#### **Moral Injury**

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## What is "Moral Injury"?

According to Litz et al. (2009) "moral injury involves an act of transgression that creates dissonance and conflict because it violates assumptions and beliefs about right and wrong and personal goodness..." (i.e., inner conflict over transgression of moral values)

Moral injury is a relatively new syndrome (yet quite old) that often occurs in the setting of trauma, such as Post-Traumatic Stress Disorder (PTSD), but MI is distinct and separate from PTSD

#### MI also often occurs in:

- first responders, i.e., police, firemen, or emergency medical personnel
- civilians experiencing severe trauma
- healthcare professionals (often the cause of burnout)

Moral Injury has both psychological and spiritual dimensions

#### Miasma: Greek Root of Moral Injury

*Miasma*: Ancient Greek concept of moral defilement or pollution, often resulting from unjust killing, but applicable to any transgression of moral values (applies to perpetrator, victim, or even the observer)

"What can I do? Where can I hide from all this and not be found? What wings would take me high enough? How deep a hole would I have to dig? My shame for the evil I have done consumes me... I am soaked in blood-guilt, polluted, contagious... I am a pollutant, an offense to gods above."

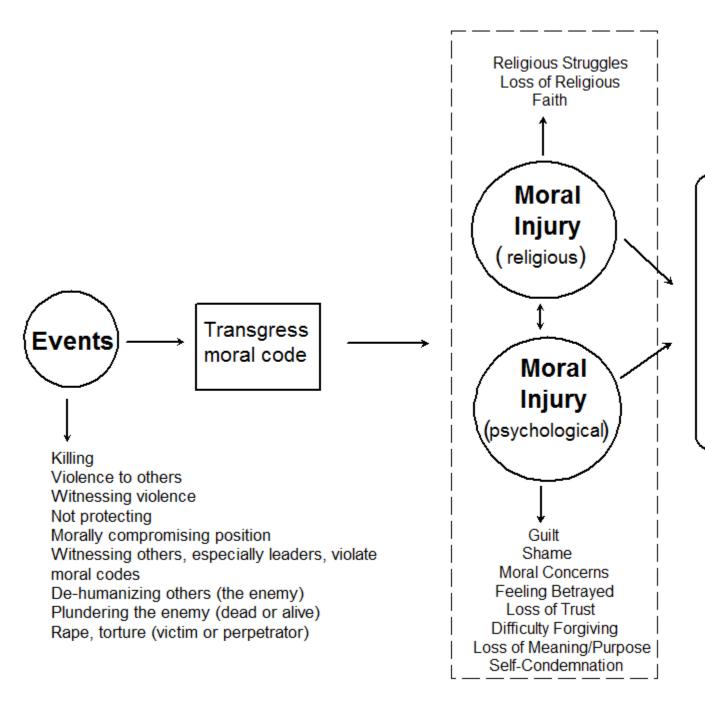
(Emphases mine)

— Herakles in Euripedes' Herakles (424 BCE)

#### Other Terms for Moral Injury

Related terms, each with their own distinction, are:

"inner conflict"
"spiritual injury"
"soul injury"



#### Clinical Outcomes

PTSD Symptoms
Depression
Anxiety
Substance Abuse
Relationship Prob
Pain
Physical Disability

# Why is Moral Injury an important issue in the Military?

- Over 90% of 373 U.S. Veterans reported high levels (9 or 10 on 1-10 severity scale) of at least one "inner conflict" symptom, and 59% reported 5 or more symptoms
- Over 80% of 103 active-duty military reported high levels (9 or 10) of at least one "inner conflict" symptom, and 52% had 4 or more such symptoms

Koenig, H. G., Youssef, N. A., Ames, D., Oliver, J. P., Teng, E. J., Haynes, K., ... & Pearce, M. (2018c). Moral injury and religiosity in US veterans with posttraumatic stress disorder symptoms. *Journal of Nervous and Mental Disease*, 206(5), 325-331.

Volk, F., & Koenig, H. G. (2019). Moral injury and religiosity in active duty US Military with PTSD symptoms. *Military Behavioral Health*, 7(1), 64-72.

#### Is Moral Injury important in Other Settings? YES

- First responders (police, emergency medical technicians, firemen, etc.)
- Natural and man-made disasters
- Health care settings
- Everyday life, with loss, change, family conflict, etc.
- Church setting
- Children with ACEs

# How to Identify It

#### **Events and Symptoms**

- Moral Injury Events Scale (MIES)
- Moral Injury Questionnaire-Military Version (MIQ-Q)

#### Symptoms only

- Moral Injury Symptom Scale-Military Version (MISS-M)
- MISS-M-Short Form (MISS-M-SF)
- Expressions of Moral Injury Scale (EMIS-M)
- EMIS-M-SF

Nash, et al., 2013 Currier, et al., 2015 Koenig et al., 2018a,b Currier et al., 2018 Currier et al., 2020

Koenig, H. G., Youssef, N. A., & Pearce, M. (2019). Assessment of moral injury in veterans and active duty military personnel with PTSD: a review. *Frontiers in psychiatry*, 10, 443, https://www.frontiersin.org/articles/10.3389/fpsyt.2019.00443/full

#### Moral Injury Symptom Scale - Military Version Short Form<sup>01</sup>

Instructions: Please circle the number that most accurately indicates how you are feeling now:

1. I feel betrayed b	w .								
1 2	3 4	5 6	7 8	9	10				
Strongly disagree	Mildly disagree	Neutral	Mildly agree		Strongly agree				
2. I feel guilt over:		he life of son	neone in war.						
1 2	3 4	5 6	7 8	9	10				
Strongly disagree	Mildly disagree	Neutral	Mildly agree		Strongly agree				
3. I feel ashamed about what I did or did not do during this time.									
1 2	3 4	5 6	7 8	9	10				
Strongly disagree	Mildly disagree	Neutral	Mildly agree		Strongly agree				
4. I am troubled by	v having acted i	n ways that	violated my own	moral	s or values.				
1 2	3 4	5 6	7 Š	9	10				
Strongly disagree	Mildly disagree	Neutral	Mildly agree		Strongly agree				
	,		, -6						
5. Most people are	trustworthy								
1 2	3 4	5 6	7 8	9	10				
Strongly disagree		Neutral	Agree	,	Strongly agree				
Strongry disagree	Disagree	Neutrai	Agree		Strongry agree				
6 Th			!£-1						
6. I have a good se									
1 2	3 4	5 6	7 8	9	10				
	•		Somewhat Mostly	7	Absolutely				
untrue untru	e untrue	true or false	true true		true				
7. I have forgiven:									
1 2		5 6	7 8	9	10				
Strongly disagree	Disagree	Neutral	Agree		Strongly agree				
8. All in all, I am i	nclined to feel t	hat I am a fa	ilure.						
1 2	3 4	5 6	7 8	9	10				
Strongly disagree	Disagree	Neutral	Agree		Strongly agree				
9. I wondered wha	t I did for God	to punish m	e.						
1 2	3 4	5 6	7 8	9	10				
A great deal	Quite a bit	_	omewhat		Not at all				
(very true)	<b>V</b>	_			(very untrue)				
())					()				
10 Compared to w	han van first wa	nt into the w	ilitare has your	religion	s faith since then				
1 2	3 4	5 6	7 8	9	10				
Weakened a lot	Weakened a littl	-	/ o ngthened a little	9	Strengthened a lot				
weakened a lot	wеакенец a пп	ie strei	igmened a nittle		ouengmened a 10t				

Scoring: Reverse score items 5, 6, 7, 9, and 10, and then sum all items to produce a total score indicating moral injury severity (possible range 10-100)

<sup>&</sup>lt;sup>1</sup> Koenig, H.G., Ames D, Youssef N, Oliver JP, Volk F, Teng EJ, Haynes K, Erickson Z, Arnold I, O'Garo K. Pearce MJ (2018). Screening for Moral Injury – The Moral Injury Symptom Scale – Military Version Short Form. <u>Military Medicine</u>, in press. Contact: Harold Koenig@duke.edu

#### Moral Injury Symptom Scale - Civilian Version - Short Form (MISS-C-SF)<sup>©</sup>

Instructions: Reflecting on a period of severe trauma or stress in your life, please circle <u>the number</u> that most accurately indicates how you are feeling now:

1. I feel betrayed by those who I once trusted.  1 2 3 4 5 6 7 8 9 10									
Strongly disagre	_	_		Neutral	•	Mildly a	•	,	Strongly agree
2. I feel guilt 1	over fa 2	iling to 3	save so 4	meone 5	from b 6	eing sei 7	riously 8	injured 9	l or killed. 10
Strongly disagre	e Mi	ildly disa	gree	Neutral		Mildly a	igree		Strongly agree
3. I feel ashamed about what I did or did not do during this time.									
1 Strongly disagre	e Mi	3 ildly disag		5 Neutral	6	7 Mildly :	8 agree	9	10 Strongly agree
4. I am troub	led by 1	having	acted in		that vio	lated n 7	ny own 8	morals 9	or values.
Strongly disagre	_	ildly disa	-	Neutral	•	Mildly a	•		Strongly agree
5. Most peop	5. Most people are trustworthy.								
1	2	3	4	5	6	7	8	9	10
Strongly disagre	e	Disagre	e	Neutral		Agre	e		Strongly agree
6. I have a go	od sens	se of wh	at mak	es my l	ife mea	ninofni	1		
1	2	3	4	5	6	7	8	9	10
Absolutely	Mostly	Son	newhat	_	y Son	iewhat	Mostly		Absolutely
			_	true or f	alca t		_		
untrue	untrue	u	ntrue	uuc or r	aise t	rue	true		true
		_						uing th	
7. I have forg	given m	yself for		happen	ed to m	e or ot	hers du	uring th	at time.
	given m	_	r what l	happen	ed to m		hers du 8	_	
7. I have forg 1 Strongly disagre	given m 2 e	yself for 3 Disagre	r what l	happen 5 Neutral	ed to m	ne or ot 7 Agre	hers du 8	_	at time. 10
7. I have forg 1 Strongly disagre 8. All in all, I	given m 2 e	yself for 3 Disagre	r what l 4 e feel th	happen 5 Neutral at I am	ed to m 6	ne or ot 7 Agre	hers du 8	9	at time. 10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I	given m 2 e am inc 2	yself for 3 Disagre clined to 3	r what l 4 e o feel th 4	happen 5 Neutral at I am 5	ed to m 6 a failu 6	ne or ot 7 Agre	hers du 8	_	at time. 10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I	given m 2 e am inc 2	yself for 3 Disagre clined to 3	r what l 4 e feel th	happen 5 Neutral at I am	ed to m 6 a failu 6	ne or ot 7 Agre	hers du 8	9	at time. 10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I	given m 2 e am inc 2 e	yself for 3 Disagre clined to 3 Disagre	r what l 4 e o feel th 4 e God to p	happen 5 Neutral at I am 5 Neutral	ed to m 6 a failu 6	ne or ot 7 Agre	hers du 8	9	at time. 10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I 1 Strongly disagre 9. I wonder v 1	given m 2 e am inc 2 e	yself for 3 Disagre clined to 3 Disagre	r what l 4 e o feel th 4 e	happen 5 Neutral at I am 5 Neutral	ed to m 6 a failu 6	ne or ot 7 Agre	hers du 8	9	at time. 10 Strongly agree  10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I 1 Strongly disagre 9. I wonder w	iven m 2 e am inc 2 e	yself for 3 Disagre clined to 3 Disagre	r what I 4 e p feel th 4 e God to I 4	happen 5 Neutral at I am 5 Neutral	ed to m 6 a failu 6 me. 6	ne or ot 7 Agre re. 7 Agre	hers du 8 e 8	9	at time. 10 Strongly agree 10 Strongly agree
7. I have forg 1 Strongly disagre 8. All in all, I 1 Strongly disagre 9. I wonder v 1 A great deal (very true)	given m 2 e am inc 2 e vhat I d 2	yself for 3 Disagre clined to 3 Disagre lid for C 3 Quite a	r what 1 4 e o feel th 4 e God to p 4 bit	happen 5 Neutral at I am 5 Neutral punish	ed to m 6 a failu 6 me. 6 Som	ne or ot 7 Agre re. 7 Agre 7 Agre	hers du 8 e 8	9	at time. 10 Strongly agree  10 Strongly agree  10 Not at all
7. I have forg 1 Strongly disagre 8. All in all, I 1 Strongly disagre 9. I wonder v 1 A great deal (very true) 10. Compared	given m 2 e am inc 2 e vhat I d 2	yself for 3 Disagre lined to 3 Disagre lid for C 3 Quite a	r what 1 4 e o feel th 4 e God to p 4 bit	happen 5 Neutral at I am 5 Neutral ounish 1 5	ed to m 6 a failu 6 me. 6 Some	ne or ot 7 Agre re. 7 Agre 7 Agre	hers du 8 8 8 8 8	9	at time. 10 Strongly agree  10 Strongly agree  10 Not at all (very untrue)

Source: © Koenig HG, Ames D, Pearce M (2019). Religion and Recovery from PTSD. London: Jessica Kingsley Publishers. Adapted from: Koenig, H.G., Ames D, Youssef N, Oliver JP, Volk F, Teng EJ, Haynes K, Erickson Z, Arnold I, O'Garo KN, Pearce MJ (2018). Screening for Moral Injury – The Moral Injury Symptom Scale-Military Version Short Form. Military Medicine 183 (11-12): e659–e665. Contact Harold Koenig@duke.edu for scoring guide.

#### Moral Injury Symptoms Scale - Healthcare Professionals Version (MISS-HP) O

The following questions may be difficult, but they are common experiences of busy healthcare professionals. They concern your experiences on your job as a health professional and how you are feeling now. Try to answer every question. Circle a single number between 1 and 10 for indicating how much you personally agree or disagree with each statement.

1. I feel betrayed by other health professionals whom I once trusted.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
2. I feel guilt over failing to save someone from being seriously injured or dying.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	адтее	
3. I feel ashamed a	about what I've	done or	not done when p	rovidi	ing care to my p	patients	3.		
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
4. I am troubled b	y having acted i	n ways	that violated my o	wn n	norals or values				
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
5. Most people with whom I work as a health professional are trustworthy.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
6. I have a good sense of what makes my life meaningful as a health professional.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
7. I have forgiven	myself for what	s happ	ened to me or to o	thers	whom I have c	ared fo	r.		
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
8. All in all, I am i	nclined to feel th	at I'm	a failure in my wo	ork as	a health profe	ssional.			
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
9. I sometimes feel God is punishing me for what I've done or not done while caring for patients.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree	Mildly dis	agree	Neutral		Mildly agree		Strongly	agree	
10. Compared to before you went through these experiences, has your religious/spiritual faith has									
strengthened.									
1 2	3	4	5	6	7	8	9	10	
Strongly disagree					Mildly agree		Strongly	_	
11. Do the feelings you indicated above cause you significant distress or impair your ability to function									
in relationships, at work, or other areas of life important to you? In other words, if you indicated any									
problems above, how difficult have these problems made it for you to do your work, take care of									
things at home, or get along with other people?									
□ Not at All	□ Mild		Moderate	o 1	Very Much	οE	xtremely		

<sup>©</sup> Koenig HG, Mantri S, Lawson J (2020). Moral injury symptoms scale for healthcare professionals: the MISS-HP. Durham, North Carolina: Duke University Center for Spirituality, Theology and Health. Permission required for use (Harold Koenig@duke.edu).

Moral Injury is different from PTSD, but with some overlap when occurring in situations involving severe trauma

#### Moral Injury

#### DSM-5 PTSD

**Moral Concerns** 

Betrayal

Loss of Trust

**Difficulty Forgiving** 

**Loss of Meaning** 

**Self-Condemnation** 

Religious Struggles

Loss of Religious Faith

Negative Alterations in Cognitions/Mood (Criterion D)

Distorted Blame of Self/Others

Guilt Shame Amnesia

Neg Affect Dec Interest

Feel Isolated

Criterion F (duration)

Criterion G

(impaired function)

Criterion H

(exclusions)

Severe Stressor (Criterion A)

> Intrusion Symptoms (Criterion B)

Avoidance Symptoms (Criterion C)

Alterations in Arousal/ Reactivity (Criterion E)

# Neuroanatomy

#### PTSD

Overactive amygdala is in charge -- with underactive prefrontal cortex; fight or flight occurs in non-dangerous "trigger situations"

#### Moral Injury

 Pre-frontal cortexmust be intact where moral thinking is located

There is evidence that damage to the right frontotemporal cortex, as occurs in frontotemporal dementia, may be associated with a loss of moral behavior (Robert et al., 2019).

# Interventions for Moral Injury

#### Secular Psychological

- Adaptive Disclosure (AD)
- Impact of Killing
- Acceptance and Commitment Therapy

#### **Spiritual**

- Building Spiritual Strength (BSS)
- Spiritual-Integrated Cognitive Processing Therapy (SICPT)
- Chaplain/Clergy Religion-Specific Pastoral Care

## Spiritually-Integrated CPT (SICPT)

A manual-based structured psychotherapeutic intervention for Moral Injury in those experiencing severe trauma

A 12-session in-person individual treatment delivered over 6 weeks at 2 sessions/week

SICPT is a spiritual/religiously-integrated intervention using a CPT framework

By reducing moral injury, the goal is to decrease trauma symptoms and comorbid conditions (depression, anxiety, substance abuse, relationship problems, etc.)

**Several versions:** broad "spiritual" version, plus religiously-integrated versions: Christian, Jewish, Muslim, Hindu, Buddhist

Pearce, M., Haynes, K., Rivera, N. R., & Koenig, H. G. (2018). Spiritually integrated cognitive processing therapy: a new treatment for post-traumatic stress disorder that targets moral injury. Global Advances in Health and Medicine, 7,

https://journals.sagepub.com/doi/full/10.1177/2164956118759939

#### 12-Session SICPT Outline (broadly spiritual version)

- 1 Introduction: Moral Injury and Rationale for SICPT: Symptoms of PTSD; goals of SICPT; review stuck points handout; brief review of traumatic event. Practice assignment: Write initial Impact Statement with focus on moral injury/impact on conscience, God, others, world.
- **2 The Meaning of the Event and Spirituality:** Patient reads Impact Statement. Begin to identify stuck points. Identify moral injury and impact on spiritual beliefs/practices. Introduce of A-B-C Worksheets (WS); explanation of relationship between thoughts, feelings, behavior. Practice assignment (PA): Complete 1 A-B-C sheet each day; complete Spiritual Resources Worksheet.
- **3 Spiritual Resources and Moral Injury:** Review A-B-C practice assignment. Review spiritual resources. Introduce Intention for Kind Attention and Compassion & discuss how fits within client's spiritual belief system. PA: reassign A-B-C WS, complete Core Values WS, read Prodigal son story.
- 4 Kind Attention & Compassion: Review A-B-C WS on inner conflict/moral injury (ICMI). Review setting Intention for Kind Attention and Compassion toward ICMI. Introduce spiritual distress & grief. Introduce spiritually-oriented Challenging Questions WS to challenge stuck points. PA: Complete spiritually-oriented Challenging Questions WS; read WS on spiritual reactions to ICMI.
- **5 Challenging Questions & Spiritual Distress:** Review spiritually-oriented Challenging Questions WS. Review spiritual distress/grief and Lament. Distinguish between different types of Guilt. Introduce ritual of confession to deal with guilt. Introduce Patterns of Problematic Thinking WS. PA: Complete spiritually-oriented Challenging Questions WS; chose confession ritual to practice daily
- **6 Confession Ritual and Problematic Thinking:** Review spiritual confession ritual & problematic thinking WS. Introduce stages of self, other, Divine Forgiveness. Introduce Challenging Beliefs WS. PA: Complete Challenging Beliefs WS daily related to forgiving self, others, God.

#### 12-Session SICPT Outline

- 7 Forgiveness I and Challenging Beliefs: Review Challenging Beliefs and Forgiveness WS's related to forgiveness stuck points. Introduce final REACH forgiveness steps. Introduce Trust for self, others, and God. PA: Complete REACH WS, read Trust Module.
- 8 Trust and Forgiveness II: Review Challenging Beliefs WS regarding forgiveness and trust stuck points. Discuss judgment issues, review REACH forgiveness WS. Introduce Making Amends. Introduce Esteem for Self, Others, & God. PA: Read Esteem Module.
- 9 Esteem and Making Amends: Review Challenging Beliefs WS on beliefs hindering making amends and esteem. Review Making Amends WS, Verbal Blessing WS. Introduce Power/Control (P/C) issues related to self, others and God; Introduce Spiritual Discrepancies re P/C.
- 10 Power, Control, & Spiritual Discrepancies: Discuss P/C and self-blame; address Spiritual Discrepancies related to P/C. Introduce Intimacy issues related to self, others, & God. Introduce Spiritual Partnerships. PA: Read Intimacy Module.
- 11 Intimacy and Spiritual Partnerships: Discuss issues related to increasing intimacy/participation in Spiritual Community. Introduce Safety issues as related to self, others, and God. Introduce Post-Traumatic Growth. PA: Write final impact statement.
- 12 Safety and Post-Traumatic Growth: Have patient read the final Impact Statement. Therapist reads the first Impact Statement and then compares differences. Identify any remaining stuck points related to ICMI, review course of treatment and client's progress, help client identify goals for future and "Paying it forward" to others, family, spiritual community, those in need.

# Manualized Structured 12-Session Pastoral Care Intervention for Moral Injury

May be administered by clergy, chaplains, or licensed counselors

Heavily Bible-based for Christian version (and similarly heavily scripture based for Jews, Muslims, Buddhists, and Hindus based on their core religious scriptures: Torah and Talmud, Qur'an and Hadith, Dhammapada, Bhagavad Gita)

12 weekly sessions, each 50-min long, targeting each of the 10 dimensions of Moral Injury

# 10 Moral Injury Dimensions (Session Focus)

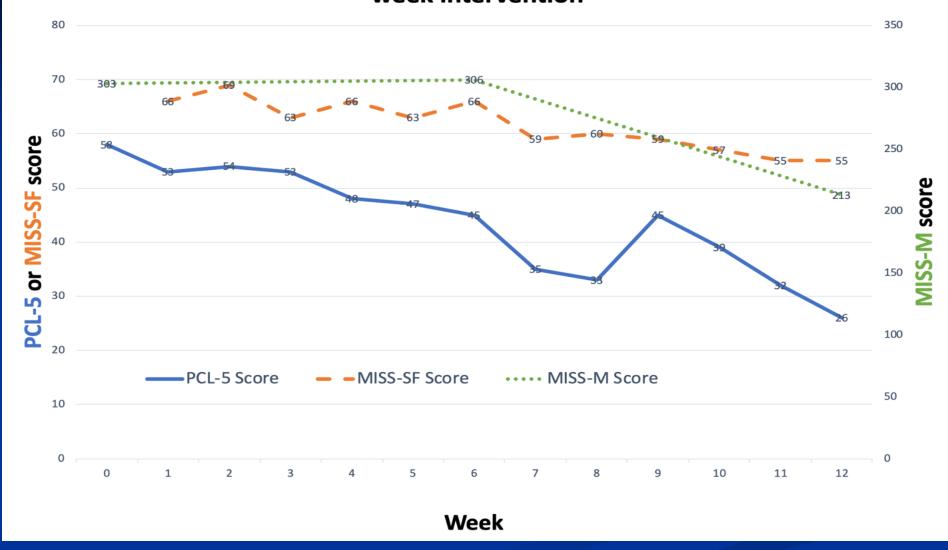
- 1. Guilt
- 2. Shame
- 3. Betrayal
- 4. Moral concerns
- 5. Loss of trust
- 6. Loss of meaning
- 7. Self-condemnation
- 8. Difficulty forgiving
- 9. Religious struggles
- 10. Loss of religious faith

# Treatment Modules for each Moral Injury dimension

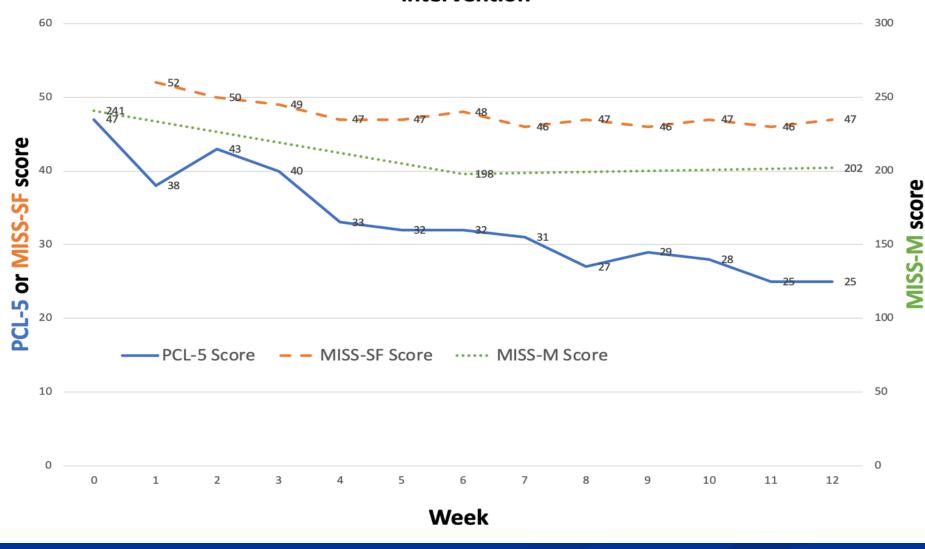
- 1. Conviction
- 2. Lament
- 3. Repentance
- 4. Confession
- 5. Forgiveness
- 6. Reconciliation
- 7. Atonement
- 8. Recovery & Resilience (for Sessions #11 and/or #12)

Anger (optional)

#### Decrease in PTSD and moral injury symptoms of Mr. A over 12week intervention



# Decrease in PTSD and moral injury symptoms of Mr. B over 12-week intervention



# Summary

- 1. Moral injury is a relatively new syndrome distinct from PTSD that often occurs in those suffering from various forms of trauma, where there is a perceived transgressions of moral values by self or others
- 2. There are numerous measures of MI that can be used to identify it: combined events-symptom measures and pure symptom measures (pure symptom measures recommended)
- 3. The symptoms of MI are psychological, spiritual, and religious, all of which must be addressed for complete healing
- 4. There are secular, spiritual, and religion-specific treatments for MI; there is preliminary evidence of their effectiveness
- 5. Versions of religion-specific treatments are available for Christian, Jewish, Muslim, Hindu, and Buddhist faith traditions

# **Further Resources**

## **Books and Manuals**

- You are My Beloved. Really? (<a href="https://www.amazon.com/gp/product/1530747902">https://www.amazon.com/gp/product/1530747902</a>)
- Religion and Recovery from PTSD
   (https://www.amazon.com/Religion-Recovery-PTSD-Harold-Koenig-ebook/dp/B07WQ34JTN)
- Pastoral Care for Moral Injury
  - Pastoral Care Structured Manual (<u>Harold.Koenig@duke.edu</u>)
  - Clergy workbook
  - Patient workbook
- 4. Spiritually-Integrated Cognitive Processing Therapy
  - SICPT Manual (michelle.pearce@umaryland.edu)
  - Therapist workbook
  - Patient workbook

#### **Summer Research Workshop**

August 15-19, 2022 Durham, North Carolina

5-day intensive research workshop focus on what we know about the relationship between spirituality and health, clinical applications, how to conduct research, and how to develop an academic career in this area. Faculty includes leading spirituality-health researchers at Duke, Yale University, Emory, and elsewhere.

- -Strengths and weaknesses of previous research
- -Theological considerations and concerns
- -Highest priority studies for future research
- -Strengths and weaknesses of measures of religion/spirituality
- -Designing different types of research projects
- Primer on statistical analysis of religious/spiritual variables
- -Carrying out and managing a research project
- -Writing a grant to NIH or private foundations
- -Where to obtain funding for research in this area
- -Writing a research paper for publication; getting it published
- -Presenting research to professional and public audiences; working with the media

Partial tuition Scholarships are available

If interested, contact Dr. Koenig: Harold.Koenig@duke.edu

# Spirituality Health Research

Methods
Measurement
Statistics
and Resources



Harold G. Koenig, MD

# ww.spiritualityandhealth.duke.edu

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News



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#### Welcome

The Center was founded in 1998, and is focused on conducting research, training others to conduct research, and promoting scholarly field-building activities related to religion, spirituality, and health. The Center serves as a clearinghouse for information on this topic, and seeks to support and encourage dialogue between researchers, clinicians, theologians, clergy, and others interested in the intersection.



#### Mission

The five main goals of the Center are to:

- · Conduct research on religion, spirituality and health
- · Train those wishing to do research on this topic
- · Interpret the research for clinical and societal applications
- Explore the meaning of the research for pastors and theologians
- Discuss how theological input can advance the research



#### **Upcoming Events**

16th Annual 5-day Spirituality and Health Research Workshop (August 12-16, 2019)

Monthly Research Seminars

#### **Recent News**

# Thank you