 2
Regressions Predicting Moral Struggles Simultaneously From Different Sets of Variables

Variables	β	t	p value
Religious/spiritual variables			
Extent of belief in God's existence	−.07	−0.84	.40
Religiousness	**.27**	**3.18**	**.001**
Attributions of responsibility for struggle			
Self	**.16**	**2.21**	**.03**
Military	**.20**	**2.56**	**.01**
Luck	−.05	−0.61	.55
Another person	−.06	−0.78	.43
Nature	.12	1.47	.14
God	.08	1.07	.29
Human evil and sinfulness	.19	1.90	.06
The devil/supernatural evil	.04	0.39	.69
Karma	−.01	−0.06	.95
Personality and individual differences			
Extraversion	.05	0.61	.54
Agreeableness	.00	0.05	.96
Conscientiousness	−.02	−0.15	.88
Emotional stability	.05	0.57	.57
Openness	−.10	−1.09	.28
Self-esteem	**−.26**	**−2.84**	**.01**
Gratitude	.15	1.70	.09
Military variables			
Potentially morally injurious experiences	**.18**	**2.44**	**.02**
Combat experiences and aftermath of battle composite	.10	1.29	.20

Note. Simultaneous multiple regressions entered each set of predictors under headings in *italics* together. Religiousness was calculated by standardizing and averaging scores on the religious belief salience and religious participation measures. Predictors in **bold** font were statistically significant at $\alpha = .05$.

tor rather than the separate measures of religious belief salience and religious participation because entering these highly correlated measures separately would result in problematic levels of multicollinearity.

Results from the regression of moral struggles on r/s involvement variables showed that religiousness was positively associated with moral struggles. Attributions of responsibility for the struggle to the self and military were uniquely, positively associated with moral struggles. Among personality and individual difference variables, self-esteem showed a unique, negative association with moral struggles. Finally, PMIE exposure showed a unique, positive association with moral struggles.

Exploratory Follow-Up Analyses: Predicting the Moral Struggles Over Time

We assessed GOS variables and moral struggles at two time points (baseline and 6-month follow-up), which provided an opportunity to examine longitudinal associations among variables. These analyses are supplementary to our main goals and exploratory in nature. We therefore selected as potential predictors only those variables that showed unique, concurrent associations with moral struggles to decrease the likelihood of Type I error. Prior to longitudinal analyses, we calculated descriptive statistics for veterans who completed the 6-month follow-up assessments (see Table 3). Measures showed relatively consistent mean levels, and multi-item measures had high *alpha* levels at both time points.

We then conducted autoregressive path models using maximum likelihood estimation with the *lavaan* package (Rosseel, 2012) to examine longitudinal associations between GOS predictors and moral struggles (see Figure 2); models estimated rank-order stability effects for each variable from T1 to T2, correlations between variables assessed at T1, correlations of changes variables across time, prospective effects from predictors at T1 to outcomes at T2, and reciprocal effects from outcomes at T1 to predictors at T2. The correlations of change across time and the prospective effects of predictors at T1 to outcomes at T2 are relevant to longitudinal associations between predictors and outcomes (see Table 4).

Significant correlation of change effects indicated that shifts in predictors and outcomes occurred together over the 6-month period between assessments. Increases in religiousness, increases in attributions of responsibility to the self, and increases in scores on the MIES positively predicted increases in moral struggles. Significant prospective effects indicate that predictors at T1 associated with changes in outcomes at T2 above and beyond the correlation of change between variables. Higher self-esteem at T1 predicted decreases in moral struggles over time.

General Discussion

The current study aimed to identify predictors of moral struggles among veterans. Because we examined a large number of predictors using multiple analytic strategies, we summarized our findings in Table 5 in relation to previous work in civilian samples and to our predictions. Our expectations were that variables reflecting relative weakness in the GOS as pertaining to moral struggles would positively predict moral struggles, whereas variables reflecting relative strength would negatively predict moral struggles. Broadly speaking, concurrent correlational and multiple regression

Table 3

Descriptive Statistics and Alpha Reliabilities for Variables Included in Longitudinal Analyses (n = 117)

Variables	Number of items	Scale range	Baseline *M*	Baseline *SD*	Baseline *α*	Follow-up *M*	Follow-up *SD*	Follow-up *α*
Moral struggles	4	1 to 5	2.61	1.01	.79	2.38	.96	.80
Religious/spiritual variables								
Religiousness	—	—						
Attributions of responsibility for struggle								
Self	1	0 to 10	7.01	3.29	—	7.23	3.36	—
Military	1	0 to 10	5.56	3.63	—	5.66	3.64	—
Personality and individual differences								
Self-esteem	10	1 to 4	3.06	0.56	.84	3.11	.61	.90
Military variables								
Potentially morally injurious experiences	9	1 to 6	3.87	1.37	.91	4.00	1.27	.88

Note. Religiousness was calculated by standardizing and averaging scores on the religious belief salience (four items) and religious participation (six items) measures.

findings were consistent both with previous work and with our predictions. We draw two general conclusions from these results: predictors of moral struggles in civilian samples were largely replicated in a veteran sample, and it may be useful to situate predictors of moral struggles within a GOS framework. We next focus on individual predictors of moral struggles.

Predictors of Moral Struggles

The general pattern of findings among r/s predictors coincided with previous work showing that higher levels of r/s involvement predicted higher levels of moral struggles (Exline et al., 2014; Stauner, Exline, Grubbs, et al., 2016). Further, increases in religiousness over time were related to increases in moral struggles. Together, these findings suggest that r/s involvement may be a GOS vulnerability pertaining to moral struggles among veterans.

Highly religious veterans may be more concerned with how their perceived transgressions conflict with deeply held r/s values; increased salience of r/s values and increased participation in r/s activities over time may heighten distress regarding moral tensions.

Although many attributions of responsibility for the cause of the struggle were related to moral struggles in the zero-order correlational results, the only unique associations were for attributions to the self and to the military. Increases in self-attributions over time also related to increases in moral struggles. The findings for self-attributions were expected and replicated previous work (Exline et al., 2014). Higher levels of self-attributions may indicate that veterans are blaming their ongoing r/s struggle on their own moral shortcomings. The positive association between attributions of the struggle to the military and moral struggles, discovered for
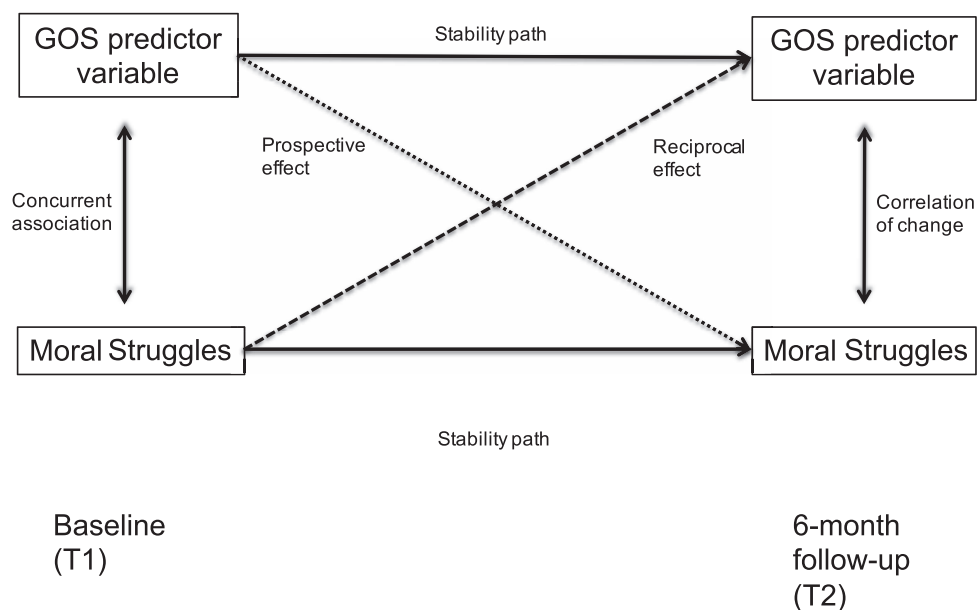

Figure 2. Conceptual scheme for autoregressive path models. General orienting system predictor variables were religiousness, attributions of responsibility for the religious/spiritual struggle to the self and to the military, self-esteem, and potentially morally injurious experiences.

Table 4

Correlations Relating Predictors to Moral Struggles in Longitudinal Analyses

Variables	Correlation of changes	*p* value	Prospective association	*p* value
Religious/spiritual variables				
Religiousness	**.23**	**.02**	.01	.89
Attributions of responsibility for struggle				
Self	**.18**	**.05**	.02	.81
Military	.04	.63	−.11	.24
Personality and individual differences				
Self-esteem	−.02	.86	**-.20**	**.03**
Military variables				
Potentially morally injurious experiences	**.20**	**.03**	−.01	.90

Note. Coefficients in **bold** font were statistically significant at α = .05. Longitudinal path analysis associations are depicted in Figure 1. Religiousness was calculated by standardizing and averaging scores on the religious belief salience and religious participation measures.

the first time in the present study, suggests that blaming the military for the struggle reflects a loss of confidence in a trusted authoritative institution and leaves the individual vulnerable to moral questions and conflicts (Litz et al., 2009).

Among individual-differences predictors, self-esteem emerged as the most relevant to moral struggles, consistent with previous work in civilian samples (Grubbs et al., 2016). High levels of self-esteem were negatively associated with moral struggles concurrently and predicted decreases in moral struggles over time. These findings suggest that low self-esteem might be a particular risk factor for moral struggles. Veterans with more negative views of themselves may have more doubts about their global worth as a person and therefore persistently and increasingly question their moral character.

Turning to military variables, traumatic combat-related experience and PMIE exposure positively predicted moral struggles in zero-order correlations, but only PMIE exposure showed a unique association in simultaneous multiple regressions.[1] These findings taken together highlight the importance of measuring combat-related experiences and PMIE exposure separately (Wisco et al., 2017) and suggest that the morally injurious aspects of combat and aftermath of combat experiences during wartime may be particularly relevant to veterans experiencing more general moral struggles upon returning home.

The associations between PMIE exposure and moral struggles (in concurrent and longitudinal analyses) were of moderate magnitude, suggesting that these constructs are related but not completely overlapping. These findings constitute preliminary evidence that moral struggles are part of the sequelae of difficulties associated with PMIEs (though, as noted earlier, not all moral struggles arise from PMIEs; Farnsworth et al., 2014). PMIE exposure may lead to moral struggles through various mechanisms. Directly, veterans may still be struggling with the implications of PMIEs suffered during war. Indirectly, PMIEs are related to questioning of morality more generally (Drescher et al., 2011; Litz et al., 2009), to self-criticism (Kopacz et al., 2016), and to negative moral emotions such as shame and guilt (Farnsworth et al., 2014), all of which could result in increased likelihood of conflict and tension when confronting moral challenges. Further, moral strug-

gles may mediate between PMIE exposure and other psychological problems; indeed, a separate study using the data set from the current article found that total levels of r/s struggles mediated the relations between PMIE exposure and symptoms of anxiety, PTSD, and depression (Evans et al., 2018).

Clinical Implications

A great deal of research has demonstrated that veterans are at a relatively high risk for a wide range of psychiatric difficulties (Hom, Stanley, Schneider, & Joiner, 2017; Spelman et al., 2012) and have an increased risk of suicide (Amato, Kayman, Lombardo, & Goldstein, 2017; Currier, Smith, & Kuhlman, 2017). Moral struggles may represent another uniquely salient difficulty for veterans in their own right, and such struggles could also exacerbate other mental health problems. This possibility is based on research reviewed previously showing that moral struggles are positively related to a range of outcomes indicative of psychological distress. Furthermore, suicidality has been associated with guilt related to perceived sins in civilian samples (Exline et al., 2000) and to lower spiritual health in general (including guilt) in veteran samples (Kopacz, 2014; Kopacz, Hoffmire, Morley, & Vance, 2015). Veterans dealing with moral struggles may therefore be in need of moral healing, which involves coming to terms with perceived transgressions (perpetrated by the self or others) in one's past and making strides toward living in accordance with one's moral values in the present (Farnsworth, Drescher, Evans, & Walser, 2017).

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[1] Increases in scores on the MIES over time were positively related to increases in moral struggles. Though the MIES primarily measures exposure to PMIEs, some items assess the extent to which one is "troubled" by the occurrence of the event(s). As such, scores on the MIES may increase or decrease over time based on changes on these scale items. Thus, although the actual nature of one's wartime experiences did not change over the time of the study, veterans who experienced an increase in how troubled they were by their exposure to PMIEs reported higher levels of moral struggles over time.

Table 5
Summary of Associations Between Predictors and Moral Struggles Across Analyses

Predictor variables	Associations found in civilian samples	Predicted association in the current study	Zero-order correlations	Simultaneous multiple regressions	Longitudinal path analyses
Religious/spiritual variables					
Extent of belief in God's existence	+	+			
Religious belief salience	+	+			
Religious participation	+	+	+		
Religiousness	+	+		+	+ (correlation of change)
Attributions of responsibility for struggle					
Self	+	+	+	+	+ (correlation of change)
Military			+	+	
Luck					
Another person			+		
Nature			+		
God			+		
Human evil and sinfulness			+		
The devil/supernatural evil			+		
Karma					
Personality and individual differences					
Extraversion					
Agreeableness	−	−			
Conscientiousness	−	−	−		
Emotional Stability	−	−			
Openness					
Self-esteem	−	−	−	−	− (prospective)
Gratitude		−			
Military variables					
Combat experiences and aftermath of battle composite		+	+		
Potentially morally injurious experiences		+	+	+	+ (correlation of change)

Note. "+" indicates a positive association between predictor variable and moral struggles; "−" indicates a negative association; empty indicates no association. Longitudinal path analysis associations are depicted in Figure 2. Religiousness was calculated by standardizing and averaging scores on the religious belief salience and religious participation measures; individual measures were used in correlational analyses, and the standardized measure was used in simultaneous multiple regressions and longitudinal path analyses.

There are several promising options for treating moral struggles in veterans.[2] One newly developed program, *From Vice to Virtue: A Guide to Personal Transformation and Spiritual Growth* (Ano et al., 2017), is a group therapy designed to resolve moral struggles and cultivate virtue and spiritual growth. It involves normalizing moral struggles, monitoring internal responses related to moral tensions, identifying specific plans for change, and keeping track of measurable goals pertaining to cultivating virtue and resisting vice. The program has shown promising preliminary results in a small sample of Christians who reported an ongoing moral struggle.

Another option that seems highly relevant to moral struggles is acceptance and commitment therapy (ACT; Hayes, Strosahl, & Wilson, 2011), which is an evidence-based intervention that helps clients identify core values and develop behavioral strategies to live in accordance with said values. ACT has been proposed as potentially helpful for veterans dealing with moral injury because ACT involves being open to painful moral emotions (e.g., guilt or shame) and using such emotions as guides toward value-consistent living (Farnsworth et al., 2017).

It has also been posited that moral difficulties could be amenable to psychotherapies incorporating a spiritual component owing to their increased focus on issues such as guilt and forgiveness (Kopacz et al., 2016; Wortmann et al., 2017). Along these same lines, veterans might benefit from seeking support from chaplains, who have historically supported military personnel with ethics and morality (Carey et al., 2016). This option could be especially appealing because veterans have reported more familiarity and comfort with chaplains than traditional mental health services (Harris, Park, Currier, Usset, & Voecks, 2015). Finally, the Building Spiritual Strength intervention (Harris et al., 2011), which is specifically designed for use in r/s veterans who have experienced military trauma, may help resolve moral struggles and alleviate other mental health symptoms.

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[2] Other populations for whom moral struggles may be particularly salient (e.g., civilians who have experienced traumas or refugees) might also benefit from the recommendations reviewed in this section; however, we are cautious about generalizing our findings to these populations.

Treatment in the context of any of the above-mentioned modalities may benefit from considering the findings from our study. Providers could help veterans to understand whether and how their r/s beliefs and practices may be contributing to their moral struggles. Attributions for the cause of the struggle to the self and the military could be questioned; this might facilitate the process of self-forgiveness for one's own perceived moral shortcomings (Exline et al., 2017; Fisher & Exline, 2010) and fostering compassionate attitudes toward others in the military who may have contributed to an ongoing moral struggle (Exline et al., 2017). Theoretically, self-forgiveness and compassion have been posited as central for veterans suffering from self-condemnation (Griffin et al., 2017; Worthington & Langberg, 2012). Increases in self-forgiveness and compassion may also benefit global self-esteem (Irons & Lad, 2017), which was a salient predictor of lower levels of moral struggles in the current study. Providers should be sensitive to the possibility that general moral struggles of veterans could be tied to specific PMIEs in the context of military experience; thus, we echo others in emphasizing that providers take special care to attend to the moral and spiritual dimension of veterans' concerns from the outset of therapy and explore the potential genesis of moral struggles in the most painful aspects of veterans' military experiences (Carey et al., 2016; Currier, Holland, & Malott, 2015; Griffin et al., 2017).

Limitations and Future Directions

As we relied on self-reports, our findings are subject to all the well-known limitations associated with this method, such as acquiescence, social desirability, and limitations to self-knowledge (Paulhus & Vazire, 2007). Future studies might benefit by obtaining peer or clinician reports of GOS predictors and moral struggles. Our sample was predominantly Christian, which precludes generalizing to veterans identifying with other faith traditions and veteran nonbelievers. Future work relating GOS variables to moral struggles for veterans who identify as r/s and non-r/s may be fruitful. Our sample also consisted mostly of men (83%), and so, future work should examine whether the findings replicate in samples of female veterans. Though we did not aim to target a specific racial/ethnic group with recruitment procedures, most participants in the study identified as African American/Black. Therefore, our findings add to research related to r/s in African American veterans (Frueh, Elhai, Monnier, Hamner, & Knapp, 2004) but may not generalize to other races/ethnicities. The current study was concerned with correlational associations between predictors and outcomes: This approach was favored given the exploratory nature of our research questions in veteran samples, but future research may take a more model-based approach. Future experimental work could lead to causal inferences regarding the relations between variables included in our study, as such inferences are precluded by correlational designs. Finally, it may be useful to consider social stigma around military service and lack of social support for r/s struggles as predictors of moral struggles in future work.

Notwithstanding these limitations, findings from the current study provided the first evidence that GOS variables predicted moral struggles in a sample of U.S. military veterans. Such findings may ultimately inform and be incorporated into more efficacious treatment strategies, potentially helping veterans with moral struggles to better reintegrate into civilian life by reclaiming a sense of moral directedness.

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