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Social Justice



Edin Hasanovic portrays Tjaden Stackfleet in "All Quiet on the Western Front." (Courtesy of Netflix © 2023)



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As a Catholic sister, I have a profound yearning to live from a place of integrity and a heightened awareness of my failure to do so. I know I'm not alone in this gnawing sense of "dis-ease" about my place in a patchwork of broken systems and untenable realities. This nagging sense of dis-ease that's grown in me over the last several years is something I've seen take root among my friends, my family, my congregation and in society.

The kind of dis-ease I'm talking about can feel hard to pin down. For example, in early 2020, I remember the discomfort and shame compounding my efforts to process the new reality of a global pandemic. "Essential workers" were expected to risk their lives for poverty wages to enable others — specifically, me — to remain securely isolated and comfortable. My vows profess a desire to live simply, in solidarity and in service, but the privilege of my class, race and socioeconomic status mean that I inadvertently benefit from the adversity of others.

Sickening realities like these affect us and can injure the conscience of someone who cares —particularly as we recognize our own contribution to the situation. Martin Luther King Jr. observed that "We are caught in an inescapable network of mutuality, tied in a single garment of destiny." The idea of well-being is, after all, so much more than physical and mental health. It reflects the challenging complexities of being human. Discerning whether the feelings of dis-ease grow from within me or are triggered by external factors is usually nearly impossible. Fortunately, the mental health field is finally beginning to embrace the complexities of human well-being — and we're learning more about these so-called "soul wounds."

A specific kind of trauma arises when we face situations that deeply violate our conscience or threaten core values. Parker Palmer, founder of the Center for Courage and Renewal, calls the disconnect a "tragic gap" between how things should be and how they are. The term "moral injury" has taken hold among researchers and institutions in the United States exploring the phenomenon. According to Dr. Jonathan Shay, who coined the term in the 1990s, it often "arises when one knows the right thing to do, but constraints make it nearly impossible to pursue the right course of action." As I learn about this concept, described as an "invisible epidemic" by Elizabeth Svoboda, I'm gaining vocabulary to describe the dis-ease that I’m experiencing and seeing in others.



A registered nurse in Little Rock, Ark., checks on a COVID-19 patient at the University of Arkansas for Medical Sciences Aug. 16, 2021. (CNS/Reuters/Shannon Stapleton)

I first heard the term in 2015 at a workshop about returning veterans and the challenge of reintegrating after war. *All Quiet on the Western Front*, the 2022 movie version of Erich Maria Remarque's 1928 World War I novel, brutally reminds us why the experience of war ravages not only the bodies, but the souls of individual soldiers. Research confirms that situations other than war can cause moral injury.

In 2020 the concept entered the collective psyche, applied to the experience of health care workers serving COVID patients. Doctors, nurses and other health care providers often approach their jobs as a vocation, a call to serve. When the lack of resources at the start of the pandemic prevented them from fulfilling their role, people died as they watched. Unnecessary shortages, partisan politics and conspiracy theories actively worked against their grueling efforts to serve.

Moral injury is also being connected to social workers, another career rooted in service to people experiencing poverty, physical or mental health struggles, or tragic life events. Their service is compromised by factors beyond their control: a social safety net that's notoriously under-resourced and societal dynamics stacked against the vulnerable.

In a recent exchange with Jerry, a fifth-generation farmer in Wisconsin, I found myself grappling with the spectrum of moral injury and the deeper implications of cynicism, outrage and shame. He said:

> I'm tired of fighting…the markets, the politics, the structure, the haters... What's more, I see the argument against the way I farm, and more and more, I agree. There is almond milk in my fridge and I am a conventional dairy farmer. I don't want to be the type of farmer I am anymore … a beast of burden for the agri-chemical industry … It is blighting my soul.

As Jerry's experience highlights, simply existing amid bad systems — economic, political, agricultural, military, ecclesial — is detrimental to our spirit and undermines our sense of well-being. So many of our systems allow for — even incentivize — terrible outcomes, and we are dragged along for the ride. The wounds caused by a sense of complicity can range from cognitive dissonance to personal shame or outrage. Here are a few more examples from my circles:

- A busy mother yearns to steer her children away from what Pope Francis calls the "throwaway culture" but finds only plastic-wrapped vegetables at her stores.
- My congregation's peace and justice coordinator grapples with her desire for more U.S. military support for a besieged Ukrainian people even though nonviolence is a deeply held core value.
- The burned-out epidemiologist — exasperated and ashamed by the overall response to COVID — struggles with bitterness and resentment about the "post-COVID" reality.
- The Dominican sister who has devoted her life to the Order of Preachers is prohibited from preaching at Mass because she's a woman.

These unremarkable, "normal" realities of our day-to-day existence are a far cry from the wrenching events that soldiers in war or health care providers in a global pandemic experience. Nevertheless, their pervasive and ordinary nature can feel

like death by a thousand cuts, particularly for those of us who are sensitive and paying attention. The ethical distress is real — it isn't the result of distorted thinking that can be corrected with traditional therapy. It would, literally, require systemic change to address.

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We have some common responses to moral conflicts:

- We turn them against ourselves in guilt.
- We make them easier to endure by numbing ourselves until we don't care anymore.
- We make them more palatable by adopting narratives that rationalize or justify (or distort) a disturbing reality.
- We isolate ourselves, resentful of a world and others who feel disturbingly normal.

If the level of numbness, outrage and denial is any indicator, the impacts are both incremental and cumulative. Unfortunately, given our brutally dysfunctional systems, many of us will continue making decisions that violate our ethics. How can we live authentically in the midst of moral injury rather than numbing out, rationalizing or isolating?

Emerging clinical approaches to moral injury are incorporating spiritual and pastoral care along with traditional treatments. A range of practices seek to elicit healthy processing. They invite us to confront moral conflicts head-on rather than ignoring or explaining them away. They nurture a community of support that understands and relates to the struggle. Some are encouraged to make amends for harms committed.

Such approaches remind me of Dorothy Day, who once said that "our problems stem from our acceptance of this lousy, rotten system." Perhaps the Catholic Worker movement, which she co-founded, models a way to bear the systemic burdens with grace. Seeking to hold the big picture of harm done by capitalism, militarism, individualism, etc., the movement responds by helping people in need. And it hinges on intentional, inclusive communities of resistance and mutual support. Personally, I've also found an ironic sense of humor to be an indispensable tool.