FREE CLINICIAN SCREENING TOOL

FOR EMDR-TRAINED CLINICIANS

Racial Trauma + Moral Injury Quick Screen

RTMI-QS · A 9-item first-step screen for intake and case conceptualization with military, veteran, and first responder clients

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WHEN TO USE IT

At intake, in Phase 1 history taking, or any time processing stalls and you suspect race-related stress, betrayal, or a values violation is part of the picture.

HOW TO INTRODUCE IT

"I ask everyone about experiences tied to race, identity, and values, because they can shape how stress gets stored. Answer as much or as little as you want."

Think about race-related experiences and values-related experiences that have been most important or stressful recently. **Over the past 30 days, how much has each statement fit for you?**

PART A · RACE-RELATED STRESS	0 Not at all	1 A little	2 Some times	3 Often	4 Very often
1. I replay racialized experiences or think about them when I would rather not.	☐	☐	☐	☐	☐
2. I stay especially alert to how race may affect what happens around me.	☐	☐	☐	☐	☐
3. I avoid certain people, places, or situations because they connect to racialized experiences.	☐	☐	☐	☐	☐
PART B · MORAL INJURY					
4. What happened crossed a line I believe should never be crossed.	☐	☐	☐	☐	☐
5. The way a leader, team, or institution responded after the harm became part of the injury.	☐	☐	☐	☐	☐
6. I keep going back to my own part in it: what I did, didn't do, or had to go along with.	☐	☐	☐	☐	☐

PART C · IS IT STILL HAPPENING? (CLINICIAN ASKS)	No	Unsure	Yes
7. Is the person, group, or system tied to the harm still present?	☐	☐	☐
8. Could speaking up bring real job, legal, financial, or safety consequences?	☐	☐	☐
9. Is the client still supervised by, employed by, or dependent on that system?	☐	☐	☐

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01 Reading the screen

Look at the pattern, item by item. A single strong answer is enough reason to slow down and ask more.

Any Part A item at 3 or 4	Explore race-related stress and how it may be linked in memory networks across developmental, service, and post-service experiences.
Any Part B item at 3 or 4	Explore moral injury: betrayal, guilt, shame, and injury to meaning. These often sit underneath PTSD symptoms that are already improving.
Both A and B elevated	Consider overlap. Ask about institutional betrayal and what happened after the harm, especially who responded and how.
Any "Yes" or "Unsure" in Part C	Map current context before you choose a target. Strengthen Phase 2, and check whether the client's caution is an accurate read of real risk.
Item 6 at 3 or 4, or any hopelessness	Run your standard suicide risk screen (such as the C-SSRS) before moving on. Shame and loss of meaning tied to moral injury raise risk.

Don't pathologize an accurate reading of the environment.

Before you challenge vigilance, mistrust, avoidance, anger, or a cognition, ask whether the client is responding to a memory, a current condition, or both.

02 What to ask next

RACIAL TRAUMA

"When did you first notice race shaping how you were treated?"

"Where do you feel most on guard right now?"

"What did you have to do to stay safe, or to keep your job?"

MORAL INJURY

"Was there a moment that went against what you believe is right?"

"Who did you expect to do something different?"

"What do you carry about what you did, didn't do, or had to tolerate?"

THE SYSTEM AROUND IT

"What happened after it happened, or after you spoke up?"

"Who held power then, and is that still true?"

"What protected you then, and what is it costing you now?"

KNOW WHAT THIS TOOL IS

The RTMI-QS is an original clinical teaching and conversation tool developed by Dr. Arielle N. Jordan. It has no validated cutoffs and does not diagnose. Use it to decide what to explore. For formal measurement, pair it with published instruments such as the Race-Based Traumatic Stress Symptom Scale (Carter et al., 2013), the Moral Injury Events Scale (Nash et al., 2013), or the Moral Injury and Distress Scale (Norman et al., 2024), which now has a recommended clinical cut score. Item content informed by moral injury research including Litz et al. (2009) and Nash et al. (2013).

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03 When processing stalls

Well-meant reassurance can shut processing down. Use the smallest question that opens new information.

CAN CLOSE PROCESSING	TRY INSTEAD
"You know it was not your fault."	**"What choices were actually available then?"**
"Not everyone is unsafe."	**"Where, with whom, and under what conditions?"**
"You did the best you could."	**"What did survival require from you?"**
"What happened is over now."	**"What part is past, and what part is still true?"**

THE SCREEN IS STEP ONE. THE TRAINING SHOWS YOU WHAT TO DO WITH IT.

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HAVE A CLIENT IN MIND RIGHT NOW?

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