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Ethical Wound of Militancy and Insurgency: Militancy and Insurgency exposure as a predictor of moral injury among the population of tribal areas of KP, Pakistan

Gohar Ali
Department of Psychology, Islamia College Peshawar, KP, Pakistan

Dr. Syeda Nadia Shah
Department of Psychology, Islamia College Peshawar, KP, Pakistan

Dr. Syed Zuhaib Aziz
Lecturer, Department of Sociology, The Islamia University of Bahawalpur, Pakistan

Dr.Aman Ullah*
Assistant Professor, Department of Sociology, University of Swabi, KP Pakistan
Email: aman@uoswabi.edu.pk

ABSTRACT
Militancy and insurgency not only result in physical destruction but also inflict deep psychological, social, and moral scars. One of the harsh consequences of civil war is moral injury, which emerges when people commit, witness, or are unable to stop actions that violate their moral and ethical beliefs and values. The study hypothesized whether exposure to militancy and insurgency war predicts moral injury among residents of war-affected areas in KP. Additionally, it also compared the severity of moral injury among individuals exposed to militancy and insurgency from tribal areas and individuals from the general region of KP, who are not exposed to militancy and insurgency. A cross-sectional study was designed with a purposive sample of 300 individuals, equally divided between civilians from conflict-impacted tribal districts (n=150) and those from general areas of KP with no exposure to civil war (n=150). Moral injury was measured using the Expression of Moral Injury Scale-Civilian Version (EMIS-C) by Thomas et al. (2023, while civil war exposure was assessed through demographic questions. Regression analyses revealed that exposure to terrorist activities (R^2=.313 or 31%), military operations (R^2=.333 or 33%), and cumulative impact of violence (R^2=.303 or 30%) strongly predicted moral injury (P<.001). Independent-Sample T-tests further showed that individuals from tribal areas of (civil war victims) reported significantly high levels of moral injury scores (M=61.67, SD=13.46) as compared to the individuals from general areas of KPK (M=44.00, SD=11.95), confirming the hypotheses. Findings of the study indicate that exposure to militancy and insurgency significantly predicts moral injury among civilians, emphasizing that moral injury extends beyond military personnel but profoundly impacts civilian populations. These findings highlight the urgent need for culturally sensitive, community-based interventions to respond to both psychological and moral injury.

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DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

Keywords: Civil War, Moral Injury, KPK.

Introduction

The Socio-psychological consequences of militancy often surpass physical harm, with moral injury emerging as a particularly significant area of concern. The concept of moral injury refers to the psychological distress arising when individuals commit, witness, or are unable to prevent actions that contradict their fundamental moral principles (Litz et al., 2009). Although the term was initially conceptualized within military contexts, however, recent empirical work has extended the concept to civilian populations, recognizing its association with guilt, shame, internal conflict, and long-term behavioral challenges (Jamieson et al., 2020; Fleming & Smingelsky, 2024). Distinct from post-traumatic stress disorder (PTSD), which is primarily fear-driven, moral injury arises from the violation of moral beliefs and the ensuing emotional struggle (Ang, 2017). It may stem from harm inflicted on others and is often recognized as a form of violence itself (McClymond and Anthony 2017).

Studies indicated that these morally injurious events often contribute to suicidality, PTSD, anxiety, depression, substance use, and spiritual distress, particularly when people struggle to make peace with their moral decisions or experiences with their deeply held ethical beliefs (McEwen et al., 2021; Battles et al., 2018). Research indicates that moral injury is highly prevalent within those settings, where civilians' causalities, seeing traumatic violations, or breach of trust by authority figures (Griffin et al., 2019). Insurgency and militancy provide a particularly fertile ground for moral injury, as they are intimate, asymmetrical, and blur distinctions between combatants and non-combatants. Under such circumstances, both civilians and militants often find it difficult to reconcile survival choices with cultural and ethical norms (Williamson et al., 2018). It has been witnessed from previous research findings on former child soldiers in Liberia that forced involvement in killings and the destruction of communities produces long-term moral injury and social alienation (Betancourt et al., 2013). Similarly, evidence from Syria demonstrates that victims of widespread violence, displacement, and coercive survival choices endure persistent moral injury with severe mental health consequences (Rizkalla et al., 2024). Unlike traditional interstate wars, civil conflicts infiltrate daily existence, dismantle community structures, and compel individuals to navigate morally compromising circumstances. The empirical work of Thaler (2024) revealed that insurgency and militancy not only contributed to physical destruction but also negatively affected the social order, leading to social disharmony and ethical conflict. Likewise, the recent work of Rothenberg (2022) demonstrated that prolonged exposure to uncertainty, such as war and insurgency, as well as where people may demand morally difficult decisions, leads to ethical trauma.

Current Focus of the Study

Insurgency and militant activities of Tehrik-e-Taliban Pakistan (TTP) in the tribal area, as well as systematic targeting of civilians, along with demolition of educational institutions, target killing of tribal and political leaders, when accompanied by deliberate use of fear as a weapon, deeply affected the local people both materially and morally. Moreover, the forced migration of local people from their ancestral homeland, their children were denied from getting education, and killing of local people were killed without the means to resist. Notwithstanding, persistent threats of execution and pressure contributed to painful moral dilemmas, including bribery, remaining silent during the

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target killing of the public, or unwillingly providing food and home for living to militants. All of the above factors contributed to harsh psychological consequences. Thus, meaningful recovery, therefore, requires accountability for these crimes, dismantling militant structures, and locally driven mechanisms of restorative justice to rebuild trust and dignity. Main theme of this study to examine the moral injury in militancy affected in the study area. The study will further investigate how common ethical trauma (Moral injury) exists in war-affected individuals and compare it to the general population who did not experience Insurgency. The present study seeks to investigate how routine psychosocial stressors such as forced displacement, dispossession, intrusion into private life, fear, and the collapse of communal institutions interact with morally distressing experiences to generate moral injury. Exploring and digging into the ground realities, the study aims to fill the existing gaps in the existing literature and suggest policy recommendations for war-impacted populations in Pakistan. This study will be carried out under the following hypotheses:

Hypotheses

Exposure to civil war would predict moral injury among war-affected individuals.
Individuals who are exposed to civil war would score high on moral injury as compared to the general population.

Sample

The total sample of the study comprised of 300 participants. It was divided into two groups. The first group was the general population, comprising of 150 participants who were taken from general areas of Khyber Pakhtunkhwa (KP) and had not been exposed to insurgency and civil war. The other group was the target population, comprised of 150 participants who were taken from the tribal regions and were directly exposed to insurgency and civil war. The age range of the sample was from 18 to 50 years. A purposive sampling technique was used for data collection. The subjects were approached in different areas of KP, Pakistan.

Inclusion/Exclusion Criteria

Subjects with an age range of 13-50 were included, and subjects with an age below and above 50 were excluded.

Subjects having chronic illness/disease or psychological issues and who used drug substances were excluded.

Instruments

Demographic Sheet

The self-constructed demographic sheet included all the relevant information regarding the participant's age, gender, and family system, area of residency, birth order, marital status, and socioeconomic status. To capture the civil war exposure, three questions were added in the demographic section regarding terrorist activities, military operations, and psychosocial pressures, i.e, loss of home, forced displacement, etc.

Expression of Moral Injury-Civilian

The Expressions of Moral Injury Scale—Civilian Version (EMIS-C) was developed by Victoria Thomas, Amy Adler, and Amy Alpert and published in 2023. This 17-item self-report scale, adapted from the military version (EMIS-M), measures moral injury in civilians, focusing on self- and other-directed feelings. It uses a 5-point scale from strongly disagree (1) to strongly agree (5). Tested with 312 adults (99 men, 212 women, average age 37.24), it showed two clear factors: self-directed and other-directed

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ISSN Print: 3007-3146

DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

expressions. The scale is reliable (Cronbach's alpha is about .90) and valid, linking well with guilt, shame, anger, depression, PTSD, and anxiety measures. Small changes, like replacing "military experiences" with "experiences," make it suitable for civilians. The overall reliability of the scale in our study was alpha .92.

Procedure

A cross-sectional study was conducted to investigate the moral injury among the population of the tribal areas of KPK, Pakistan. The total sample of the research was (N=300), which was equally distributed into two groups. The individuals who were exposed to civil war were known as the target population (n=150), collected from tribal areas of KPK, and the individuals who had not experienced civil war were named as the general population, collected from general areas of KP.

Before initiating the data collection, informed consent was given to each participant. After obtaining their approval, individuals were selected for data collection. Each individual was provided with a questionnaire and informed consent. Participants were assured that the data would only be used for research purposes and would be kept confidential. After taking them into account, questionnaires (Expression of Moral Injury-Civilian Version by Thomas et al. 2023) were distributed to the participants along with verbal instructions.

Results

Table 1 Socio-demographics Characteristics of Participants (N=300).

	Area	n	%
Residency	Peshawar	89	27.9
	Aurakzai	9	3.0
	Waziristan	62	20.7
	Bajaur	53	17.7
	Mohmand	7	2.3
	Khyber	10	3.3
	Kurram	4	1.3
	U/L Dir	5	1.7
	Swat/Matta	2	0.7
	Swabi	14	4.7
	Charsadda/Mardan	23	7.7
	Karak/Kohat	8	2.7
	Chitral	6	2.0
	Abbotabad/Hazara	3	1.0
	Bannu/Lakki Marwat	3	1.0
	Bunner	2	0.7

Table 1a shows the major socio-demographic characteristics of the total sample. Frequencies (N)
and the Percentage (%) of each level of demographics is shown.

Dialogue Social Science Review (DSSR)
www.thedssr.com

ISSN Online: 3007-3154
ISSN Print: 3007-3146

DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

Table 2
Subjects experienced (N=300).

	Variables	N	%
Subjects experienced TA	Yes	159	53.0
	No	141	47.0
Subjects experienced MO	Yes	152	50.7
	No	148	49.3
Subjects experienced social impact because of TA and MO	Yes	142	47.3
	No	158	52.7

Note: TA (terrorist activities), MO (military operations)
Table 2 shows the frequency and percentage of the total sample experiencing insurgency and military operations.

Table 3
Psychometric properties of major variables of the study. (N=300)

Variables	N	M	SD	A	Range
EMIS-C	300	52.94	15.430	.923	1.117

Note: EMIS-C (expression of moral injury scale-civilian).
Table 2 shows scales used in the current study have high reliability, which makes it Suitable for the study to be used.

Table 4
Linear Regression analysis showing the impact of terrorist activities on moral injury among civil war victims. (N=300).

Variable	B	SE	B

Dialogue Social Science Review (DSSR)
www.thedssr.com

ISSN Online: 3007-3154
ISSN Print: 3007-3146

DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

Constant	78.33	2.30***	
Terrorist activities	17.27	1.48***	.56
R^2	.313		
F	135.38***		

Note: *p<.05. **p<.01. ***p<.001

Table 4 shows the impact of exposure to terrorist activities in a war-ridden area on moral injury in war-exposed individuals. The result reveals a significant regression equation between exposure to terrorist activities in civil war and moral injury reported by the participants, F (1,298), 135.98; the table is statistically significant at p <.001 with variance of R^2 of .313, and the adjusted R^2 is. 311. Results reveal that exposure to terrorist activities in civil war predicts moral injury among war-affected individuals.

Table 5
Linear Regression analysis showing the impact of military operations on moral injury among civil war victims. (N=300).

Variable	B	SE	B
Constant	79.47	2.29***	
Military operations	17.77	1.46***	.57
R^2	.333		
F	148.57***		

Note: *p<.05. **p<.01. ***p<.001

Table 5 shows the impact of exposure to military operations in civil war on moral injury in war-exposed individuals. The result reveals a significant regression equation between exposure to terrorist activities in civil war and moral injury reported by the participants, F (1,298), 148.57; the table is statistically significant at p <.001with a variance of R^2 of .333, and adjusted R^2 is .330. Results reveal that exposure to military operations in civil war predicts moral injury among war-affected individuals.

Table 6
Linear Regression analysis of exposure to the effects of terrorist activities and military operations in civil war on moral injury. (N=300).

Variable	B	SE	B
Constant	78.84	2.39***	
Effects of Terrorist and Military Operations	16.96	1.47***	.55
R^2	.302		

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ISSN Print: 3007-3146

DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

	129.23***	
F		

Note: *p<.05. **p<.01. ***p<.001

Table 6 shows the impact of exposure to the effects of terrorist activities and military operations in civil war on moral injury in war-exposed individuals. The result reveals a significant regression equation between exposure to terrorist activities in civil war and moral injury reported by the participants, F (1,298), 129.23; the table is statistically significant at p <.001with a variance of R^2 of .302, and adjusted R^2 is. 300. Results reveal that exposure to the effects of terrorist activities and military exposure in civil war predicts moral injury among war-affected individuals.

Table 7
Mean, Standard Deviation, and t-value for Intergenerational Trauma, Alexithymia, and Moral
Injury among the General Population and Target Population (N=300).

Variables	General population		Target Population				95% CI		Cohn's d
	M	SD	M	SD	t(298)	p	LL	UL	
Expression of moral injury-civilian	44.00	11.95	61.67	13.46	11.88	.001	20.36	14.58	1.37

Table 7 shows the Mean, Standard Deviation, and t-values of intergenerational trauma, alexithymia, and moral injury among individuals in the general population who had not been exposed to civil war and the target population who were exposed to civil war. The result shows that there is a significant mean difference for intergenerational trauma (t=16.09, P <.001), alexithymia (t= 10.90, P<.001), and moral injury (t=20.36, P< .001) among individuals of the general population and target population. This signifies that individuals exposed to civil war experience a higher level of intergenerational trauma, alexithymia, and moral injury as compared to individuals of the general population.

Discussion

The aim of the study is to predict the role of insurgency and civil war in moral injury and to what extent moral injury is demonstrated in individuals from the tribal areas of KP. Based on 300 samples of individuals, the results offer strong evidence supporting the proposed link between exposure to civil war and moral injury. The exposure to war and interstate war can profoundly impact individuals, resulting in psychological challenges, including moral injury. Moral injury results from violating someone's moral values and

Dialogue Social Science Review (DSSR)
www.thedssr.com

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ISSN Print: 3007-3146

DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 8 (August) (2025)

beliefs; it may be spiritual, self, or community, by failing to prevent or see actions that contradict their moral beliefs (Jamieson et al., 2020; Rothenberg, 2022). Whereas moral injury has been examined in military populations, insight remains scarce regarding its impact on civilians, especially in war-affected regions, such as the tribal areas of KP, Pakistan. Expression of moral injury-civilian version (EMI-C) by Thomas et al (2023) was used to carry out this study. EMI-C is internally consistent and reliable for the present sample of the study. The reliability of EMI-C is .923.

The first hypothesis of the study is "Exposure to civil war would predict moral injury among war-affected individuals." It is stated that exposure to civil war would predict moral injury among affected individuals. Exposure to terrorist acts ($R^2 = .313$, $\beta = -.56$, $p < .001$), military operations ($R^2 = .333$, $\beta = -.57$, $p < .001$), and their combined impact ($R^2 = .302$, $\beta = -.55$, $p < .001$) significantly predicted moral injury scores on the EMIS-C scale.

These findings suggest that different moral experiences amid insurgency and civil war, such as forced displacement, witnessing atrocities, witnessing the killing of innocents, destruction of homes and religious places, or confronting tough ethical decisions, can lead to significant psychological distress characterized by guilt, shame, and a disrupted sense of morality. The previous researches align with this hypothesis; the study conducted by Zasiekina et al. (2023) stated that there is a high level of moral injury among Ukrainian civilians due to the ongoing war with Russia. Findings of this study disclosed that people of Ukrainian exposed to civil war and ongoing conflict with Russia reported higher probability of moral injury. Likewise, another study carried out by Jamieson et al. (2020) explored the concept of moral injury, describing that it is the outcome of killing or betrayal, which disrupts a person's moral foundation and sense of integrity. Findings of this study regarding emotional reactions closely mirror the suffering experienced by residents of Khyber Pakhtunkhwa (KP) who have faced the harsh realities of insurgency and civil war, demonstrating that moral injury affects people across various situations and groups. LiVecche (2021) stated that moral injury is a deep emotional wound caused by witnessing or not stopping actions that go against one's values, leading to guilt and shame. This reflects the pain felt by the KP population exposed to the horrors of civil war, such as terrorist attacks and military operations, which predicted moral injury in our study. Although their focus goes beyond war, the shared pain from broken moral codes shows how conflict harms both civilians and soldiers. Fani et al. (2021) show that civilians exposed to trauma, like those in KP's war-torn areas, suffer moral injury, feeling guilt and shame from seeing or failing to stop wrong acts. Their finding that trauma leads to moral injury matches our results, where civil war experiences predicted moral injury. This shared pain shows how war deeply wounds civilians, needing healing beyond usual trauma care.

The second hypothesis of the study is "Individuals who are exposed to civil war would score high on moral injury as compared to the general population."

The results from Table 6 show significant differences between scores of war-affected individuals M=61.67, SD=13.46) and the individuals who were not exposed to civil war (M=44.00, SD=11.95). The individuals from the tribal areas of KPK showed a significantly high level of mora injury as compared to individuals of the general areas of KPK.

The researches align with this hypothesis; a study in the Netherlands revealed that many trauma-exposed police officers and military veterans experienced moral injury symptoms such as guilt and shame, with or without PTSD, which is less frequent among the general public (Mensink et al., 2022). Findings from research on displaced individuals residing in

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Vol. 3 No. 8 (August) (2025)

Germany revealed that 30% of conflict-exposed individuals disclosed experiences of ethical trauma and exhibited an elevated level of remorse relative to those without conflict exposure (Mooren et al., 2022). While based on military personnel, Israel Zerach and Levi-Belz (2021) reported that exposure to warfare was significantly linked to moral injury outcomes, indicating that comparable trends may be observed within war-impacted communities.

LIMITATIONS AND Implications

The study has the following limitations and recommendations for future improvement. The cross-sectional study was used to conduct a study; in the future, researchers need to conduct a longitudinal study to examine the long-term impact. Likewise, the study sample is N=300, which leads to obstructions in generalizability to other areas of conflict. Future research is suggested to increase the study sample and collect data from other conflict areas. Moreover, Self-report measures used to collect the data introduce biases in their responses; future research suggests using more in-depth or mixed methods to collect the data to minimize the biasness. However, findings of the present study have a number of implications, such as basic assessment for moral injury needs to be integrated into primary care systems in war-affected regions to ensure timely support, as well as support services should honor cultural norms and values in order that affected societies feel secure and understood. Likewise, assistance must go beyond emotional well-being but also respond to challenges like forced displacement, insecurity, sanctity of homes, and loss of livelihood. The civilian population who are exposed to violence, particularly in ex-FATA regions, requires focused engagement and support rooted in family systems.

Conclusion

This study investigated the role of civil war in predicting moral injury among populations of tribal areas of Khyber Pakhtunkhwa (KPK), Pakistan. The findings significantly underscored that experiences of terrorist activities, military operations, and their social consequences predicted a high level of moral injury. Findings of the study show that people from war-affected regions were found with substantial moral injury than those from non- war ridden areas. It could be inferences from these findings that moral injury surges in populations who are exposed to militancy and terrorism, and it is a harsh truth for civilians who have experienced brutality and the ethical disarray of civil war. Moreover, vulnerability to violence, brutality, forced migration, demolition of social institutions, and breakdown of social relationships contributed to profound feelings of shame, guilt, and moral uncertainty.

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ISSN Online: 3007-3154
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