CLINICAL UTILITY OF THE MORAL INJURY SCALE

TREATING AND SUPPORTING NON-OFFENDING PARENTS

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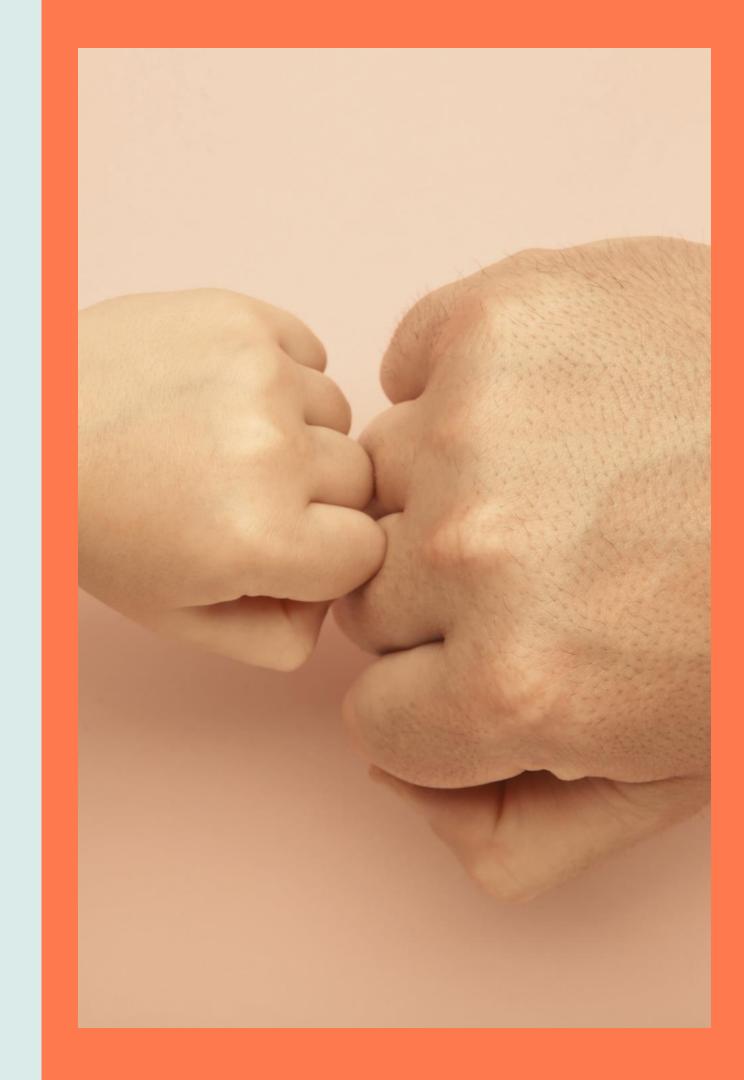




CHILDHOOD MALTREATMENT

- Impacts over half of all children aged 2 to 17 years (WHO, 2022).
- 71.8% of Australians experienced CM (Matthews, 2023).
 - 1 in 3 girls sexual abuse
 - 1 in 5 boys sexual abuse
 - 32% physical abuse
 - 30.9% emotional abuse
 - 39.6% exposed to DBV

CHILDREN WHO DISCLOSE MALTREATMENT TYPICALLY CONFIDE IN THE NON-OFFENDING PARENT (FULLER, 2016).



THE IMPACT OF MORAL INJURY ON NON-OFFENDING PARENTS

Four-minute video available to watch at https://www.youtube.com/watch?v=KE8pBYrE67A

COMPLEXTRAUMA

Early on-set, recurrent, chronic, and most often occurs within the child's caregiving system and includes neglect, family violence, emotional, physical, and or sexual abuse.

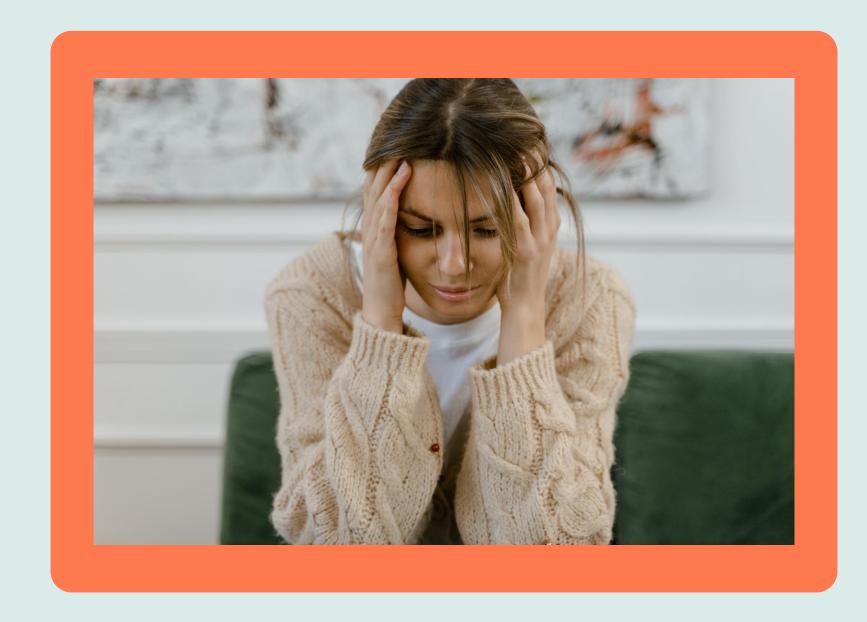
(Anda et al., 2010; Wamser-Nanney & Vandenberg, 2013)



"TRAUMA IS NOT WHAT HAPPENS
TO YOU, IT'S WHAT HAPPENS
INSIDE YOU AS A RESULT OF
WHAT HAPPENED TO YOU."
(LEVINE & MATE, 2010).

MORAL INJURY

Bearing witness to the occurrence and/or aftermath of violence and human suffering or failing to prevent outcomes which transgress deeply held beliefs (Litz et al.'s, 2009).



TRAUMA RECOVERY OF THE CHILD NOT ONLY REQUIRES THE ABSENCE OF THE FEARED STIMULI, BUT THE PRESENCE OF A SECURE ATTACHMENT FROM A PRIMARY CAREGIVER (KEZELMAN ET AL., 2015).

MORAL INJURY

MI: Psychological, social, and spiritual suffering caused by the transgression of one's deeply held moral beliefs in a high-stakes environment (Fuller et al., 2016; Griffin et al., 2019; Litz et al., 2009).

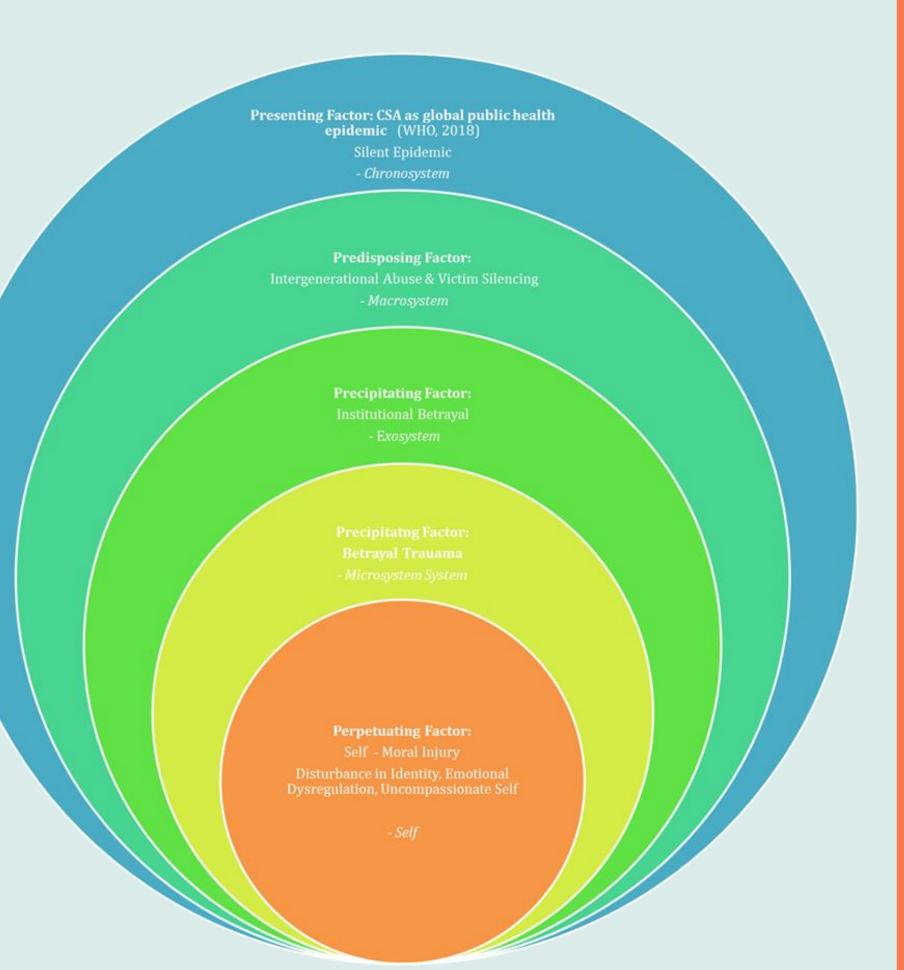
NOPs: Blind betrayal of abuse to their child evokes emotions like shame, guilt, and anger (Griffin et al., 2019).



INTRA-FAMILIAL SEXUAL ABUSE IS THE MOST PREVALENT FORM OF ABUSE GLOBALLY (GEKOSKI ET AL., 2016)

INTRAPERSONAL MORAL INJURY COGNITIONS THEORY

Adaption of Bronfenbrenner's ecological systems that impact the child's development transpiration across each level through the lens of the NOP (adapted from Bronfenbrenner, 1979; McGillivray, 2021).



NON-OFFENDING PARENTS

BARRIERS

- Legal and child protection suboptimal support (Bolen & Lamb, 2004).
- Physical evidence is rare (Smith et al., 2018).
- Vicarious trauma to most often to a non-offending mother (Wells, 2019).
- Disconnect ensuring the child's safety not recovery (Lannert et al., 2014).

OUTCOMES

- Child's disclosures of abuse unsubstantiated (Brown & Alexander, 2020; Rathus, 2020).
- Two-thirds children are given unsupervised contact to the offender (Brown & Alexander, 2020).

ASSESMENT AND TREATMENT

PTSD

A focus on PTSD treatment alone has been associated with poorer treatment responses (Phelps et al., 2018) and caregivers are not often included in the child's intervention (Van Toledo & Seymour, 2013).

Maternal Response

The maternal response is particularly important in recovery from child sexual abuse (Alaggia & Turton, 2005; Goodyear-Brown, 2011).

CPTSD

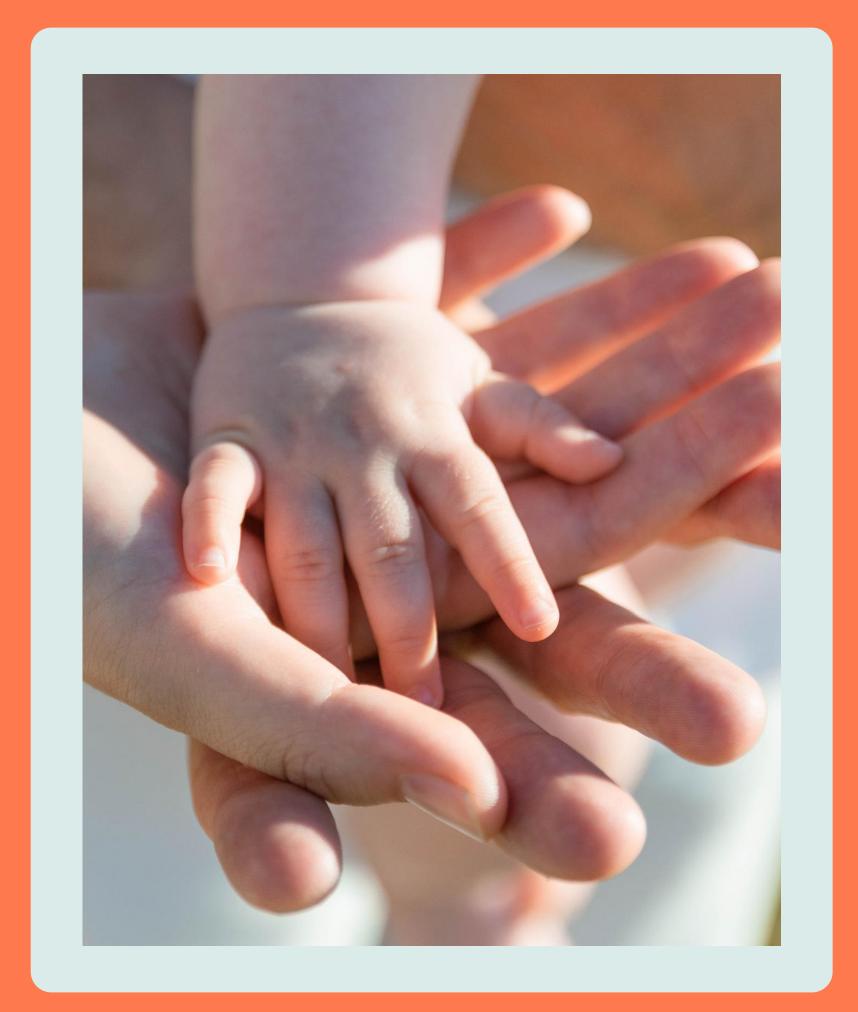
Lack of trauma-informed complex treatment programs (Cloitre, 2020; Collin-Vezina et al., 2013; Lyons-Ruth et al., 2006).

Cognitive Dissonance

When one cannot make sense of the transgressive act, they will change their beliefs about themselves, others, and humanity to alleviate dissonance and comprehend the transgressions (Bonson et al., 2023).

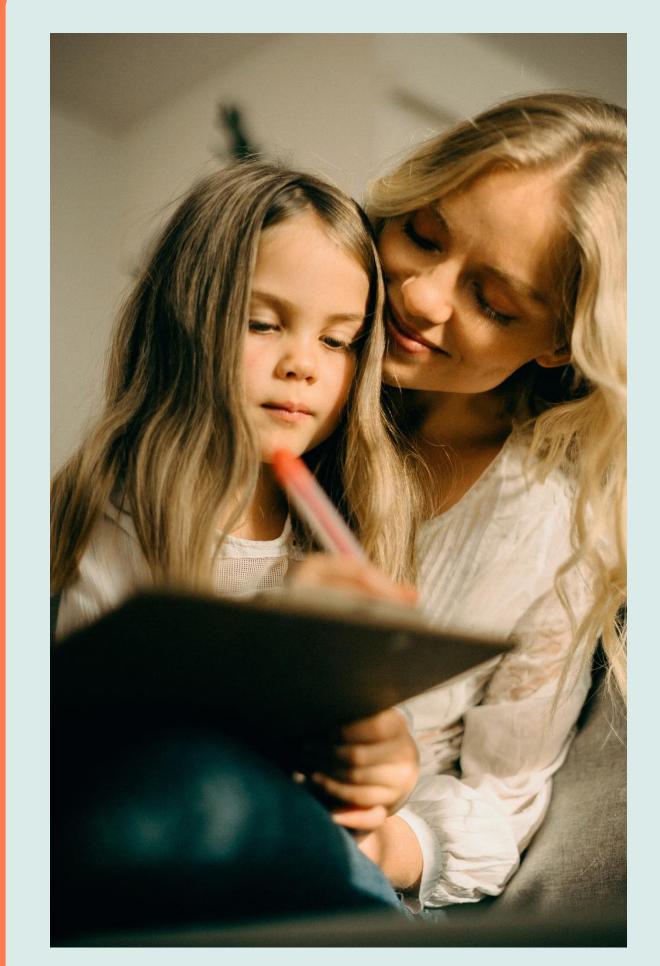
RESEARCHGAP

- No MI scale within an NOP population.
- Higher parental functioning is a mediator between trauma and post-traumatic growth (de Haan et al., 2020) more than any abuserelated factors (Schilpzand et al., 2018; van Toledo & Seymour, 2013).
- The WHO (2022) parenting interventions guidelines recommend every parent requires assistance and treatment.
- 1 hour weekly child therapy does not remove accumulated years of threat (Perry, 2009).

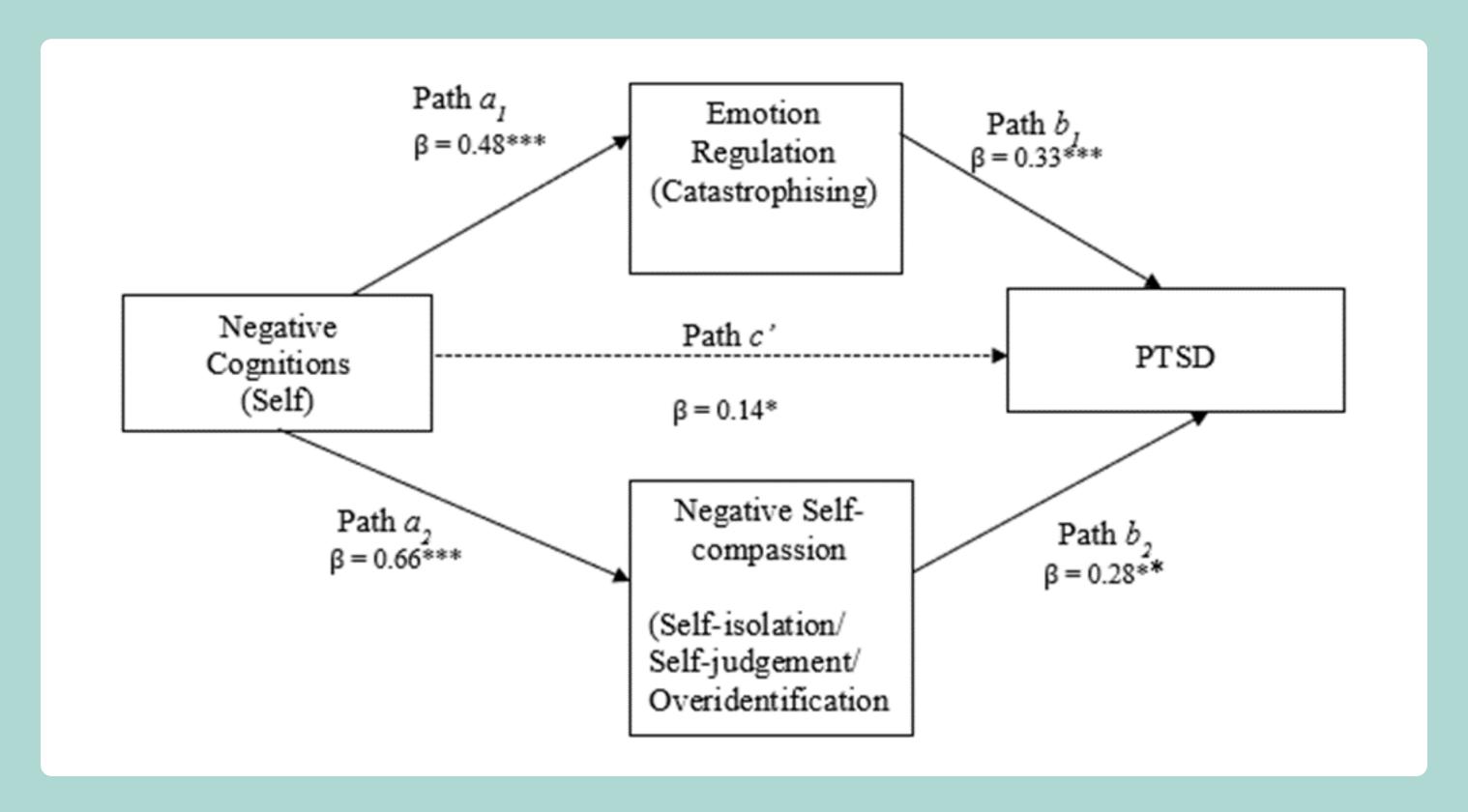


MORAL INJURY

- The clinical utility of intrapersonal cognitions of moral injury are valuable psychosocial constructs beyond abuse-related symptoms in PTSD and CPTSD was supported
- MI may differentiate between PTSD and CPTSD.
- MI may provide a parent-focused pathway to recovery to help resolve some of the current dilemma's faced by clinicians, policy makers, legal professionals, and families affected by the CSA.



MORAL INJURY AND PTSD



Intrapersonal maladaptive MI cognitions accounted for 47% of the variance in PTSD (McGillivray, 2022).

TYPES OF MORAL INJURY

Three-dimensional structure of MI supported by

Moral Injury Symptom Scale – Military and Moral Injury Symptoms Scale – Health Professionals (Koenig et al., 2018; Mantri et al., 2020))

INTERPERSONAL

To facilitate safety individuals adopt maladaptive cognitions and withdraw socially (Bonson et al., 2023; Litz et al., 2009; Williamson et al., 2020).

INTRAPERSONAL

Self-condemnation can be so powerful that parasuicidal behaviours form (Litz et al., 2009).

INSTITUTIONAL

Loss of faith in spirituality and humanity and institutional services including child protective services (Haight et al., 2017).

UTILITY OF THE MORAL INJURY SCALE

HI

H2

H3

It is 18 expected that a nonmetric multidimensional scaling analysis will yield a that same 3- dimensional theoretical structure of MI

The IMIS scale will have acceptable internal consistency (> .75; Mantri et al., 2020), similar to the Moral Injury Symptom Scale – Healthcare Professionals

Moral injury in the sample, will be similar to, or slightly higher, than estimates reported by previous research (e.g., MISS-HP found 69.6% of health practitioners developed moral injury, Mantri, 2021)

PRELIMINARY RESULTS

HI

The MIS is a 41-item scale item pool was developed from theoretical factorial structures (Litz et al., 2009; Farnsworth et al., 2017). The MIS reflected shared commonalities among each dimension.

H2

The IMIS yielded a higher internal consistency α = .89 compared to the MISS – HP α = .75 (Mantri etal., 2020). All three dimensions yielded acceptable to strong internal consistency all above the MISS-HP scale, α = .81, α = .80, and α = .77, respectively.

H3

58.3% participants high
Moral injury, 41.7% Medium.
100% of participants had
MI as compared to previous
research 69.6%.

NEXT STEP

• MI is still in the early stages of exploration within a NOP population

• The study is currently recruiting for final validation of the scale

Validation in clinical and non-clinical populations

- Design Child Version
- Randomised control trial of the Complex Trauma Intervention targeting MI treatment for NOPS

"A ship is always safe at the shore but that's not what it's built for"

- Albert Einstein

PARENTING BEYOND TRAUMA | WORKBOOK **UNDERSTANDING REBUILDING WITH COMPLEX TRAUMA SELF-COMPASSION** Restoring sense of self Trust, Love, and Betrayal

Cultivating Post-traumatic

mind and body connection

PILOT STUDY RESULTS

Significant decrease in CPTSD pre to post $F(1, 25) = 21.28 p < .001, \eta 2 = .46, power = .99$

Significant decrease in PTSD $F(1, 25) = 15.45 p < .001, \eta 2 = .38, power = .97$

Significant decrease in PTCI $F(1,25) = 23.40, \, p < .001, \, \eta 2 = .48, \, power => 1.00$

Significant increase in Self Compassion (12%) F(1, 25) = 6.53, p = .017, $\eta 2 = .21$, power = .69



CONCLUSION

TOWARDS A FUTURE WITH GREATER
TRAUMA INFORMED AWARENESS

The body treats the moral injury the same way as a physical attack (Litz et al., 2009).

Moral Injury Assessment and treatment of NOPs will help protect children in legal systems

How can you help?

RESEARCHTEAM

Dr Cher McGillivray: Clinical Psychologist and Assistant Professor Psychology

Dr Gaelle Brotto: Assistant Professor of Criminology and Criminal Justice

Line Christophersen: Ma.Crim RA.





Seeking Adult Participants for Moral Injury Study





We are looking for:

ARENTS OVER 18 WHO HAVE SUFFERED COMPLEX TRUAMA FROM THEIR CHILDREN EXPERIENCING CHILDHOOD MALTREATMENT

Outcomes:

Improve understanding and awareness of the life impact of moral injury on parents

You can help advance knowledge for therapists and researchers, to deliver improved interventions

Increase the relationship between the child and parent

Study Details

Complete survey on the link below

https://bond.qualtrics.com/jfe/form/SV_0e7GtHWBtoQJS3I

You can help make a difference

Scan the OP code



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