

Growth after Trauma: Moral Injury, PTSD, and PTG
Mark C. Lee, DMin, PhD

Introduction

Combat deployments affect people and veterans return changed. Some come back worse than others, but no one comes back the same. Many have experienced various forms of trauma, whether directly from combat operations or not, trauma can be a significant part of one's experience in war. Trauma can cause severe physical, emotional, and psychological reactions, often displaying symptoms often referred to as Post Traumatic Stress Disorder (PTSD).

Trauma may manifest symptoms of PTSD, but the injury to the psyche, or soul, is much more than just symptoms of a disorder, reparable through medication and therapy. There is a deeply spiritual aspect to combat that is much more than mere psychological or physiological, and yet they are interrelated. Therefore, the treatment of combat veterans' symptoms needs to address the moral aspects of the combat experience.¹ Hence, some behavioral health and religious professionals have begun to talk more about Moral Injury in the last few years.²

The argument is that the treatment of an individual with combat trauma cannot be devoid of the spiritual aspect of the person. I want to emphasize that any treatment of combat trauma should encompass not only the psychiatric and psychological treatment (with the use of medication and therapy), but also the spiritual.

Therefore, I suggest that it would be prudent and important to explore the spiritual aspects of PTSD and Moral Injury to aid the healing of those who suffer from combat related trauma. As suggested by the research on PTSD, faith is important and helpful in helping trauma sufferers heal, which is also an important component of promoting Posttraumatic Growth (PTG). In fact, research appears to indicate that those with religious faith do better in experiencing PTG than those without faith. Therefore, regardless of what the individual suffers from, there is a spiritual component of combat experience that needs to be address, which can be instrumental in engendering PTG.

Research appears to support that people can grow from their traumatic experiences, and their religious faith can play an important role in encouraging PTG. How does faith promote PTG? What is it about one's faith that facilitates growth? The answer to the question is that growth is dependent on more than an individual's faith, theology, or even spiritual disciplines. There is another factor that is essential to promoting PTG. Community, especially the community of faith, is perhaps the most important element that fosters growth in people.

As the saying goes, "no man is an island," no individual can stand alone and be well, especially during psychologically, emotionally, and spiritually difficult and trying times. Community is important to the process of growth because of one's connection with others. The support from community, which one receives through the process of coping with the trauma and

¹ Warren Kinghorn, "Combat Trauma and Moral Fragmentation: A Theological Account of Moral Injury," *Journal of the Society of Christian Ethics* 32, no. 2 (2012). More psychology professionals are acknowledging the need to address the issue of moral injury with combat veterans. Moral injury deals with "the experience of having acted (or consented to others acting) incommensurably with one's most deeply held moral conceptions..."

² Jonathan Shay is credited with coining the term, "Moral Injury." However, many scholars have begun researching and writing about Moral Injury in the last few years. Some of the notable books on the subject recently published are: *Soul Repair*, by Rita Nakashima Brock, et al, 2012; *Post-Traumatic God*, by David Peters, 2016; *Moral Warriors*, *Moral Wounds*, by Wollom A. Jensen and James M. Childs, Jr., 2016; *Adaptive Disclosure*, by Brett T. Litz, et al, 2016; *Afterwar*, by Nancy Sherman, 2015; *What Have We Done: the Moral Injury of our Longest Wars*, by David Wood, 2016.

then growing through the experience, is critical. Therefore, I will explore the theological implications of ecclesiology from a Christian perspective, and how that understanding can be lived out in military chaplaincy because it community for the traumatized is essential to facilitating growth.

Post Traumatic Stress Disorder & Moral Injury

The American Psychiatric Association (APA) first classified posttraumatic reactions as PTSD in 1980, in the *Diagnostic and Statistical Manual of Mental Disorders-III* (DSM-III).³ Since then, the APA has updated the DSM twice, with the latest version released in 2013.⁴ The recognition and identification, along with the labelling and naming of Post Traumatic Stress Disorder (PTSD) really began with the generation of Vietnam War veterans, although PTSD in different names was around for several generations.⁵ American Civil War combatants were said to have “soldier’s heart” for their reactions to their experiences on the battlefields. World War I and World War II veterans’ experiences from combat were referred to as “shell shock” and “combat fatigue.” As a result of the official diagnosis in 1980, more studies regarding the effects of warfare on veterans’ psyche have been conducted.⁶ Mental health professionals, and society in general, knew there were unique emotional and psychological issues related to soldiers’ experiences, but PTSD did not receive prominent attention until much political pressure was asserted on the APA by veterans and supporters.⁷

The issue of post combat trauma and its effect on veterans is not entirely answered with PTSD. As much as the military and society have focused on the problem of PTSD with veterans, there have been other voices in psychology and theology, who have raised the possibility that not all combat veterans suffer from PTSD. Perhaps more are affected by Moral Injury, which presents very similar reactions and symptoms as PTSD, but is notably different from PTSD.

³ <http://www.psychiatric-disorders.com/articles/ptsd/causes-and-history/history-of-ptsd.php>. The APA classified PTSD as a mental disorder in DSM III.

⁴ *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition.*, 5th ed. (Arlington, VA: American Psychiatric Association, 2013).

⁵ Barry R. Schaller, *Veterans on Trial: The Coming Court Battles over Ptsd*, 1st ed. (Washington, D.C.: Potomac Books, 2012). In chapter 4, Schaller gives a lengthy history of “The politics of PTSD” and the heightened attention veterans of the Vietnam War received after the war and the veterans’ reintegration, or the poor reintegration thereof, back into society. Basically, the plight of the American veterans of the Vietnam War and the toll on society caused mental health professionals and the American government to re-examine the seriousness of the psychological aftermath of combat on veterans.

⁶ Dr Jonathan Shay has written *Achilles in Vietnam* and *Odysseus in America*, to draw the parallels of the trauma of warfare experienced by Achilles and Odysseus in ancient Greek literature to what the Vietnam veteran experienced in the jungles of Vietnam and upon returning home to America. Dr Ed Tick, author of *War & Soul*, writes that ancient societies have all had rituals to send and receive warriors, because those societies’ elders understood the inherent trauma and the subsequent change to the warriors’ psyche that warfare has.

⁷ Schaller, *Veterans on Trial: The Coming Court Battles over Ptsd*, 75-80. The author makes the case that PTSD really came into the spotlight after the end of the Vietnam War and the “fall out” it had on American society with the myriad of problems and huge numbers of veterans who were unable to cope with the aftermath of combat. The problems from Vietnam War were unique to that of previous wars like World Wars I and II or Korean War. The problems faced by Vietnam War veterans also heightened awareness and increasingly politicized the debate over PTSD. Furthermore, the definition and diagnosis of PTSD were heavily contested within the world of psychology and what was put out eventually was also influenced by many political factors.

Noted American experts in trauma like Charles Figley, Ed Tick, Jonathan Shay, and Larry Dewey,⁸ who have worked extensively with Vietnam-era veterans, support a different outlook on those with post combat stress. Figley, et al prefer a change to the entire outlook to combat trauma and even the terminology of what combat veterans suffer – to move away from focusing too much on PTSD. The reactions with which combat veterans suffer might be better termed as Combat Stress Injury (CSI),⁹ or Post Traumatic Stress, as an alternative. Still others, like Jonathan Shay, who coined the term, prefer Moral Injury. There is an injury, but healing and eventual strengthening is possible, the hope and possibility of growing through one's traumatic experience is available and open to the combat veteran. An injury does not have the same sense of permanence as it does for a disorder.

Tick asserts that PTSD should not be dealt with as a primarily medical or psychological condition. "Modern approaches seek etiology and cure in brain chemistry and cognition, and a diagnosis of PTSD almost inevitably leads the sufferer, professionals and public to look for psychological and medical treatment as if the wound were primarily a medical condition."¹⁰ Medical and psychological treatments alone are insufficient. This is not to say that medical or psychological treatment modalities are completely inept. Instead, Tick strongly advocates that while treatment for PTSD is available, the cure is not purely medical or psychological. In order to heal the combat veteran, the "unique and complex moral, ethical, and religio-spiritual dimensions of warfare that are inevitably troubling to the survivor" need to be dealt with.¹¹ We need to help combat veterans, who suffer from the aftermath of combat trauma, holistically – mind, body, and spirit. Post-combat trauma is really a matter of the soul; a deep core essence of the person's being that affects the mind and the heart. In healing our combat veterans, we must look at the spiritual aspect.

Healing for PTSD requires a spiritual approach because PTSD is a sacred wound to both the soul and society...Healing PTSD requires moving beyond conventional therapeutic practices to restore the proper relationships between veterans and communities...¹²

Moral Injury suggests a hopeful future of recovery and potential growth, as opposed to a permanent state of suffering. Proponents of Moral Injury espouse that the injuries sustained by a person as a result of combat exposure, are in fact, injuries to the soul of the person. Jonathan Shay¹³ states: "I really don't like the term 'PTSD'..."¹⁴ the diagnostic definition of 'post-traumatic

⁸ Charles Figley is a Vietnam War veteran and renowned expert in traumatology, who has authored many books on trauma, most notably, *Combat Stress and Injury*, a book I reference in this study. Ed Tick, Jonathan Shay, and Larry Dewey are psychologists and psychiatrist who work(ed) with Vietnam War veterans for the US Department of Veterans Affairs, and authors of books cited in this thesis. These experts have all worked with combat veterans and have dealt with issues of PTSD and effects of combat on the veteran's psyche and soul.

⁹ Charles R. Figley and William P. Nash, *Combat Stress and Injury: Theory, Research, and Management*, Routledge Psychosocial Stress Series (New York, NY: Routledge, 2007).

¹⁰ Edward Tick, "Ptd: The Sacred Wound," *Journal of the Catholic Health Association of the United States*, no. May-June (April 27, 2013 2013): 16.

¹¹ Ibid.

¹² Ibid., 22.

¹³ Jonathan Shay, *Odysseus in America: Combat Trauma and the Trials of Homecoming* (New York: Scribner, 2002); Jonathan Shay, *The Pen and the Dollar Bill: Two Philosophical Stage Props* (<http://www.iom.edu/Object.File/Master/32/928/Presentation.PTSD.Shay.pdf>: Institute of Medicine of the National Academies, 2006).

stress disorder' is a fine description of certain instinctual survival skills that persist into everyday life after a person has been in mortal danger — but the definition doesn't address the entirety of a person's injury after the trauma of war. In fact, Dr. Shay created the term "moral injury," and the term is catching on with both the VA and the Department of Defense.¹⁵

The propagation of Moral Injury is not to say that all PTSD cases are Moral Injury or that PTSD should be minimized. In fact, Rita Nakashima Brock, et al, claim that "moral injury is not PTSD...It is possible, though, to have moral injury without PTSD."¹⁶ Moral Injury suggests that the aftermath of combat trauma can affect some people in a troubling way, even if they do not meet the standards for PTSD. Therefore, many more people — a far greater percentage of combat veterans — could be suffering from Moral Injury than PTSD.

Regardless of the diagnosis or injury from which a combat veteran might suffer, the primary thesis of this paper is that growth can occur. This growth is known as Posttraumatic Growth. Furthermore, the thrust of this paper is to examine the role of the military chaplain, as a representative of the Church, to facilitating such growth.

What is Posttraumatic Growth?

Posttraumatic Growth (PTG) describes the phenomenon of traumatized people growing — becoming stronger, healthier, happier, and in all aspects better — after their traumatic experiences. PTG can be expressed as the improvement experienced in various facets of one's life and self, because they have struggled with trauma. People who have experienced PTG state that although they would never want to go through it again, they can look back on the trauma as an experience that helped them to be a better person.

In the 1980s, Calhoun and Tedeschi began asking about the possibility of people growing from their traumatic experiences. "Posttraumatic growth is positive change that the individual experiences as a result of the struggle with a traumatic event."¹⁷ People can endure significantly difficult events in life and come out of those experiences having a perspective that they are better people because of the experience, although it was pure "hell" for them during the trauma. Growth can occur after trauma, and individuals experience growth after much wrestling with the trauma. The struggle helps with meaning and purpose, leading to a new worldview to better make sense of the experience. Trauma leads one to struggle with painful experiences and the suffering of the resulting symptoms, which eventually can lead to growth.

One's engagement with the discomfort and the pain, not running away from or avoiding it, but instead struggling with it, helps the person to come out of it with better appreciation for the experience. Much like driving through a dark tunnel, one must embrace the darkness of the unknown, relying on some guiding light, to traverse the length of the tunnel to get to the other side where there is light. The result is a person who has grown and is better (more mature, wiser, stronger, and more benevolent, etc.) for having had the struggle. Combat veterans struggle with their experiences. Struggling to understand and to cope with these traumatic experiences often

¹⁴ www.pbs.org, "Jonathan Shay Extended Interview," Public Broadcast System, last modified March 11, 2011, accessed March 16, 2014.

¹⁵ Jeff Severns Guntzel, "Beyond Ptsd to 'Moral Injury'," accessed March 16, 2014.
<http://www.onbeing.org/blog/beyond-ptsd-to-moral-injury/5069>.

¹⁶ Rita Nakashima Brock and Gabriella Lettini, *Soul Repair: Recovering from Moral Injury after War* (Boston: Beacon Press, 2012), xiii.

¹⁷ Lawrence G. Calhoun and Richard G. Tedeschi, *Facilitating Posttraumatic Growth: A Clinician's Guide, The Lea Series in Personality and Clinical Psychology* (Mahwah, NJ: Lawrence Erlbaum Associates Publishers, 1999), 11.

lead to posttraumatic growth.¹⁸ Hence, PTG occurs when the individual struggles, re-evaluates previously held worldviews, adapts and reinterprets them, and creates new perspectives that are healthy and helpful for the person's life.

The underpinning meaning of PTG is growth, so it is an "experience of improvement that for some persons is deeply profound."¹⁹ There are five domains of PTG, which can have different measurements of experienced growth for various individuals:²⁰

- Greater appreciation of life and changed sense of priorities
- Warmer, more intimate relationships with others
- A greater sense of personal strength
- Recognition of new possibilities or paths for one's life
- And spiritual development

I propose that PTG is useful to help veterans move towards a different response to combat trauma, one of a hopeful future, a new state of being, and one that is more inclusive of a larger population of combat veterans. The possibility of experiencing growth from trauma is much more appealing than keeping the focus on the psychological and spiritual injuries and disorders, and the treatment of symptoms.

PTG and Combat Veterans

Tedeschi and McNally deal with the specific question of whether or not PTG can be fostered in combat veterans.²¹ These researchers found that while many combat veterans do experience the long-term effects of PTSD as a result of the combat trauma, there is evidence for PTG in several different populations of veterans, to include aviators, Prisoners of War (POW), and Vietnam War veterans. Data appears to support that combat veterans, who are more exposed to repeated and/or prolonged trauma than most civilians, can and do experience growth after trauma. The question is: how? The authors purport "psychotherapy can nurture such change [posttraumatic growth] through cognitive processing, support of attempts at mastery of new experiences, and enhancing relationships."²² In addition to psychotherapy, Tedeschi and McNally support the importance of the "life narrative in posttraumatic growth, noting how storytelling is central to this endeavor."²³ They also note that one of the differences between civilian and combat trauma is the shared trauma. Combat veterans "experience prolonged and repeated traumas, often within a supportive, cohesive group (if the unit is functioning well).

¹⁸ Stephen Joseph, "Religiosity and Posttraumatic Growth: A Note Concerning the Problems of Confounding in Their Measurement and the Inclusion of Religiosity within the Definition of Posttraumatic Growth," *Mental Health, Religion & Culture* 14, no. 8 (2011): 843, <http://dx.doi.org/10.1080/13674676.2011.609162>.

¹⁹ Lawrence Calhoun and Richard Tedeschi, "Posttraumatic Growth: Conceptual Foundations and Empirical Evidence," *Psychological Inquiry* 15, no. 1 (December 1, 2010 2004): 4.

²⁰ Ibid., 6. Citing Tedeschi & Calhoun, "The posttraumatic growth inventory: Measuring the positive legacy of trauma," *Journal of Traumatic Stress* (1996).

²¹ Richard G. Tedeschi and Richard J. McNally, "Can We Facilitate Posttraumatic Growth in Combat Veterans?," *American Psychologist* 66, no. 1 (2011), <http://dx.doi.org/10.1037/a0021896>.

²² Ibid., 21.

²³ Ibid. Citing Meichenbaum (2006). Resilience and posttraumatic growth: A constructive narrative perspective. In L.G. Calhoun & R.G. Tedeschi (eds.), *Handbook of posttraumatic growth: Research and practice* (pp. 355-367). Mahwah, NJ: Erlbaum.

The...common narrative... may enhance the process of posttraumatic growth.”²⁴ The “common narrative” is the community of soldiers who have shared common experiences in combat. This concept of community for combat veterans is an important one, which I will discuss later.

Is there evidence of PTG in combat veterans from Afghanistan and Iraq? Pietrzak, et al., studied 272 veterans and found that 72% of the respondents “endorsed a significant degree of posttraumatic growth in at least one of the areas assessed...”²⁵ Of the six areas of measuring PTG, 16.5% of the veterans indicated that he/she had a stronger religious faith after combat experiences. The study does not mention how these veterans experienced growth. Was there training, debriefing, therapy sessions, a church, pastoral counselling, etc. that served as the impetus for growth or did growth naturally occur over time as these veterans processed their combat experiences?

Interestingly, younger veterans who had indicated more PTSD symptoms showed more PTG. A possible explanation for this inverse relationship between the severity of PTSD symptoms and the higher PTG rate is that those dealing with higher PTSD struggle more to find the meaning of the event which challenged their previous worldview.²⁶ As mentioned earlier, finding meaning and purpose of the trauma for one’s life is crucial and the more one struggles to understand the event, the more one appears to sense growth. So, one can conclude that those who strive to finding meaning have a higher likelihood of growing from their trauma. Furthermore, perceived unit member support was positively correlated to PTG. “Social support may promote PTG by providing a context within which to construct narratives about a traumatic experience, reintegrate them into existing schemas, and generate meaning for them.”²⁷ Unit support translates to community, a group of people with a strong sense of common bond, as previously mentioned. For combat veterans, community is a family of people who understand, share in the narrative, and support one another through the process of dealing with the aftermath of combat. The community is for support and acceptance, a safe place to share the stories (nightmares) of the carnage and the emotional, psychological, and spiritual toll of combat. Again, this sense of community is an important component to promoting PTG.

D. Patricia Tackett²⁸ specifically deals with the population of veterans who served with National Guard units in Operation Iraqi Freedom and Operation Enduring Freedom.²⁹ In the section on spirituality, Tackett pertinently addresses the issue of religious/spiritual coping and

²⁴ Ibid.

²⁵ Robert H. Pietrzak et al., “Posttraumatic Growth in Veterans of Operations Enduring Freedom and Iraqi Freedom,” *Journal of Affective Disorders* 126, no. 1-2 (2010), <http://dx.doi.org/DOI: 10.1016/j.jad.2010.03.021>. The study indicates that the top three areas of growth were: “changing priorities about what is important in life (52.2%), being able to appreciate each day (51.1%), and being better able to handle difficulties (48.5%).”

²⁶ Ibid., 233.

²⁷ Ibid. Citing Calhoun and Tedeschi, “Posttraumatic Growth: Conceptual Foundations and Empirical Evidence,” (1-18).

²⁸ D. Patricia Tackett, “Resilience Factors Affecting the Readjustment of National Guard Soldiers Returning from Deployment” (Qualitative and literature review, Antioch University, 2011), accessed March 23, 2011.

²⁹ National Guard soldiers are voluntary citizen-soldiers, who belong to what is known as Reserve Component of the Army in the United States. These soldiers train one weekend a month and two weeks annually. These National Guard members have otherwise full-time civilian lives (work, school, families, etc.) and participate in the military on a part-time basis. The National Guard, along with the Reserves (another entity of citizen-soldiers), has been called upon to fight along with the Active Duty component since the beginning of both combat operations in Iraq and Afghanistan. There are more unique and difficult challenges and problems facing soldiers from the Reserve Component due to the nature of their structure and the lack of resources to support soldiers, particularly post deployment.

the impact of positive religious coping to affirmative outcomes in dealing with combat trauma. Not surprisingly, Tackett cites the vast array of research in this arena, which predominantly indicates, “religious and spiritual belief and practices...can be beneficial for psychological recovery as well as in personal growth posttrauma.”³⁰ Religious beliefs help combat veterans find meaning and purpose of life and the trauma, no differently from civilians, thereby reducing the severity and duration of PTSD symptoms. Religious practices, including such rituals as the healing prayer or Holy Eucharist, can also help lead the veteran to wholeness and can engender PTG. Finally, religious beliefs and practices encourage forgiveness, which also help to reduce the severity and duration of PTSD induced reactions. The benefits are not only psychological, but evidence supports that religious and spiritual rituals have neurological benefits as well, which suggest better brain functioning.³¹ Positive and healthy religious coping to combat trauma is important to not only reduce symptoms, but to also promote PTG. Tackett also points out that the military chaplains need to work with combat veterans, along with mental health professionals of various disciplines, which is vital and necessary to promote spiritual fitness and well-being in the Army.

PTG in the Context of Christian Community

What is important in facilitating growth? As mentioned earlier, one of the key components to facilitating growth in combat veterans is community with fellow veterans who can share in their experiences. Spiritually, the community of faith, with those who have experienced similar trauma, appears to be the single most important factor for growth. Why? Based on some of the literature available on the effect of groups on healing and helping those suffering from various forms of trauma, one can conjecture that community helps to normalize reactions, to put in psychological terms. However, more importantly, I believe community provides a safe place to share and to find help and support, which gives people the sense of the collective will: I can survive because they have survived. Community offers friendship and a sense of bond between people who shared similar experiences of loss, fear, pain, and despair, giving to one another the healing brought through friendship. In these groups, members can begin to hope for the future, find a sense of resolve to move on, as well as learn from the trauma.

As a chaplain from the Christian faith tradition, I will address the community of faith specifically from the traditional Christian concept of community.³² What constitutes community in Christianity? The Christian concept of community is perhaps best represented by the Church, the *ecclesia*. According to Migliore, the *ecclesia* is described in the New Testament:

[...] refers to a unique and transformed way of being human in relationship with God and with other persons. It designates a distinctive form of human

³⁰ Tackett, "Resilience Factors Affecting the Readjustment of National Guard Soldiers Returning from Deployment," 42-47. Citing Annick Shaw, Stephen Joseph, and P. Alex Linley, "Religion, Spirituality, and Posttraumatic Growth: A Systematic Review," *Mental Health, Religion & Culture* 8, no. 1 (March 2005), <http://dx.doi.org/10.1080/1367467032000157981>.

³¹ Tackett, "Resilience Factors Affecting the Readjustment of National Guard Soldiers Returning from Deployment," 46-47.

³² My claim as a Christian theologian is not to exclude other religious faiths from the dialogue. It is merely claim who I am and the particular theological framework from which I approach the subject. I believe the concept of a religious community is available and can be used in other religions. However, the concept and practice will need to be interpreted and adapted according to the religious tradition.

community characterized by mutuality, interdependence, forgiveness, and friendship.³³

What is the importance and role of the Church in providing the help necessary to move people from sufferers to those who have experienced growth in the aftermath of their trauma? First, the Christian community, the *ecclesia*, is a “new community of free persons centered on God’s love in Jesus Christ and empowered to service by the Holy Spirit.”³⁴ The Church can be viewed as an organic entity, “She is a ‘mode of existence,’ a *way of being*.” The mystery of the Church, even in its institutional dimension, is deeply bound to the being of man, to the being of the world and to the very being of God.³⁵ Being is not only about existence, but also about relationships.

Community begins with relationships. First, there is community with God and humanity. Then, there is community created with individuals, gathered together to belong as one, based on the love of Jesus Christ. The Church is united with, in, and through Jesus Christ, based on faith in Christ. Of the four images of the Church that Migliore offers³⁶, the one that best portrays the community of faith most helpful in the promoting PTG is Church as the *body of Christ*.

The community participates in one Lord, one Spirit, one baptism, and thus becomes “one body.” This organic image of the church as a body whose head is Christ has been enormously influential in Christian theology and in the history of the church. The image conveys the mutual dependence of all members of the community on one another, their variety of gifts which are for the enrichment and edification of the whole community, and the common dependence of all members of the body on the one head who is Christ (cf. Col. 1:15-20; Eph. 5:23). The unity of the church as one body is indispensable if it is to be effective in carrying out its mission in the world.³⁷

This definition of the Church offers the best imagery of the kind of community that necessarily aided in promoting growth for those who suffered from trauma. If we understand the Church to be the body of Christ, then each member of the body also represents the body. The body of Christ then represents, incarnationally, the ministry of Jesus Christ. Hence, the Christian military chaplain, as a member of the body of Christ and as an ordained representative of the Church (regardless of denomination), becomes de facto the Church to the people to whom s/he ministers.

The Christian community, i.e. the Christian chaplain, is called to love God and others in unity while acknowledging and appreciating the individuality of persons. We have unity with God and one another, as brothers and sisters in Christ Jesus – united in our baptism and communion, and we must acknowledge our multiplicity – that we are diverse individuals. We cannot separate ourselves from the community and we cannot lose our individuality and be

³³ Daniel L. Migliore, *Faith Seeking Understanding: An Introduction to Christian Theology* (Grand Rapids: W.B. Eerdmans, 1991), 189.

³⁴ Ibid.

³⁵ Jean Zizioulas, *Being as Communion: Studies in Personhood and the Church, Contemporary Greek Theologians* (Crestwood, NY: St. Vladimir's Seminary Press, 1985), 15.

³⁶ Migliore offers four main images of the church found in the New Testament: 1) the church as the *people of God*, 2) people of God as a *servant people*, 3) the church as the *body of Christ*, and 4) a *community of the Spirit*, filled by the gifts of the Spirit. Migliore, *Faith Seeking Understanding: An Introduction to Christian Theology*, 190-91.

³⁷ Ibid., 191.

subsumed by the group's identity. As Volf puts it, our union is based on the union with God, modeled on God's own relational nature.

Jesus' high-priestly prayer, that his disciples might become one "as you, Father, are in me and I am in you, may they also be in us" (John 17:21), presupposes communion with the triune God, mediated through faith and baptism...³⁸

Therefore, community of faith is important because the veteran's trauma can impair relationships and create distance between the injured and other significant people in the veteran's life.³⁹ Veterans are always highly encouraged to "incorporate community and relationships as aspects of their spiritual experience."⁴⁰ A faith community is particularly important and helpful to the veteran to find support through the question of theodicy and to help restore and reintegrate the veteran to a healthy relationship with God and the worshiping body. The ultimate hope is that faith communities can help lead the veteran to a new, renewed, or restored relationship with God and to find healing and eventual growth. The community of faith can be the best and safest place for the combat veteran to explore issues of moral injury, as previously mentioned, because combat trauma is not just a psychological issue; there is a lot of spiritual injury, which causes faith struggles. The community of faith is essential to promoting PTG.

As mentioned earlier, this community of faith for military personnel is none other than the chaplain. The community, the chaplain, is present with and for the soldiers, and journeys with, to lead those traumatized individuals to healing, hope, and possibly growth. The collective stories connect them as a community, which supports one another through the process of growth. In this community built between the chaplain and the soldier, Christ's promise to be "where two or three" are gathered in his name becomes real.

In the account of Jesus' resurrection, the Synoptic and Johannine gospels indicate that women – Mary Magdalene and Mary, mother of James, and another woman (either Joanna or Salome) – came to the tomb early in the morning. The gospels also indicate that Peter and other disciples were together, although not very clear as to where and how long. Furthermore, in Luke 24:13, there is an account of two of Jesus' disciples on the road to Emmaus as they encounter the resurrected Christ. The interesting discovery here is that in all the accounts, people are together. They are huddled together, locked in a secluded home somewhere, traveling together, and more importantly, supporting one another. The rest of the world does not share their pain, loss, and grief. The rest of the world does not understand their fear and trauma. No matter what the rest of the world does not share or understand, these individuals do; they share their trauma together as a community. Perhaps they knew only fear, despair, and hopelessness. However, they had strength and encouragement together as a community because of their shared common bond.

The community was the single point of nexus for these individuals, turning their fear, confusion, chaos, hurt, despair, and trauma into hope, clarity, order, comfort, peace, and growth, both individually and as a group. They needed one another, perhaps even yearned for one another to feel the support for and with each other.

Fundamentally, community for the Christian Church is not mere co-existence or even common congregation. Rather, it is the movement to friendship, as a way of sharing and inviting

³⁸ Miroslav Volf, *After Our Likeness: The Church as the Image of the Trinity*, *Sacra Doctrina : Christian Theology for a Postmodern Age* (Grand Rapids, MI: William B. Eerdmans, 1998), 195.

³⁹ Figley and Nash, *Combat Stress and Injury: Theory, Research, and Management*, 304.

⁴⁰ Ibid.

others to belong, a deeper way of relating and being with one another.⁴¹ Friendship moves individuals in groups from merely being included to really belonging to one another and to the larger community. In this type of friendship, people are called to be with one another, to share life together, and to support each other. Belonging involves shared stories, vulnerabilities, sense of co-existence, and mutuality; that which bonds individuals spiritually.

The military chaplain, as a representative of the Church, becomes the Church to the soldiers because of the relationship built. The chaplain becomes the community – the Church – to the combat veterans, carrying out the role of the faith community, which leads to restoration of self and life. By responding in a loving and caring way, the chaplain might help the traumatized to move to a place of not only healing, but also actually growing from the trauma.⁴² Christian care as a form of ministry necessarily encompasses ways in which Christ's Church is supposed to take care of its members – with love, compassion, grace, and mercy. The members of the body of Christ are all different and when dealing with those who are traumatized and hurt, we ought to be mindful of how we are called to care for the weaker members of the body. "In other words, people who are the weakest and least presentable are indispensable to the church."⁴³

How do we accomplish this act? A phrase that chaplains often use to refer to this form of ministry is "ministry of presence." However, what is this "ministry of presence?"

"Ministry of presence" speaks about the form of ministry with which military chaplains engage daily. Being merely physically present is not what that phrase means. To be present, really present with the other, is to share the reality of God's love, to offer friendship, companionship, and a sense of invitation and inclusion. It all starts with being attentive and engaged with the other, and deep listening. Bonhoeffer appears to agree with the importance of listening when he writes, "Our love for the other consists first of all in listening."⁴⁴ In this ministry of presence, of actively listening, wherein the chaplain brings the Holy to the other, we are mindful that we are called to listen and guide. The key to the ministry of presence is more than being physically present – the chaplain gives of him/her self to other in order to make a connection, a bond between the two people. In this process, the other is invited to belong to this community that is now created between the chaplain and the other.

We belong to Jesus Christ and to one another through our community and it is in this community that we enter not to serve ourselves, but to serve one another. As John Swinton declares, "In order to find ourselves we need to look away from ourselves."⁴⁵ Authentic Christian community is comprised of individuals who belong to one another, those who have abandoned

⁴¹ John Swinton, *Resurrecting the Person: Friendship and the Care of People with Mental Health Problems* (Nashville, TN: Abingdon Press, 2000), 145-63. Chapter 9: 'Enabling Friendship-in-Community' deals with the movement of caring for mental health patients towards community and friendship with them. Swinton discusses how the movement towards friendship is the key to authentic Christian love in action beyond merely caring for those with mental illnesses.

⁴² PTG is for the traumatized individual to express that the traumatic experience actually helped the person become better, stronger, and better able to deal with not only the individual's own future stressors, but also to help others. Growth is expressed as feeling as though the trauma was beneficial for the individual, although the experience is not desired.

⁴³ Stanley Hauerwas and Jean Vanier, *Living Gently in a Violent World: The Prophetic Witness of Weakness, Resources for Reconciliation* (Downers Grove, Ill.: IVP Books, 2008), 74.

⁴⁴ Dietrich Bonhoeffer, *Spiritual Care* (Philadelphia, PA: Fortress Press, 1985), 36.

⁴⁵ John Swinton, "From Inclusion to Belonging: A Practical Theology of Community, Disability and Humanness," *Journal of Religion, Disability & Health* 16, no. 2 (2012/04/01 2012): 185, accessed 2015/07/23, <http://dx.doi.org/10.1080/15228967.2012.676243>.

“human love” for “spiritual love.” We are more fully able to embrace our true identity in and through Christ when we live in such a way as to be focused on fulfilling the needs of others.

It is in being the “non-anxious presence,” to put in the words of Clinical Pastoral Education (CPE),⁴⁶ as chaplains represent “the Holy” to the other, to simply “be” with the suffering; to sit empathetically with the other. “Empathy plays a central role in pastoral care. It is a means of imaginatively stepping into the shoes of another person and seeing the world from her or his perspective.”⁴⁷

In essence, to provide a “ministry of presence” is to provide spiritual care that is offers community to the other. It is not an endeavor to “understand” the other’s pain and suffering. Instead, spiritual care is about being present and feeling with the other in the other’s moment of need. To be with the other is to simply stand by, to be present, and to offer support, to pray for, and not to offer advice, solution, or empty platitudes in a well-intentioned but pitiful effort to console.

A great biblical illustration of human suffering and the “good and bad”⁴⁸ attempts to console are found in the story of Job, whose friends provide an outstanding example of what to do as well as what not to do in being community. While his friends did a good job of listening to and just remaining silently in solidarity with Job’s suffering in the beginning, they ruined it later by talking. What we might learn from Job’s friends, at least initially, is the art of sitting in silence. As John Swinton writes, “By sitting with Job in silence and solidarity, they offered him comfort, solace, and hope in the midst of his suffering. Sadly, they refused to listen to Job’s silences, or at best they listened wrongly.”⁴⁸ These friends were able to practice “ministry of presence” for a period. Job’s friends did not actively listen to or engage in a ministry of presence with Job. These friends were not able to provide an empathic presence with Job; they did not place themselves in Job’s position. They provided a typical, although well intended, response to the one suffering tragedy, which is very meaningless and ineffective in the way of providing any comfort. While Job’s friends began well, we can see how they were ineffective in their response to Job’s calamities.

The important point here for those providing care is to offer community first and foremost simply by being present, listening, providing a loving and caring presence of being with a hurting member of the body of Christ, without unnecessary words, especially words that ultimately only lead to questions asking why the individual suffers trauma. Combat veterans suffering from trauma do not need someone who will further evoke questions related to theodicy.

Instead, hurt and struggling people need the help of others to grow and “during this growth we need a friend, a guide, a wise counselor – someone who accompanies us along the road and through the passages of pain.”⁴⁹ This is the community – whether one or more – the Church, embodying the love of Christ, which comes alongside and walks with the traumatized,

⁴⁶ Stephen D. W. King, *Trust the Process: A History of Clinical Pastoral Education as Theological Education* (Lanham, MD: University Press of America, 2007). This book gives a very good background into the history and the basic theories and philosophies that is today’s Clinical Pastoral Education (CPE), as espoused by Association of Clinical Pastoral Education (ACPE). A brief background of ACPE is also available at https://www.acpe.edu/ACPE/About_ACPE/ACPE/About_ACPE/About_ACPE.aspx?hkey=8bda1439-a609-475c-83ba-d86c9ca8e7e4.

⁴⁷ Carrie Doehring, *The Practice of Pastoral Care: A Postmodern Approach*, 1st ed. (Louisville: Westminster John Knox Press, 2006).

⁴⁸ John Swinton, *Raging with Compassion: Pastoral Responses to the Problem of Evil* (Grand Rapids, MI: William B. Eerdmans Pub., 2007), 102.

⁴⁹ Jean Vanier, *Community and Growth*, Rev. ed. (Mahwah, NJ: Paulist Press, 1989), 133.

as a fellow sojourner. The military chaplain is just such a community – whether individually or corporately – to the traumatized combat veteran. Ultimately, as Jean Vanier puts, the goal is to find new life for people in and through community.

From the wound at the heart of Christ on the cross came water and blood, the sign of the community of believers which is the Church. Life sprang from this cross; death was transformed into resurrection. That is the mystery of life born from death.⁵⁰

Vanier offers a broader definition of what it means *to be community*.

There are three activities that are absolutely vital in the creation of community. The first is eating together around the same table. The second is praying together. And the third is celebrating together. By celebrating, I mean to laugh, to fool around, to have fun, to give thanks together for life.⁵¹

One might argue that Vanier's sense of community differs greatly from that of the military. However, I propose that the military context is not so different from that which Vanier proposes. The community of L'Arche, where most of the members of the community live with some sort of a disability, might appear to be more dependent physically, emotionally, and spiritually upon each other.

Conversely, military group cohesion may seem to be less dependent, with members who are stronger and more capable of caring for themselves and others. Furthermore, one might argue that the communities of the military and L'Arche are fundamentally different because the military is about force and might, destruction and death, whereas L'Arche is about meekness and gentleness, building up and giving life. However, I would argue they are not very different, if at all. Yes, there are physical differences, with L'Arche having more dependence on others for everyday survivability, but the similarities are more apparent because both are comprised of human beings with essentially the same needs: for love, companionship, and a sense of belonging. Both are genuine communities of people who care for and about each other. Both groups of people, particularly combat veterans in the military, might be emotionally and spiritually fragile, requiring the same level of care, attention, and love. Moreover, I would also argue that both groups desire the same kind of peace.

A community such as L'Arche might define peace as tranquillity and the absence of conflict, while those in the military would consider the absence of warfare as peace, especially from the world's perspective of how peace might be described. However, the peace that combat veterans desire is not just the absence of warfare or chaos and turmoil, but what I believe to be the same inner peace for which most people long, and which is the antidote to people's everyday anxieties. "And the peace of God, which surpasses all understanding, will guard your hearts and your minds in Christ Jesus." (Philippians 4:7). The communities of L'Arche and the military, despite the apparent differences between them, feel and share this "peace of God." The "peace of God" is one that 'does not have its source within – there is dissension – nor without – there is opposition – but in God... The peace of God "will stand sentry watch" over your hearts and

⁵⁰ Ibid., 157.

⁵¹ Hauerwas and Vanier, *Living Gently in a Violent World: The Prophetic Witness of Weakness*, 37.

minds.”⁵² This peace, as described by Craddock, ironically offers a military sense of standing guard and watching as a protective shield from anxiety. “Because God’s peace is on duty, they do not have to be anxiously scanning the horizon for new threats. Alert, yes; anxious, no.”⁵³ Both of these communities desire the same peace, which is to be free of anxiety and resting in the assurance of Christ’s presence, strength, and comfort despite the tornado of turmoil, conflict, struggle, and warfare that may surround them. It is ultimately this type of peace that one wants to experience both individually and together, which exists to love and embrace.

Therefore, I suggest that Vanier’s definition can be applied to the military context, particularly to combat veterans. This type of community requires vulnerability and intimacy – a willingness to be open about oneself and to share with others beyond the superficiality of most relationships. Part of being vulnerable and intimate with one another is experienced through the act of eating together. Eating connotes basic survival. For without eating, one cannot live. However, eating is not just about survival, which one could do by him/herself. Eating together in this context is about sharing a very intimate function of life with others, because one is at ease, vulnerable, and personal. Therefore, eating together means for me not just literally sharing a meal, but also encompasses riding in convoys and going out on patrols together, which in the combat zone personal and can be a matter of survival. Sometimes, it also means living in tight quarters together, sharing horrible meals such as MREs or eating in the Dining Facility (DFAC) at odd hours after missions, and becoming very intimate with fellow soldiers, depending on one another for survival and safety.

If eating is for the body’s survival, praying is for spiritual life, as a part of spiritual nourishment. We all need spiritual nourishment in order for us to continue to sustain our spiritual life. “If we do not have the spiritual nourishment we need, we will close in on ourselves and on our own comfort and security, or throw ourselves into work as an escape.”⁵⁴ Thus, praying together for the military personnel means to be the spiritual support for one another, in addition to literally praying together. Many chaplains pray for and with their soldiers before missions, and definitely after a significant event. Prayers in the combat zone were more than words, more than solace for the soul; these prayers were necessary for the survival of the soldiers’ souls. Perhaps more important than individual prayer is communal prayer, for those who pray. A community of prayer is absolutely needed and essential when one cannot utter any words of prayer.

The community grows and is strengthened through prayer, as individuals become “bread” for one another, feeding and nurturing each other. “Communal prayer is an important nourishment. A community, which prays together, which enters into silence and adoration, is bound together by the action of the Holy Spirit. God listens in a special way to the cry which rises from a community.”⁵⁵

One could say that prayer is the “glue” that keeps the group together in unity and harmony. The significance of praying together was most notably powerful and meaningful during times of loss in combat, whether due to death or significant injuries, where soldiers were open to words of comfort and unity in shared pain through communal prayer. One powerful example that comes to mind is the time the battalion, with which I deployed in 2005, lost our soldier on his very last patrol mission. Half of the battalion was already in Kuwait when we

⁵² Fred B. Craddock, *Philippians, Interpretation, a Bible Commentary for Teaching and Preaching*. (Atlanta, GA: J. Knox Press, 1985), 72.

⁵³ Ibid.

⁵⁴ Vanier, *Community and Growth*, 168.

⁵⁵ Ibid., 195.

received the news of this soldier's fatality. About 250 soldiers had gathered in a large tent to receive the news from one of the company commanders and I offered a word of prayer for whoever wanted to stay to pray; not a single soldier left the tent. There was not a single dry eye and all of the soldiers stayed together and huddled in their respective squads and platoons. In that moment of grief and angst, the community comforted one another and was comforted by prayer. I dare say that prayer at that moment was the spiritual nourishment and "glue" that particular community needed.

Finally, to come together in community, people need to celebrate. This does not, as Vanier suggests mean just having fun; it is about celebrating life. To celebrate, especially in the context of the combat zone, is mainly about finding moments of levity and appreciating the gift of life. Celebrating life together certainly was very real and necessary for life together as a military community in the combat zone. I spent hours in the smoke pits, as many of my fellow chaplains did, listening to the stories of soldiers, even sometimes enduring the very juvenile and crude jokes and language, as a way of celebrating the vitality of youth and giving thanks for the simple fact that we were alive yet another day. The jokes and pranks throughout the deployment, even during patrols at times, helped manage stressful situations and break up the monotony of daily routines. Another example of celebrating life, ironically, was during memorial ceremonies to honor fallen soldiers. It might seem counterintuitive that life is celebrated during a ceremony to memorialize a dead comrade, however, it is not contradictory. These memorial ceremonies are extremely difficult to attend, but they are valuable times for the surviving comrades to reflect on the great gift of life and to be thankful for the sacrifices of those fallen. It is a time of reflection on how valuable and fleeting life is, what we mean to each other as "brethren-in-arms," and how much meaning and value each person brings to the community. The military chaplain represents the love of God in all of these times and circumstances by being present with soldiers, and loving and caring for them. This love of God is what we are called to embody and present to those for whom we care. Hence, there are tears as well as laughter in these memorial ceremonies. Therefore, community that eats, prays, and celebrates together is vital and necessary for healing and growth. For it is in community where healing begins because, as Vanier states:

...one person, all alone, can never heal another...It is important to bring broken people into a community of love, a place where they feel accepted and recognized in their gifts, and have a sense of belonging. That is what wounded people need and want most.⁵⁶

Summary

Combat changes people – for good or bad – and no one comes back the same. The stressors experiences in combat can result for some with PTSD, while for many more with Moral Injury. Regardless, there is the potential for people who have trauma to grow, which is Posttraumatic Growth (PTG). The key to facilitating such growth, as I have tried to put forth in this paper, is community. This community is best offered by the chaplain, who according to Christian theology, is the very incarnational representation of the Church to those combat veterans suffering from PTSD or Moral Injury.

Community is perhaps important enough to be declared as the single most important component to promoting PTG. However, as discussed earlier, community is not just a gathering

⁵⁶ Jean Vanier, *From Brokenness to Community, The Wit Lectures* (Mahwah, NJ: Paulist Press, 1992), 28.

of people, especially from the perspective of practical theology. Community in the Christian context encompasses the concepts of community of the secular setting, where people with common experiences or affinities can gather and feel the support and love of the other members of that community. However, the Christian community, as the incarnational representative of Christ, is about accepting the “other,” caring for others in acts of sacrificial love, which is the agape, unconditional way as Jesus did with the leper, the tax collector, the prostitute, and all who were outcast, down trodden, and the marginalized of society. The role of the community in helping the traumatized is to accept them, providing a safe place to hear their stories, and to love them as Christ loves them.

The Christian community, as modeled by Vanier – a gathering focused on eating, praying, and having fun (celebrating life) together – is what I propose the military chaplain ought to emulate for those combat veterans under his/her care. The significant element of this kind of community is love – for those of us who are Christians, the love of Jesus Christ. The role of the military chaplain is to replicate the ministry of Jesus, as the Christian community to our combat veterans who suffer from the aftermath of combat trauma.

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