



UNRAVELLING THE IMPACT OF MORAL INJURY ON THE PSYCHOLOGICAL WELL-BEING AND THE MEDIATING ROLE OF RELIGIOUS SUPPORT AMONG PAKISTAN POLICE PERSONNEL

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Abstract

This study explored the effect of moral injury on psychological well-being among Pakistani police personnel and examined whether religious coping mediates this relationship. Using a cross-sectional, mixed-methods design, data were collected from 183 police personnel via the Moral Injury Distress Scale (MIDS), Ryff's Psychological Well-Being Scale, and the Brief Religious Coping Scale (Brief RCOPE). Quantitative analysis disclosed an unexpected positive correlation between moral injury and psychological well-being, $r(181) = .34, p < .001$, propose that in the cultural and spiritual context of Pakistani law enforcement, moral injury may foster moral reflection, spiritual growth, and resilience. Simple linear regression confirmed that moral injury significantly predicted psychological well-being, $F(1, 180) = 22.88, p < .001$, with moral injury accounting for 11.3% of the variance in well-being ($B = 0.25$). However, mediation analysis showed that religious coping, despite being significantly associated with moral injury ($B = 0.05, p = .007$), did not predict psychological well-being ($B = -0.16, p = .484$), and the indirect effect was non-significant ($B = -0.01, 95\% \text{ CI } [-0.03, 0.03]$). The qualitative portion, derived from thematic analysis of open-ended responses in the MIDS, exposed seven themes: moral violations and personal regret, integrity compromised by power and corruption, witnessing injustice without the power to act, regret over missed compassion, struggles between justice and a flawed system, navigating ethical dilemmas, and pain from mob justice. These narratives revealed moral conflicts, institutional helplessness, and emotional burdens. Together, the findings challenge Western assumptions about moral injury as uniformly harmful, suggesting instead that in religious and collectivist cultures, moral injury can become a catalyst for psychological growth, moral resilience, and self-reconstruction.

Keywords: *Moral injury, psychological well-being, religious coping, shame, guilt*

Introduction

Law enforcement personnel routinely face ethically complex and high-risk situations that place them at heightened risk for psychological distress. Among these stressors, moral injury, the psychological harm stemming from actions that violate one's moral or ethical code (Litz et al., 2009) has garnered increasing attention. Though initially explored in military



contexts, recent studies have identified its relevance in policing, where officers are exposed to violence, corruption, and organizational betrayal (Papazoglou et al., 2020).

In Pakistan, police officers confront additional challenges such as political instability, inadequate resources, and insufficient mental health support. These conditions make them particularly vulnerable to the effects of moral injury, yet little empirical research exists to examine its impact on their psychological well-being, a multidimensional construct encompassing purpose in life, autonomy, and personal growth (Ryff, 1989). Evidence suggests moral injury is linked to negative outcomes such as depression, guilt, and hopelessness, all of which compromise well-being (Bryan et al., 2018). It is marked by intense emotions like guilt, shame, anger, and spiritual anguish, leading to prolonged psychological and social repercussions.

This study also investigates religious support as a potential mediator in the relationship between moral injury and psychological well-being. Given Pakistan's strong religious orientation, religious frameworks can aid in meaning-making and moral repair after ethically injurious events (Currier et al., 2015). By examining these constructs among Pakistani law enforcement personnel, this study addresses a significant research gap. Its findings may contribute to more culturally sensitive psychological interventions and organizational policies aimed at supporting the mental health of those who serve in high-risk public safety roles.

Moral Injury refers to a profound and lasting impact on an individual's psychological, biological, spiritual, behavioral, and social well-being. It arises from committing, failing to prevent, or witnessing actions that violate deeply held moral beliefs and expectations, leading to enduring consequences. Events that may result in MI include both active and passive forms of wrongdoing, whether by the individual or by others, such as causing harm or failing to prevent it. Recent research has identified MI as a distinct type of trauma, setting it apart from other forms. Importantly, MI is not categorized as a mental health disorder. Functional MRI (fMRI) studies have demonstrated that the neurobiological response in PTSD can vary depending on the severity of the trauma. In cases of sexual harassment, physical violence, or war-zone trauma, brain activity was primarily observed in the right hemisphere, with minimal differentiation between these trauma types. Traumas involving direct danger were linked to increased activity in the amygdala, while traumas lacking immediate threat were associated with heightened activity in the precuneus. A comprehensive review revealed several brain regions, mostly in the left hemisphere, associated with feelings of guilt. In studies where participants used personal narratives to recreate emotional experiences, the left precuneus cortex and anterior insular cortex showed activation when participants recalled negative self-referential emotions such as guilt and shame. Interestingly, these same brain areas were also activated during the experience of positive self-referential emotions like pride (Barnes et al., 2019). It is marked by deep emotions like remorse, shame, wrath, and spiritual anguish, leading to chronic psychological and social repercussions (Javaid et al., 2024a).

Moral Injury (MI) differs from Post-Traumatic Stress Disorder (PTSD) and is often regarded as more profound or existential in nature. MI refers to the damage caused to an individual's moral framework and core values when they witness or commit acts that violate their moral code, resulting in deep emotional and spiritual turmoil (Javaid et al., 2024b).

While MI can present with PTSD-like symptoms, it also encompasses value-driven emotional and cognitive experiences such as remorse, grief, sorrow, humiliation, and isolation. The origins of MI and PTSD are distinct. MI stems from betrayal, violation, or suppression of deeply held moral beliefs. Moral Injury is closely linked to military culture



and experiences, with its proponents positioning themselves as empathetic allies, sensitive to the specific challenges and complexities of military life (MacLeish, 2018; (Javaid et al, 2024c).

A newly introduced concept, Moral Affront, refers to the reaction to witnessing or being subjected to an act perceived as morally wrong, without necessarily compromising one's own moral values. While Moral Injury can contribute to the development of PTSD especially when individuals view themselves as perpetrators or partially responsible for an immoral act, the two conditions require different treatment and rehabilitation strategies. Although symptoms of PTSD and Moral Injury may overlap, it is essential to address the core moral violation when treating MI. The term Culpable Bystander applies to individuals who believe they failed to prevent an immoral act, leading to their experience of Moral Injury (Javaid et al, 2024d). Additionally, even when actions like killing in combat are legally justified, they may still conflict with an individual's personal moral values, resulting in Moral Injury despite legal approval (Neilsen, 2015). At the heart of Moral Injury lies a profound sense of powerlessness, which can result in two primary consequences, intense ethical anxiety and the deterioration of personal relationships (Subotic & Steele, 2018).

Despite increasing attention on moral injury, empirical research has largely focused on military personnel and veterans, with some recent studies exploring its impact on social workers (Haight et al., 2016), journalists (Feinstein et al., 2018), civilians (Steinmetz et al., 2019), and rising adults (Chaplo et al., 2019). Police officers, who face moral risks in their roles (Blumberg et al., 2018), are assailable to morally injurious outcomes (Papazoglou et al., 2019). One study examined police officers involved in incidents where they killed or injured someone, finding correlations with PTSD and, to a small degree, depression (Komarovskaya et al., 2011; (Javaid et al, 2024e)). Moral injury, resulting from personal moral offend or betrayal by others, can lead officers to question their identity and values, potentially contributing to PTSD. The emotional impacts of moral injury can include guilt, shame, anger, and disenchantment, which affect officers' psychological and social functioning (Papazoglou et al., 2019; Iqbal et al., 2024).

Moral injury in law enforcement arises when officers are forced to violate deeply held moral beliefs through their actions or inactions, leading to emotional responses such as shame, guilt, anxiety, and anger (Blumberg et al., 2018). Police and correctional officers routinely face morally challenging situations including use of force, witnessing violence, or making decisions conflicting with personal ethics, which can contribute to moral injury and related psychological distress (Javaid et al., 2023). These experiences may result in burnout, increased turnover, and impaired well-being. Research indicates moral injury significantly predicts PTSD symptoms and their clusters (re-experiencing, avoidance, hyper-arousal) among police officers, highlighting the need for awareness, mental health support, and preventative measures within law enforcement organizations (Papazoglou et al., 2025). Given the unique nature of police work, understanding potentially morally injurious events (PMIEs) beyond traditional trauma is essential for early intervention and treatment, especially since moral injury symptoms may differ from those of PTSD (Blumberg et al., 2018; Ali et al., 2024).

Moral injury is another mental health care for those help individuals who have experienced trauma or crisis. It arises when one is exposed to ethical violations caused by their own actions (Antonelli, 2017). Examples include witnessing or hearing about people harming others, or being unable to help all those affected by disasters due to overpowering need or personal limitations (West & Cronshaw, 2022).



A key example of a morally injurious effect is a law enforcement officer's involvement in a critical incident, though less terrible cases like making an arrest the officer believes is unfair, being unable to arrest someone due to policy, or following an immoral (but not unlawful) order can also impart. These experiences help explain why activity stress among law enforcement officers is higher than in most other professions (Reichard & Jackson, 2010). Critical incidents that may be perceived as transitiveness acts or morally injurious include being injured, witnessing a colleague's death, handling homicide, suicide, child abuse, or severe occurrence (Violanti et al., 2016). On average, officers experience such incidents per year totaling around 250 over a 30-year career (Marin, 2012). Some roles, like child sexual abuse investigators, face even higher exposure (Brady, 2017). Taking a life in the line of duty can be particularly distressing, often intense by media scrutiny and investigations, which uniquely burden law enforcement officers (Komarovskaya et al., 2011).

The re-experiencing of traumatic events can trigger the distressing reliving of moral conflicts, often accompanied by feelings of self-blame, shame, and other negative emotions. This process is particularly painful as it undermines self-esteem and weakens trust in relationships, thereby perpetuating a cycle of suffering and emotional turmoil (Litz et al., 2009). A qualitative study conducted interviews with 24 Swedish military veterans who experienced a significant decline in their mental well-being and increased psychological distress, despite not meeting the full diagnostic criteria for Post-Traumatic Stress Disorder (PTSD). In the absence of a clear medical explanation for their deteriorating mental health, these veterans were left in a state of uncertainty, struggling to access adequate support. The study used inductive reasoning to identify patterns and relationships within the data. One of the key findings was the emergence of a deep and persistent moral struggle, comparable to a moral wound that had left a lasting impact on their psyche. Moral Injury MI can result in a wide range of intense emotions, including guilt, shame, anxiety, anger, depression, bitterness, and identity disturbances (Grimell, 2023).

Most soldiers who enter war zones experience intense emotions. Some of these feelings are negative, such as horror, panic, fury, rage, or embarrassment, while others are more positive, including arrogance, enjoyment, and ecstasy. These powerful emotional responses are often accompanied by physical effects such as hormonal surges, rapid breathing, increased heart rate, dilated pupils, and loss of bladder control. The largest study on this subject, conducted during World War II by Stouffer and his colleagues, identified fear as the most dominant emotion among U.S. combatants. Their survey of U.S. infantry battalions in France revealed that over 65% of soldiers struggled to carry out their military duties due to persistent feelings of fear. A similar study among U.S. infantrymen in the Pacific combat zone produced nearly identical results, with an overwhelming number of combatants reporting fear as the primary obstacle to effective military action. Soldiers described experiencing intense heart palpitations and severe nausea, and many reported breaking into cold sweats, shivering, or even fainting (Stouffer et al., 1949).

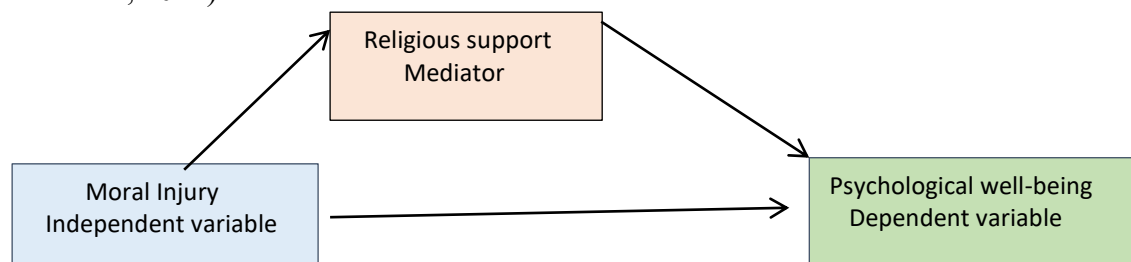
Moral Injury is often accompanied by spiritual and religious suffering, along with a need to find courage, confidence, resolution, and inner harmony (Javaid & Fatima, 2024). Addressing spiritual wounds can help veterans overcome major barriers that might otherwise prevent them from fully participating in or benefiting from traditional trauma therapies, ultimately leading to a more holistic and meaningful recovery. During both combat and peacekeeping missions, military personnel may encounter morally challenging situations, referred to as Morally Injurious Experiences (MIEs) that involve complex ethical dilemmas and conflicts capable of deeply impacting their moral values and sense of identity.

These MIEs can trigger intense and distressing emotional and spiritual responses, often presenting as anxiety, depression, PTSD, and Moral Injury. The Canadian Armed Forces has a longstanding tradition of employing chaplains to provide spiritual support. The Royal Canadian Chaplains Service (RCChS) has received significant praise for its outstanding service and support during Canadian military operations in Afghanistan (MacDonald et al., 2018). Moral Injury (MI) represents a profound violation of an individual's ethical and spiritual values, leading to a crisis of conscience and challenging core beliefs. Since the 1990s, psychiatrists have used this term to describe the psychological aftermath of such moral breaches. Military chaplains play a crucial role in addressing Moral Injury by providing confidential spiritual and emotional support to service members struggling with the existential consequences of war. The confidentiality of these interactions is essential, as many service members turn to chaplains to avoid formal documentation that could jeopardize their military careers (Townsend, 2015).

Spiritual activity, including contemplative and empathetic listening, can help improve symptoms (Liebert, 2019). Faith can support individuals through moral dilemmas, reminding them they are not alone. Positive religious coping plays a role for voluntary trust on God for meaning. An Italian study linked spiritual dryness to reduced life satisfaction, show a need for spiritual support (Büssing et al., 2018). (Captari et al. 2018) found that positive religious coping buffers against mental health issues, while negative coping increases risk. The expanded social, psychological, and spiritual suffering base from costly or unworkable trying to manage, control, or cope with the experience of moral pain (Farnsworth et al., 2017). Moral Healing a transitional procedure whereby one moves towards a diminution in moral injury related internal happening related to social, spiritual and/or psychological suffering caused by or come from morally injurious events (Barnes et al., 2019).

Trust violations and moral injuries lead to social pain, a loss of belonging, and distress (Baumeister & Leary, 1995). MI involves the loss of kinship, pride, trust, and community, and is linked to symptoms like guilt, shame, anger, and existential distress (Litz et al., 2022). Clinicians treating MI should be prepared for the complexity of transgressive experiences, helping individuals restore faith in humanity and engage in compassionate behaviors (Litz et al., 2024).

The literature on moral injury in American law enforcement is limited, but the theory of Religious Coping by Pargament (2001) is well-developed. Religious coping involves seeking meaning through the divine in response to stress. Unlike general religiosity, it requires a triggering stressor and focuses on how religion helps individuals cope (Pargament et al., 2000). Religious coping can be positive or negative, and occurs through self-directing, postpone, or collaborative styles (Pargament et al., 1988). It's linked to posttraumatic growth (Gerber et al., 2011).





Research Objectives :

Following are the objectives of the study:

1. To analyze the prevalence of moral injury, psychological well-being, religious support, and demographic profiles among Pakistani police personnel.
2. To examine the relationship between moral injury and psychological well-being.
3. To investigate whether moral injury is a predictor of psychological well-being.
4. To investigate whether religious support mediates the relationship between moral injury and psychological well-being.
5. To explore the lived experiences of moral injury among Pakistani police personnel through their personal accounts of morally distressing events and their psychological impact.

Hypothesis :

1. Moral injury has a significant impact on psychological well-being
2. Moral injury will significantly predicts psychological well-being in law enforcement personnel
3. Religious support significantly mediates the relationship between moral injury and psychological well-being.

Methods:

Research Design:

This study employed a cross-sectional, mixed-methods design, integrating both quantitative and qualitative data. The quantitative component examined relationships among moral injury, psychological well-being, and religious coping. The qualitative component involved a thematic analysis of participants' open-ended responses derived from the subjective section of the Moral Injury Distress Scale (MIDS), aiming to explore the lived moral experiences of police personnel in Pakistan.

Participants:

A total of 183 police officers (N = 183) participated in the study. Participants were recruited through convenience sampling, based on their availability and willingness to participate. The sample included officers of varying ranks and service durations from different police units across Pakistan. Participation was voluntary, and anonymity and confidentiality were ensured.

Measures:

Moral Injury Distress Scale (MIDS):

Moral injury was measured using the Moral Injury Distress Scale (MIDS). The scale includes quantitative items assessing the frequency and intensity of morally injurious experiences and the resulting emotional distress, as well as subjective open-ended questions prompting participants to describe morally injurious incidents in their own words. Quantitative items are rated on a Likert scale, with higher scores indicating greater distress related to moral injury. The qualitative responses from the open-ended section were analyzed thematically to capture the personal and contextual dimensions of moral injury. The MIDS demonstrated good internal consistency in the present sample.

Ryff's Psychological Well-Being Scale (18-item version):

Psychological well-being was assessed using the 18-item version of Ryff's Psychological Well-Being Scale. The scale covers six domains of well-being: autonomy, environmental mastery, personal growth, positive relations, purpose in life, and self-acceptance. Each domain includes three items rated on a 7-point Likert scale from 1

(Strongly agree) to 7(Strongly disagree). Higher scores reflect greater psychological well-being.

Brief Religious Coping Scale (Brief RCOPE):

Religious coping was measured using the Brief RCOPE, a 14-item scale assessing both positive and negative religious coping strategies. Items are rated on a 4-point Likert scale from 1 (Not at all) to 4 (A great deal). Total scores indicate the degree to which individuals rely on religious coping in stressful situations. The scale showed acceptable internal consistency in the current sample.

Procedure:

Police officers were approached through administrative channels and invited to participate in the study. After providing informed consent, participants completed a paper-based survey packet that included demographic questions, the MIDS, Ryff's Psychological Well-Being Scale, and the Brief RCOPE. The open-ended section of the MIDS invited participants to describe morally injurious incidents they had experienced during their service. Ethical approval was obtained from institutional authorities, and participants were assured of the voluntary nature of the study and the confidentiality of their responses.

Results

Descriptive Statistics:

Descriptive statistics were computed for moral injury, psychological well-being, and religious coping (see Table 1). The scores for moral injury (M = 61.49, SD = 23.80) ranged from 24 to 117. Psychological well-being scores ranged from 27 to 120 (M = 64.36, SD = 17.79), while religious coping ranged from 17 to 73 (M = 33.80, SD = 5.79). Skewness and kurtosis values indicated that religious coping was positively skewed (skewness = 1.72) and leptokurtic (kurtosis = 11.81), suggesting a non-normal distribution. However, other variables were approximately normally distributed.

Table 1:

Descriptive Statistics for tmids, tryfs, and trcope

Variable	N	Min	Max	Mean	SD	Skewness	SE Skew	Kurtosis	SE Kurt
tmids	183	24	117	61.49	23.80	.13	.18	-.92	.36
tryfs	182	27	120	64.36	17.79	.90	.18	.67	.36
trcope	182	17	73	33.80	5.79	1.72	.18	11.81	.36

SD = Standard Deviation; SE = Standard Error. Valid N (listwise) = 181.

Frequency tables:

The demographic profile of the 183 Pakistani police personnel revealed a wide age range, from 19 to 60 years, with the most frequently reported age being 40 years (10.4%), followed by 30 years (7.7%) and 36 years (6.6%). This indicates that the sample included both younger and older officers, offering a broad perspective across different stages of police service. In terms of rank distribution, the majority of participants were Constables (59.6%), reflecting their larger presence in the police force. Other notable ranks included Sub Inspectors (13.1%) and Assistant Sub Inspectors (9.3%), while ranks such as Inspector, Head Constable, and Traffic Warden were also represented. A few participants belonged to rarely

reported ranks like Naib Qasid, PSA, SHO, and Senior Traffic Warden. This diversity in age and professional rank supports a well-rounded understanding of the experiences related to moral injury, psychological well-being, and religious support in the policing context.

Table 2

Frequency Distribution of Police Ranks

Rank	Frequency	Percent (%)
ASI	17	9.3
Constable	109	59.6
HC	10	5.5
Inspector	11	6.0
Naib Qasid	1	0.5
PSA	1	0.5
Senior Traffic Warden	2	1.1
SHO	1	0.5
Sub Inspector	24	13.1
Traffic Warden	7	3.8
Total	183	100.0

Note:ASI=Assistant sub-inspector, HC=HeadConstable, PSA=Public Safety agency , SHO=Station house officer

Correlations:

Pearson product-moment correlation coefficients were calculated to examine the relationships among the variables (see Table 5). Moral injury was significantly positively correlated with psychological well-being, $r(181) = .34, p < .001$, and with religious coping, $r(181) = .26, p < .001$. Religious coping was also significantly positively correlated with psychological well-being, $r(181) = .25, p = .001$.

Table 3

*Pearson Correlations Among *tmids*, *tryfs*, and *rcope14* (N = 183)*

Variable	1	2	3
1. <i>tmids</i>	—	.34**	.26**
2. <i>tryfs</i>		—	.25**
3. <i>rcope</i>			—

Values are Pearson correlation coefficients (2-tailed).

$p < .01$. All correlations are statistically significant.

Simple Linear Regression:

A simple linear regression was conducted to examine whether moral injury (*tmids*) significantly predicts psychological well-being (*tryfs*) among Pakistani police personnel. The results revealed that the regression model was statistically significant, $F(1, 180) = 22.88, p$

< .001, indicating that moral injury accounts for a significant proportion of variance in psychological well-being.

The model explained approximately 11.3% of the variance in psychological well-being, $R^2 = .113$, with a moderate positive correlation between the predictor and outcome variable, $R = .336$. The unstandardized regression coefficient for moral injury was $B = 0.252$, $SE = 0.053$, suggesting that for each one-unit increase in moral injury, psychological well-being increased by 0.25 units. This effect was statistically significant, $t = 4.78$, $p < .001$. The standardized regression coefficient was $\beta = .336$, indicating a moderate effect size.

These findings suggest that higher levels of reported moral injury were unexpectedly associated with higher levels of psychological well-being in this sample. This counterintuitive result may be influenced by culturally specific coping mechanisms, the role of spiritual frameworks, or differences in the interpretation of moral injury in the Pakistani policing context.

Table 4

Model Summary of Regression Analysis

Model	R	R ²	Adjusted R ²	SE of Estimate
1	.336	.113	.108	16.80

Note; Predictor: *tmids*.

R = multiple correlation coefficient; R² = coefficient of determination; Adjusted R² = adjusted coefficient of determination; SE = standard error of the estimate.

Table 5

ANOVA Summary Table

Source	SS	df	MS	F	p
Regression	6457.74	1	6457.74	22.88	< .001
Residual	50808.05	180	282.27	--	--
Total	57265.79	181	--	--	--

Note; Dependent variable: *tryffs*. Predictor: *tmids*.

SS = sum of squares; df = degrees of freedom; MS = mean square; F = F-ratio; p = probability value.

Table 6

Coefficients for the Regression of tryffs on tmids

Predictor	B	SE	β	t	p
Constant	48.84	3.48	—	14.05	< .001
<i>tmids</i>	.25	.05	0.34	4.78	< .001

Note $N = [183]$. The dependent variable is *tryffs*.

B = unstandardized regression coefficient; SE = standard error; β = standardized regression coefficient; t = t-value; p = probability value.

Mediation Analysis:

A mediation analysis was conducted using Hayes’ PROCESS macro for SPSS (Model 4; Hayes, 2022) with 5,000 bootstrap samples and a 95% confidence interval to test whether religious coping mediates the relationship between moral injury and psychological well-being.

Path a (Moral Injury → Religious Coping)

Moral injury was found to significantly predict religious coping, $B = 0.05$, $SE = 0.02$, $t = 2.72$, $p = .007$, 95% CI [0.01, 0.08]. This indicates that individuals reporting higher levels of moral injury also reported significantly greater use of religious coping strategies.

Path b (Religious Coping → Psychological Well-Being)

However, religious coping did not significantly predict psychological well-being when controlling for moral injury, $B = -0.16$, $SE = 0.22$, $t = -0.70$, $p = .484$, 95% CI [-0.59, 0.28]. This suggests that religious coping was not a significant independent predictor of well-being in this model.

Direct Effect (Path c’: Moral Injury → Psychological Well-Being controlling for Religious Coping)

The direct effect of moral injury on psychological well-being remained statistically significant even after including religious coping in the model, $B = 0.26$, $SE = 0.05$, $t = 4.76$, $p < .001$, 95% CI [0.15, 0.36]. This implies that moral injury contributes to psychological well-being regardless of the level of religious coping.

Indirect Effect (Moral Injury → Religious Coping → Psychological Well-Being)

The indirect effect of moral injury on psychological well-being through religious coping was not statistically significant, $B = -0.01$, 95% CI [-0.03, 0.03]. Because the confidence interval includes zero, there is no evidence of mediation.

Table 7

Regression Analysis Predicting the Mediator (trcope) From the Independent Variable (tmids)

Predictor	B	SE	t	P	95% CI LL	95% CI UL
Constant	30.84	1.18	26.14	< .001	28.51	33.17
tmids	0.05	0.02	2.72	.007	0.01	0.08

Note. $R = .199$, $R^2 = .040$, $MSE = 32.24$, $F(1, 179) = 7.41$, $p = .007$.

B = unstandardized regression coefficient; SE = standard error; CI = confidence interval; LL = lower limit; UL = upper limit.

Table 8

Regression Analysis Predicting the Dependent Variable (tryffs) From the Independent Variable (tmids) and Mediator (trcope)

Predictor	B	SE	t	p	95% CI LL	95% CI UL
Constant	53.84	7.69	7.01	< .001	38.68	69.01
tmids	.26	.05	4.76	< .001	0.15	.36
trcope	-.16	.22	-.70	.484	-.59	.28

Note. $R = .336$, $R^2 = .113$, $MSE = 284.01$, $F(2, 178) = 11.34$, $p < .001$.

B = unstandardized regression coefficient; SE = standard error; CI = confidence interval; LL = lower limit; UL = upper limit.

Table 9

Direct and Indirect Effects of tmids on tryffs

Effect Type	Effect	SE	95% CI LL	95% CI UL	p
Direct	.26	.05	.15	.36	< .001
Indirect	-.01	.01	-.03	.03	

Bootstrap samples = 5000, 95% confidence interval used. Indirect effect via trope is not significant (CI includes zero).

Note. SE = standard error; CI = confidence interval; LL = lower limit; UL = upper limit.

Qualitative results:

To explore the lived experiences of moral injury among Pakistani police personnel, participants were asked to describe emotionally distressing events during their service that violated their moral values. Through thematic analysis of their open-ended responses, seven key themes were identified. These themes reflect the complex ethical challenges faced by officers and their emotional and psychological consequences. The following themes emerged from the data: moral violations and personal regret, integrity compromised by power and corruption, witnessing injustice without the power to act, regret Over missed compassion, struggles between justice and a flawed system, navigating ethical dilemmas in law enforcement, failure to prevent harm to the public, and pain from mob justice and public cruelty.

Moral Violation and Personal Regret:

This theme includes accounts where officers committed actions that conflicted with their moral or ethical values, often resulting in lasting guilt, shame, or regret. These incidents involved physical harm, negligence, bribery, and enabling criminal acts. Participants demonstrated an acute awareness of their moral failure, offering reflections on what should have been done differently. These moments illustrate how moral injury is not only caused by external injustice but also by one's own transgressions against internal moral standards.

P1 described an incident involving excessive force:

During duty, I assaulted a common citizen.

His head was severely injured by my blows.

I should have controlled myself to avoid harming the common citizen.

P2 shared a regretful account of an accidental shooting:

In the village, I had a minor verbal altercation with a man, and unintentionally, a shot was fired from me, which caused a fracture in his leg.

Seeing him in that mental state was the most painful aspect.

I should have taken him to the hospital.

P3 admitted to engaging in corrupt practices:

During a checkpoint duty, I took bribes from drivers, which was a violation of moral values.

I should have performed my duty with honesty.

P4 reflected on a serious ethical breach:

I, along with fellow soldiers, helped an arrested proclaimed offender, who had multiple cases against him, escape custody.

We betrayed our own integrity.

I wish I had not violated the law.

P5 also described an instance of corruption:

I released a pickpocket after taking a bribe. Moreover, I acted against the law and against ethical values.

One should not trade their integrity for money.

These narratives reveal the psychological and emotional burden that follows morally questionable behavior. The participants not only acknowledged the wrongdoing but also expressed profound remorse. Their responses underscore the essence of moral injury, the internal conflict and distress that result from violating deeply held moral beliefs, even when no external punishment is applied.

Integrity Compromised by Power and Corruption:

Participants described instances where they acted against their moral compass due to external pressures, such as political influence or internal corruption. This theme reflects how institutional dysfunction and hierarchical obedience often lead to moral compromise.

A senior officer took a bribe and allowed a local drug dealer to continue operating. The most painful part of the incident was that for the sake of a small amount of money, countless future generations are being destroyed.

When asked, "*What should you have done in this situation?*" the response was: "*I should have highlighted and reported the matter.*"

For instance, P6 painfully recalled:

I provided unnecessary privileges to a dacoit due to a recommendation... I ended up encouraging a criminal.

This quote highlights how personal morality can be undermined by loyalty to power structures, leaving lasting guilt. Similarly, P7 shared:

At the behest of a political person, an innocent person was beaten... I would not have made an unlawful recommendation.

Such accounts demonstrate the inner conflict between duty to authority and duty to justice, where choosing obedience over ethical action results in deep psychological distress, a hallmark of moral injury.

Witnessing Injustice Without the Power to Act:

A recurring thread was the trauma of witnessing corruption and injustice without being able to intervene. Officers expressed distress over observing offenders being released due to bribery, undermining their belief in law enforcement as a force for good.

P8 stated:

During duty, my colleague subjected a suspect to physical violence.

In response to the question, "*What was the most painful part of that moment for you?*" he said:

We should not take the law into our own hands.

When asked, "*What should you have done differently at that time?*" he replied:

I should have stopped my colleague.

P9 lamented:

I saw a drug dealer being given concessions and released... I should have opposed it in every possible way.

P10 similarly reported:

I saw a fellow officer release a murderer after taking a bribe... I should have opposed it with everything I had.

P11 stated:

During duty, there was a case involving a fight between two influential families. The more powerful party committed many injustices. The most



painful aspect at that time was that the law supports the powerful and not the accused.

When asked, *"What should you have done differently?"* he replied, *"Justice should have been served fairly, and no one should have been subjected to injustice."*

This kind of incident has occurred many times, with the latest one happening nine months ago.

P12 stated:

I saw a fellow colleague involved in dealing with an alcohol supplier.

In response to the question, *"What was the most painful part of the incident?"* he said, *"We, who are supposed to uphold the law, are ourselves violating it."*

He added, *"I should have reported him and morally boycotted his actions."*

P13 confessed that fellow colleagues misused their job authority to take fruit from a vendor without payment. When asked what the most painful aspect of the incident was, he said:

I should have either explained to my colleague the injustice being done to a poor laborer or paid for the fruit myself.

These responses expose the paralyzing impact of institutional rot, where officers are morally injured not just by their actions, but by their perceived helplessness and silence in the face of wrongdoing.

Regret Over Missed Compassion:

Moral injury was also experienced in deeply human, interpersonal moments, where the failure to act kindly or forgive left long-term emotional scars.

P14 recalled a personal moral failure:

During Ramadan... I had a bitter argument with a citizen, then I regretted that I could have forgiven him at iftar. This incident happened ten years ago, and it still stays with me.

This quote reflects the power of missed moral opportunities to create lasting regret, even outside formal duty contexts. Compassion denied, whether through inaction or compliance with rigid procedure, becomes a source of internal suffering.

P15 shared:

The suspect's family left disappointed after being denied the meeting... he could have been treated as a human being.

Such reflections indicate that moral injury isn't limited to major institutional failures; it can stem from everyday moments where one's values like empathy, dignity, and justice are compromised by professional norms.

Struggles Between Justice and a Flawed System:

Some officers shared how their moral efforts felt futile within a corrupt or apathetic system.

P16 said:

My honesty did not bring about any significant change... the powerful did not support good conduct.

This disillusionment speaks to moral exhaustion, the psychological toll of trying to act righteously in a system that punishes virtue and rewards wrongdoing. It raises concern over institutional betrayal, where the very organization meant to uphold justice becomes a source of moral dissonance.

Navigating Ethical Dilemmas in Law Enforcement:

Not all instances of moral struggle stemmed from wrongdoing; some arose from moral complexity in enforcing the law.



P17 described:

I stopped a traffic violator who later became a lifelong friend... I could have just given him a warning.

This reflects a conflict between legal enforcement and empathetic understanding, particularly when offenders come from disadvantaged backgrounds. Similarly, P18 supported a poor man in getting a license:

The painful part was that some violators are compelled by circumstances.

These reflections suggest that strict enforcement of the law often clashes with officers' human instincts to understand and help, a moral tightrope that, when crossed, can leave lasting emotional impact.

Failure to Prevent Harm to the Public:

Some officers reported moral injury related to their failure to protect the public due to noncompliance or lax enforcement.

P19 stated:

People do not follow traffic signals... I would have stood firm and made people follow them.

This regret points to a moral responsibility for public safety, a sense that the officer failed to prevent avoidable harm, leading to moral accountability for consequences beyond their direct control.

Pain from Mob Justice and Public Cruelty:

Finally, a few participants were troubled by excessive violence inflicted by civilians, with officers unable to intervene.

P20 stated that one day, while returning from duty, he came across a man who had met with an accident. No one was helping him; people were just watching. The most painful part of the incident, he said, was:

Everyone should have helped him out of basic humanity.

He added:

What affected me the most was that people were just watching and not offering any help. I picked him up and helped him reach the nearby hospital.

P21 stated that there had been a fight in the neighborhood. What was most painful for the residents was that a father was being beaten by his own children. In response to the question, "*What should you have done in this situation?*" he said:

No matter what the circumstances, children should never treat their parents that way.

P22 recounted:

People caught a thief and beat him so badly that his bones were broken... There should be restraint.

This suggests another form of moral injury being a witness to unlawful cruelty that one is powerless to stop, especially when the punishment far outweighs the crime. It raises questions about the role of law enforcement as moral arbiters in a society where mob justice often prevails.

Discussion

The present study was conducted to investigate the prevalence and interrelationships among moral injury, psychological well-being, and religious coping among Pakistani police personnel, using a cross-sectional mixed-methods approach. The quantitative component of this study oriented to explore four key objectives: to assess the prevalence of moral injury, psychological well-being, and religious support along with demographic characteristics; to



examine the relationship between moral injury and psychological well-being; to evaluate whether moral injury significantly predicts psychological well-being; and to determine whether religious coping mediates the relationship between moral injury and psychological well-being. Built on these objectives, three hypotheses were tested: that moral injury would significantly impact psychological well-being, that moral injury would significantly predict psychological well-being, and that religious support would mediate the relationship between moral injury and psychological well-being. Descriptive statistics discovered notable variance in moral injury, psychological well-being, and religious coping among the participants. Police personnel reported a wide range of moral injury scores, psychological well-being scores, and religious coping, suggesting diverse experiences and coping mechanisms within the police force. A positively skewed distribution of religious coping scores indicated that the most of officers relied heavily on religious strategies to deal with morally injurious experiences. Moreover, the wide age range and distribution of ranks, from Constables to Senior Officers, highlighted a sample with varying levels of contact to critical incidents and different organizational roles, enhancing the generalizability of the results within the Pakistani policing context.

Unexpectedly, the correlational analyses disclosed that moral injury was positively associated with psychological well-being. This finding was different to much of the existing Western literature, which consistently links moral injury to increased emotional distress, PTSD, depression, and impaired psychological functioning (Litz et al., 2009; Griffin et al., 2019). In stark contrast to these frameworks, the current findings suggest that in the cultural and religious context of Pakistani law enforcement, moral injury may coexist with or even contribute to enhanced psychological well-being. This paradox can be comprehended through several culturally informed lenses. First, in collectivistic societies like Pakistan, where spirituality, moral duty, and faith are profoundly embedded in personal and occupational identities, morally injurious experiences may be interpreted not only as sources of distress but also as tests of faith, after all contributing to a sense of growth, purpose, or moral fulfillment. Moral injury experiences may activate meaning-making processes through spiritual reflection, fostering resilience and adding to increased well-being despite psychological distress (Pargament, 2007). This adjusts with prior research on spirituality assisting post-traumatic growth and personal development (Tedeschi & Calhoun, 2004). In addition, the professional identity and moral commitment of law enforcement officers may encourage reframing moral challenges as tests of character and dedication, strengthening psychological resilience rather than decreasing well-being (Kim et al., 2018). Furthermore, the collectivist cultural context may provide strong social and community support networks that buffer the harmful effects of moral injury and promote adaptive coping strategies (Triandis, 1995). Police officers, especially those who experience moral pain as a consequence of fulfilling their professional obligations, may integrate such experiences into a larger moral framework that affirms rather than undermines their sense of self. Such integration may result in post-traumatic growth, a concept which describes how individuals can experience positive psychological changes as a consequence of struggling with profoundly challenging life circumstances (Tedeschi & Calhoun, 2004). It is acceptable that many officers in the present sample were able to reframe moral suffering as meaningful or redemptive, especially when grounded in spiritual or moral worldviews, thus resulting in unexpectedly higher psychological well-being. This expectation is reinforced by narrative identity theory, which suggests that people construct logical life stories out of their most painful experiences; when those stories comprise themes of resilience, spirituality, and redemption, they may be



associated with improved well-being (McAdams, 2001). Additionally, it is important to consider the influence of social desirability and response bias in this context. Within a rigid hierarchical system like the police, where stoicism are culturally valued, participants may have underreported mental distress or overreported well-being to maintain a socially satisfactory image of strength and composure.

To further test the predictive value of moral injury, a simple linear regression was conducted, and the results indicated that moral injury was a significant predictor of psychological well-being. The model accounted for 11.3% of the variance in psychological well-being, and the regression coefficient for moral injury was positive and statistically significant. This finding confirmed the second hypothesis and further supported the surprising observation that higher reported levels of moral injury were associated with greater psychological well-being. Again, this runs counter to conventional psychological expectations but aligns with culturally particular interpretations of moral pain. In the context of Pakistani police officers, many of whom work under prolonged stress, high-risk responsibilities, and moral ambiguity, experiencing moral injury might serve to heighten moral reflection, reinforce spiritual or ethical belief, or affirm a sense of moral vigilance and professional purpose. Similar patterns have been noted in studies of military and healthcare professionals, where moral injury, when refined through spirituality or meaning-making frameworks, can promote post-traumatic growth and renewed purpose rather than decline (Currier et al., 2017; Wortmann et al., 2019). These outcomes could boost self-acceptance, religious meaning, and psychological stability. Supporting this, Bryan et al. (2021) found that the presence of meaning in life buffered the negative mental effects of moral injury among veterans, while Carey et al. (2023) reported that religious well-being significantly reduced moral injury symptoms in healthcare workers. Furthermore, officers may explain moral challenges not as internal moral failings but as reflections of external injustices, which, when viewed through a lens of spiritual fatalism, may result in resilience rather than psychological decline. This perspective is strengthened by evidence that spiritually integrated coping and self-compassion can change moral suffering into moral growth and professional calling (Rogers et al., 2023; Wild et al., 2025).

The third hypothesis, that religious coping mediates the relationship between moral injury and psychological well-being was not supported by the mediation analysis, despite partial support in one path of the model. Specifically, in the first stage of the mediation model (Path a), moral injury significantly predicted religious coping, indicating that police personnel who revealed higher levels of moral injury were more likely to engage in religious coping strategies. This finding aligns with the cultural context of Pakistan, where religion is profoundly embedded in both personal and collective identity. Given that spiritual rituals, prayer, and spiritual reflection are frequently turned to during moments of moral conflict, it is not unexpected that individuals experiencing moral distress also reported greater dependence on religious coping (Pargament, 1997). This pattern suggests that spiritual frameworks remain prominent when police officers are trying to make sense of morally injurious events, maybe as a way to seek forgiveness, reframe the experience as a trial of faith, or find strength in religious duty (Ai et al., 2013).

However, the second part of the mediation model (Path b) which assessed whether religious coping predicted psychological well-being when controlling for moral injury was not statistically significant. This outcome suggests that although religious coping is commonly used, it did not directly contribute to higher psychological well-being in this sample. Accordingly, the indirect effect of moral injury on psychological well-being through



religious coping was also non-significant, with the confidence interval including zero, confirming the absence of mediation. This pattern of consequences indicates that religious coping, while present, did not serve as a mechanism explaining how moral injury leads to better psychological well-being. In other words, the relationship between moral injury and psychological well-being does not go through the pathway of religious coping, even though both are individually associated with moral injury (Carey et al., 2023).

Various interpretations may account for this unexpected finding. First, the Brief RCOPE used in this study contains both positive (e.g., seeking comfort from God, trusting divine purpose) and negative (e.g., feeling punished by God, spiritual discontent) religious coping strategies. These contrastive subcomponents might have neutralised each other in their impact on psychological well-being when analyzed as a total score, covering their individual effects. It is possible that some officers benefited psychologically from spiritual practices, while others experienced remorse, confusion, or alienation, leading to no overall mediating effect (Pargament et al., 2011).

Secondly, religious coping may not use as a bridge linking moral injury to well-being, but rather as a background process used to manage stress in general but not specifically transforming the impact of moral distress into well-being. In other words, while moral injury triggers religious coping, that coping may not instantly influence emotional outcomes unless accompanied by deeper religious meaning-making, community support, or ritualized healing processes (Currier et al., 2017).

In conclusion, the mediation analysis gives a complex picture. While moral injury significantly prompted greater use of religious coping strategies, these coping strategies did not, in turn, enhance psychological well-being. This partial support for the mediation model suggests that religious coping is not the explanatory link between moral injury and well-being in this context. However, its existence in response to moral injury signals its relevance in how individuals participate with and make sense of moral pain. This underscores the need for future research to investigate how spiritual coping is used, whether it is meditative and adaptive, or shaming and isolating and to consider wide models of spiritual meaning-making, moral repair, and cultural myths that might best account for the relationship between moral injury and well-being. The contradiction between statistical outcomes and theoretical expectations also points out a limitation in applying Western statistical mediation models to non-Western, religio-centered environments. In future research, varied analytical models such as moderated mediation or longitudinal designs could better capture these complex interactions (Koenig, 2020).

Through the thematic analysis, seven key themes were identified: moral violations and personal regret, integrity compromised by power and corruption, witnessing injustice without the power to act, regret over missed compassion, struggles between justice and a flawed system, navigating ethical dilemmas in law enforcement, failure to prevent harm to the public, and pain from mob justice and public cruelty. Together, these themes emphasize not only the generality of moral injury as conceptualized in international literature, but also the culturally unique manifestations shaped by Pakistan's socio-political and institutional context.

One of the powerful themes was officers' reflections on personal wrongdoing, such as overusing of force, accepting bribes, or assisting criminals. These narratives demonstrated intense guilt, shame, and a sense of moral failure. Participants' statements such as "I should have controlled myself" or "I betrayed my integrity" echo the illustration of moral injury offered by Litz et al. (2009), who defined it as the permanent psychological, social, and



spiritual harm resulting from actions that breach one's deeply held moral beliefs. The officers' regret illustrates the self-condemnation and inner tension at the core of moral injury. This theme relates with international research on soldiers and first responders, where moral injury often arises from acts of commission, such as harming civilians or failing to maintain ethical codes (Griffin et al., 2019). Importantly, even when no judicial punishment was imposed, the officers' psychological burden persisted, underscoring that moral injury is mainly self-imposed through conscience rather than externally enforced. In cultural contexts like Pakistan, where religion and morality are interconnected, such regret may be exaggerated, as actions perceived as evil are also viewed as spiritual failings (Kamran & Nawaz, 2020). Research also shows that unsolved guilt from moral transgressions can lead to prolonged stress, depression, and even suicidality among law enforcement officers (Papazoglou & Andersen, 2014). The accounts in this study reveal the intersection of personal responsibility and systemic weakness, as many officers regretted decisions made under pressure, yet still carried complete accountability for them. These findings emphasize the urgent need for ethical training, peer support, and safe spaces where officers can process their guilt positively.

A dominant theme was officers' moral injury caused by compromising their integrity due to political or institutional pressure. Several participants reported being forced to obey illegal orders, provide privileges to criminals, or mistreat innocents under the power of powerful actors. Such experiences arrange with Shay's (1994) notion of "betrayal by leadership", where moral injury occurs when authority figures demand actions that breach ethical values. Officers in this study expressed guilt and distress for obeying with corrupt demands, even when refusal might have led to individual risk or career setbacks. Their reflections, such as "I should have reported the matter" or "I encouraged a criminal," exemplify the psychological burden of forced collaboration. This theme reflects the broad reality that individual morals are often constrained by institutional dysfunction. Studies of moral injury in policing show that officers often face dilemmas where compliance with authority conflicts with justice, and choosing organizational loyalty often results in long-term psychological suffering (Williamson et al., 2020). In Pakistan, where police are simultaneously expected to defend justice and serve political elites, this dual pressure increases moral distress. These findings suggest that reducing moral injury requires not only individual resilience but also general reform to reduce corruption and protect ethical officers.

Another prominent theme was the trauma of witnessing wrongdoing, such as colleagues taking bribes or abusing suspects, while being powerless to interfere. Officers described frustration, helplessness, and a sense of guilt through silence. This reflects the concept of moral injury by omission, where failure to stop harm creates permanent guilt (Litz & Kerig, 2019). Research indicates that witnessing dishonorable behavior without agency can be as psychologically harmful as direct participation (Molendijk, 2018). In contexts where corruption is widespread, silence often becomes a survival strategy, yet it leaves officers ethically wounded. The statement "law supports the powerful and not the accused" illustrates how organizational betrayal deepens this distress. Similar findings among military personnel show that being unable to stop corrupt acts committed by peers produces long-term moral injury and distrust of institutions (Bryan et al., 2016). In Pakistan's policing context, this helplessness is further strengthened by socio-political realities, where resistance to corruption may result in punishment (Abbas, 2019).

While many accounts focused on organizational and systemic failures, several officers pointed out moral injury arising from personal failures of empathy. Examples included refusing to forgive a citizen during Ramadan or restricting visitation to a suspect's family.



These narratives highlight that moral injury stretches beyond corruption and violence to include omissions of kindness. Currier et al. (2019) argue that moral injury often originates from moments where individuals feel they failed to live up to their moral ideals, particularly in interpersonal contexts. In religiously oriented societies like Pakistan, compassion, forgiveness, and hospitality are not just individual virtues but cultural and religious requirements (Koenig et al., 2018). Thus, failing to act mercifully may carry heavier moral and spiritual consequences. These findings broaden the understanding of moral injury by demonstrating that it can appear in everyday policing interactions, not just surpassing crises. This underscores the value of training officers in empathy and emotional regulation, so that moments of missed sympathy are reduced and officers feel more aligned with their values.

Several officers expressed disappointment at being unable to create change despite acting with honesty and integrity. Their reflections discovered a sense of moral exhaustion from working within a corrupt and apathetic system. This aligns with research on organizational betrayal, where organizations fail to uphold the values they claim to stand for, leading to deep mental harm (Smith & Freyd, 2013). In policing contexts, studies have shown that when moral behavior is punished and corruption rewarded, officers often experience cynicism, withdrawal, and burnout (Punch, 2009). The officers' statements "my honesty did not bring change" reflect the inefficiency of trying to uphold justice in an environment that systemically weakens it. This theme highlights that moral injury in Pakistani policing is not just about personal actions but about systemic structures that sustain corruption. Addressing moral injury therefore requires institutional accountability and reforms that protect officers who act with unity, ensuring they are not punished for ethical behavior.

Not all moral struggles stemmed from wrongdoing, some arose from directing ambiguous ethical dilemmas. Officers described moral conflict in situations where lawful enforcement clashed with empathy, such as punishing poor offenders or issuing harsh penalties despite relieving circumstances. Research shows that frontline police officers worldwide face quasi dilemmas where strict adherence to the law may contradict compassionate impulses (Bonner, 2019). These recurring ethical conflicts can lead to moral remainder, the lasting unease after difficult decisions (Epstein & Hamric, 2009). For Pakistani officers, these dilemmas are intensified by universal poverty and lack of social safety nets, where minor contravention are often driven by need rather than evil. These findings suggest that moral injury is not always about wrongdoing but can also appear from the complexity of justice itself, where officers feel they cannot fully adjust duty and compassion. Providing officers with training in ethical decision-making and liberty may reduce the long-term moral burden of such choices.

Some officers reported moral injury emerging from perceived failures to protect the public, such as tense enforcement of traffic rules or inability to prevent avoidable harm. These narratives highlight the theme of excessive-responsibility, where individuals internalize blame for negative outcomes beyond their control (Koenig et al., 2018). Research on first responders shows that moral injury often rises up when individuals feel they failed in their protective role, even when situations were beyond their capacity (Smith & Freyd, 2013). This theme underscores that moral injury can arise not only from wrongful acts but also from perceived insufficiency in fulfilling occupational responsibilities, reflecting the high moral expectations officers place upon themselves.

Finally, officers exhibited distress from witnessing mob violence, cruelty, and public apathy. Examples included communities beating thieves or viewers refusing to help accident victims. These experiences exemplify the vicarious dimension of moral injury, where



witnessing inhumanity without being able to interfere causes moral dissonance. Research in post-conflict societies shows that observing cruelty and being powerless to stop it can profoundly wound moral identity (Bryan et al., 2016). In Pakistan, where mob justice is a common consequence to sick judicial systems (Abbas, 2019), police officers are often caught between cultural practices of nemesis punishment and their professional duty to uphold the law. This theme raises important questions about the dual role of police as both agents of the state and moral mediators of society. Officers' distress at social cruelty shows that moral injury is not only shaped by institutions but also by community behaviors.

Overall, the qualitative findings uncover that moral injury among Pakistani police personnel is multidimensional, it arises from individual moral transgressions, systemic corruption, organizational betrayal, missed mercy, ethical dilemmas, and societal inhuman treatment. The results suggest that addressing moral injury in policing need both individual-level interventions (counseling, peer support, spiritual coping strategies) and structural changes (anti-corruption measures, and public teaching against mob justice). Only through a cooperative approach can the psychological well-being of officers be safeguarded and the honesty of the policing system be strengthened.

Limitations:

This study has some important limitations to keep in mind. First, because the data was collected at one point in time (cross-sectional), we can't be sure about cause and effect between moral injury, religious coping, and psychological well-being. Second, the study used convenience sampling and only included Pakistani police officers, so the results might not apply to other groups or countries. Third, the information was based on self-reports, and participants might have given socially acceptable answers instead of being completely honest, particularly since mental health can be a sensitive topic. Also, since religious coping did not show a strong role in explaining how moral injury affects well-being, there may be other important factors we didn't measure. Lastly, the qualitative responses came only from a small open-ended section and may not fully represent all experiences of moral injury.

Implications:

The study shows that moral injury affects psychological well-being in complex ways, particularly in the cultural context of Pakistani police officers. Interestingly, moral injury might lead to positive outcomes like personal growth or reflection, rather than just distress. This means mental health programs for police officers should consider cultural values and spirituality as strengths, not just focus on problems. Since religious coping is a common way officers deal with moral injury, supporting spiritual resources could make mental health support more effective and relevant for them.

Recommendations for Future Research:

Future studies should collect data over time to better understand how moral injury and well-being influence each other. It would also be helpful to study police officers from other countries or different jobs to see if these findings hold true in other places. Researchers should look into other factors like social support or different coping methods that might explain how moral injury impacts well-being. More detailed interviews or group discussions could give a deeper understanding of police officers' experiences with moral injury. Lastly, testing mental health programs that include spiritual support could help find better ways to assist officers dealing with moral injury.

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