

Combat Trauma after the Afghanistan War: An Analysis of the Need to Care for  
Canadian Soldiers through the Framework of Preference Ethics

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## Table of Contents

Part I Introduction .....	3
Part II Analysis .....	10
Background.....	10
Preference Utilitarian Ethical Framework .....	13
Arguments for Preference Utilitarianism.....	16
Arguments against Preference Utilitarianism .....	19
Arguments for Military and Government Moral Ethical Obligations .....	22
Part III Recommendations .....	25
The Policy Making Process .....	25
Understanding other Ethical Positions.....	26
Understanding Historical Elements .....	27
Understanding Opposing Political Values .....	28
The Need for Spiritual Resilience.....	31
Part IV Conclusion.....	33
Works Cited .....	38

## Part I Introduction

The mental-health struggles of Canadian soldiers returning from the Afghanistan war have recently caught a lot of political attention. A Mental Health survey released in 2013 has determined that the rate of post-traumatic stress disorder among members of the Canadian Armed Forces (CAF) has nearly doubled since 2002 (Statistics Canada; The Globe and Mail). Julian Fantino, a retired police official, was recently forced out of his role as minister for Veteran Affairs Canada (VAC). This was as a result of numerous public complaints about his inability to effectively provide adequate healthcare to veterans. Mr. O'Toole, a retired Air Force officer in the Canadian military, was appointed Minister of Veterans Affairs in January 2015. Mr. O'Toole replaced Mr. Fantino who faced repeated opposition calls for his resignation or firing in the fall over his handling of the Veterans Affairs portfolio (CBC News, Jan 2015). The Veteran Affairs department has faced much criticism from some veterans because of the decision to close regional offices and for a lack of support for veterans with mental illness.

Soldiers unable to function within the military due to mental illness do not have sufficient funds to care for themselves and their families after military service. According to Canadian military policy, soldiers who cannot achieve universality of service as per regulation DAOD 5023-0, must be dismissed. Natyncyck, the previous Chief of the Defence Staff, established a comprehensive approach to alleviate struggles of military families and soldiers suffering with combat stresses (Natyncyck 6). This endeavour to alleviate suffering families requires a Department of National Defence (DND), and a Government of Canada (GOC) commitment, through effective public policies and a well-integrated multi-disciplinary team of health professionals. However this comprehensive necessity has received much criticism ranging from long wait times for mental health services to limited numbers of mental health-care workers.

This essay analyzes policies and procedures that DND, CAF and GOC used in the care for soldiers suffering from mental issues as concerns the horrors of war. The Canadian Mental Health Association (CMHA) is the only association in Canada that addresses all aspects of mental health and mental illness (Canadian Mental Health Association). This is done by the promotion and advocacy of other policymakers, mental health consumers and their families, educators, the media, stakeholders and other service providers. CMHA's National office influences public policy at the federal level with a multi-faceted approach that includes involvement with government officials and politicians. Briefs and presentations are submitted to Standing Committees on Finance, Health, Human Resources Justice and DND.

There are military procedures intended to aid veterans with mental and other health issues. The military has established a comprehensive procedural approach designed to care for not only CAF ill and injured members but their families also (Natynczyk 4). This procedural approach stems out of the 1998 Standing Committee on National Defence and Veterans Affairs that stated in its report on quality of life in the CF that the nation has a moral commitment to military personnel in recognition of the sacrifices they make and the services they render, a commitment based on five concrete principles, one of which specifically concerns ill and injured military personnel (Natynczyk 4). This comprehensive framework organizes the programs and services offered to CAF ill and injured members and their families into an integrated system of care that ensures they receive the care and support they require through the successive phases of recovery, rehabilitation, and reintegration (Natynczyk 4). Through this comprehensive approach, "the mental health and well-being of military members and their families remains a top priority for the Canadian Armed Forces" (Lawson). Tom Lawson, the current Chief of the Defence Staff, "is responsible for ensuring that military families are well supported and are able to lead positive,

nurturing family lives comparable to other Canadian families” (Lawson). But there are still problems in the execution of this comprehensive approach.

A major problem as concerns the mental health-care of veterans is the lack of adequate mental health personnel required to perform necessary services. Veterans are soldiers who have served in CAF for at least two years. The military Ombudsman’s extensive research on Canadian soldiers and their families, *Fortitude Under Fatigue* (report), has an over-arching observation that while the CAF’s capacity to meet the Post Traumatic Stress Disorder (PTSD)/Operational Stress Injury (OSI) challenge is functioning, it is doing so largely due to the determination and commitment of the mental health providers who continue to deliver quality frontline care despite being severely overburdened and operating in difficult professional environments (Daigle 2). The function of caring for veterans is clearly strained. An important question arises: Do the Canadian Armed Forces and the Federal Government of Canada have a moral ethical mandate to care for its soldiers who return from war with combat trauma?

In this paper I will argue that the Canadian military has a moral ethical mandate to provide comprehensive mental health care for its soldiers. This mandate stems from the legal and moral requirements that the CAF and Canadian Government are obligated to offer mental health services to veterans. One such legal requirement is that contained in the *Canada Health Act*.

Under the *Canada Health Act*, all residents of a province, including veterans, are entitled to receive health services, including mental health care, under the terms of their provincial or territorial health care plan (Office of the Auditor General 2). For eligible veterans, the Department pays for various services not covered by provincial health plans. These mental healthcare services can include specialized psychological care, residential treatment, and some

prescribed medications. These mental health services are intended to enhance the well-being of veterans, promote independence, and ensure continued care.

Another legal requirement for offering mental health services to veterans is as expressed in *The Constitution Act* by the placement of overall responsibility upon the Federal Government for providing medical care to Canadian military members (Government of Canada).

A recent legal mandate, Bill C-58 was introduced in the House of Commons on 30 March 2015, by Minister of Veteran Affairs as an Act to amend the Canadian Forces Members and Veterans Re-establishment and Compensation Act and to make consequential amendments to another Act (Support for Veterans and Their Families Act). Bill C-58 is intended to establish and improve the following:

- “a) a transition process of Canadian Forces members and veterans to civilian life by allowing the Minister of Veterans Affairs to make decisions in respect of applications made by those members for services, assistance and compensation under the Act before their release from the Canadian Forces and to provide members and veterans with information and guidance before and after their release;
- b) retirement income security benefit to provide eligible veterans and survivors with a continued financial benefit after the age of 65 years;
- c) critical injury benefit to provide eligible Canadian Forces members and veterans with lump-sum compensation for severe, sudden and traumatic injuries or acute diseases that are service related, regardless of whether they result in permanent disability;
- d) family caregiver relief benefit to provide eligible veterans who require a high level of ongoing

care from an informal caregiver with an annual grant to recognize that caregiver's support" (Parliament of Canada).

In this paper, my main focus will be predominantly on soldiers who return from war with combat trauma. Combat trauma and the mental struggles one endures are enigmatic and painful. Shay narrates several narratives regarding a "soldier's wanderings and troubles" as they attempt to integrate into lifestyles at home upon return from war (Shay 2). Shay concludes that "recovery from psychological injuries ... whether (it) occurs spontaneously or in a defined treatment setting, *recovery happens only in community*" (Italics original, Shay 4).

This study will be done through the lens of preference utilitarianism. Preference Utilitarianism is a doctrine that posits that the moral value of any action is determined by the subjective preferences of the affected. Goodin notes that when used to inform public policy, preference utilitarianism is an ethical theory that "purports to provide a complete political theory, a complete normative guide for the conduct of public affairs" (Goodin 4). This approach is intended to facilitate in the evaluation of the comprehensive care plan that is now in the public domain. This comprehensive approach to care calls upon all current mental healthcare systems of support to serve a common objective, and takes into account all phases of treatment and rehabilitation – from the onset of illness or injury to the return to work. (Natynczyk 3).

The following research hypotheses provide a basis for analysis through the preference utilitarian ethical framework:

- I. Moral ethics are principles on which our moral decisions are based (Tiwari and Mehrotra 24). This encompasses the measurement by which a human being is graded as being good, bad and evil.

II. Moral ethical issues are those which pertain to a specific kind of situation. They are acts that affect other people.

III. Moral ethical issues are those with the potential to help or harm others or ourselves.

The methodological approach undertaken in this Research Paper is Content Analysis.

Content analysis refers to a general set of techniques useful for analysing and understanding various texts such as newspapers, books, and journals. This embraces a qualitative type research that Leedy and Ormrod define as one that involves a detailed examination of the contents of material for the purpose of identifying patterns, themes, or biases (Leedy and Ormrod 144). The material to be examined includes books, newspapers and journals that identify Canadian public policy patterns of care for soldiers returning home from war. The analysis includes studies on proponents and opponents of preference utilitarianism as well as advocates for and against a moral ethical obligation of governmental institutions to care for their veterans.

The main purpose of this essay is to contribute to ethical dialogues within the military through the Defence Ethics Programme (DEP). The ethical culture of the CAF and DND is a complex relationship between Canadian military, Public Service and societal ethics. This is because the CAF and DND are integral parts of our democratic society and must reflect its values (Baril and Fréchette). Also by its nature, national defence involves the controlled use of military force for justifiable cause. Therefore, to best ensure ethical decision-making and integrity within these diverse requirements, the need to develop a structured and visible approach to ethics is strongly endorsed by CF and DND senior leadership (Baril and Fréchette). The main objective of the DEP is to ensure that members of the CF and employees of DND perform their duties to the highest ethical standards. DEP therefore provides the focus, framework and processes necessary to guide, assess and continuously improve the ethical conduct of CF

personnel and of DND employees. The DEP framework includes an articulation of a clearly defined ethics culture, which includes an ethics vision, values and policies. The DEP ethics process includes the following:

- “ a) a clear communication of ethics policy, expectations and guidance;
- b) a clear requirement for leadership commitment, example and program participation, along with a means for leaders to assess organizational ethical risk;
- c) a motivational strategy that provides for incentives, program awareness, ethics training, individual self-learning, and opportunities for ethics discussion and open dialogue;
- d) a range of tools to assist personnel in recognizing ethical situations, risk assessment, and ethical decision-making;
- e) an effective and flexible range of options for moral protest, consistent with varying ethical situations and circumstances;
- f) an effective and flexible range of options for ethical censure to provide for prompt resolution of ethical concerns, consistent with varying ethical situations and circumstances, and consistent with the chain of command;
- g) effective measurement mechanisms, to monitor program effectiveness and identify program improvement opportunities” (Baril and Fréchette).

There is much literature on work-related situational ethics in the military but not much scholarly work exists on ethical dilemmas concerning combat trauma amongst veterans. It is hoped that this paper will contribute to the ethical dilemmas surrounding combat trauma and how

the military and government can effectively provide guidance, especially in the policy-making process and procedural frameworks.

This paper also elucidates the important role of the Royal Canadian Chaplain Service who as First-Responders, provide spiritual resiliency support to soldiers during and even after combat. Chaplains are trained religious and spiritual caregivers who contribute significantly to the spiritual and mental well-being of CAF members and their families (Lawson, 50). Chaplains are charged with ministering to soldiers by offering perspective, moral encouragement and hope to those who have returned to Canada, many of who suffer from Post Traumatic Stress Disorder (Marshall).

Aside from offering chapel services, Chaplains are also available, to all soldiers, on-call 24 hours / 7 days a week to support members in need and provide spiritual resiliency support. Chaplains also offer advice to the Chain of Command and other care providers which means that they do inadvertently provide counsel to the policy making process.

## Part II Analysis

### Background

Canada's military role in Afghanistan began in late 2001 with a few soldiers from the Joint Task Force 2 (JTF2). In 2006, 2500 troops were deployed to Kandahar. Reasons to engage in the war were justified, by the military, by the following reasons: defence of Canada's national interests; ensure Canadian international leadership and help the Afghanistan people rebuild their country with democratic ideals. More troops were officially deployed until March 2014 when combat operations were formally concluded. Upon return to Canada, many soldiers came back

affected mentally by the horrors of war. Brian Stewart, a Canadian Broadcaster in a national telecast maintains that military planners have been slow to confront mental problems of Afghanistan war veterans . Stewart reports on the Canadian military's ignorance of the PTSD "epidemic" amongst soldiers that came back home (Stewart). Stewart insists aside from the rise in suicides of military members, there is a growing public perception that the Stephen Harper government has not cared enough during a period of budget cutting and restraint about the well-being and morale of former soldiers, many of whom suffer from the debilitating effects of trauma, including PTSD (post-traumatic stress disorder). Stewart also suggests that Hillier, a former Chief of Defence Staff noted that this perception could quickly become reality, which would be an ominous turnaround for Conservatives who always claimed a pro-military aura. Stewart cites Hillier on the government's current care of veterans: "This is beyond the medical issue ... I think that many of our young men and women have lost confidence in our country to support them" (Stewart).

Stewart also maintains that bureaucratic turf wars and budgetary feuds seem to have delayed the hiring of needed psychiatrists and mental health professionals. The Canadian government is only now scrambling to hire an extra 54 specialists that the Defence Department called for almost 11 years ago (Stewart). The delay in so critical an area seems due not to a shortage of funds, for the government set aside \$11 million, but rather a reluctance to hire during a period when deficit-fighting ruled the bureaucratic mindset. For several years now, DND has, to please the government, spent several billion dollars less than it has been granted by Parliament (Stewart). The government has underspent \$10 billion over the past three years to help meet deficit reduction targets.

Stewart's use of the term "epidemic" in his CBC report, *Why Ottawa ignored the military's PTSD epidemic*, to suggest that the current government has ignored veterans' mental health issues, seems alarming. But there is statistical evidence by the Veterans Transition Network program that offers the following statistics from a survey on Transition to Civilian Life conducted on veterans' (including 40,000 Canadian men and women who recently returned from Afghanistan):

- 1) Over 40% still have difficulty adjusting to civilian life up to 10 years after returning home, including low job satisfaction and feeling disengaged from their communities.
- 2) 2 in 3 have poor health-related quality of life as a result of 4-6 diagnosed physical and mental conditions ranging from injuries to major depression.
- 3) 1 in 2 are unable to emotionally connect to (their) loved ones, families, and friends they had before serving, leaving them isolated (Veterans Transition Network).

It is important to note that the CAF has established a Code of Values and Ethics that offers a "comprehensive values-based programme" that applies "the highest ethical standards" when soldiers are at home and abroad (Department of National Defence and Canadian Forces, 3). This comprehensive approach "calls upon all current systems of support to serve a common objective, and takes into account all phases of treatment and rehabilitation – from the onset of illness or injury to the return to work" (Natynczyk 3). The effectiveness of this approach has been subject to debate. I work as Chaplain in the Canadian Armed Forces and have dealt with soldiers who do not want to identify themselves as being mentally ill due to the duty-bound culture within the

military. Rennick avers that this highly structured and duty-bound culture places military personnel in a dangerous double bind where they are both stressed and somewhat limited in terms of their outlets for stress relief (Rennick). In this duty-bound culture, soldiers are afraid of being stigmatized as weak. The tendency among soldiers to stigmatize and humiliate those considered weak is highlighted in a March 2003 report of the Office of the Military Ombudsman into a complaint that one of several parade floats entered into the pre-Grey Cup celebration of the 2 PPCLI in November 2002 mocked soldiers under treatment for operational stress injuries (Rennick). Rennick also notes that the investigation concluded that the float prepared by one Company portrayed a mythical “Crazy Train”, a local derogatory reference to members of the Regiment suffering from operational stress injuries. More seriously, the investigation found that the float was part of the ongoing stigmatization of soldiers being treated for operational stress injuries (those that take the train) as being malingerers and fakers trying to escape their duties (Rennick).

#### Preference Utilitarian Ethical Framework

Classical utilitarian ethics espouse right actions as those that maximize pleasure and minimize pain. Utilitarian ethics focuses on maximizing overall utility (happiness). Preference utilitarianism is a subset of this doctrine and suggests that the moral value of any action is to be determined by the subjective preferences of the affected. But what are subjective preferences? In preference utilitarianism, preferences are not necessarily sensational but rather a state of affairs, such as accomplishing a common goal. That implies that an agent morally ought to perform an act if and only if that act maximizes desire satisfaction of preference fulfillment, regardless of whether the act causes sensations of pleasure.

Preference utilitarians are often criticized because some preferences are misinformed, outlandish or even trivial. This implies that certain preferences are not necessarily good. However, preference utilitarians respond by suggesting that limiting preferences that make something good is essential. This is argued by providing references to informed desires that do not disappear after therapy (Brandt). Nonetheless, this does not resolve substantive assumptions about which preferences are for good things.

Like all different versions of utilitarianism, this ethical theory subscribes to consequentialism, the ethical position that the rightness of actions must be judged exclusively by the goodness of their consequences (Pattanaik 324). Preference utilitarianism can therefore be distinguished by its acknowledgement that every person's or business entity's experience of satisfaction is unique. But how does one maximize the unique aspect of this experience of satisfaction?

The maximization of the unique experience of satisfaction can be understood by a critical analysis of Harsanyi's use of descriptive social science on the basis of rational behavior of society and individuals. Like John Rawls, Harsanyi introduces "the ideal of considering the choice of an ethical criterion in a hypothetical situation where individuals do not know who they are or what their interests will be" (Harsanyi, *Essays on Ethics*, foreword). Harsanyi uses utility theory to develop two axiomatizations of utilitarian rules that Weymark concludes as "Harsanyi's Aggregation Theorem" and "Harsanyi's Impartial Observer Theorem" (Weymark 255). Both of these theorems assume that there is a single profile of individual preference orderings and a single social preference ordering of a set of social alternatives (Weymark 255). In the Aggregation Theorem, Harsanyi assumes that individual and social preferences satisfy the expected utility axioms represented by Neumann-Morgenstern utility functions (Weymark 255).

With an addition of a Pareto condition, Harsanyi demonstrates that the social utility function is an affine combination of the individual utility functions. That implies that to maximize a person's or business entity's experience of unique satisfaction, one must consider social utility as a weighted sum of individual utilities once the origin of the social function is suitably normalized (Weymark 255). In Harsanyi's Impartial Observer Theorem, Harsanyi introduces a hypothetical observer who chooses alternatives based on a sympathetic yet impartial concern for the interests of all members of society. Harsanyi then assumes the impartial observer has preferences over these hypothetical alternatives that satisfy the utility axioms. Harsanyi concludes that one's choice of alternatives can be ranked by their average (over members of society) utility (Weymark 256). It is important to note here that Harsanyi's contribution has generated a lot of controversy. This is because Harsanyi often states his assumptions and theorems imprecisely and he also uses unstated assumptions in his proofs (Weymark 255).

For preference utilitarians, a criterion of right implies that it is not morally right to use the principle of utility as a decision procedure in cases whereby it is impossible to maximize utility in the calculation of utilities before acting. Preference utilitarians argue that most people stay away from calculating utilities because serious miscalculations will force them to perform actions that reduce utility. It is therefore possible for agents to follow their moral intuitions since these intuitions can help one to maximize utility, especially in likely circumstances (Hare 46-47).

Preference Utilitarians don't advocate for countries to launch into war unless the war is to be a success in uniquely optimizing the greatest pleasure. Happiness is therefore assumed to be essential in the care of returning soldiers attempting to reintegrate with the Canadian society.

The preference utilitarian ethical approach can be measured on items that uniquely lead to the greatest good for the greatest number. The approach assesses an action in terms of its

consequences or outcomes. This means that the net benefits and costs to all stakeholders on an individual level are taken into account. As regards the mental healthcare for soldiers it is vital to note that the stakeholders include family members, friends and even Canadian taxpayers.

### Arguments for Preference Utilitarianism

There are benefits to the use of this theoretical ethical framework in an analysis of mental healthcare of soldiers. Singer offers a preference utilitarianism that fulfills the interests of those involved, in this case, the CAF soldiers, the CAF military leadership, the government of Canada, the military, VAC, DND, various civilian stakeholders such as the Military Family Resources Centre (MFRC), private counsellors mandated by CAF, and the rest of the Canadian community that pays taxes to fund military interventions such as Afghanistan. Singer also insists that practical ethics in the public sphere requires one to weigh up all interests and “adopt the course of action most likely to maximize the interests of those affected” (Singer 13). Singer continues to argue that we are morally required to change our lives as a way of increasing overall utility.

Hare, also a preference utilitarian, maintains that individuals continue to wrestle with moral conflicts at two levels, the intuitive and the critical (Hare 25). Individuals struggle to make moral ethical decisions at the public level. A moral dilemma exists when a person attempts to make a public choice as to a private one because of the reduction of interpersonal comparisons to intrapersonal ones (Paden 361).

As concerns the policy-making processes of mental healthcare, the military and Canadian government comprise of individuals at the leadership level, who may not necessarily hold identical moral and ethical viewpoints. This implies that individuals responsible for making mental healthcare public may be prone to wrestle with moral conflicts at two levels, their own intuitive moral ethical values and those publicly espoused by the various government institutions

involved in the healthcare business. Public policy needs to be continually revised to obtain more success with more people. This involves a decision making process that necessitates a creation of opportunities for revision since we do not know everything about consequences to know what proper decisions to take.

Goodin maintains that utilitarianism, from the outset, is an ethical theory with political consequences (Goodin 4). This is because utilitarianism tells us what is right and wrong, good and bad. It is also political, since it touches upon the conduct of public life. Penz, Drdyk and Bose posit that utilitarian ethics is a theory whose central tenet espouses that the development of policies is a worthy social goal if, and only if, it satisfies a number of values, including human well-being, equity, empowerment, cultural freedom, human rights, environmental sustainability and integrity regarding corruption (Penz, Drdyk and Bose 11).

Preference utilitarianism can also aid in the formulation of corporate legislation. It serves as a suitable guide for public officials in pursuit of their professional responsibilities. However, Crimmins cautions that all primary elements of law –constitutional, penal, civil and procedural law need to be codified to allow for a body of law clear in its principles and certain in its execution (Crimmins 93).

Frey emphasizes the need for moral philosophers to be cognizant of other areas of concentration in the attempt to create sound ethical policies: economics, political science, and rational choice theory (vii-viii). This can make the CAF and Canadian Government's application and analysis of ethical matters have stronger standards of argumentation and rigor.

Preference Utilitarians argue that development goals and principles of individual employees are necessary for organizations (Crocker 45). CapSim avers that this type of ethical approach in terms of employee development, allows for an assessment of an action in terms of its

consequences or outcomes; i.e., the net benefits and costs to all stakeholders on an individual level (Capsim 1). This implies that ethical actions by every CAF and DND mental healthcare employee, is important to the conduct of the Canadian Government. Every CAF and DND leader ought to strive to achieve the greatest good for the greatest number while creating the least amount of harm or preventing the greatest amount of suffering.

The preference utilitarian theory also holds that every stakeholder's interests should be considered equally when making management decisions. Therefore for any set of options in CAF management meetings, it is vital to view the most ethical option as the one that produces the best balance of benefits over harm for the most stakeholders. Outcomes may be quantified in such terms as contentment and suffering, the relative value of individual preferences, monetary gain or loss, or the short-term and long-term effects of an action. In terms of reflections within a business context, this approach relies on a statistical analysis of probable outcomes, a classic costs/benefits assessment, and/or a consideration of the marginal utility of a consequence for various stakeholders in the group (Capsim 1).

Harsanyi argues that utilitarians take the view that we can obtain a better insight into the nature of moral problems by reducing them to problems of rational choice (Harsanyi, Basic Moral Decisions 231). At a common-sense level, in its simplest form, rationality means choosing (what is or at least what one thinks to be) the best means to achieve a given end, goal, or objective (subjective or objective (Harsanyi, Basic Moral Decisions 231). This means that one can make rational decisions following a transitive and complete system of preferences among all his/her possible goals. This preference model of rationality basically amounts to choosing all our actual goals after careful consideration, and in full awareness of the opportunity costs of our choice (Harsanyi, Basic Moral Decisions 232).

## Arguments against Preference Utilitarianism

It is important to note that the preference utilitarian ethics framework is not a necessarily comprehensive ethical theory that can be expected to generate all answers. Although utilitarianism has gained popularity as an ethical theory, there are some difficulties in relying on it as a sole method for moral decision-making. First, the utilitarian calculation requires that we assign values to the benefits and harms resulting from our actions and compare them with the benefits and harms that might result from other actions. Also, it's often difficult, if not impossible, to measure and compare the values of certain benefits and costs. How do we go about assigning a value to life? Or how do we go about comparing the value of money with, for example, the value of life, the value of time, or the value of human dignity? Moreover, can we ever be really certain about all of the consequences of our actions? Our ability to measure and to predict the benefits and harms resulting from a course of action or a moral rule is difficult.

Some scholars suggest that Bernard Williams' article "A Critique of Utilitarianism" is a definitive work that refutes all types of utilitarianisms (Raby). In this article, Williams builds an argument against consequentialist ethical theories in general and in particular utilitarianism. According to Williams, all forms of consequentialism are concerned solely with consequences and are indifferent to the personal integrity of a person, something that is formed by their deepest held moral principles (Raby). Williams' attempts to reconcile one's ethical behavior to one's feelings and emotional responses as regards resolving moral problems. William insists that any ethical theory that fails to reconcile ethical behaviour to our feelings and emotional responses should not be accepted as a proper ethical theory. Williams argues, that utilitarianism:

...runs against the complexities of moral thought: in some part because of its consequentialism, in some part because of its view on happiness and so forth. A common element in utilitarianism's showing in all these respects, I think, is a great simple mindedness (Smart & Williams 149).

Smart continues to suggest that we ought to understand simple mindedness in the context of utilitarianism as the recognition of too few thoughts and feelings that reflect the world the way it actually is, both in the way it appears, and the way people go about their lives (Smart & Williams, 149). This does not mean that utilitarians do not recognize these type of thoughts rather we ought not to grant them special preferences. According to utilitarianism the way others feel or act in certain situations may force us to act against our own feelings (Smart & Williams 103-104). Williams furthers his arguments that:

...our moral relation to the world is partially given to us by such feelings, and by a sense of what we can and cannot 'live with,' to come to regard those feelings from a truly utilitarian point of view, that is to say, as happenings outside one's moral self, is to lose one's sense of moral identity; to lose, in the most literal way, one's integrity (Smart & Williams 103-104).

Integrity is a central notion that Williams would have us to disregard utilitarianism. Williams insists that utilitarianism is not a complete theory that encompasses how actual acts of morality are performed (Smart & Williams 150). Williams believes that utilitarianism fails to recognize the (alleged) moral nuances associated with someone attempting to force you by

threats. Williams claims that you can't always be held responsible for the actions of others, and your moral responsibilities should not be held hostage by the threats others make (Smart & Williams 109).

Goodin is cognizant of opponents of who posit that utilitarian ethics does not serve as a good guide for moral conduct because it is crassly calculating and impersonal (Goodin frontispiece). This means that utilitarianism is weak in its attempt to enlighten practical personal conduct. The general happiness derived from the interests of those affected is simply a sum of individual pleasures (Miller and Williams 30). These individual pleasures, when added together, may not necessarily be truly representative of each individual person's happiness. The decisionmaking process usually draws individual psychological responses that are unique to others.

According to Glover for decisions made that include individuals in a group with varying psychological dispositions, reason may not necessarily be at the fore but rather the question of whether suffering is at the core of the issue (Glover 2). Frey cautions that a major problem for Preference Utilitarians is that they tend to separate persons from the pleasures (or mental states) and desires that persons have, and employ a value-theory that exploits this separation, to the seeming detriment of individual, autonomous persons (Frey 15). This means that decision-making within the leadership at CAF and the Government can prove to be difficult, if the individuals making corporate ethical decisions have different individual moral values.

Huemer discredits Preference Utilitarians like Singer in that a meta-ethics is introduced that adheres to a revisionary ethics that causes a clash with the moral sensibility of the vast majority of people because our individual moral attitudes fail to correspond to public moral reality (Huemer 364). Hence the question of whether the Canadian military leadership has fully engaged in the policy of comprehensive care remains to be actively debatable. A major problem of meta-

ethical philosophers is that they tend to readily forget that ordinary ethical thinking is frequently muddled, or else mixed up with questionable metaphysical assumptions (Smart & Williams 3).

#### Arguments for Military and Government Moral Ethical Obligations

Barrett, a former Lieutenant Colonel in the United States (U.S.) military, argues that the Canadian military is committed to ethical performance on and away from the battlefield (Barrett 17). This is because of the Canadian Defence Ethics Programme that places a great deal of emphasis on ongoing academic research. This has resulted in a simple and consistent military ethos whose purpose is to maintain Canadian values, military beliefs, expectations and values. Barrett continues to suggest that overall, the CAF ethical work and descriptive ethos should be an exemplar for the construction of a similar U.S. Army program since the Canadian military has prioritized the moral component of warfare and created a system of implementation in support of their goals. The Canadian military's Lamplighter program and the use of Unit Ethics Coordinators afford military service members the opportunity to "cast a light" and highlight discrepancies in ethical behaviour (Barrett 18).

Dolman posits that political freedom begins with military service. This is due to the notion that from early Greek philosophy through the Enlightenment, the notion that those who fight for the state inevitably rule it was not only politically deterministic – it was morally just (Dolman 1).

#### Arguments against Military and Government Moral Ethical Obligations

There are scholars who argue that since war is morally wrong then no institution ought to be morally or ethically obligated to support the military. O'Connell writes that modern warfare has fallen upon hard times (O'Connell 3). According to O'Connell this true sport of kings appears no longer worthy of Clausewitz's famous dictum

“a mere continuation of policy by other means” has become a ring of black humour, a grotesque mockery of reality. Two centuries of increasingly pointless, financially pointless, financially disastrous, and above all lethal conflict, culminating in the discovery and proliferation of nuclear weapons, have rendered this venerable institution virtually incapable of performing any of the roles classically assigned to it” (O’Connell 3).

According to Holmes war in the modern world cannot be morally justified (Holmes xi). Holmes offers the following reasons to support his statement: unconvincing application of assessing wars by just theorists, poor examination by strategists examining how to incorporate power effectively into policy, and government leaders responsible for making and implementing war policy are unable to speak to the issues of central concern to humankind (Holmes xi). For Holmes, life involves recognizing that the demand of morality not only supercede personal desires and interests, including self-interest, when and if they conflict, but also override other obligations as well (Holmes 23). Dolman avers that modern military forces are the unwelcome but undiscardable remnants of a frightful state system that remains locked in constant war or preparation for war (Dolman 2).

Dower, a pacifist, argues that the matter of going to war is a complex one. Although Dower sees a limited role for armed forces, he is deeply opposed to any country possessing weapons of mass destruction (Dower vii).

Martin offers three reasons why it is immoral to serve in the military of any country. His first reason is that as stipulated in the United Nations Universal Declaration of Human Rights, a

free, moral human being is personally responsible for his or her actions (Martin para. 2). This capacity for moral integrity the glory and crown of human existence is such that our worth derives not from wealth or power or fame, but from our moral autonomy and dignity as persons. Martin continues to write that people are often corrupted when they are part of institutions that pressure them to act in ways they might not choose to act as individuals. Martin continues to suggest that people are "trained," forced under extreme pressure, to give up their moral autonomy and substitute the false dignity of the state and the military. To give up one's moral autonomy is to give up one's dignity as a human being and become like a robot, a human machine at the disposal of the will of others. However it is essential to note that Martin assumes that people are forced into the military. However, in Canada, military members are not coerced but rather choose out of their own volition, to fight for their country. Canadians have several employment opportunities other than being working for the military. If someone signs up to be a Canadian soldier and finds that there are ethical dilemmas in being a Canadian soldier, then he/she is allowed to voluntarily release from the military.

Martin's second reason is that why no one should serve in the military of any country derives from the distinction between the police and military. For Martin, to be a member of a police force under the rule of law in a democratic country can be a noble and respectable form of employment but to be a member of a military machine is neither noble nor morally respectable. This is because military action is action to destroy, kill, or defeat in a lawless world.

Martin's third reason for not serving in the military of any nation is because all militaries are inherently terroristic. In other words, there is no essential difference between terrorism as engaged in by non-governmental groups and the kind of force and violence engaged in by military organizations of nation-states.

I find Martin's notion that "all militaries are inherently terroristic" to be highly debatable. Martin's assertion assumes that every military is orchestrated to inflict terror under any circumstances. Martin does not also make mention militaries that are obligated to obey international legal entities such as the Geneva conventions that vouch for humanitarianism during wars. The Canadian military not only endorses the Geneva conventions but also holds its soldiers to Canadian laws and Rules of Engagement whenever they are sent on military assignments.

### Part III Recommendations

Preference utilitarianism acknowledges that every person's or business entity's experience of satisfaction is unique. Therefore in order for one to make an informed policy that espouses preference utilitarian ideals, it is important to appreciate the moral value of any action as determined by the subjective preferences of those affected. In this paper I have briefly examined the policy-making process concerning providing care to combat trauma veterans. I have also lightly reflected on procedures that have been enacted due to the various policies made to provide assistance to these veterans riddled with mental health issues. Based on these policies and procedures made by the CAF and DND, I would now like to offer suggestions that will help facilitate policies and procedures regarding combat trauma.

#### The Policy Making Process

The Policy making Process entails one's ability to take into consideration other people's ethical positions; carefully examining historical elements of the issue at hand and a keen assessment of prevailing political values.

## Understanding other Ethical Positions

Ethics is largely concerned with what we ought to do and how we ought to live. Different people embrace different ethical positions perhaps due to cultural, societal or religious upbringing. There are many ethical theories assumed by different people. Therefore the task of sitting at table with others when making policies requires attention to others with opposing ethics.

Ethical theories can be divided broadly into those that focus on action and those that focus on agency or character; both are concerned with the ‘good life’ and how concepts such as fairness and justice can inform our thinking about the world (Australian Education Curriculum 3). These considerations can lead to individuals developing a broad understanding of values and ethical principles as they mature.

It is therefore important to develop skills that explore areas of contention and then engage with and understand the experiences and ethical positions of others. It is also necessary that an ethical understanding be developed that identifies and investigates the nature of other peoples ethical concepts, values and character traits, so as to understand how one’s reasoning can assist in group ethical judgment. Ethical understanding involves building a strong personal and socially oriented ethical outlook that helps one to manage context, conflict and uncertainty, and to develop an awareness of the influence that one’s own values and behaviour have on others (Australian Education Curriculum 1).

It is also vital for one to develop an awareness of other people’s meanings and practical reasoning abilities associated with different thought patterns and actions. This is because people call on principles, concepts, experiences, senses, emotions and reasoning to guide them when making judgments (Australian Education Curriculum, 1). Scholars like Lipman, Sharp and

Oscanyan suggest that ethical inquiry should be an open-ended, sustained consideration of the values, standards and practices by which we live ... taking place in an atmosphere of mutual trust, confidence and impartiality (Australian Education Curriculum 3).

One area of study in ethics is human nature itself and the dilemma that exist with the question: ‘How ought I to live?’ The philosophers Plato, Aristotle and Aquinas, along with Kant during the Enlightenment, and more recently preference utilitarian philosophers such as Peter Singer identified the importance of reason as a human attribute – although their justification varied. So developing a capacity to be reasonable, exploring perceptions of activities and character comprise an essential part of understanding dynamics of group decision-making (Australian Education Curriculum 3).

Although there are different ethical positions, each with their strengths and weaknesses, there is the need to make a judgment in the face of competing claims. There is need for open-minded reasoning in order to make decisions that accommodate every person’s unique experience of satisfaction.

#### Understanding Historical Elements

Understanding the history of an issue during the decision making process is important. History involves tracing ideas back to their origin and studying the evolution of ideas or events (Standler 1). But why should ideas be traced back to their origin. I believe that although factual information is necessary in establishing sound historical reconstruct, it is crucial to identify the evolution of ideas and understand why ideas on an issue may have changed. But this historical endeavour requires one to be skeptical. Sandler avers that like a science historical endeavours require skepticism because of conflicting “facts” that one may encounter (Standler 2).

Is history important? There are a number of reasons that highlight the importance of history. History can be inspirational as well as provide a sense of identity. History also contributes to moral understanding. History provides a terrain for moral contemplation (Stearns) Studying the stories past situations allows for one to test his or her own moral sense and hone it against current realities and complexities.

Why study the history of an issue? The answer is because we virtually must, to gain access to the laboratory of human experience (Stearns). This allows us to formulate basic data about the forces that affected the situation and helps us as we emerge with relevant skills and an enhanced capacity for informed critical thinking, and simple awareness.

#### Understanding Opposing Political Values

Politics is complex and difficult. Ethics in politics has to do with the results and consequences of decisions and policies (Girard 34). Political ethics is a challenge that requires serious attention, debate and dialogue within the societies and between cultures. Girardin notes that it is an essential human activity in building societies and communities based on rules, laws and a balance of conflicting interests (preface). But polls on all continents on the confidence of people in institutions show that people do not place much trust in politics and politicians (Girardin, preface). Politicians are perceived by some Canadian citizens as selfish and defending special interests rather than the common good. "Ethics in politics" seems to many a contradiction in terms, even though many politicians try to give their best for the common cause of a country or the international community (Girardin, preface). Trust in and respect for politics and politicians is vital for a harmonious relationship between the various stakeholders involved with the care of soldiers returning from war with combat trauma. Financial aid plays a pivotal role in

sustaining this harmony. But relations and interactions between politics and economics are complex.

Between the ideal types of planned economy and *laissez faire*, the range of possibilities is enormous. Economics is a key driver of societies and sometimes pretends to run the show (Girardin 132).

The blame game between politicians echoing their citizens' complaints on one side and veterans may easily run into the dead end of populism. The first ethical aim in shaping economics must be to reveal and charge real costs, exposing hidden subsidies as well as hidden costs and externalities – the costs paid by others or the environment now or down the road (Girardin 132). Health costs, the costs of administration remain imprecise and clouded by fog. Accuracy in assessing true costs is not easy, because short-term considerations may prevail, but these should be aimed at in the interests of equity, long term sustainability.

A second ethical requisite is a clear link between macroeconomics and microeconomics. Policy decisions are mainly macro- economic, but their consequences are felt at the micro-economic level (Girardin 132). Politicians often focus on the macroeconomic vision, but voters focus on the results. It is possible to observe how macro-economists ignore the possible consequences of their policies and are even unable to articulate the link. Girard also notes that the consequences for citizen of decisions are usually taken at the macroeconomic level (Girard 132).

#### On Procedural Complexities

A policy is a course of action or guidelines to be followed whereas a procedure is the 'nitty gritty' of the policy, outlining what has to be done to implement the policy (State of New South Wales, Department of Education and Training). An effective ethics is necessary in

preventing failure in implementation of policy. Failure of implementation is often hard to measure, whether in monetary or reputational terms. (U4-CMI). Important questions arise from the current CAF comprehensive approach for the care of ill and injured members; as well as their families. How much does it cost the taxpayers? How do we measure its effectiveness? How do we calculate the cost–benefit of the comprehensive approach? All these questions must be considered if the value of ethics risk management is to be properly understood. Blame for ethical default can become personal, permanent, and often sensationally public. Here are some administrative tools for maintaining policy and procedural effectiveness:

- a) a standardized and accessible format for policy documents;
- b) clear procedures for policy-making by the relevant authorities;
- c) effective mechanisms for communicating policies;
- d) established procedures for holding and updating policy documents;
- e) commitment to ensuring that the ethical performance of military and government leaders;
- f) comprehensive care program to be reviewed and evaluated on a regular basis. This reflects current good practice and maintenance of legal requirements. Procedures for the oversight, the monitoring and the evaluation of the effectiveness of the DEP can be found in the DAOD 7023 series (Department of National Defence and Canadian Forces).

The intent of these standards is to be seen as appropriate and feasible in demonstrating that the CAF and GOC are concerned about its integrity. These standards are also necessary in enhancing the quality of service delivery.

### The Need for Spiritual Resilience

As of June 01, 2015, veterans' injured in Canada's modern wars have been forced to wait for any improvements to their benefits until elections in 2015 are over. This occurs in the wake of the dissolution of Parliament when no substantive bills or changes are possible (Bailey). The federal government is cutting services for veterans even as it ramps up spending on a publicity program to honour them (Minsky). Overall funding for Veterans Affairs has dropped, with many of those cuts coming from disability, health care and reintegration services. The department says there's less need for those "traditional" services, even as soldiers return home from serving in Afghanistan with needs of their own (Minsky). An important question arises: how else ought the military extend care to veterans during political transition?

It is important that while policy is being enacted, that the well-being and wellness of soldiers be integrated into a healthy individual lifestyle. Fonséca maintains that the well-being and wellness of soldiers are essential indicators that characterize a healthy society (Fonséca i). Fonséca insists that several interactive dimensions of these concepts, including social and spiritual well-being/wellness, play a key role in creating what can be identified as a holistic life balance. So how does one achieve a holistic well-being?

One important way to provide assistance to veterans, while waiting for government policy to be re-enacted, is through spiritual resiliency initiatives such as those offered by the Royal Canadian Chaplain Service. But what is spiritual resilience? Can spiritual resiliency be independent of religion, especially to those who have no religious inclinations? According to

Fonséca, spiritual well-being is not necessarily associated with religion, as it can be experienced in numerous ways like divinity, cultural beliefs, individual explorations, meditation, and self-concentration (Fonséca 9). Spiritual well-being provides individuals with a sense of purpose and meaning when life becomes difficult for one to comprehend. The main components of spiritual well-being are mental, emotional, and physical health (Fonséca, 9) Although this spiritual experience may be a personal experience, it can be influenced by an individual's community, culture, and local beliefs.

According to the Royal Canadian Chaplain Service, spirituality is a broad concept that is often confused with religion (Royal Canadian Chaplain Service 1). Spirituality is the driving force to total well-being and refers to one's value system (ethics, moral compass) in terms of the search for meaning and purpose in life as well as connectedness with others (Royal Canadian Chaplain Service 1). Although spirituality may relate to a particular religion, it can also be independent of religion. Spirituality is that part of humans that connects one to a state of mind, being and place, and provides a sense of belonging and purpose. During times of chaos, spirituality, the inner resources that sustain a Service member can be challenged giving rise to stress and a lack of focus. It is under these difficult moments that spiritual resilience is required. Spiritual resilience is the ability to recover the emotional, psychological and physical strength required to adjust to adversity or a traumatic change (Royal Canadian Chaplain Service 1). This implies that a soldier can have an inner spiritual fortitude to bounce back from difficult circumstances.

## Part IV Conclusion

All people, including veterans, have the right to decent and productive work in conditions of freedom, equity, security and human dignity (World Health Organization). For persons with mental health problems, achieving this right can be particularly challenging. The burden of mental health disorders on health and productivity has long been underestimated.

According to a report from the Congress of the United States, two combat-related conditions that affect some veterans who have served in Iraq and Afghanistan and that have generated widespread concern among policymakers are post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI). In the United States the Veteran Health Administration (VHA) spent about \$2 billion (in 2011 dollars) in fiscal year 2010 to treat veterans of recent overseas contingency operations, compared with total expenditures in 2010 on health care for veterans of all eras and conflicts of about \$48 billion (Congress of the United States vii). From 2002 through 2010, VHA spent a total of \$6 billion on health care expenditures for recent Overseas Contingency operations (OCO) veterans.

Also in Canada, the total cost from mental health problems and illnesses to the Canadian economy is significant. The economic impact of mental illness on the workplace comes from both lost productivity and disability claims (Office of the Auditor General 1). According to the Mental Health Commission of Canada, the economic cost to Canada is at least \$50 billion per year (1). This represents 2.8% of Canada's 2011 gross domestic product. Over the next 30 years the total cost to the economy will have added up to more than \$2.5 trillion (Mental Health Commission of Canada 1).

It is important to treat TBI as soon as possible. TBI is caused by sudden trauma to the head and is commonly sustained by soldiers exposed to explosions (Congress of the United States vii). It may result in a decreased level of consciousness, amnesia, or neurological abnormalities, and it is classified as mild, moderate, or severe on the basis of its severity at the time of the injury. Mild TBI, which is also known as a concussion, may in some cases lead to ongoing symptoms that include headaches, memory difficulties, fatigue, irritability, and sleep problems (Congress of the United States vii). Diagnosing severe cases is straightforward, but mild TBI's—which account for about 90 percent of TBI cases among active-duty OCO service members—may be difficult to detect, both by those afflicted and by health care professionals, although most cases resolve quickly without medical intervention (Congress of the United States, vii). But what is the right time to treat PTSD and other OSI's?

As concerns timeliness, the VAC Department has not established a standard for the time it should take a veteran to access treatment and services under the Rehabilitation Program (Office of the Auditor General 7). However, the Department does have a standard of making 80 percent of eligibility decisions within two weeks of determining that the veteran's application is complete. The Department has also established a standard for preparing case plans within 45 days of a favourable eligibility decision. The combination of the time required on deciding on eligibility and the time required to assess a veteran and prepare a case plan may affect how long a veteran will have to wait for mental health services. We found that the Department did not meet its target in the 2013–14 fiscal year, as 75 percent (2,160 of 2,893) of decisions on first applications for mental health conditions were processed within 16 weeks (Office of the Auditor General 8). This means that 733 veterans did not receive a decision within the 16-week standard. Veterans Affairs Canada's standard is to provide a veteran with a health benefits card within 6

weeks of approving the veteran's application. This card allows direct billing from the service provider to the Department.

On the issue of facilitating access to mental health service, the Office of the Auditor General examined whether Veterans Affairs Canada facilitates timely access to services and benefits for veterans who have been identified by or to the Department as having mental health care needs (4). Given that an eligibility decision is a prerequisite to obtaining most benefits, they focused on the Department's processes used to determine eligibility for its rehabilitation and disability benefits programs. Overall, the Auditor General found that Veterans Affairs Canada is not adequately facilitating timely access to mental health services (5). Veterans Affairs Canada has put in place important health supports for veterans, and the Department is providing timely access to the Rehabilitation Program. However, access to the Disability Benefits Program—the program through which most veterans access mental health services—is slow, and the application process is complex.

Also Veterans Affairs Canada has not analyzed the time it takes, from a veteran's perspective, to receive a Disability Benefits eligibility decision. This finding is important because Veterans Affairs Canada has a legislative responsibility to facilitate access to the specialized care required by veterans with mental health conditions (Office of the Auditor General 5).

An issue as complex as operational stress injuries, tackled by an organization as diverse as the Canadian Forces, all but eliminates the possibility of simple, over-arching solutions (Daigle, 8). On February 5<sup>th</sup>, 2002 the Ombudsman for the Department of National Defence and the Canadian Forces (DND/CF) published a special report entitled *Systemic Treatment of CF Members with PTSD* (Daigle, 8). It evaluated the CAF's ability to respond effectively to the

modern mental health challenge driven largely by PTSD. The report rendered two major conclusions: (1) PTSD was a serious and growing problem for the CF and (2) the CF's approach to mental health injuries generally, and PTSD specifically, was inadequate. These conclusions were reinforced by 31 specific recommendations designed to improve DND/CF's ability to diagnose, treat and care for members suffering from PTSD. These recommendations spanned the mental health care continuum, addressing institutional leadership and coordination; national tracking; awareness, education and training; standardized treatment; and caregiver stress and burnout (Daigle 8).

Other findings from the Ombudsman's report include the chronic manning shortfall in spite of ongoing recruiting efforts and mitigation measures, representing a frontline caregiver deficit of 15-22% for the CAF's steady state mental health requirement; extensive outsourcing of treatment for CF members suffering from OSIs with the limitations inherent in such outsourcing; poor situational awareness of strategic and functional leadership of the magnitude of the OSI imperative as it evolves over time; and an ad hoc approach to systemic qualitative performance measurement which has hindered the CF's ability to assess the effectiveness of its OSI capability (Daigle 2-3).

These findings suggest that the CAF must maintain the current institutional focus on the provision of appropriate care, treatment and support for CAF members suffering from PTSD and other OSI's in spite of the natural deceleration resulting from the close of major operations in Afghanistan along with various corporate pressures, including renewed fiscal restraint (Daigle 3).

Other recommendations posit that the CAF needs to develop and implement a more assertive and innovative recruiting campaign aimed at reducing the persistent caregiver manning

shortfall (Daigle 3). Perhaps Natyncyk's comprehensive report needs to be revisited especially on the issue of reintegration. This is because it is an approach that requires the integration and coordination of services available through the military health care system, the military administrative and social support system, and the transition and veteran support system managed by Veterans Affairs Canada (VAC) (Natynczyk 3). This concept of care envisages coordinated, integrated and consistent delivery and administration of benefits and services during the three stages that veterans must navigate following injury or illness: recovery, rehabilitation, and reintegration into military service or return to civilian life.

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