

**A CONVERSATION  
ABOUT MORAL  
INJURY**

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Retired Colonel Dave “LewDog” Lewis and retired Colonel Paul Doc “VooDoo” Nelson met first at Spangdahlem Air Base, Germany, when LewDog was deputy commander of the 52d Operations Group and VooDoo was assigned to the 23d Fighter Squadron. When LewDog took command of the 14th Operations Group (2004–06) at Columbus Air Force Base, Mississippi, he brought VooDoo along with him as the base’s senior flight surgeon.

Since 2010, they have worked closely together on service member reintegration and veterans’ issues. During VooDoo’s final assignment as the Air Force Surgeon General’s chair to Air University, LewDog was named an Air University visiting scholar, which allowed them to continue to collaborate. As professionals they debated how to refer to each other in an academic format, finally settling on “LewDog” and “VooDoo” to reinforce to the reader that what follows is not only a professional but also personal conversation between two old friends and colleagues who have worked on these issues for many years together.<sup>1</sup>

**VooDoo:** I appreciate you taking the time to talk about the concepts of moral injury from your perspective—as an operator, as a strategist, and now in your role as the director for the Harris County, Texas, Veterans Services Department. As an operational physician who worked hard to stay current throughout my career, I had never even heard the term until about 2011 or so, when you mentioned it to me and asked if these were some things I was dealing with after returning from a difficult deployment to Afghanistan. When you described it, a light bulb came on. Can you talk about the origins and evolution of the term moral injury, how you became aware of it, and how you understand the concept to be defined today?

**LewDog:** Until recently, very few people had heard of the term moral injury. But if we go back and study history, especially the ancient Greeks, we find instances of moral injury—a specific type of mental and emotional injury that can come from a variety of experiences and can manifest in different ways—described in literature.

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1. The following discussion was conducted over Zoom on April 20, 2023. Each paragraph was subsequently edited for readability and brevity while retaining the essence of the conversation.

For example, Homer's epic poems *The Iliad* and *The Odyssey* have very clear descriptions of what we consider today to be moral injury. In the 1990s, Veterans Affairs psychiatrist Dr. Jonathan Shay really elevated the concept of moral injury and popularized the name, but the phenomenon or experience is nothing new. What history has taught us is that human beings—unless they're sociopathic or psychopathic—do not like to kill other human beings. When you are either witnessing or perpetrating things that violate your deep personal moral beliefs, there's an effect that is generated. It's pretty easy to explain to somebody when we're trying to raise awareness about moral injury. And yet, when I talk to most people they say, "Wow, I've never heard of that before." But we see it all the time in our warriors.

Recently, a good friend of mine—a Baptist preacher and veteran—was sharing some difficulties he was having with another veteran who was experiencing some life challenges. I asked him if he'd ever read anything about moral injury, and it was a completely new term to him! We human beings haven't evolved a lot in the last 2,500 years, so there's nothing strange and unusual about our recent wars that caused us to experience moral injury. I believe this is something we need to talk about, give it a name, and better understand it.

**VooDoo:** Years ago I became aware of retired Lieutenant Colonel Dave Grossman's book *On Killing*, which was one of the first books to methodically address the human aversion to killing other human beings.<sup>2</sup> Our professional military has become very proficient over the past 75 years in decreasing our human, natural resistance to killing others and has been able to desensitize our military members to the act of taking another person's life in combat. While this makes sense in terms of military operations, we put our humanity at risk when we do this.

**LewDog:** That's an important point. Grossman talks about going back to Civil War battlefields and looking at the rates of fire on the enemy. If you calculate the rates of fire and determine the distance between squads, the injury and fatality rates are much lower than the math predicted. It turns out that firing on the enemy in the Civil War was actually the exception and not the rule. For example, they found multiple muzzle-loaded weapons with several charges rammed in them but never fired, presumably because of the aversion to killing, even when personal safety is threatened. The closer the proximity we are to our enemy the more difficulty we have morally to fire because it gets very personal. Fixing bayonets was an especially significant event because it signaled to both belligerents that the fight was about to get very personal.

If you are the perpetrator of violence on behalf of your country, it becomes very challenging from a moral aspect. Since World War I, we've trained our warriors to kill other humans limbically. If we look at how we train our infantry forces, especially those who are at the pointy end of the spear, it is based upon a very simple stimulus challenge and response that is predictable and good in combat. We condition our warriors to react semi-autonomously—without thinking.

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2. Dave Grossman, *On Killing: The Psychological Cost of Learning to Kill in War and Society* (New York: Little, Brown and Company, 1995).

Post-combat, and especially post-military service, however, our brain starts to think about our response. That can be a problem. We think this is the root of a lot of what we now call moral injury. Add in the other part of the limbic brain being challenged—living in a state of fear, fight, flight, or freeze reaction—that is designed to keep you alive. But moral injury is different.

One of the issues is that we have posttraumatic stress (PTS) challenges coexisting with moral injury. The American Psychiatric Association *DSM-5-TR* manual [*Diagnostic and Statistical Manual of Mental Disorders, Text Revision*] provides the criteria to make a mental health diagnosis. Since as of now there are no diagnostic criteria for moral injury, we think that many cases are either not reported or they get lumped into the posttraumatic stress disorder (PTSD) criteria.

I have a simple way to explain it: PTSD is when something traumatic happens to you. Moral injury occurs when you are the perpetrator of violence, you witness violence, or you feel betrayed by events that have unfolded. In some ways, PTSD is more fear-based, and moral injury is more reflective or personally introspective. That distinction becomes important, because if we lump everyone together, we may end up missing the mark. Obviously, I'm not a clinician but it seems intuitive that if we don't have the right diagnosis, we won't provide the right treatment.

**VooDoo:** As a long-time clinician, I'll agree with you. Let's talk more about PTSD, and more specifically posttraumatic stress. Normal people experience stress after witnessing or being a part of an abnormal situation. Maybe this is witnessing a serious car wreck or engaging in combat operations. This of course applies to veterans and first responders, but it can also apply to other people, too. A startle response or hypervigilance is a normal protective mechanism designed to keep us alive in a dangerous situation.

For most people, several weeks or months go by and they return to normal. The symptoms may have been very troublesome, but most tend to burn out. Unfortunately, for about 20 percent of the people with PTS, they get stuck or "fixed." For these people PTS can permanently interfere with basic life skills and functioning, especially if not treated—it becomes a "disorder." That's the PTSD that gets all the headlines, of course. What are your thoughts about PTS, PTSD, and the connection to moral injury?

**LewDog:** I agree with your summary of how PTS becomes PTSD. The biggest challenge with posttraumatic stress is when your brain gets hijacked—that is, that fear-based limbic response gets hijacked—and you can't rationally think your way through the challenge.

Now when we get to moral injury it almost becomes the exact opposite process in your brain. Let's say you're the one who takes a life—especially when it is your own limbic response to a threat. As you reflect upon that experience later—often it's a long time post-combat—that's where the cognitive dissonance starts to occur, and you start to question your own morality. I think this explains why we are seeing many of our Vietnam-era vets struggling today. They put it in a container when they got home and tried to reintegrate back into society. Now that they are retiring and thinking

about their own lives, they have plenty of time to think through their experiences in Vietnam. A lot of repressed stuff is leaking out now . . .

I think it's important that we cast the net wide when it comes to identifying moral injury. Much of my understanding comes from Dr. Zachary Moon, a professor of theology and psychology at the Chicago Theological Institute. We don't want to have a narrow definition of moral injury because so many things play into the guilt, shame, and betrayal emotions. These experiences can overlap and become very complex. For example, if someone experiences military sexual trauma, that event may leave them with posttraumatic stress. But there may also be the feeling of betrayal—by your unit, maybe a supervisor or commander, or by your peers. That sense of betrayal is very real and may leave a person with a moral injury associated with the traumatic event.

**VooDoo:** Here's one I don't really understand: around 10 percent of our military vets were involved in active contact with the enemy, while 90 percent—like me—spent most of our time in support roles. And yet, from the VA's statistics, anywhere from approximately 10 to as high as 30 percent of vets experience PTSD and are rated by the VA. Some of the highest rates are in Vietnam-era vets, and we are still trying to understand the magnitude of the issue in vets who have served in the last 30 years. Why the big difference between the percentage of those exposed to trauma, whether from combat or other experiences, and the rate of PTSD, in your opinion?

**LewDog:** In my view, America's foreign policy goals are very ambitious. But to those fighting the wars, the actions are morally ambiguous, particularly in counterinsurgency operations. World War II, our "touchstone war," was unambiguous, at least for policy-makers. But for those on the ground, or in the air, or at sea, it was far more complex.

With today's conflicts, maybe we are putting ourselves on a moral pedestal that's impossible to achieve. Incidentally, our nation had never fought a war like World War II before, and has never fought one like it since, so it is really hard to draw generalities from this war.

I also think we can look at betrayal using a moral injury lens. Think about August 2021 and the way we left Afghanistan. Many veterans felt betrayed by their country: I'd characterize that as a moral injury. Many of us had thoughts like, Why did we do all this, why did I lose friends, or why did we leave our friends? It's easy to say, "I joined because we don't want terrorists to attack us again," but the reality, for those with boots on the ground trying to execute the mission in a morally ambiguous environment—we saw in very personal ways the murkiness of our foreign policy.

**VooDoo:** You and I first started talking about this subject after I had returned from Afghanistan working the aeromedical evacuation part of the surge in early 2010. The Joint Trauma System has resulted in remarkable survival rates for those wounded in battle—it's an incredibly good news story for our nation. And yet, as we discussed then, moving people quickly has a potential downside, too. During World War II, most vets returned home on a troop ship with 3,000 of their closest friends, and with lots of time to debrief and share experiences and talk among peers who understood, because they were there, too.

Today, there is a sharp juxtaposition between the combat experience—for those wounded and those not—and a return back home, whether to a rehab hospital or back into civil society. How might this play in today's experiences with both PTSD and moral injury? Has this impacted the experiences of veterans, particularly for those in the National Guard and Reserve components?

**LewDog:** In a counterinsurgency fight it's difficult to put your experiences into context. We come home—remember we're an all-volunteer force—and America is going to the mall, going to the movies, and going to restaurants. You're trying to understand how to put your own experiences into context, and it can be a real challenge. Relationships with family and close friends very often change: good relationships start to show strain, and those already facing difficulties will often bend and may finally break. One spouse will say “just talk to me” and the other spouse—the veteran—is thinking, “I can't even put my own experiences into context, let alone put it into context for you.”

You and I have talked about this . . . the most common response for someone who has been medically evacuated out of theater is almost always “When can I get back to join my unit?” We've had people lose limbs and still want to get back and join their unit. Why? Because they feel a sense of incompleteness about the mission. They didn't get to finish what they started or have survivor's guilt because their buddy didn't make it, and they want to get back to finish the mission.

We're really good at building up units and teams with incredible camaraderie and morale, but when we pop somebody out of that unit they're now often labeled and self-identify as “mission incomplete.” We are good at making them more physically whole, but we haven't addressed the attendant moral and mental components.

**VooDoo:** Drawing on my own experiences coming home, I didn't have a language or a mental framework to explain why I felt bad, I just knew I did. And I started falling into what now I know were very predictable patterns—angry at everyone, hard to talk to, especially to those who mattered most. I ate too much, drank too much . . . I was not headed for a good place. I couldn't explain it to my wife, or family, or my boss, or anyone. I felt like I was the only guy who felt this way, and I felt unworthy or weak and tremendously guilty and ashamed because my experiences were not anywhere within the same league as the patients I took care of—most of them frontline Marines wounded in combat. But on the outside, I put on a great mask. I was acting like I was before—like a flight doc and a colonel—but in the inside I felt like a fraud . . . really unworthy.

You and I have talked a lot about this. You gave me the language and framework and helped me understand I wasn't the only guy who felt this way. Talk to me about that, and especially the role that loved ones, friends, and communities can play in supporting veterans during this transition.

**LewDog:** That's an important point: we tend to challenge ourselves internally but put a mask on externally. I was on the ground with an Army unit during Desert Storm, and I was part of the wholesale killing machine. It was up close and personal. For much of the 1990s, what we did seemed morally challenging. I felt remorse, but I was thinking, “I'm the only one that's experiencing this, so I probably ought to just shut my mouth and soldier on.” So I put on the mask, carried on with my career and

the things and assignments I needed to do. Yet, like most people, I reflected upon those actions, and these challenged my own deeply held moral beliefs—“Thou shalt not kill.” I could not filter my experiences through the lens of the community—the Greeks would call that catharsis—and it created some mental isolation.

I am a strong advocate for a community-based sharing process that helps us understand our own experiences—the context of those experiences is critical. Let’s face it. In our all-volunteer force less than 1 percent of America is serving at any given time. For those that have skin in the game, it becomes really complicated. We must do a better job of normalizing our combat experiences. Like I said, in the 1990s I thought I was the only human being in history that had ever been through these challenges.

I read Homer’s *Odyssey* when I was in high school, but it didn’t really make much of an impact on me. Later in life as I read and reread this and other classic works, I realized I was not the first person that has ever gone through this! As it turns out, this is a very normal, human reaction, but nobody talked about it. We need systems in place to deal with this; a big part of that is to work within our communities to address those who carry the baggage home. We say we support the troops, but this is where the rubber meets the road.

**Voodoo:** We’ve talked about the tribal traditions, Native American and others. When the warrior class returns to the community, the community collectively shares the experiences and the responsibilities; the warriors, together with the entire community, bear the burden of war. What can our American society learn from this? Is there a way to apply some of these principles to where we are today?

**LewDog:** This is something that Native American and many other tribal communities have addressed throughout the years. Many tribes knew and know how to deal with these moral injury experiences, namely in ceremonial ways that create a shared sense of responsibility among the entire community. So how do we take our warriors and spread the responsibility for the war across the entire community? Our society doesn’t do that today, so I think there are some very good lessons to be learned from Native Americans and their perspectives.

Contemporary American society tends to turn to the Hollywood perspective: warriors are either portrayed as stoic heroes or something that is a threat to our society—the discards or broken warriors. Neither portrayal is accurate. Perhaps we may learn lessons from prior generations about how to share the burden of war across the entire society. We don’t do that very well in our country.

**Voodoo:** For me, coming home after 9/11 to a nation where doing our part meant going to a shopping mall and doing “normal” things was completely disorienting. I had no way cognitively to bridge the fact that I had been over there on the other side of the world where people were dying on behalf of people who are shopping.

**LewDog:** This is where I think we need to look at shared sacrifices that could provide a key to the “normalization” concept we need to talk about. What we experience is very “normal” for the warrior class, but when we come home there doesn’t appear to be any shared sacrifice; the challenges of war are not spread broadly across our society

like it was in Vietnam. Jonathan Shay wrote about Vietnam and moral injury, but that was largely a conscripted force.

I've always found it interesting that we had significant counterwar protesting during Vietnam by—like it or not—the people of America. We didn't really see that while we were in Afghanistan or Iraq, and I often ask myself, Why not? I think it has to do with “skin in the game”—unless you volunteer you don't perceive any particular risk. And since you were a volunteer, society may feel they really don't owe you anything more—you signed up for this, suck it up. Maybe you know somebody you went to high school with who served, was injured, or perhaps died in combat, but that's not a sacrifice for the rest of America. It's not a “clean” fight like World War II. So I think there's a feeling of betrayal from our society.

Betrayal is another form of moral injury.

**VooDoo:** Betrayal . . . I'll come back now to the withdrawal from Afghanistan: it was a mess . . . a tragedy played out in real time in front of every American . . . we left people behind, we lost some of our military, and in the end most of us were asking, Why the hell were we even there in the first place if this is how it ends? What was it worth? Most of us are still angry. I even remember being in Germany with you in late 2001, watching us launch F-16s to overfly Afghanistan and wondering even then, What the hell are we doing? What purpose were we trying to achieve? I didn't say anything because I figured since everyone else was so gung-ho, I needed to be, too. Same when I deployed. Inside I'd think privately, What the hell are we doing? Now I wonder if maybe others felt the same way. So here we are. I'm some combination of mad, sad, and thinking our nation didn't learn a damn thing from Vietnam, and here we are again. And it sucks.

**LewDog:** First, we need to remember wars have political, not military, outcomes. Our thinking centers on winning the fight militarily. We've won virtually every military battle since Vietnam, but how many wars can we say we've won? When you take a look at the actual political outcome from Afghanistan, you could say we spent nearly 20 years there without comprehending our desired political outcome. I understand victory from a military sense; I never fully understood what winning meant in a political context. It's like putting a football team on the field that scores first down after first down, but we don't know where the goal line is, and we don't know what the scoreboard says.

If we don't know what the political outcome of winning looks like, then we rely on our military to go out and win the war on military terms. Perhaps at some point in time we will start evaluating the long war from a cost/benefit analysis. How many trillions of dollars did we spend? What did we get from our investment? So maybe it's time to leave. With regard to the Middle East and the past 20, actually 30 years of conflict—do we look at our wars and say, Was our goal to keep America from being attacked by terrorists again? Or was our goal to create a democracy in Afghanistan? That last one is not achievable . . . never was. Or was it somewhere in between?

That's the problem we run into as military warriors: we want to know specifically what we need to accomplish and break it down into a set of objectives we can do. The

policy becomes fuzzy at some point in time, which means when we fight, the rules are one way some days and very different other days. It's challenging to keep track of all of that, and it becomes morally ambiguous in a lot of ways for those doing the fighting on the ground.

If you look at nearly 20 years in Afghanistan, we have to ask, did we make anything better? Is there less of a threat to our society from terrorism? Or did we actually make it worse? Those are interesting questions because we did spend a lot of blood and treasure. But what was the political return on investment?

**VooDoo:** Now you're talking like not only a professor of strategy but also a practitioner of one—a so-called pracademic.<sup>3</sup> I know you've often told me "strategy is strategy," and your approach to veterans' issues is based upon the tenets of strategy applied to real-world problems. The VA and its mental health teams have been doing incredible work, and there are so many other groups that are doing good things, too, for our vets—faith-based organizations, peer groups, the broader community. You have worked hard over the past now—almost 15 years?—to connect all these loosely connected groups . . . connecting strategy to the operational arts for effect. How would these different communities come together and what specific roles can they play in supporting veterans and service members?

**LewDog:** When I think about moral injury, I want to talk about helpful communities. Let's start with the mental health community. When we look at our warriors' challenges there's some really interesting research being done. How do we differentiate what we see in brain responses to moral injury inputs, and how do we differentiate these responses from other trauma? What are the most effective ways to treat moral injury?

I don't think we will ever have a pill that "cures" moral injury. I'm not discounting that some type of pharmacological intervention may be helpful, but I am concerned we might chase after that and miss the strength of connectedness and shared responsibilities. It's important that we grapple with clinical approaches to moral injury. Some clinicians believe putting a label on it and including it in the *DSM* will help, but others believe doing so reduces the incentive to getting treated once moral injury is a compensable diagnosis. I'm not sure what the right answer is. I just want our veterans to get the help they need and to heal.

**VooDoo:** Certainly, it's important to address the medical and mental health issues faced by veterans, but tell me more about the disincentive you just mentioned.

**LewDog:** One of the things we know is that when somebody becomes rated at 100 percent disability they quit going to the VA, so we have to ask ourselves, What's the real goal? In my organization we say, "Focus on the ability, not the disability." I want to look at barriers to success. If moral injury is one of those barriers to success, then how do we approach that challenge? I want to think of the challenges less from a compensatory aspect, and more on how we remove barriers to life goals.

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3. See, for example, Maria R. Volpe and David Chandler, "Resolving and Managing Conflicts in Academic Communities: The Emerging Role of the 'Pracademic,'" *Negotiation Journal* 17 (2001), <https://doi.org/>.



I'll reiterate three main points: awareness, normalization, and individual growth potential. If a warrior can understand that what they are experiencing is a very normal human reaction to their experience, then the door opens to a path forward and healing. We warriors can spend a lot of time being very self-reflective and introspective about actions we've taken. Normalizing those feelings can lead to growth. But a lot of us are very good at numbing the feelings without addressing them—that's a big problem. If I don't want to reflect anymore, then I'll reflect into the bottom of a bottle of vodka instead.

Our faith-based communities are another part of American society that knows how to talk about experiences, particularly from a moral perspective. We need to raise awareness and unleash that skill set within the faith-based community. How do we normalize and talk about the things we witnessed, experienced, or the transgression from our own actions? I would love to see somebody take a look at the Bible, the Qur'an, or other religious texts from a moral injury perspective. There's plenty of violence, war, and atrocities in our documents of faith. How do we reconcile that with contemporary experiences? It's not just a bunch of stories from the past. We must connect to lived experiences from real world people.

**VooDoo:** The role of organized religion in American society has changed significantly over the past few decades. What are the roles faith-based communities can play even if participation in organized religion is declining overall?

**LewDog:** I am constantly amazed at how many faith leaders come to us talking about veterans, and I think in some cases about veterans who have experienced traumatic events or morally injurious events, but they lack the context of the warrior perspective. I talk about leveraging the faith-based community—being on the lookout for someone who might have experienced moral injury, and then knowing what to do or where to refer them to. I agree we tend to see fewer and fewer people participating in organized religion, but that doesn't mean Americans are less spiritual. Faith-based organizations can provide important eyes and ears in our communities and help us address the issues confronting vets today.

**VooDoo:** As younger generations have moved away from many organized religious traditions, we've seen a rise in alternative forms of spiritual practices, such as meditation, mindfulness, and yoga. As with religion, these practices may provide individuals with a sense of purpose, meaning, and connection to something greater than themselves. Your thoughts?

**LewDog:** Absolutely; it may be a portal into acceptance for our warrior communities . . . participation in the spiritual experience of their choice. I'll touch on my own experiences throughout much of the 1990s. When I came home to "peace," I took all my experiences at war and threw them in a file in the back of the file cabinet to be dealt with at some point in the future. I felt like I wasn't welcome to go back to church because I had transgressed many of the values I was taught as a young man. I wrote it off and said, "Well, that's one thing I can't do anymore"—until I had a really powerful and spiritual conversation with a chaplain.

So maybe we can open the door to better participation in faith and other spiritual communities. But it has to come from an area of understanding. Our warriors want to know they can go to our faith leaders, but they need them to understand the veteran's experience and the context in which moral injury occurs and exists. Once vets realize that people do understand and are empathetic toward the morally conflicted situations we find ourselves in, then we make progress.

**VooDoo:** Let's talk a bit about the importance of peers, and peer-to-peer relationships, either formal or informal. How does that fit in the discussion?

**LewDog:** A couple of things go together to optimize our mental health—community-based programming and clinical-based programming. They aren't mutually exclusive; rather, they work better when working together. I especially think peers using "nonclinical" language is important for the average warrior. We often understand best from those with whom we have shared experiences and language. Building out savvy warrior peers who can communicate in an easily understood way is important—a peer base capable of engaging and communicating in nonclinical language can be a way to address and normalize the challenges of moral injury.

**VooDoo:** What are the roles of organizations, like the VA or others, to facilitate those peer-to-peer conversations?

**LewDog:** That's an important topic. The State of Texas did something really interesting about 12 years ago when they created a military veteran peer network as a first line of defense. Those working on behalf of veterans recognized they would never have enough clinical support to be able to address the challenges of a fairly large returning veteran population—there are almost 1.8 million vets in the state of Texas. Veteran peers are like scouts. They can help screen the force and can connect people to helpful resources. That's a big part of my job, incidentally, as the veterans director for Harris County.

To do that effectively and safely, we need to have some type of peer certification or accreditation. That last point is challenging. The goal is to have a screening force that can talk about moral injury in a VFW [Veterans of Foreign Wars] or American Legion Post, not necessarily over a cocktail, but to do it in a nonthreatening peer way. What's normal and what's not, and who to go see.

**VooDoo:** Prior generations found those peer-to-peer relationships at the VFW or the American Legion, and yes . . . those conversations were usually facilitated by alcohol. Today's generations aren't joiners in the same way that our generation and those before were. That phenomenon of course isn't just limited to veterans' groups but includes all legacy organizations. Young people today are online—social media, LinkedIn, and a bunch of new ones I haven't heard of yet. Have you seen any examples of how we could utilize technology and social media to help bring people together as opposed to dividing them further?

**LewDog:** Social media and tech are the classic double-edged swords here. For every organization that brings people together we find ourselves divided by another. Granted you and I are older, and for our generation that face-to-face interaction is very important. It's hard for me to be empathetic online. It's hard to develop empathy

over an app. But apps can help to raise your own personal awareness of the risk that you face.

The elephant in the room when we talk about moral injury or PTSD in veterans is suicide. Maybe well-applied technology can help us move the needle on that one, but I still think, at least for now, that the key is connectiveness—there is no substitution for real relationships with real people.

**VooDoo:** We've covered a lot of ground. What makes you optimistic these days? It's easy to get depressed about the stats like "22 vets a day," recognizing that is only the tip of the iceberg of pain within the community of veterans.

**LewDog:** I'll tell you the first thing that I'm optimistic about, and it may sound unconventional to some: I have seen some amazing potential in plant-based medicine from a perspective of addressing some of the mental health aspects and particularly moral injury challenges. We obviously need to know more, but that has me optimistic. The good news is that there are many things we can learn from long-established tribal activities—things such as Ibogaine, Ayahuasca, and other plant-based traditional medicines connected to tribal rituals. But if we try to separate the plants from the ceremonial aspect of the healing journey, we run the risk of an incomplete process. That to me is a big risk . . . the same risk if we decide to rely only on pharmacologic treatment and medication. It appears that the power we are starting to see in plant-based medicines is accomplished via a guided journey.

The other thing I see that's exciting is the fact that we are raising awareness. Ten years ago I couldn't imagine Air University taking on a topic like moral injury, and now it's kind of front and center, and people are thinking and talking about it. That means we're making progress in raising the awareness about moral injury. I think as we continue to develop community-based programming that goes hand-in-hand with the clinical approach, and as we get better knowledge and understanding about interventions, then I believe there are some very exciting times ahead of us.

On the challenges of shared sacrifice for America going to war, I don't have an answer, but I remain optimistic as we bridge the gap by having community discussions on what it's like to go to war, not by pretending that it's exclusive to a warrior class and not the rest of America. Everybody needs to have skin in the game, or we shouldn't go to war.

**VooDoo:** We live in a very partisan time in our nation, but one bright spot I see is that there are vets on both sides of the aisle working together on things they can agree on. I've seen that in DC, but I'm also seeing that at the local and state levels, too. Talk to me about that.

**LewDog:** Veterans know how to solve problems. We're trained from day one to understand things that are bigger than ourselves, and our mission requires us to work together as a very diverse organization to solve problems. If we can identify and clearly articulate the tough problems, then there's nothing better than a highly diverse, highly trained workforce to come together to solve those challenges.

We have many problems in our society today, but I think this is an opportunity that we have as veterans. I can't solve world hunger, but I might be able to solve hunger on

my block. I can make my block better, and block by block, community by community, city by city, state by state, we can make this a better country. I think that's the skill set that we bring to the table as veterans, and that is the opportunity that sits in front of us. If you were able to get through boot camp, or whatever commissioning source you came through, then you have the ability to make a significant difference in our country today. What we need to do is to identify the mission, bring that diverse workforce together, and solve some problems.

**VooDoo:** Earlier we touched briefly on the importance of making sense of our experiences as we transition back to civil society. We need to understand what happened to us and put it into a package we can deal with. It's like Joseph Campbell's concept of the "hero's journey" connecting back to ancient literature such as the *Iliad*, but also to modern-day stories like *Star Wars*. All highlight the idea of rediscovering who we were and who we have become. Thoughts?

**LewDog:** I think rediscovering yourself but allowing your community to rediscover you is even more important. I work in the Houston area. If you were 18 years old when you left Houston and joined the military, you are a different person when you return home, in four years or 34. Regardless of where you served or what you did, you faced experiences that could make you stronger, but only if you are able to package them in a way to make sense of them for yourself.

When a vet comes home, we have to rebuild their Maslow's pyramid in civil society in order for them to reintegrate successfully into their new roles and responsibilities. They will always be a veteran, but they need to build on and, in some ways, stretch beyond that identity. Our vets have incredible skills and talents, but sometimes they need help coming to terms with their service in order to move forward. It's a remarkable and untapped national capability.

**VooDoo:** In that light, I'll bring up a quote from T. S. Eliot from 1942: "We shall not cease from exploration/ And the end of all our exploring/ Will be to arrive where we started/ And know the place for the first time."<sup>4</sup>

**LewDog:** That's a good one. I frequently start my talks with the adage "you can never go home again," because while your old home may or may not have changed, you have, by the nature of your service in uniform. If your transition is managed well, you return stronger than you were when you left. That's the goal.

**VooDoo:** Final words as we wrap this up?

**LewDog:** To me, moral injury is a pretty simple concept. I say that PTS is when something traumatic happens to you, and stress is normal after a traumatic event. But things are different if you're the perpetrator, or you're the witness, or you feel betrayed by events that took place in your presence, then that is when a moral injury can occur. It doesn't mean it will, but it can. To be able to move past the simple concept, however, requires both awareness and normalization. I think it's incumbent on all of us to help raise awareness regarding moral injury and then figure out how we can bring each of

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4. T. S. Eliot, "Little Gidding," *The Four Quartets*, stanza V.

the communities together and leverage them to make our warrior class productive and successful and to play a key role in making our communities better.

**VooDoo:** Thanks, LewDog. It's been good to talk. You're a pretty smart guy . . . for a fighter pilot . . .

**LewDog:** Noted. Æ

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