The Study of a Secret Society:

Resistance to Open Discussion of Suicide in the United States Coast Guard

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ACKNOWLEDGMENTS

To my dissertation committee, my sincere thanks for sharing your knowledge and for providing me with your guidance and support.

To the chair of my committee Dr. Siamak Movahedi, thank you for sharing your expertise. I will never forget your patience and serenity throughout this process as well as your valuable feedback and especially your vast knowledge of the human mind.

Dr. Frances Bigda-Peyton, thank you for your excellent recommendations especially in the area of organizational defensive routines, as well as for your valuable insight and interest in broadening the perspectives of this paper.

To Dr. Michal Ginach, your expertise in culture and psychoanalysis was vital to this paper and I thank you for your valuable insight, feedback and your encouragement.

To my editor, Elizabeth Moskowitz, you polished and simplified complications. I genuinely thank you.

To my family and Christopher MacDonald, thank you for always encouraging me, for your presence, love and support throughout my life.

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ABSTRACT

This project began as an investigation into the high rate of suicide among members of the Coast Guard in comparison to other branches of the U.S. Armed Forces. The course of research revealed Coast Guard officials' chronic reluctance to disclose information about suicide. Therefore, the new focus of research became a comparative investigation of the Coast Guard's resistance to discussing suicide within the organization. The study was conducted through interviews with a sample of Coast Guard and other military members as well as through discussion boards on the Internet. Questions centered on military life experience, stress, depression and suicide. The data suggest that members of the Coast Guard 1) initially appeared excited to participate in the study, however, when asked to discuss or disclose suicide-related information about the Coast Guard, they displayed marked signs of reluctance about their participation; 2) Coast Guard members emphasized the idea of the Coast Guard being a family; 3) Coast Guard members presented as the most conversational when compared with the other military branches; 4) the Coast Guard has a humanitarian mission as opposed to the other four combat-oriented services; 5) Coast Guard's image and perception among members of the Armed Forces is unique and somewhat set apart from the other, larger and more combat-oriented services; 6) the Coast Guard is perceived to be the toughest service to get promoted in, and it is seen as the most competitive when compared to all other military branches; 7) there is a differential suicide rate between the Coast Guard and the other military branches during both war and peace times. The findings are analyzed using Töennies' concept of Gemeinschaft versus Gesellschaft, Horney's theory of neurosis, Argyris' theory of organizational defensive routines, as well as Menninger's theory of suicide.

CHAPTER I: INTRODUCTION

The Coast Guard has the leading number of deaths by suicide during peace times when compared to the other four services, as portrayed by the 1998-2002 McAlexander and Gray data. Yet current reports of the drastic increase in the suicide rate of U.S. troops in Iraq are of striking concern as well. Death is a frightening process to come to terms with under any circumstances, but death as a result of suicide involves a conscious act to terminate one's life. Suicide is not a minor problem to be ignored; it is a serious matter that requires critical attention and recognition. Suicide is violence not only against the self but also against the family, the workplace, and society at large. It leaves those left behind confused, shocked, and traumatized.

Originally, this project began in 2004 as a research effort into the differential patterns and dynamics of suicide among various branches of the U.S. Armed Forces. In particular, the researcher was interested in studying the relatively higher rate of suicide in the Coast Guard in comparison to the Air Force. However, during the process of informal data collection, the researcher encountered a chronic reluctance by officials in the Coast Guard to disclose information about suicide or suicide statistics in the organization. A number of contacts who had already disclosed information about suicide suddenly disappeared. They changed jobs or left the Coast Guard altogether. Acknowledging or discussing the problem of suicide seems to be an organizational taboo. This resistance led the researcher to believe that members of the Coast Guard erect an emotional wall when a discussion of suicide threatens to surface in their organization. Consequently, the question that emerged was: What is the Coast Guard hiding from? What is it about the Coast Guard that prevents them from releasing suicide information? And why is it that other organizations seem to be able to share the data openly, so that the public can study it? According to Benson (2005), secret societies have always existed in the course of

human history. Benson believes that secret societies are difficult to study because they are quite literally secret, and take steps to remain so. They frequently deny this fact and publicize misleading or false information in order to avoid the public impression of secrecy (Benson, 2005).

Other researchers have also encountered the reluctance that Coast Guard members display to civilians regarding the disclosure of suicide-related information. An article by Koopman (2005) describes the Coast Guard's involvement in recovering the bodies of Golden Gate Bridge suicide victims from the San Francisco Bay. Koopman reports that the Coast Guard does not like to discuss this part of its mission, and despite several attempts to interview the personnel who perform these duties, the personnel consistently say "no" (p. 4). The Coast Guard spokesperson says, "It's a very touchy thing… these people see a lot of death and it's not easy for them to talk about" (Koopman, 2005, p. 4). A Coast Guard petty officer at Fort Baker explains: "I didn't sign up for this… I joined the Coast Guard to save lives" (Koopman, 2005, p. 4).

As a consequence of this resistance and reluctance to discuss suicide among Coast Guard personnel, the researcher was led to develop a new focus of study, namely a comparative service investigation into the Coast Guard's resistance to discussing suicide within the organization.

The military as a whole has a vested interest in portraying itself in a certain way to the public. When one considers what is fed to the public by military media, one sees an image of toughness, the ultimate macho virtue; this is a vision of men (and the occasional woman) who have been disciplined and trained to perfection, involving not only physical stamina but also mental and emotional self-control. The works of the ancient Stoics, such as Epictetus and Marcus Aurelius, which still guide modern military theorists, call for self-command, self-reliance, and control. Within such an orientation, emotions are perceived as irrelevant cognitions or irrational

opinions, and they are assumed to be subject to conscious control (Sherman, 2005). In other words, the military's goal is to perpetuate the idea that emotional experience is voluntary (Sherman, 2005). In reaction to this Stoic call for autonomy, most military training focuses on establishing group spirit and group pride. Boot camp, for example, is about stripping the self and building a new and tougher identity, in which being a member of the group is the all-important goal.

As this study proceeded, the researcher hypothesized that there might be certain aspects of the Coast Guard which fail to cultivate this feeling of camaraderie; consequently, this lack of group cohesion and support contributes to negative feelings about the self and the organization, thus leading to secrecy and defensive, maladaptive behavior patterns.

The research is carried out using two sets of data. The first set consists of in-person or phone interviews with Coast Guard and non-Coast Guard (Army, Air Force, Navy, and Marines) active duty and retired officers, enlisted men or women as well as civilian employees. The interviews with both Coast Guard and non-Coast Guard military members are unstructured, and contacts are received on a referral basis. Interview questions focus on respondents' life experience in the military, as well as their perceptions of and experiences with stress, depression and suicide-related issues in the service. Willingness to participate, openness to disclosing information, consistency of information disclosed, demeanor, as well as the process of discussion are noted. The second set of data originates from a post placed on an Internet discussion board on each web site of the five military branches, as well as the Army Reserves and the National Guard. In order to access the discussion boards, individuals must be members of the website. The control groups for both sets of data are individuals serving in non-Coast Guard military branches

(Army, Marines, Navy, and Air Force). This control group is chosen in order to compare the organizational attitudes and perceived dynamics across the services with the Coast Guard.

Two important factors presently known to the researcher about the Coast Guard are:

1) Coast Guard members who were initially involved with the study and appeared excited to participate began to display reluctance when asked to discuss or disclose suicide-related information about the Coast Guard.

2) There is a differential suicide rate between the Coast Guard and other military branches during war and peace times. The Coast Guard has a relatively high rate of suicide during peace time compared to the other military branches according to the 1998-2002 McAlexander and Gray data, whereas the Army's suicide rate was relatively low during peace time, but has drastically increased with the start of the war in the Middle East in 2002.

In order to further understand these factors, as well as the additional findings derived from the research, the author applies two fundamental theories. The first one is Ferdinand Töennies' work on *Gesellschaft* and *Gemeinschaft*. The second is Emile Dukheim's work on the social and organizational relationship of suicide.

When looking at social dynamics in organizational systems, Durkheim's (1978) review of Töennis' *Gemeinschaft* (community) versus *Gesellschaft* (society) provides further insight on an organization's internal structure, the influence this internal structure may have on carrying out the organization's mission, and the representational role this structure may have on an external social system. As Durkheim notes, a *Gemeinschaft* "constitutes an absolute unity which excludes the distinction of parts… it is an undifferentiated and compact mass which is capable only of collective movements, whether these be directed by the mass itself or by one of its elements charged with the task of representing it" (p. 115). Durkheim (1978) continues that it is

"community carried to its highest point of perfection" (p. 115) in which its members feel alike, think alike and share each other's joys and sorrows. For members to become so fused with each other, they must be "of the same nature" (p. 116) or share the same characteristics, as Durkheim explains. A *Gesellschaft* on the other hand, is "mechanical;" it follows the model of "deliberate and contractual law" (p. 119) in which individuals look out only for their best interest (Durkheim, 1978).

These concepts address the implications of the differential suicide rate between the Coast Guard and other military branches during peacetime, as well as the sharp increase in suicide rates among U.S. soldiers. Thompson (2010) reports that while the U.S. military lost 761 soldiers in combat in the period between the invasion of Afghanistan and the summer of 2009, a staggering 817 soldiers committed suicide during that same time frame. A 2008 article by Thompson (2008) reports that the U.S. Army had 164 suicides in Iraq and Afghanistan from 2002 through 2007, double the Army's 2001 rate; 115 soldiers committed suicide in 2007, marking the highest toll of Army suicide records since 1980 (Thompson, 2008).

This differential is analyzed using Durkheim's (1951) concept of *anomie*. Anomie is defined as a state of "de-regulation, … as traditional rules have lost their authority" (Durkheim, 1951, p. 253), creating a state of normlessness and meaninglessness (Clinard, 1974). Durkheim (1951) suggests that disturbance in social equilibrium is a motivating factor for suicide, as "no living being exists or can be happy unless its needs are sufficiently proportioned to its means" (p. 246). The concept of anomie may help explain why suicide rates are high among troops in Iraq, as well as among veterans who have returned home after being in combat zones for long periods of time. Soldiers who come home to civilian life after spending long lengths of time in combat can feel a sense of normlessness, powerlessness and isolation; they may feel lost in an

environment where the values and norms are radically different than what they are accustomed to.

CHAPTER II: LITERATURE REVIEW

For this project, major theories and research on suicide from the academic disciplines of sociology, psychoanalysis, psychology, and neuroscience are examined. As no single theory provides sufficient and universally satisfactory information about any given instance of suicide, it is important to have a broad, multidisciplinary theory.

In terms of understanding suicide, Durkheim has developed compelling ideas that explore the relationship of circumstantial social and organizational settings to suicide. Durkheim (1951) believed that any given person might be subject to two dimensions of social influence, called social integration and social regulation. These two dimensions may, in turn, lead to three different types of suicide (1951). According to Durkheim (1951), social integration, which refers to the degree of connectivity between an individual and society, relates to egoistic and altruistic suicide. Social regulation, which refers to the degree of influence society has over an individual, relates to anomic suicide. Egoistic suicide results from a lack of social integration because there are limited or no social networks operating, whereas altruistic suicide results from excessive social integration, as is commonly found in the military. Anomic suicide refers to those who attempted to deviate from social expectations (Durkheim, 1951).

Research by Riemer (1998) found that 54% of his sample served in leadership positions, which supports Durkheim's claim, as noted in Riemer (1998), that suicide is higher among noncommissioned officers, elite troops, and those in leadership roles. Maris' (1997) enhances Durkheim's ideas and suggests that Military Suicide is part of social suicide. According to Maris (1997), there are two types of military suicide: 1) when aggression begins as external but is

directed toward the self when the battle is lost, and 2) when there is self-sacrifice to bring about social, political, or religious change, also known as altruistic suicide. The latter are seen as obligatory deaths for the greater social good. Maris (1997) explains that suicides are not private, individual actions. Instead, they are social and public, the result of social forces and pathologies acting together with individual characteristics (Maris, 1997).

After World War II, extensive social science studies were carried out by the military. A study by Stouffer et al. (1949) explored the rapid promotion rate in the U.S. Air Corps (now the U.S. Air Force) as compared to the Army. They found that the rapid promotion rate in the Air Corps resulted in competition among its members which explains a higher rate of suicide (Stouffer et al., 1949). Hourani et al. (1999) found that suicide rates in the Navy were higher among males than females, whites were more likely to commit suicides than blacks, and enlisted personnel were more likely to commit suicide than officers. However, only 60% of suicides were completed with firearms among the Navy, whereas for all other military and national populations firearms account for 75% of suicides (Hourani et al., 1999). Kawahara and Palinkas (1991) found that Navy suicide statistics were not characteristic of the U.S. general population. Navy suicide rates were lowest among better-educated personnel. Interpersonal conflicts and the breakup of relationships were the primary reasons for completing suicide. Military life, with its overseas assignments and prolonged periods at sea, places tremendous strain on marital and other relationships, as well constricting opportunities to form such relationships. Other studies on suicide in the military have noted the lack of social cohesion and support experienced by military personnel as contributing factors in this increased suicide risk (Kawahara and Palinkas, 1991).

Durkheim's (1951) research on relationship dynamics suggests that common soldiers are often not married, lack close family ties and therefore are more likely to commit suicide.

However, officers (who are more likely to be married) have an even higher suicide rate because of the nature of their training, where they learn to set little value on their own lives (Durkheim, 1951). Rothberg and Jones (1987) found that divorced or separated soldiers have a seven times greater risk for suicide than married soldiers, supporting previous research that disrupted interpersonal relationships are significant factors in suicide (Rothberg and Jones, 1987). Rothberg and Rock (1988) list a number of stressful events that appear to have been present at the time of the suicides. They include difficulties with a love object, such as pending divorce, marital problems, altercations, infidelity, and domestic violence, murder of the love object or attempts to murder the love object (Rothberg and Rock, 1988).

Jumper (2004) explains that stress is an inherent factor of military life. An ambiguous or unstable future leads to stress, which transfers over to other stress factors such as family or relationships issues, financial and legal problems, as well as substance abuse and suicide (Jumper, 2004). Guerry (2005) found that most suicide attempts directly involve relationship issues or failures; others involve alcohol or substance abuse. Guerry suggests that people who commit suicide do not want to die, but rather want their pain to end. To them, suicide is the only way out (Guerry, 2005). Lastly, Bertillon (1882) explains that divorce and suicide rates vary because both depend on unstable equilibrium. The more divorces in a country, the more incompatible couples it contains. Bertillon argues that this results from people living irregular lives and having poor character and intelligence, which may ultimately lead to a predisposition for suicide (Bertillon, 1882).

Frances and Gale suggest that a military career has an intense effect on family and personality. A consequence of military family separation is that the military official develops an increased devotion to his duty (Frances and Gale, 1973). Moreover, military families live, work,

and go to school in a firmly organized, observant, conforming, conservative, and inflexible structure. They demonstrate a low tolerance for individual differences, which encourages scapegoating behavior within the family because of shame and fear of ostracism by the public (Frances and Gale, 1973). Frances and Gale (1973) report that military members who enter psychiatric treatment usually present with the fears of public display in the waiting room and are concerned about losing status. Presenting problems of the wife include "depression, suicide attempts, alcoholism, or extramarital affairs" (p. 175). Children of military families deal with "school phobias, unusual sphincter control disorders, behavioral problems, and depression" (p. 175); teenagers present with acting-out behaviors. Fathers present with alcohol problems, violent acting out or the fear of becoming violent, work difficulties, and psychosomatic problems (Frances and Gale, 1973).

The psychoanalytic literature on suicide details the individual processes underlying suicide. Sigmund Freud's (1917) theory identifies two components of depression, melancholia and mourning. Mourning is characterized by ambivalent feelings for the lost object that has been internalized and feelings of guilt that accompany the mourning process (Freud, 1917). In melancholia, the internalized object has now become part of the ego. The main emphasis of the personality shifts from ego to superego. Freud (1917) explains that through this shift, sadism characterizes the superego's stance, attacking the ego by infusing it with guilt. When this occurs, suicide becomes an option. The superego, having lost its ability to forgive, creates an unbearable situation for the ego. Suicide is perceived as a viable escape from the struggle. The release carries with it the hopeful illusion that forgiveness and reconciliation between ego and superego can be achieved. Freud noted that the will to live emphatically requires the need to feel a certain

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amount of self-esteem, which in the melancholic state has been destroyed by a punishing superego.

Melanie Klein (1986) explains in "A Contribution to the Psychogenesis of Manic-Depressive States" that suicide carries with it the fantasy of preserving the internalized good object and all parts of the ego that are identified with the good object, as well as the fantasy of destroying all parts of the ego and id associated with the bad object. Hence, suicide enables the ego to unite with all of its love objects (Klein 1986).

Karl Menninger (1938) expanded on Freud's theory and developed the concept of the suicidal person's three wishes. The first entails guilt relieved through the wish to be killed. The second involves revenge attained through the wish to kill. The third involves hopelessness realized through the wish to die. Menninger believed that individuals who are suicidal wish to be killed because: 1) they feel they burden their loved ones, 2) they wish to kill in order to release anger and aggression against those they feel have wronged them and, 3) they wish to die because of the unbearable pain they are experiencing (Menninger, 1938).

Otto Fenichel (1945) writes that the origins of suicide lie in a fixation of the individuals' character at a depressive level. Fenichel states that at this level self-esteem is regulated by "external supplies" (p. 387). The associated guilt feelings are so strong that they result in the individual regressing to a melancholic state. Fenichel (1945) said that such individuals go through the world in a state of perpetual greediness, always looking for external supplies to regulate self-esteem. If this does not occur, self esteem plunges dangerously, precipitating a downward slide toward suicide (Fenichel, 1945). Fenichel (1945) explains that such individuals attempt by any means necessary, to get others to participate in providing vital "supposed power" (p. 387).

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Bowlby (1973), Ainsworth (1969), Main et. al. (1985) and Mahler et. al. (1975) studied attachment styles and their link to depression by looking at behavioral patterns of the attachment-separation process between mother and child during the first 1½ years of life. They found that a secure attachment could be distinguished from various types of insecure attachment. This could influence behavior in later years (Blatt, 1995). Attachment theory consists of: 1) an interaction-behavioral model, researched by Bowlby (1969), which describes the development and maintenance of behavioral patterns in infant-parent relationships; and 2) a representational or cognitive model, researched by Bowlby (1973) and Main et. al. (1985), which entails the internalized interpersonal experiences and how these affect emotional states and intimate relationships in later life (Blatt, 1995). Blatt (1995) notes that research on patterns of insecure attachment as developed by Bowlby (1988) and Sroufe (1983) suggests that there is a predisposition to depression in anxiously ambivalent and insecurely attached people. In other words, individuals who are overly dependent on interpersonal contact become so because of inconsistent and unreliable early attachment experiences (Blatt, 1995). Compulsively self-reliant or avoidant individuals avoid interpersonal contact because of punitive and intrusive early attachment experiences (Blatt, 1995).

D.W. Winnicott explains the theory of the identification of the False Self in "Mind and Its Relation to the Psyche-Soma." According to Agar (2001), Winnicott explains that the False Self is the infant's early defense mechanism against over-intellectualization in response to external impingement. According to Winnicott (1965), when an individual lives out of a False Self, breakdown occurs because the individual is longing to find a good environment concept, a return to the dependent psyche-soma, which is basically the only place for him to live. In essence, living without a mind is a desired state (Winnicott, 1965). Ironically, death becomes a

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means of preserving the honor of the True Self (Agar, 2001). Winnicott explains that suicide is the destruction of the total self in order to avoid the annihilation of the True Self. Hence, since suicide is the only defense left against betrayal of the True Self, it is the False Self that ultimately organizes the suicide (Winnicott, 1965).

Christopher Bollas writes about the mother-child relationship in terms of the importance of mirroring and imaging dynamics in order to develop a True Self (Agar, 2001). He explains in *The Shadow of the Object: Psychoanalysis of the Unthought Known* that "we use the structure of the mother's imaging and handling of our self to objectify and manage our true self… and if this handling does not include the mother's responsiveness to the real needs of her infant so that those needs can be mediated for him, the infant must react rather than be" (Bollas, 1987, p. 51). Bollas' examples include mothers who are depressed, ill, absent, or unresponsive and too aggressive (Agar, 2001).

Before discussing the literature on organizational defenses it is noteworthy to review the psychoanalytic meaning of resistance and defenses. Freud (1953) defines resistance as "whatever interrupts the progress of analytic work" (p. 517). This includes holding back thoughts, not talking about thoughts or avoiding a discussion about a particular topic. According to Freud (1953) resistance results from fear and frequently, that fear is related to facing one's anger. Leo Rangell (1983) states "resistance is a defense against insight" (p. 1). This insight is not blocked or out of reach but actively opposed by an unaccepting ego (1983). Resistance, described by Freud (1895d), refers to all behavior and verbalization that hinders the patient access to his or her unconscious. Freud (1926) identifies five types of resistance: repression resistance, transference resistance, id resistance which refers to a repetition compulsion of repressed instincts, superego

resistance which refers to a need for punishment, and epinosic resistance which refers to the difficulty rejecting symptoms because of the potential gain received by them (Freud, 1926).

Hyman Spotnitz (2004) explains that all forms of resistance, whether conscious or unconscious, denote opposition to the analytic process. Spotnitz (2004) refers to five categories of resistance: transference resistance, status quo resistance, resistance to the analytic process, resistance to cooperation, and resistance to termination (p. 117). In transference resistance, the patient's customary patterns of dealing with frustration emerge as the patient co writes the analytic situation. The analyst determines whether the transference to the analyst is object oriented (oedipal) or narcissistic (Spotnitz, 2004). In status quo resistance, the patient feels satisfied with his or her analysis and seeks to maintain his or her current state (2004). In resistance to the analytic process, the patient is not interested in learning anything new or moving away from his or her old patterns of existing (2004). In resistance to cooperation, the patient may refuse to give information, verbalize feelings or listen to the analyst (2004). In resistance to termination, the patient refuses to accept interruption of treatment either through an analyst's vacation or treatment termination. A patient may communicate this by regressing to previously resolved difficulties (Spotnitz, 2004).

Defenses derive from a conflict between drives and the ego (Freud, 1896). Furthermore, the function of defenses is to support and maintain a state of emotional stability in order to avoid anxiety and discomfort (1896). Anna Freud (1936) identifies nine mechanisms of defenses, these include, regression, repression, reaction formation, isolation, undoing, projection, introjection, turning against the self, and reversal into the opposite. Sublimation, denial, altruistic surrender, and identification with the aggressor were added in later years (Akhtar, 2009). Defenses serve to reduce anxiety; they operate unconsciously, and have their roots in childhood. Some defenses

arise in developmental stages, whereas others are specific only to certain psychopathological symptoms. Some defenses are more ego oriented than id, and some defenses are permanent while others are employed only during specific events. Defenses play a role in the normal psyche, and any behavior can be used for defensive purposes and do not always fall under the identified mechanisms of defense described by Anna Freud (Akhtar, 2009).

In surveying the literature on defensive structures I found the work by George Valliant most relevant to my research. Vaillant (1995) views defense mechanisms as serving the purpose of adaptation. They are unconscious, involuntary, and creative. Defenses distort, deny or repress reality and alter the relationship between affect and idea (Vaillant, 1995). Furthermore, Vaillant (1995) explains that defenses are healthy no matter how odd, sick or disordered they appear, because they serve as a means of coping, defending or protecting the individual against perceived threat. Vaillant (1995) describes four levels of defenses, each of which include various subtypes of defense mechanisms. The fourth category and most relevant to this study, is labeled, Mature Defenses. These are characterized by a fusion between the four sources of conflict (id, superego, reality, and people). This category contains a defense mechanism called altruism (Vaillant, 1995). In altruism, the feelings of the self are attributed to the object, which allows for self-efficacy, and the self is at least partially gratified because asceticism is teamed with pleasure and thus allows the object to feel blessed (Vaillant, 1995).

Defensive routines in organizations are defined as actions or policies, which we put in place in order to protect ourselves and our organizations from experiencing embarrassment or threat (Argyris, 1999). Argyris (1999) views defensive routines as anti-learning and overprotective. They prevent the identification of the problem as well as thwart the potential to reduce or eliminate it (1999). Argyris' (2006) work on organizational defensive routines suggests

that defensive reasoning within an organization involves the use of cover-ups for self-protection, the discouragement of new or opposite points of view within the organization, and the perception that the organization is always innocent. Defensive reasoning leads to the creation of an underground organization whose existence is known. Actions, however, are rarely taken to correct its mistakes. Those within the organization believe they must protect the underground organization to keep it from getting out of control (Argyris, 2006).

The literature on suicide includes work by Iga (1986) who suggests that suicide is caused by a failure to attain personal goals because of inadequate means such as detrimental behavior, illness, declining creativity, and a weak ego. A weak ego is characterized by a strong dependency need, a tendency toward emotionalism, high susceptibility to group pressure, a lack of reality testing, and weak impulse control. Research by Firestone (1994) discusses the implications of unresolved Oedipal complexes in people at risk for suicide. Family dynamics in which parents compete with, show resentment toward, or direct aggression at the child of the opposite sex fosters the growth of aggression in the child. This feeling is then internalized and emerges as a negative thought process, which can be triggered when the individual strives to achieve personal goals. Cutter (1971) states that there is, to some degree, a universal wish to die in every human being, with natural variation from human to human and throughout time for any individual. A prior history of attempts is clearly a risk factor for suicide, since many suicides are preceded by past attempts or injurious behavior. Suicidal behavior intensifies if disinhibitors such as drugs are involved, along with factors such as alcohol abuse and psychiatric hospitalization. Alvarez (1971) writes in *The Savage God: a Study of Suicide* that those who commit suicide do so in order to escape confusion and to clear their minds, a process in which suicide enables the individual to create an imaginative reality and break the patterns of obsession and necessity that

have controlled his or her life. Empirical evidence by Carveth (2000) shows that suicide rates are higher in adults who have had painful births. Adams et al. (1998) found that feelings of anxiety, depression and alienation are linked to poor self-cognitions, which are strongly correlated to suicide.

Modern psychoanalysis has studied the pre-Oedipal dynamics, which are communicated through emotional induction or projective identification rather than through words (Meadow, 1996). It is believed that patients reenact events and impressions in their adult lives that originally evolved in their early childhood or pre-Oedipal years. These occurrences and impressions are stored and replayed throughout the lifespan. Moreover, understanding the competing forces of Eros (the life drive) and Thanatos (the death drive) is vital in terms of conceptualizing the ego and its conflicts with the id in pre-Oedipal dynamics (Meadow, 1996).

Spotnitz (2004) notes that a schizophrenic reaction involves reducing the tension to protect the object. This results in a disorganized mental apparatus and eventually leads to psychosis (2004). In other words, a psychotic state is the mind's attempt to reconcile the conflict between love and hate (Spotnitz, 2004). Menninger suggests that self-mutilation and suicide may occur as a defense if the mind fails to reconcile the hatred withheld from objects (1938). Spotnitz (2004) adds if the defense of self-mutilation and suicide fails, then homicide will occur. However, if homicidal behavior is guarded by hospitalization, then suicidal behavior manifests itself once again (Spotnitz, 2004).

Cognitive psychological theory contends that thoughts, not external events, dictate the feelings and behavior of the suicidal individual, and only if these negative thought patterns are modified can an individual improve how he or she feels and lives (Beck et al., 1979). Aaron Beck (1983) is most commonly associated with cognitive theory. He observed that the cognitive

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link between depression and suicide is a feeling of hopelessness whereby this feeling manifests itself in the individual's negative views of the future, his or her self, and the situation.

Shneidman's (1996) psychological theory of suicide describes suicide as a "drama of the mind"; he uses the word "psychache" to describe the psychological pain of negative emotions and unmet psychological needs. This "psychache" holds an overwhelming amount of distress, resulting in the perception of suicide as the only way to escape the pain (Shneidman, 1996). Furthermore, Shneidman (1996) states that the combination of psychache and lethality, the willingness and ability to kill oneself, is what results in suicide. Merely denying a suicidal individual access to lethal weapons will not eliminate the risk of death. Only if an outside person manages to alleviate and identify the suicidal person's psychache can he or she reduce the lethality of the behavior (1996). Shneidman's theory suggests the use of the question "Where do you hurt?" to accomplish this result (Shneidman, 1996).

Jamison discusses the implication of acute psychiatric illness as the single most common and dangerous trigger of suicide, aside from the interplay between an individual's predisposing temperament and genetic vulnerabilities (Jamison, 1999). Bostwick notes in (Maltsberger and Bostwick, 1997) that diagnoses which predict suicide-related behavior are usually depression and panic disorder (or both). Studies of 209 suicidal patients met the criteria for one or more additional diagnoses that are known to elevate suicide risk. These include: mood disorders, substance abuse disorders, or anxiety disorders.

Neuroscience research also contributes to our understanding of suicide. A significant number of studies have focused on dysfunction of the prefrontal cortex, also called the "executive control center" of the brain. These studies have found that suicidal individuals (both attempted and completed suicide) have low levels and abnormal functions of the

neurotransmitters serotonin, dopamine, and norepinephrine in the prefrontal cortex. Though the following studies have demonstrated neurobiological dysfunctions in suicidal individuals, the precise dynamics of these irregularities remain unclear (NIMH, 2003-2004). One of these studies, done by Kraemer and colleagues (1997), linked reduced serotonin function to aggressive, impulsive, and risk-taking behaviors, all of which are associated with suicide (Kraemer et al., 1997). Placidi and colleagues (2001) examined patients who were diagnosed with major depression. They found that patients who had made serious suicide attempts had significantly lower levels of serotonin compared to controls or those who had made less serious attempts of suicide. No differences in levels of dopamine or norepinephrine were noted (Placidi et al., 2001). Additionally, Ordway (1997) found that individuals who have experienced chronic stress and depression develop a depletion of norepinephrine and an increase in noradrenergic proteins. The latter has been found in individuals who have committed suicide (Ordway, 1997). Lastly, a study by Engstrom and colleagues (1999) examined the interaction between serotonin, dopamine and norepinephrine metabolites in the cerebrospinal fluid. The findings suggest that when compared to controls, those who attempted suicide had abnormal interactions between neurotransmitter metabolites as well as, low levels of the dopamine metabolite HVA. However, this study did not find the individuals who attempted suicide to exhibit lower levels of the serotonin metabolite 5-HIAA, which is a significant contradiction to previous studies (Engstrom et al., 1999).

Industrial/organizational psychology offers various theories and research to further our understanding on suicide. This discipline discusses the psychology of fear, which provides a salient perspective essential for understanding self-destructive acts within military systems. According to the ancient philosophy of Stoicism, military conduct is made up of mindless drill

and compliance that is ultimately and essentially motivated by feelings of fear (Sherman, 2005). Terror Management Theory postulates that instinctual awareness of death creates feelings of terror in human beings. Ultimately, we manage terror by fostering a cultural worldview, which imposes order, meaning, permanence on existence and self-esteem in our lives (Pyszczynski, 2004). In other words, Pyszczynski (2004) says that having cultural worldviews and self-esteem in life are essential for anxiety-free and terror-free living. This supports O'Malley's (1975) research, which states that there is a strong correlation between suicide rates and media presentations of threat. Sayers (1996) contends that defensive routines are institutional, ongoing and long term mixed messages. Furthermore, Sayers argues that defensive routines serve the purpose of avoiding embarrassment or threat and maintaining the status quo to prevent unwanted change by means of: 1) giving messages that are inconsistent, 2) acting as if the message given is not inconsistent, 3) making the inconsistency undiscussable, and 4) pretending as if there is no inconsistency that is undiscussable (1996).

Organizational learning emerges from social interactions and involves making sense of data, socialization, observation and emulation of practices within the organization (Easterby-Smith et. al., 1999). Argyris & Schön (1978) report that each member creates his or her own perspective of an organization, always incomplete, thus requiring continual input from other members in order to get the whole picture. Moreover, Salomon & Perkins (1998) report that organizations do not learn very well, mostly because of the characteristic that they must pass through a collective of individuals with different cognitions, all of which are very deeply ingrained, before learning takes place. Therefore, members who have different perspectives and views that range from policymaking to individual beliefs may inhibit organizational learning. Brown & Duguid (1991) report that workplace practices indicate that people usually work

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differently from the way organizations describe the work in manuals, yet organizations use these descriptions to understand work practices, thereby masking learning and innovation generated by members. Brown & Duguid (1991) suggest that in order for organizations to improve in all three areas, they must perceive working, learning and innovation as compatible and complementary forces within an organization.

In terms of understanding organizational violence, Connell emphasizes that most of the actual violence is not isolated/individual action but rather institutional (Kimmel and Messner, 1995). Connell argues that the state is an instrument of coercion and may even be the means for calculated violence by using hegemonic masculinity (Kimmel and Messner, 1995). Connell describes the military as organized based on the relationship between various forms of masculinity. For example, a soldier may be physically violent but subordinate to orders from superiors; a general may be dominating on the one hand, but organizationally competent on the other (Kimmel and Messner, 1995). Heinrich Himmler, for example, was the head of the Nazi police forces in WWII. Reportedly, he had never killed anyone despite commanding one of the most brutal military organizations in recent history (Kimmel and Messner, 1995). Himmler's life ends as he commits suicide to avoid facing trial for his part in the Holocaust (Microsoft Encarta, "Heinrich Himmler", 2007).

The following section describes the role of the present day Coast Guard as well as its historical development into the organization it is today. The United States Coast Guard is the first and oldest maritime agency of the U.S., established in 1790. It was the amalgamation of five U.S. Federal agencies (the Revenue Cutter Service, the Lighthouse Service, the Steamboat Inspection Service, the Bureau of Navigation, and the Lifesaving Service) that ultimately produced what we today call the U.S. Coast Guard (USCG). Until 1798 when the Navy