



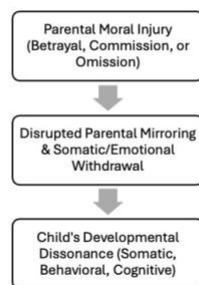
CLINICAL DEVELOPMENTAL GUIDE: ASSESSING & TREATING MORAL INJURY IN MILITARY-CONNECTED CHILDREN

An Expressive Arts and Family Systems Framework for Pediatric, School-Link, and Youth Trauma Clinicians brought to you by Moral Injury Support Network for Servicewomen, Inc.

SECTION 1: THE SYSTEMIC TRANSMISSION OF SOUL WOUNDS

In military families, moral injury is rarely isolated to the individual servicemember. When a parent returns with a severe "soul wound"—distinguished by existential guilt, moral self-loathing, or systemic betrayal—the entire family system absorbs the impact. This phenomenon is known as **Intergenerational Moral Transmission (IMT)** or **Family Systems Trauma**.

FAMILY SYSTEMS MORAL TRANSMISSION PIPELINE



The Neuro-Systemic Impact of Disrupted Mirroring

A parent suffering from acute moral injury often struggles with emotional containment, displaying somatic numbness or sudden moral outrage. This disrupts the child's *primary mirroring loops*. The child's nervous system detects the parent's unexpressed distress and internalizes it, translating the parent's existential shame into the child's own felt sense of badness or insecurity.

SECTION 2: DEVELOPMENTAL STAGE ANALYSIS MATRIX

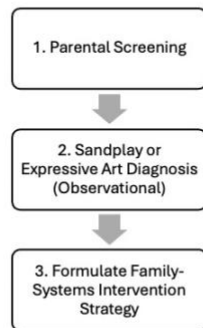
Children process moral trauma through the lens of their cognitive, emotional, and social development. Standard trauma screeners often miss these nuances because the child is not expressing fear, but rather **existential misalignment**.

Developmental Stage	Cognitive & Moral Lens	Clinical Presentation & Somatic Markers	Pathological Misattributions (Internalized)
Early Childhood (Ages 3–5)	Egocentric Morality (Events happen <i>because</i> of the child's actions or inner "goodness/badness").	Somatic regression (wetting, sleep disturbances), hyper-vigilant attachment seeking, physical "clinging," loss of symbolic play.	<i>"Mommy/Daddy is sad/gone because I was bad. I am a bad child."</i>
Middle Childhood (Ages 6–11)	Rule-Bound / Conventional Morality (Deep preoccupation with fairness, rules, and authority).	"Perfectionist" anxiety, behavioral acting-out at school, somatic complaints (recurring stomachaches, headaches), compulsive hoarding/organizing.	<i>"If I follow all the rules and keep things perfect, Mommy/Daddy won't hurt anymore."</i>
Adolescence (Ages 12–18)	Abstract / Existential Morality (Testing system integrity, questioning institutional values).	Moral cynicism, self-harm, substance experimentation, profound withdrawal from peer groups, anti-authority stance.	<i>"The country, the military, and my parents are hypocrites. Nothing is truly safe or good."</i>

SECTION 3: ASSESSMENT PROTOCOL & PLAYROOM PROMPTS

When working with military children, standard cognitive talk therapies can hit defensive walls. Play and expressive arts serve as the child's native language.

CLINICAL INTAKE PATHWAY



1. Diagnostic Sandplay Prompts (Ages 3–11)

The sand tray bypasses verbal defenses, allowing the child to project family-level systemic dynamics.

- **Prompt:** *"I'd like you to build a world in the sand where there is a big secret, and some of the toy figures have to guard it. Show me where everyone sleeps, and who is keeping watch."*
- **What to Observe:**
 - Are the child's "soldier" or "guardian" figures placed in constant, exhausting defensive postures?
 - Is there an isolated, unapproachable figure buried under the sand? (Often represents the morally injured parent).
 - Is there a "helper" figure that is completely overwhelmed or broken?

2. Metaphorical Interview Prompts (Ages 12–18)

Youth processing family-level betrayal or moral disillusionment respond to narrative metaphors rather than direct clinical inquiries.

- **Prompt:** *"Sometimes families operate like a unit on a mission, where a major event goes off-script. If your family was a crew on a spaceship that hit a meteor, what would your job be? Who is steering the ship, and who is trying to fix the engine in secret?"*
- **What to Observe:**
 - Does the adolescent identify as the "caretaker of the parent" (fixing the engine)?
 - Is there a profound sense of isolation or a belief that the "captain" (the parent or the military institution) has abandoned them?

SECTION 4: CLINICAL INTERVENTIONS & EXPRESSIVE TOOLS

These concrete tools are designed to move beyond general play therapy by targeting the relational structures of military families.

Intervention 1: The "Weighted Shield" (Somatic & Artistic - Ages 6-11)

- **Goal:** To help children release the somatic burden of "carrying" their parent's guilt or shame.
- **Execution:**
 1. Provide the child with a cardboard cutout of a shield.
 2. Ask them to paint or draw on the *inside* of the shield all the heavy feelings, rules, or secrets they feel they have to protect their family from (use stones or heavy modeling clay glued to the shield to physically weight it down).
 3. On the *outside* of the shield, paint what they want their family to look like when everyone is safe.
 4. **The Pivot:** Facilitate a symbolic release: *"You've carried this heavy shield for a long time to keep your family safe. Let's place it on this shelf. It is the grown-ups' job to carry the heavy shields now, so your hands can be free to play."*

Intervention 2: The "Broken Bridge" Narrative (Ages 12-18)

- **Goal:** To address adolescent moral cynicism and repair trust in the family system.
- **Execution:**
 1. Utilize clay or mixed-media to have the adolescent build a bridge between two landmasses (representing "My Parent/The System" and "My True Self").
 2. Invite them to intentionally "break" or alter the bridge to show where the moral trust or communication was ruptured.
 3. **The Pivot:** Ask them to design a "temporary scaffolding" using string, wood, or wire. *"We can't fix this bridge instantly, but we can build a temporary way to pass messages across. What is one small, safe boundary we can put on this scaffolding today?"*

Intervention 3: Conjoint Family Mapping (Systemic Re-alignment)

- **Goal:** Re-establish healthy parent-child hierarchies that were damaged by moral injury.
- **Execution:**
 - Bring the morally injured parent and the child together in the playroom.
 - Use yarn or colored tape on the floor to draw "zones" of responsibility.

- Guide the parent to physically step into the "Parent Zone" and verbally state to the child: *"I am the parent, and I am strong enough to hold my own heart. You do not have to carry my worries anymore. You can step into your zone and just be a kid."*

For the complete 12-NBCC credit syllabus and masterclass schedule featuring Dr. Daniel L. Roberts and Gina Hernandez, go to <https://misns.org/programs/workshops/>.