



Cultural Problems Require Cultural Solutions

Partnership between Anthropology and the U.S. Marine Corps to Prevent Suicide¹

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Abstract: The U.S. military continues to experience high and increasing rates of suicide despite massive funding and support for research and prevention. The dominant research and prevention paradigm, which is strongly oriented toward quantitative, clinical, psychodynamic, and biomedical approaches, can greatly improve with an expansion into

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qualitative, ethnographic methods, theories, and applications. Critical discussion of key aspects of military suicide research and prevention and the nature of anthropological research support a robust partnership between the discipline of anthropology and the U.S. Marine Corps to address and prevent suicide.

Keywords: U.S. Marine Corps, ethnography, military suicide, collaborative research, military anthropology, suicide prevention

Suicide among U.S. military servicemembers and veterans has been a persistent issue for nearly 20 years.² According to the U.S. Department of Defense (DOD), Marines in 2020 displayed the second-highest rate of suicide among all the Services at 33.9 per 100,000 servicemembers, with more pronounced risk in combat arms occupations.³ The DOD's response to military suicide is marked by exponential growth in funding and investment in research, treatment, interventions, and public health initiatives, making it the single largest funder for suicide research in the United States.⁴ Due to persistent journalism, advocacy, research, and military-civilian collaboration, military suicide remains a high national priority and a point of utmost concern within the U.S. military community.⁵ Nevertheless, despite massive investment and the development of lifesaving measures by healthcare and research institutions, the rate of suicide among servicemembers and veterans continues to rise.

To bolster suicide prevention, the military, research, and healthcare communities must adjust the current psychological, clinical, biomedical, and epidemiological models of suicide research and prevention to include and

engage with direct, lived experience of servicemembers. This can be accomplished by engaging in qualitative, ethnographic research to explore and operationalize the social, cultural, and institutional realities that contribute to suicide and the development of underlying risk factors. This paradigm expansion, discussed here in the context of the U.S. Marine Corps, can be achieved by drawing on a broader range of methods, theories, and partnerships to address suicide and improve mental health and well-being both systematically and holistically.

Ethnographic, qualitative research on suicide, which places the policies, practices, procedures, and cultural attitudes toward mental health and well-being within its scope, requires a collaborative partnership with anthropology, the discipline specifically designed to examine the cultural meanings of human behavior. Anthropology allows for the integration and proper prioritization of the emic or insider perspective of suicide and mental health, contributing to a more effective approach to suicide research and prevention. This article begins with a brief overview of key aspects of military suicide research, as they support the above thesis. An ecological-structural model of suicide prevention is then used to establish culture as a primary foothold for gaining a holistic and restorative understanding of suicide, long understood for its complexity, or as a “multidimensional malaise.”⁶ Next, an introductory overview of anthropological research is provided, which touches on characteristics of ethnography, understandings of culture, and past and present features of military anthropology, as they may impact collaboration between anthropologists and the Marine Corps. This article provides a brief proposal for future collaboration between

anthropologists and the Marine Corps before concluding with an appeal to military science and warrior ethos.

Arguing that military suicide research and prevention requires a paradigm shift or expansion toward self-reflexive, holistic, or interdisciplinary approaches that are informed by ethnographic and qualitative study typically opens a Pandora's box of broader historical critiques of suicidology as an overwhelmingly biomedical field. While this general critique weaves in and out of this article, more comprehensive and authoritative treatments of the philosophical and applied implications of this critique are provided elsewhere.⁷ For the main purposes of this article, the brutal reality that military suicide rates continue to rise despite massive spending and resource allocation is more than sufficient evidence to justify the exploration and challenging of existing paradigms within suicide research and prevention. Essentially, the military, research/academic, and healthcare communities directly involved in suicide research and prevention are doing the same thing repeatedly and expecting different results. Accepting suicide as a chronic health disparity, and considering the recurring nature of current methods, should motivate these communities to consider different approaches, including an open-ended analysis of the perceptual and cultural models of suicide as well as the sociohistorical narratives of illness.

This article is written from the combined positionality and experience of a former Marine and interdisciplinary student of social work, anthropology, and history. Acknowledging, incorporating, and shedding light on the value of lived experience and interdisciplinarity, both of which are underrepresented within suicide research, is also an attempt to reflect the

stated objective of Marine Corps University Press, which is to speak across boundaries and communities to address common issues and topics. Speaking across disciplinary and cultural lines is especially important in suicide research, as communities are too often siloed and specific paradigms and professions will retreat from or dominate agendas out of fear that research and prevention will be “abandoned to other fields.”⁸ The existence of hidden and exposed divisiveness should be acknowledged honestly and openly, as a general atmosphere of disagreement about theory, methodology, authority over funding and access to data, and administrative oversight of suicide prevention reduces the effectiveness of military suicide research. Divisiveness and lack of reflexivity will lead further along a path marked by hypermedicalization and commodification of the body and mind.⁹

This article offers an exploration in writing, informing, and appealing to a broader and more inclusive audience of social scientists, servicemembers, veterans, and military and civilian leaders and policy makers.¹⁰ It is written for leaders who are seeking innovative approaches to more effective suicide research and prevention; for Marine officers and enlisted leaders who are seeking partners with whom they can collaborate on applied anthropological research for the direct benefit of Marines under their charge; for the military suicide research and prevention community, regardless of disciplinary or professional background; and most importantly, for Marines, so that they may be more informed and empowered to advocate for improved suicide and mental health research, holistic practices, and a culture of wellness. This contribution to the literature on military suicide is largely comprised of secondary source analysis. However,

during the roughly two-year period in which this article was conceptualized and developed, a significant number of professionals and researchers in various fields and disciplines; individuals who serve or served in military, veteran, and civilian contexts involving suicide and mental health; and fellow military veterans who have also taken the plunge into academia contributed greatly to the development of this article as secondary readers, sources, advisors, mentors, and collaborators. To these individuals, all credit for any success or value of this article is given. Any errors, misuses, or misinterpretations of sources or data belong to the author alone.

Military Suicide Research and Prevention Paradigm

The study of suicide is led almost exclusively by psychiatrists, psychologists, biomedical researchers, and epidemiologists who focus on collecting and analyzing quantitative data on individual risk and protective factors for suicide.¹¹ This trend is clear in the existing literature and evidenced by the composition of leadership in the field of suicidology as well as specific suicide research groups focused on military suicides. One such example is the Military Suicide Research Consortium (MSRC), which is composed completely of psychologists and supports quantitative research design.¹² In 2011, the editor of the *Suicide and Life-Threatening Behavior* journal and coleader of the MSRC, Thomas E. Joiner, stated that “hypothesis testing with fair testing using valid and quantifiable metrics” must be supported over approaches to suicide that fail to meet “scientific rigor.”¹³ This, in Joiner’s evaluation as well as his value of various types of research, which forms the criteria for determining publication in a leading journal on suicide, places qualitative and nonexperimental research firmly within the least valuable

range. This said, MSRC's research and activities and this philosophical view espoused by its leadership contradicts the stated mission of the MSRC, which is to "integrate and synchronize U.S. Department of Defense and civilian efforts to implement a *multidisciplinary research approach to suicide prevention*."¹⁴

Pointing to an overreliance on, or bias toward, clinical, biomedical, and epidemiological approaches should not automatically discount the continued value of such approaches; rather, it should question the utility of viewing suicide as detectable and treatable as a psychological, neurobiological, or statistically significant event that occurs within a cultural vacuum. Without robust quantitative research, invested communities and future research—to include qualitative, ethnographic projects—would be far less uninformed of critical trends in suicidal behavior within a multitude of contexts. The irony of citing sources that stem from the standard approaches to suicide research, which this author may be seen as disparaging here, in support of novel approaches is not lost on the author. However, acknowledging the limitations and dominating nature of the current paradigms of suicide research is essential to recognizing the value of novel approaches. For example, removing culture from the overall context of suicide and mental health plays on an overly mechanistic, or moralistic, view of suicidal behavior. This could also cause social perceptions of health risks and outcomes to become relegated to individual pathology, reducing suicide to a statistical description of risk and protective factors as well as pathologizing the individual Marine and dislodging mental health and suicide as a behavior situated within cultural and institutional contexts.¹⁵ Postulating "why people die by suicide" is not the same as asking why

peoples die by suicide.¹⁶ The disproportionate focus on biomedical and mechanistic interpretations of suicide restricts the Marine Corps to a limited set of theoretical and methodological tools.

Stating that culture has been excluded from suicide research will likely receive protest. Some may argue that research has been conducted for decades on factors that are indeed sociological.¹⁷ The field of sociology has a significant history of exploring self-destructive behavior and counts the French sociologists Émile Durkheim and Gabriel Tarde as classic examples of early investigations into suicidal behavior.¹⁸ A variety of social data continues to be collected and analyzed to locate risk and protective factors and applied to sociohistorical explanations of suicide within certain populations. However, sociological research on suicide is highly focused on statistically laden demographic data, as opposed to descriptions of patterned human behavior that is grounded in lived experience and cultural meanings.¹⁹ Sociologists recognize that maintaining relevance to suicidology requires pursuing qualitative research design and multidisciplinary in order to “gain new insights into the social and cultural mechanisms underlying suicide risk.”²⁰ While factors commonly correlated with suicide risk—such as gender, racial or ethnic identity, socioeconomic status, alcohol use, regional and national differences, and religion—serve as social facts, inform sociohistorical theories on suicide and mental health within communities, and contribute to digestible iconographs, checked boxes and digital inputs alone are not sufficient to identify social processes and cultural contexts. While identifying correlations between demographic factors and the high rates of suicide in the Marine Corps (i.e., the Service is largely young and male) is essential to directing further suicide research and prevention,

survey-based research does nothing to illuminate the everyday realities of the young male Marine, or how those realities, perceptions, and relationships with the social environment influence that Marine's mental state or decision to attempt suicide. The well-worn quote attributed to Albert Einstein is appropriate here: "Not everything that can be counted counts and not everything that counts can be counted."²¹

Inferring the "ifs" and "whys" of cultural motivations for suicide from a distance is tantamount to what anthropologists have long identified as "armchair ethnography," which cannot replace qualitative ethnographic study of suicidal behavior on the ground. Only ethnographic research, comprised of highly scrutinized procedures for qualitative data collection and analysis, is designed to uncover the role of the "cultural idea" of suicide and various meanings of self-destructive behavior and mental health. Without this, the individual as well as the ubiquitous Marine who embodies, reflects, imitates, and negotiates tension with the milieu of Marine Corps culture is absent from the research.²² Marines can easily recognize this reality by interpreting the significance of coded language and implicit decision-making processes. Colloquialisms such as "Love Marines, hate the Corps," "Eat the apple, f**k the Corps," and "We can't do that, it makes too much sense," or daily decisions that would hold no meaning for non-Marines, such as the choice to (or risk of) walking on grass or the proxemics involved in judging how far one can walk from a building without wearing a "cover" (cap), represent the constant tension between individual agency and the institutional, acculturative forces that Marines navigate. Such unwritten rules are encoded within the language, customs, and cognitive perceptions of Marine Corps culture and influence attitudes toward mental health.

Suicide is highly situated in social contexts and individualized to one's immediate cultural backdrop and positionality.²³ Differences in suicide rates between combat arms and noncombat arms occupations provide an opening for exploring culture as a significant, and perhaps deciding, factor.

Examining the production, reproduction, and practice of attitudes toward mental health and self-destructive behavior will also prevent suicide research from being further sanitized by the presence of institutional or organizational cultures. Marines are agents who respond to and interact with social experiences and environments. Isolating self-destructive behavior, to include suicidal ideation, from lived realities effectively cloaks culture as a main entry point for understanding and preventing suicide.²⁴ Misapplication of culture in suicidology occurs when writers use the term *culture* as a quasidemographic label for a group or community (e.g., urban culture, Midwestern culture, "cultures of honor," military culture, and ethnicity) rather than a description of subjective experiences, perceptions, values, norms, and beliefs. Abuse of this term invites the famous words of fictional character Inigo Montoya in the film adaptation of *The Princess Bride*: "You keep using that word. I do not think it means what you think it means."²⁵ From a brief discussion of trends in suicide research, as they relate to ethnographic research and meanings of culture, suicide is often outlined, through analogy, as a health disparity tied to underlying social and structural conditions.²⁶

In suicide prevention and public health education, the "iceberg model" uses the tip of an iceberg to signify suicides occurring in a community, while the submerged mass projects the number or rate of individuals who contemplate, attempt, or are at risk of suicide. This model directs attention

to those Marines “below the surface” who need support and intervention, underscoring the importance of suicide awareness and intervention training.²⁷ However, the iceberg model may also highlight underlying risk factors, including social perceptions of suicide and mental health. Keeping suicidal behavior such as attempts and deaths at the tip of the iceberg, one can revisualize the portion under the water as a body of risk factors, with those most strongly associated with immediate risk nearest the top. Such factors as suicidal ideation, substance use, previous attempts at suicide, panic attacks, or access to firearms, for example, may indicate more immediate risk within a clinical assessment than severe or chronic physical illness, financial or relationship problems, transitions in life stages, workplace discrimination, adverse childhood experiences, socioeconomic status, low unit cohesion, or harmful attitudes toward health and illness. The immediate risk factors for suicide continue to be thoroughly researched using psychodynamic and interpersonal models such as Joiner’s interpersonal theory of suicide, Edwin S. Shneidman’s psychache, and Roy F. Baumeister’s escape theory of suicide, and they are incorporated within clinical criteria for identification of risk and evidence-based treatment.²⁸ However, factors such as depression, hopelessness, suicidal ideation, feelings of escape, psychological disintegration, and lethal means—all of which are quantifiable aspects of identify, behavior, or environment that correlate with, not cause, suicidal behavior discussed in these models—cannot exist at pandemic levels without the support of underlying factors or processes, to include the collective views, attitudes, and values held and practiced within society and institutions. This analogy allows researchers to comprehend the full depth and breadth of suicide, prompting the

integration of ecological, cultural models of suicide with existing psychodynamic and interpersonal perspectives.

Anthro-what?: The Relationship between Anthropology and the Military, and the Value of Anthropology to Military Suicide Research and Prevention

Effective and productive exploration of the cultural roots of suicide requires the active involvement of anthropologists.²⁹ Anthropology, however, is neither as popular a discipline as psychology, sociology, or other social sciences, nor is it as readily associated with pressing issues such as public health, violence, or suicide. This is largely a result of anthropologists who write and operate within an academic bubble. Consequently, any knowledge of anthropology is often replaced by scenes of mustached men in pith helmets and colonial wear taking intrusive photographs and notes of exotic tribes or stuffy professors donned in elbow-patched blazers. As a result, making the connection between anthropology and suicide research and prevention—which is necessary to facilitating a discussion on the benefits of cultural research on Marine suicide, mental health, and well-being—requires a “hip-pocket class” on the discipline as well as some key aspects of the relationship between anthropology and the military that may impact anthropological research on military suicide.³⁰

Anthropology, in brief, is the study of learned human behavior throughout time and space. Anthropologists endeavor to understand the development and meaning of behaviors, events, worldviews, places, spaces, and cultural or social systems and networks. Culture is the most basic and essential factor of anthropology. While each anthropologist possesses a

unique perspective or approach to understanding culture, which typically depends on theoretical leanings, intellectual traditions, or subfield, culture is understood here in two ways. The first understanding is of groups that are commonly referred to as “cultures,” such as American culture, Native American culture, urban or rural culture, and ethnic culture. The second understanding is of a concept or idea of culture as being the ubiquitous, multifaceted force that informs and guides human behavior by assigning collective meanings to people, places, behaviors, language, and objects and places things, behaviors, and thoughts on a spectrum of acceptable or desirable to unacceptable or taboo.³¹

The Marine Corps is a prime example of the first form of culture, as it is an insular society complete with beliefs, attitudes, language, values, and traditions unique to members of the community.³² The unwritten rules and roles of Marine Corps society are held internally (e.g., every Marine knows, without saying, that one does not walk on certain grass) and can be empirically observed (e.g., when a “new boot” or recruit walks on grass). Anthropologists question, discover, and transcribe these unwritten scripts and performances (e.g., what is being expressed when a sergeant major yells at the new boot who steps on grass) through an exploration of material culture, human biology, linguistics, and social practices and behaviors. To aid in understanding the significance or meanings of observable behavior, experiences, and beliefs disclosed by community members, anthropology often partners with and draws from similar disciplines such as psychology, history, economics, and environmental studies, as well as “helping professions” such as social work and nursing, to employ a diverse set of methods and theories to generate knowledge on a broad variety of topics

and regional studies. For example, this article is inspired by medical anthropology, a collaborative subfield dedicated to examining health, treatment, and illness.³³ Understanding social perceptions of illness and cultural consensus on health and disability allows for the building of explanatory models that, when applied to public health issues, allow leaders and researchers to make decisions based on more robust knowledge of the social and cultural factors at play.

For example, returning to the iceberg model discussed above, a Marine can experience depression and suicidal thoughts as a result of prolonged anxiety that stems from military sexual assault. Suicidal thoughts may worsen as the Marine becomes singled out as a “malingerer” due to a group perception of depression as an invalid illness or injury and an organizational failure to reciprocate reports of sexual assault with appropriate action or support. The Marine can become further ostracized due to a social perception of survivors of sexual assault as related to a belief in rugged individualism, views of victimhood or mental illness as a sign of personal weakness and moral shortcomings, or a prevailing masculine attitude toward sexual behavior. As a result, the Marine finds it extremely difficult to seek help and experiences mental anguish and deteriorating psychological health. In this scenario, cultural attitudes and beliefs create a barrier to treatment, recovery, and a return to duties and increases perturbation. Unfortunately, this is not an imagined scenario, but one very similar to the experiences of Corporal Anne K. Vassas, who died by suicide one month before her 21st birthday after experiencing extreme mental distress stemming from multiple sexual assaults.³⁴

Of course, this example addresses the harmful or maladaptive aspects of certain socially acceptable behaviors and perceptions. Using a strengths-based approach, one can easily point to traits of the Marine Corps that, if further understood and capitalized on, can contribute to resiliency and increased mental health.³⁵ For example, in their study on resilience in the Marine Corps, anthropologist Frank Tortorello Jr. and sociolinguistic analyst and former Marine William M. Marcellino criticize the dominant view of Marine resilience “as automated functions of human biopsychological systems,” as opposed to an expression of Marine Corps values and sociocultural practices.³⁶ Reducing resilience to neurological function interferes with one’s ability to recognize resilience as culturally reinforced.³⁷ Tortorello and Marcellino’s work provides an example of anthropological research locating harmful interpretations of mental health, which views the Marine as an amalgamation of physiological and psychodynamic parts and functions rather than an active, thinking participant in a social system. People often limit resilience to a psychological state or strength without fully acknowledging cultural forms or foundations of resilience. As a result, the psychologizing of resilience places the individual Marine in a position of sole responsibility for their success or failure to be resilient to risk factors. This model dismisses the production or presence of risk factors within the Marine’s environment. Such conceptualizations of risk and accountability are characteristic of “structural violence,” a situation whereby an individual, based on their position and identity, is restricted from a full expression or actualization of self. Structural violence has been recognized as a key concept in research on health disparities, pioneered by the late medical anthropologist Paul E. Farmer, who described structural violence as:

violence exerted systematically—that is, indirectly—by everyone who belongs to a certain social order: hence the discomfort these ideas provoke in a moral economy still geared to pinning praise or blame on individual actors. In short, the concept of structural violence is intended to inform the study of the social machinery of oppression. Oppression is a result of many conditions, not the least of which reside in consciousness. We will therefore need to examine, as well, the roles played by the erasure of historical memory and other forms of desocialization as enabling conditions of structures that are both “sinful” and ostensibly “nobody’s fault.”³⁸

Placing the burden on individual Marines to develop resilience and use resources to counteract suicide risks, which are produced within the environment, is reminiscent of the policy reactions to military sexual assault. Requiring adherence to a “buddy system,” providing victim advocate resources, and issuing rape whistles does nothing to address the implicit attitudes within the military that permit rape, and it holds the individual accountable for their rape and recovery.

Applied Anthropology

Anthropology in its applied form (as opposed to in an academic context) is also well suited to studying and resolving miscommunications, processual problems, and conflicts between groups that often stems from assumptions, past experiences, and misperceptions of “others.” Inserted into conflicted situations, anthropologists serve as “cultural brokers,” facilitating collaboration, mutual understanding, and achievement of shared goals.³⁹

Studying interaction within healthcare settings to support treatment processes and communication between providers and clients is an established role for anthropologists within the U.S. Department of Veterans Affairs (VA).⁴⁰ Mixed methods research on suicide and mental healthcare, which combines qualitative and quantitative data collection and analysis, provides another example of the intersection of culture and suicide.⁴¹ However, mixed methods projects can undermine the true value of interdisciplinary research by making token use of qualitative and ethnographic research to summarily confirm, rather than challenge, dominating theories and methods.

The question of how anthropologists conduct cultural research is a natural transition at this point. The value of anthropology is found in unique methods and mentality toward studying human behavior as well as access to a wide array of techniques and tools to explore specific topics. Such topics include in-depth interviews with individuals and groups, cross-sectional sampling, life-narrative approaches, open- and close-ended surveys, analysis of historical documents and material culture, and participant observation, which is most applicable to the topic of mental health and suicide in the Marine Corps. Participant observation occurs when an anthropologist embeds with a community to observe and record, firsthand, individual and group behavior within a naturalistic environment. The primary benefit of this classic method of anthropological research is drawn from the field's historical focus on the emic worldview of partner communities. Anthropologists attempt to see, through the eyes of community members, how and why people learn, interpret, convey, and

perform certain behaviors, and how individuals and groups give or draw meaning from everyday issues such as mental health, illness, or wellness.⁴²

For example, an anthropologist studying suicide in the Marine Corps would dedicate the bulk of their time and energy to being with Marines, which means attending trainings, events, and ceremonies; serving in clinical settings; and even deploying in limited capacities, attempting to leave a light footprint and carefully avoiding interference with day-to-day activities by enmeshing with a unit and melting into the background. Anthropologists often enjoy long-lasting relationships with communities and become valuable advocates and resources for them.⁴³ Some researchers who see the value of being understood in terms of their own experiences and worldviews are members of a growing community of veteran-social scientists. They are informed by direct experience with cultural realities and academically trained to recognize cultural experience, opening the door to autoethnography, which transpersonal psychologist Diana Raab defines as “a form of autobiographical writing and an approach to research that describes and analyzes personal experience as a way to understand cultural experiences.”⁴⁴

Receiving information on sensitive topics such as suicide requires trust, rapport, and confidence between the researcher and the community. Beginning with a shared consensus that a full comprehension of individual and group behavior is attainable through open-ended exploration of Marine Corps life and appropriateness of the research framework, such trust and rapport is strengthened and maintained by the anthropologist’s prime directive to do no harm, to benefit the community at the center of a study when unconstrained by ethical dilemmas, and to collaborate on all stages of

research to address concerns.⁴⁵ Keeping these points in mind, it is not uncommon to find anthropologists navigating complex, often austere environments worldwide in the pursuit of cultural knowledge and working in close partnership with various communities.

However, as with any ethnographic project, such research brings challenges to maintaining objectivity throughout sustained involvement and acculturation to the Marine Corps and sociocultural aspects of suicide. The issue of objectivity and subjectivity receives significant space in training, and the literature on anthropological method and theory is replete with debate over “insider-outsider” or “emic-etic” considerations. It could be argued that anthropologists spend as much or more time analyzing their relationship to knowledge, communities of study, and interdisciplinary debate on ethical principles and practices involved in research than conducting actual fieldwork. As a result, properly trained anthropologists continuously account for the positionality and interests of the researcher, the research participants, and the communities and contexts to which both belong.⁴⁶ To that point, and in the interest of disclosing positionality, this article draws specifically on what Yannis Hamilakis describes as “politically situated ethics.” This can be defined as:

ethics that takes sides, that recognise the contingency and historicity of human action, the nexus that links knowledge and power and produces specific “regimes of truth.” . . . These are also ethics that acknowledge the inequalities and asymmetries of power and the necessity to adopt a stance that sides with certain interests and groups against others. It is this ethic that moves the debate from the arena of abstract principles within professional structures to the

arena of theorised practice. The political ethic is an embedded ethic, and at the same time is a social ethic, an ethic that goes beyond western individuality by recognizing the need to address social dynamics (such as class struggle, labour, feminist, green or anti-capitalist movements), and forge alliances with effected groups and people with whom these specific archeologists [or anthropologists] share political convictions and goals. I do not suggest that this process is easy, unproblematic and straightforward; in fact it is the most difficult, uncomfortable and risky of the options open to us, but still the one that holds the most promise.⁴⁷

Openly and deliberately acknowledging how, when, where, and why one “sides” with specific groups, positions, or “regimes of truth” and power is especially important to military anthropology, which, as a field and subject of study, centers on a society that quite literally runs on power differentials. While ethnographic research to date provides valuable insight on the emic perspective of Marines and may provide parallels to future research on Marine suicide, it is arguable that the cumulative body of ethnographic or cultural research on the Marine Corps is cross-sectional or fully representative of Marine culture.⁴⁸ For example, the perceptions, values, and motivations of a lance corporal in the infantry is vastly different from those of a captain in an air wing, a career staff noncommissioned officer, an officer candidate, or a student at a military college or academy. Rich, in-depth ethnography is traditionally a long-term affair that allows the ethnographer to account for and ethically situate their values, beliefs, and “outsider” perspectives with those of the community of collaboration. The

need for cross-sectional research, with purposeful representation of populations most effected by suicide, is especially important given that Marines who die by suicide are more likely to be young, enlisted, and placed within combat arms, and that ethnography to date does not focus on such Marines extensively.

The Military and Anthropology: A Complex Relationship

To ensure that no important information is withheld, this article will now move from a description of anthropology and the application of ethnographic research to Marine suicide to a brief discussion of the oft-complicated and conflicted relationship between anthropology and the U.S. military. Acknowledging conflicts of interest will hopefully preempt misgivings as to the potential for collaboration between the Marine Corps and anthropologists to reduce suicide. American anthropology's historical involvement in military and intelligence activities dates back to World War II, during which anthropologists contributed to psychological operations and intelligence gathering.⁴⁹ Since then, this relationship has been an "on-again, off-again" affair, encumbered by differences in collective professional aims, issues of trust and ethics, and disagreements about foreign policy. For example, participation in military, security, or political operations can disrupt anthropologists' status as objective observers. Anthropologists should not use a position of trust to gather information on a community only to share that information with parties with whom the community is in conflict or competition. Suspicion of anthropologists as spies often leads people to ask anthropologists if they are members of the Central Intelligence Agency (CIA), law enforcement, or clandestine surveillance

bodies. Marines in frontline units might suspect that anthropologists are in league with the inspector general, the Naval Criminal Investigative Service (NCIS), or their own chain of command. Such suspicion undermines trust that what is shared in confidence is kept in confidence and that data is gathered and analyzed in the interest of the person and community.⁵⁰

Debate about collaboration between anthropologists and the military found a major flashpoint in the Human Terrain System (HTS), a U.S. Army Training and Doctrine Command program in operation between 2007 and 2014. HTS teams attempted to use social scientists to study the cultural environment in Iraq and Afghanistan in support of counterinsurgency operations.⁵¹ The American Anthropological Association, the leading professional organization representing the American anthropological community, investigated and opposed anthropologists' involvement in HTS.⁵² Eventually, HTS shut down amid reports of high costs, mismanagement, and poor implementation.⁵³ HTS represents an automatic tendency within the U.S. military to view cultural research and studies exclusively as external strategic or security studies of allies, opponents, and spaces, rather than internally oriented cultural analysis.⁵⁴ One exception to this tendency, which stands as powerful evidence of the value of qualitative research on military suicide, is provided by David T. Matsuda, who was assigned to the HTS program and who was ordered by a general officer to investigate a troubling pattern of suicides on Army bases in Iraq. Matsuda concluded that

Army suicide studies seldom stray from psychological precedent based on the statistical collection of individual traits used to create composite post-mortem profiles that are compared to historical data

in an effort to predict future trends. . . . As such, past Army suicide studies, when viewed as a body of research, are not holistic because they exclude the Army's organizational culture and the unit social relations in which ideational, attempted and completed suicidal behavior occurs. In addition, publications based on quantitative, closed ended questions and statistical surveys leave out qualitative ethnographic fieldwork in which open ended questions allow primary source interviewees to include personal experience as well as local knowledge of Army organizational culture and unit social relations.⁵⁵

Matsuda's study parallels a potential migration from the "psychological autopsy" to the "social" or "sociological autopsy" of suicide, which places more appropriate emphasis on ethnography.⁵⁶ What these movements and studies strongly suggest is that without the implementation and consistent support of internal cultural research, the Marine Corps will not be able to fully grasp the interrelated factors, conditions, and social perceptions that contribute to the decision to commit suicide or, for that matter, any salient issue that affects Marines, such as sexual assault, discrimination, hazing, or toxic leadership. This will leave Marine leaders and individual Marines one step behind the cultural curve. This point is more specifically emphasized by the following narrative of the Translational Research Group (TRG), a critical effort by the Marine Corps to employ anthropologists in organizational research. Housed within the Marine Corps' Center for Advanced Operational Culture Learning (CAOCL), an organization responsible for culture and language education and training, the TRG supported CAOCL's curriculum and assessment activities, though its core

mission was to conduct social science research on Marines and Marine Corps organizations.⁵⁷

In response to the 2017 “Marines United” Facebook scandal, in which Marines and members of other U.S. military Services distributed hundreds of nude photos of female servicemembers online, Marine Corps leaders asked the TRG to conduct a study on gender-related issues, including sexual harassment in the Marine Corps, from a cultural perspective.⁵⁸ The TRG conducted the Marine Corps Organizational Culture Research (MCOCR) Project to examine the “commonalities among the aftermath of assault and harassment, both reported and unreported.”⁵⁹ It found that these “common threads” of Marines’ experiences with sexual harassment and assault “are presented as discrete issues, but the reality is much more complex. Not only are these threads interwoven with each other, but they are also enmeshed in intangible cultural beliefs.”⁶⁰

The TRG study of the themes, experiences, and pervasiveness of sexual harassment within the Marine Corps was an act of critical self-assessment and acknowledgement of problems existing at the cultural level. The MCOCR embodied a commitment to understand narrative experiences of Marines, observe the symbiotic relationship between Marines and the Marine Corps, and apply lessons learned from such experiences and observations to policy decisions. The release of the TRG report in 2020 was accompanied by high-profile media coverage of sexual harassment and Marine Corps organizational culture.⁶¹ That same year, CAOCL, including the TRG, was shut down, or “divested,” in order to “invest in areas of higher priority.”⁶² The developments surrounding the TRG study and the closure of CAOCL may hold clues to administrative views of ethnographic research on

behavioral problems in the Marine Corps, as well as studies of organizational dysfunction in the larger U.S. military. This proposes the question: Is it possible, from the position of administrative leadership, that discomfort or unfamiliarity with in-depth, qualitative studies on organizational culture may serve as an implicit motivation to circumvent ethnographic research and further enable the dominance of biomedical and epidemiological oversight of suicide research and prevention, which is naturally less focused on cultural-institutional environments and conditions?

It is unclear whether the closure of CAOCL marks a counterproductive restriction of anthropologists to the role of external threat analysis and cultural competency training (e.g., “operational culture”). Absent deep organizational-cultural research on pressing issues from within, the U.S. military will further lose the ability to address key issues “upstream,” and collaboration between the military and anthropologists will be further restricted to off-base contexts and veteran issues.⁶³ While the latter represents an extremely important space for anthropology to contribute to veterans’ quality of life, such as improving healthcare delivery, engagements between anthropologists and military veterans take place “downstream,” after the veteran faces problems arising from military service. A truly preventative strategy places anthropologist upstream in active-duty and reserve units, where environments, conditions, and experiences contributing to mental health problems and suicide can be observed in the moment, not retrospectively.⁶⁴

Commenting on their experience and perspectives on the role of ethnography within military suicide research, Rajeev Ramchand and William M. Marcellino provide key considerations that reinforce several points made

so far and inform logistical and other challenges to ethnographic research on suicide in the Marine Corps. There are inherent difficulties to suicide research, some of which are more unique to challenges to full-fledged ethnographic research, namely in studying small sample sizes relative to more statistically common behaviors, time/cost considerations, and access to communities with which to conduct research. "I think one of the most challenging aspects of this work, from any perspective," states Ramchand, "is around the issue of access. To do any research, you need access to military personnel and environments. This can be very hard to achieve, particularly for work that is not supported or funded by a branch of Service or the DOD."⁶⁵ Moreover, exploratory research, usually qualitative in nature, is needed to further understand the processes involved in military suicides, especially given an overreliance on quantitative approaches. According to Marcellino:

if you want to better understand why military populations commit suicide or have suicidal ideation, you first need a robust model of the embodied, social meaning and decision making of military populations. . . . such work [military suicide research] needs to be theoretically justified, accounting for the empirical reality of whole persons. I'm critical of confirmatory work that hunts and pecks for mechanical causes for social behavior, e.g. tries to find correlations between risk/ideation and startle reflex/hypothalamus shrinkage/serotonergic function, etc. . . . Self-conviction as worthlessness seems to have much higher explanatory power than a lipid profile.⁶⁶

Ramchand further emphasizes an opening for qualitative research:

There are tangentially related questions on military suicide prevention that ask questions like: is there stigma associated with seeking mental health care? How are chaplains used to prevent military suicides? Do leaders foster cultures of support? Etc. etc. These have, in my opinion, relied more on quantitative approaches than qualitative ones.⁶⁷

Ramchand provides three specific considerations when discussing the need for ethnographic framing on military suicides:

- (1) What is the mental health culture in military settings and how does it vary? This would address questions beyond individual questions about stigma to understand how military personnel perceive mental health treatment, how leaders perceive treatment, how other support personnel (e.g., chaplains) see mental health treatment, and even how mental health providers perceive military-sponsored mental health treatment. What does the culture of mental illness look like in military settings?
- (2) What is the culture of support in military settings? Beyond mental health, how strong and where are there deficiencies in cultures of support? Do people know when each other is struggling (relationally, alcohol use, financially) and do they offer support or ignore problems until they reach crisis points?
- (3) How have needs changed? Does the new cohort of military recruits have norms and expectations that will require changing the ways the military “does business” and how? Is the current structure and

operations across the military supportive for helping new recruits function well, thrive, and does it promote health and well-being?⁶⁸

Emerging Themes in Application of Culture, Cultural Studies, and Anthropology

From this brief overview of the relationship between the Marine Corps and anthropology, specifically regarding ethnographic research on suicide and topics directly and indirectly related to mental health, multiple themes emerge. First, Marine Corps leadership has behaved reactively to salient issues by not facilitating and sustaining deep, qualitative study of behavioral problems prior to media fallout. This is evidenced by leadership supporting the TRG study only after the activities of the “Marines United” Facebook group became public, Marines were known to be harmed, and damage was made to the performance and reputation of the Marine Corps. Despite successful identification and analysis of key issues directly and tangentially involved in the issue of sexual assault, the TRG was ultimately shut down. Second, the Marine Corps does not provide appropriate time, funding, resources, and support for institutional ethnography (not be confused with the industrial-organizational psychology-oriented research undertaken by various agencies, offices, and contractors). While the results of the TRG study continue to provide valuable insight, a three-month timeframe for anthropological research is extremely prohibitive and hinders the full application of methodological and theoretical approaches.

Third, reflecting the previous critique of superficial conceptualizations of culture, military and civilian contracted studies, reports, and publications commonly frame “culture” not in analytical terms but rather as surface-level or aspirational descriptions. This assertion can be supported by the many

varied uses of the word *culture* in numerous publications such as *Learning*, Marine Corps Doctrinal Publication (MCDP) 7; “MCDP 7: On Learning,” a *Marine Corps Gazette* Article by Williamson Murray; “Framing Marine Corps Culture,” a U.S. Naval Institute *Proceedings* article by Anthony Pollman; the DOD’s 2020 *Annual Suicide Report*; and the Marine Corps’ *Talent Management 2030*.⁶⁹

Such uses or manipulations of “culture” can highlight generally accepted commonalities or sketch the periphery of group identity, worldview, and customs, possibly serving as a focal point for “cultural competency training.” However, aspirational, surface-level descriptions of culture are no more useful as analytical products than the individuals who attempt to undertake research and provide expertise on culture without training, experience, or pursuit of rigorous ethnographic methods and standards. Neither can inform, at least in the manner intended, understandings of the cultural contexts of Marine suicide. Missing this point will lead, and has likely already led to, studies, publications, and policy research that implicitly excludes collection and analysis of ethnographic data. It is possible that both the current research paradigm, sanitized of meaning, and the Marine Corps, which perceives “culture” and “cultural research” as aspirational and descriptive, constitute distinct yet overlapping barriers to collaborative ethnographic research and exploration of Marines’ lived experience.

For these and many other reasons that require further space and discussion to explore, the Marine Corps as a whole has not fully supported or benefitted from anthropological research on suicide and behavioral health issues, at least not to a level that matches the extent of the problem.

While this assertion may sound overly critical, such points are intended to indicate areas of further communication between anthropologists and military leadership regarding the challenges and benefits of ethnographic research, as well as resource allocation and coordination access of collaborative activities. These and other barriers to sustainable and mutually beneficial relationships between Marines and anthropologists must be addressed to facilitate culturally informed studies that can lead to a reduced prevalence of suicide and devastating behavioral issues.⁷⁰

Proposal for Collaborative Anthropological Research on Suicide

The value of the return on investment in suicide research and behavioral health services, including reliance on traditional resources such as military chaplains, in terms of empowering Marines to understand and reduce suicidal behavior or acts, provides the strongest basis for the application of anthropological research. Reviewing the *DOD Suicide Event Report* in their study of the efficacy of brief cognitive behavioral therapy, Lauren R. Khazem, David C. Rozek, Justin C. Baker, and Craig J. Bryan point out that in 2017, “34.9% of Marines who died by suicide and 49.8% who made a nonfatal suicide attempt accessed mental health services in the months preceding these behaviors.”⁷¹ Examinations of treatment efficacy, as indicated here, should also encompass an examination of underlying philosophical and cultural approaches to understanding suicide, culture, and the intersection of both. As necessary as such examinations are, getting further mired in debate does nothing to remove barriers to improved prevention and research. There must be a greater focus on proactive solutions—or in the words of this author’s old platoon sergeant, “Don’t give me excuses, give me

results.” With that in mind, what follows is a brief proposal for the incorporation of applied anthropological research on suicide and mental health in the Marine Corps, which can be adopted as a whole or in part and may inform future logic models for suicide prevention.

1. Create a permanent organizational-cultural research body composed of a representative group of Marines, veterans, and multidisciplinary social scientists charged with carrying out collaborative research that uses underrepresented methods (e.g., ethnographic fieldwork) and translates research into policy and practice. This group may be an amalgamation or expansion of (pre)existing organizations, personnel, and resources.
2. Embed researchers with Marine Corps units to conduct ethnographic and mixed methods research. The recruitment and training process for researchers is selective and tailored to maximize quality of data as well as cohesion between researchers and Marines.
3. Incorporate a developmental or life span approach, tracking individuals and cohorts from recruit training, to MOS schools, to unit assignment, to deployment, and to transition back to civilian life.⁷²
4. Ensure that each research body collaborates with interdisciplinary researchers, subject matter experts, and internal-external research bodies (e.g., the DOD, the Centers for Disease Control and Prevention, the Substance Abuse Mental Health Services Administration, and the Center for

Deployment Psychology) to support interdisciplinary, mixed-methods research, which will further triangulate data collection and analysis.⁷³

5. Focus on institutional settings (e.g., healthcare providers, suicide prevention programs, the U.S. Naval Academy and Naval Reserve Officers Training Corps programs, the Navy Judge Advocate General's Corps and other criminal justice organizations, the Marine Corps' Manpower and Reserve Affairs Department and Education Command, Marine Corps training centers, and military occupational specialty schools) to address the impact of institutional norms on Marines.
6. Empower Marine Corps leaders, Marines, and future veterans to recognize and critically self-assess organizational behavior, mitigate cultural challenges, and capitalize on strengths by integrating research results with unit training, policy, resources, and publications.⁷⁴
7. Ensure that each research body continuously assesses suicide prevention, programs, and services, evaluating sustainability, effectiveness, and areas of improvement and further need.

Conclusion: Appeal to Military Science and Warrior Ethos

Suicide in the military persists due to insufficient engagement with underlying sociocultural conditions, behaviors, structures, and systems that contribute to heightened risk for suicide and poor mental health and wellbeing. This claim rests on the perspective that risk and behavior are

embedded within social and cultural environments and processes, cultural beliefs and perceptions, and the complex interplay between individual and environmental factors. Exploring the validity of a cultural-environmental argument for suicide requires one to take detailed inventory of their values and beliefs. Marines, social scientists, healthcare professionals, and the broader military community must interrogate their own assumptions. Culture, also understood by Marines as their “warrior ethos,” is at the heart of individual and group identity, and as such can be their greatest asset or their greatest threat. Locating, closing with, and engaging maladaptive aspects of one’s cultural identity, including deeply entrenched beliefs and attitudes toward mental health and suicide, requires a commitment to self-reflexivity.

Appealing to military scientists, “culture” is too often conceptualized in terms of understanding an opponent. Repeating tired adages such as “keep your friends close and your enemies closer” can blind one to the enemy in the mirror. Many prominent figures in military science and martial arts across cultures and time periods, such as Sun Tzu, Miyamoto Musashi, Carl von Clausewitz, and John R. Boyd, were more students of cognitive perceptions and sociocultural dynamics of human behavior—particularly that of their own troops and the mental processes of strategy—than of external factors or gross interpretations of geopolitics.⁷⁵ Interpreted holistically, teachings from these and other historical sources reinforce the necessity of ethnographic and qualitative research. A professional warrior recognizes inward exploration and comprehension of environmental factors, which naturally resonates with a thick description of cultural contexts and meanings.⁷⁶ The Marine Corps is also positioned to capitalize

on the momentum of mindful and enterprising young leaders who recognize the value of cultural research on debilitating issues.⁷⁷ As a result, ethnographic research complements, reflects, and will further cultivate existing strengths.

Organizations that fail to thoroughly assess culturally bound values and behavior risk imminent and catastrophic loss of the very purpose and meaning with which that organization was created and sustained and which it may sustain into the future. Purpose and meaning may be supplanted by institutional maintenance of negative socioemotional functions, such as attributing undesirable behaviors and events to “types” or reductionist theories. Excluding such patterns of group or institutional behavior from the scope of suicide research holds focus to an immediate, palatable picture while blocking out the cultural milieu within which problem behaviors or toxic issues arise. Given the contradiction between the time and level of resources dedicated to collecting and publishing ethnographic data on suicide, the overreliance on a biomedical model of suicide, and persistent increases in suicides, political tensions within academia, healthcare, and military-governmental contexts must be acknowledged and operationalized to remove barriers that, in essence, prevent prevention. The first step to solving any problem is realizing that there is one.

The urgency of addressing suicide and mental health challenges is heightened by the growing complexity of warfare. Current and future combat features dizzying technological advancements, new applications of game theory and artificial intelligence, diverse views and theories on conflict and competition, the positioning of strategic economic centers near coastal regions and waterways, and many other critical factors that will impact the

future of the Marine Corps. Warfare will become more, not less, demanding for leaders, units, and individual Marines, pushing the limits of cognitive ability and social cohesion. Can a military society face such challenges without appreciating the internal cultural landscapes that promote or prevent destructive behaviors or mental health and wellbeing? No. By engaging in an unflinching, continuous, and sustainable appraisal of organizational culture, aided by anthropological knowledge and expertise, the Marine Corps can build a stronger foundation for future generations.

Alternatively, the Marine Corps' pursuit of risk-averse strategies to suicide prevention, giving ground to fear of failure, change, or accountability, continues to underutilize resources for cultural research and, in the process, excludes rigorous theory, methodology, and most importantly, the voices and needs of Marines. Adaptation—one part of the unofficial trinity of the Corps—requires doing something unprecedented or unimagined. While barriers to ethnographic research have been discussed and identified in this article, namely funding and access to military personnel and environments, understanding the nature and value of anthropological research is the first, and perhaps the most difficult, barrier to cultural research on suicide.

Recognition of the concomitant barriers to anthropological research within the Marine Corps was the primary catalyst for this article. More than a year ago, this author, as a doctoral student and former Marine, sought a collaborative relationship to pursue applied anthropological research on suicide and mental health. The author contacted unit commanders to hopefully initiate the process, as well as individuals experienced or invested in military suicide research for counsel. As someone who had already

completed ethnographic research on suicide, the author knew well that official approval by an institutional review board (IRB) was required.⁷⁸ In keeping with their own interpretation of collaborative approaches, the author felt that it was ethically and methodologically critical to gain the insight from Marines on the ground, with whom the author intended to work alongside. As described earlier, ethnographic research is involved, and to simply appear at a Marine Corps unit after receiving IRB approval and command endorsement, without cultivating some form of rapport or multilateral support, seemed sacrosanct.⁷⁹ For an anthropological project to be truly collaborative, a community must want the anthropologist to be there and see the benefit of building a partnership. Marines generally dislike intrusions into their domain and constraints on their time, resources, and immediate priorities, perhaps even by a former Marine. While this author received moral and intellectual encouragement from unit commanders and current and former military personnel, many of whom “saw the sense” or value in such research, with one unit commander willing to facilitate access to Marines and support an audacious research agenda, the blessings of command were needed. The author learned that it was necessary to bridge the divide between an abstract understanding of anthropology and trends in suicide research on one hand and the value of anthropology to Marines on the other to fully prepare Marines for future anthropological research. Consequently, this article, which is essentially a proposal for a concerted effort, is written and founded on a significant degree of faith—faith in the interpretation of a partnership between anthropology and the Marine Corps as valuable and beneficial, and faith that the reader, so informed and

inspired, will act on the conclusions and recommendations made here within their sphere of influence..

¹ This article is dedicated to the memory of two giants: Paul E. Farmer and Raymond J. Mendoza. Dr. Farmer, a pioneer in global health, physician, teacher, gifted anthropologist, and friend to many, passed away unexpectedly on 21 February 2022 in Rwanda, doing what he loved: serving the needs of the most vulnerable and improving lives. U.S. Marine Corps major Raymond Mendoza, former commanding officer of Echo Company, Battalion Landing Team 2/1, died in action in al-Anbar Province, Iraq, on 14 November 2005, doing what he loved: leading Marines from the front and embodying the best of Marine Corps tradition and culture. Major Mendoza was a rising star in the Corps, a father, a husband, and an inspiration to all of his Marines. The work, leadership, dedication, and values of these two individuals greatly impacted the spirit of this article, and they will continue to impact the world for generations to come. *Chi miigwetch* (thank you very much).

² For a historical and epidemiological review of suicides in the U.S. Military, see Jeffrey Allen Smith, Michael Doidge, and Ryan Hanoa, "A Historical Examination of Military Records of U.S. Army Suicide, 1819 to 2017," *JAMA Network Open* 2, no. 12 (2019): e1917448, <https://doi.org/10.1001/jamanetworkopen.2019.17448>.

³ *Annual Suicide Report: Calendar Year 2020* (Washington, DC: Department of Defense, 2020), 15. See also Seth Robson, "Defense Department Report Reveals Military Occupations with Highest Suicide Rates," *Stars and Stripes*, 28 April 2020.

⁴ Rajeev Ramchand et al., *Developing a Research Strategy for Suicide Prevention in the Department of Defense: Status of Current Research, Prioritizing Areas of Need, and Recommendations for Moving Forward* (Santa Monica, CA: Rand, 2014), <https://doi.org/10.7249/RR559>.

⁵ The phrase *military community* here includes active-duty personnel, Reserve personnel, National Guard personnel, military families, veterans, and individuals working with and for military members and veterans.

⁶ Edwin S. Shneidman, *Definition of Suicide* (New York: Wiley, 1985), 203.

⁷ See Jennifer White et al., eds., *Critical Suicidology: Transforming Suicide Research and Prevention for the 21st Century* (Vancouver, Canada: University of British Columbia Press, 2016).

⁸ Matt Wray, Cynthia Colen, and Bernice Pescosolido, "The Sociology of Suicide," *Annual Review of Sociology* 37 (2011): 505–28, <https://doi.org/10.1146/annurev-soc-081309-150058>.

⁹ Joseph Dumit, *Drugs for Life: How Pharmaceutical Companies Define Our Health* (Durham, NC: Duke University Press, 2012).

¹⁰ Alisse Waterston and Maria D. Vesperi, eds., *Anthropology off the Shelf: Anthropologists on Writing* (West Sussex, UK: Wiley-Blackwell, 2009).

¹¹ Ludek Broz and Daniel Münster, *Suicide and Agency: Anthropological Perspectives on Self-Destruction, Personhood, and Power* (Oxford, UK: Routledge, 2016), 3–23; and Kerry L. Knox, Yeates Conwell, and Eric D. Caine, "If Suicide Is a Public Health Problem, What Are We Doing to Prevent It?," *American Journal of Public Health* 94, no. 1 (January 2004): 37–45, <https://doi.org/10.2105/ajph.94.1.37>.

¹² "MSRC Directors," Military Suicide Research Consortium, accessed 15 January 2022.

¹³ Thomas E. Joiner, "Editorial: Scientific Rigor as the Guiding Heuristic for *SLTB's* Editorial Stance," *Suicide and Life-Threatening Behavior* 41, no. 5 (October 2011): 471–73, <https://doi.org/10.1111/j.1943-278X.2011.00056.x>.

¹⁴ "Letter of Intent (LOI) Instructions Program: Common Data Elements," Military Suicide Research Consortium, accessed 15 January 2022. Emphasis added by author.

¹⁵ See Margaret C. Rodman, "Empowering Place: Multilocality and Multivocality," *American Anthropologist* 94, no. 3 (September 1992): 640–56.

¹⁶ Thomas E. Joiner, *Why People Die by Suicide* (Cambridge, MA: Harvard University Press, 2005).

¹⁷ See, for example, Lindsey L. Osterman and Ryan P. Brown, "Culture of Honor and Violence against the Self," *Personality and Social Psychology Bulletin* 37, no. 12 (2011): 1611–23, <https://doi.org/10.1177/0146167211418529>.

¹⁸ See Émile Durkheim, *Suicide: A Study in Sociology*, trans. John A. Spaulding and George Simpson (New York: Free Press, 1951); Ronald Niezen, "The Durkheim-Tarde Debate and the Social Study of Aboriginal Youth Suicide," *Transcultural Psychiatry* 52, no. 1 (February 2015): 96–114, <https://doi.org/10.1177/1363461514557560>; and Seth Abrutyn and Anna S. Mueller, "Reconsidering Durkheim's Assessment of Tarde: Formalizing a Tardian Theory of Imitation, Contagion, and Suicide Suggestion," *Sociological Forum* 29, no. 3 (September 2014): 698–719, <https://doi.org/10.1111/socf.12110>.

¹⁹ See Steven Stack, "Suicide: A 15-Year Review of Sociological Literature, Part 1: Cultural and Economic Factors," *Suicide and Life-Threatening Behavior* 30, no. 2 (Summer 2000): 145–62; and Wray, Colen, and Pescosolido, "The Sociology of Suicide." Qualitative research exists more strongly in some sociological traditions than others, particularly the Chicago School of Professional Psychology (Chicago School), which is historically known for using participant observation and qualitative methods.

²⁰ Wray, Colen, and Pescosolido, "The Sociology of Suicide," 518.

²¹ See Francine Toye, "'Not Everything that Can Be Counted Counts and Not Everything that Counts Can Be Counted' (Attributed to Albert Einstein)," *British Journal of Pain* 9, no. 1 (February 2015): 7, <https://doi.org/10.1177/2049463714565569>.

²² Michael J. Kral, *The Idea of Suicide: Contagion, Imitation, and Cultural Diffusion* (New York: Routledge, 2019).

²³ For a linguistic analysis of Marine Corps culture, see William M. Marcellino, "Talk like a Marine: USMC Linguistic Acculturation and Civil-Military Argument," *Discourse Studies* 16, no. 3 (June 2014): 385–405, <https://doi.org/10.1177/1461445613508895>.

²⁴ See James Staples and Tom Widger, "Situating Suicide as an Anthropological Problem: Ethnographic Approaches to Understanding Self-Harm and Self-Inflicted Death," *Culture, Medicine, and Psychiatry* 36, no. 2 (June 2012): 183–203, <https://doi.org/10.1007/s11013-012-9255-1>.

²⁵ *The Princess Bride*, directed by Rob Reiner (Los Angeles, CA: 20th Century Fox, 1987).

²⁶ *Health disparities* are unequal distributions of health states or diseases. See "Reaching for Health Equity," Center for Disease Control and Prevention, accessed 5 March 2022; and "About Social Determinants of Health (SDOH)," Center for Disease Control and Prevention, accessed 5 March 2022.

²⁷ Ella Arensman, Paul Corcoran, and Elaine McMahon, "The Iceberg Model of Self-Harm: New Evidence and Insights," *Lancet* 5, no. 2 (February 2018): 100,

[https://doi.org/10.1016/S2215-0366\(17\)30477-7](https://doi.org/10.1016/S2215-0366(17)30477-7). For training examples, see Cpl Alexandria Nowell, "Here to ASIST," Marines.mil, 14 January 2021.

²⁸ See Roy F. Baumeister, *Escaping the Self: Alcoholism, Spirituality, Masochism, and Other Flights from the Burden of Selfhood* (New York: Basic Books, 1991); and Michael J. Kral and Isaac Sakinofsky, "A Clinical Model for Suicide Risk Assessment," in *Treatment of Suicidal People*, ed. Antoon A. Leenaars, John T. Maltzberger, and Robert A. Neimeyer (New York: Taylor and Francis, 1994), 19–31, <https://doi.org/10.4324/9780203782316>.

²⁹ Silvia S. Canetto and David Lester, "Gender, Culture, and Suicidal Behavior," *Transcultural Psychiatry* 35, no. 2 (June 1998): 186, <https://doi.org/10.1177/136346159803500201>. See also, Michael J. Kral, "Suicide and the Internalization of Culture: Three Questions," *Transcultural Psychiatry* 35, no. 2 (June 1998): 221–33, <https://doi.org/10.1177/136346159803500203>.

³⁰ While comprehensive discussion of these concepts and relationships (i.e., relationship between the military and anthropology or social sciences) is not possible here, more expansive and concise treatment of the relationship between anthropology and the U.S. military, specifically the Marine Corps, is available. For example, see the work of Kerry B. Fosher, PhD, at Marine Corps University.

³¹ American anthropology consists of four subfields: cultural (or social) anthropology; archaeology; biological (or physical) anthropology; and linguistic anthropology. A fifth field, applied anthropology, is sometimes included. For further information, see the American Anthropological Association (website).

³² Or what Canadian sociologist Erving Goffman may have termed a "total institution." See Christie Davies, "Goffman's Concept of the Total Institution: Criticisms and Revisions," *Human Studies* 12, no. 1/2 (June 1989): 77–95, <https://doi.org/10.1007/BF00142840>.

³³ Another inspiration for this article is the interdisciplinary field of social work and anthropology, which emphasizes the cultural and theoretical landscape of micro- and macro-level social work practice. See Sean Joe and Danielle Niedermeier, "Preventing Suicide: A Neglected Social Work Research Agenda," *British Journal of Social Work* 38, no. 3 (2006): 507–30, <https://doi.org/10.1093/bjsw/bcl353>.

³⁴ Cybèle C. Greenberg, "The Military's Broken Culture around Sexual Assault and Suicide," *New York Times*, 26 November 2021. See also, Rebecca J. Hannagan, "'I Believe We Are the Fewer, the Prouder': Women's Agency in Meaning-Making after Military Sexual Assault," *Journal of Contemporary Ethnography* 46, no. 5 (2016): 624–44, <https://doi.org/10.1177/0891241616636664>

³⁵ *Resilience* is defined here as the ability to "bounce back" from difficult events or situations. Resilience can be internal or emanate from the ability to seek available help and resources.

³⁶ William M. Marchellino and Frank Tortorello Jr., "'I Don't Think I Would Have Recovered': A Personal and Sociocultural Study of Resilience among U.S. Marines," *Armed Forces and Society* 41, no. 3 (July 2014): 496–518, <https://doi.org/10.1177/0095327X14536709>. See also Frank Tortorello, *A Realist Account of Stress, PTSD, and Resilience: Lessons from the United States Marine Corps* (Oxford, UK: Routledge, 2022).

³⁷ Strengths-based approaches recognize the inherent aspects, abilities, skills, or resources that a client or community possesses and can be leveraged to counter the scope and impact of a problem or identify buffers to risk factors.

³⁸ Paul Farmer, *Partner to the Poor: A Paul Farmer Reader*, ed. Haun Saussy (Berkeley: University of California Press, 2010), 354.

³⁹ See Anne Fadiman, *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures* (New York: Farrer, Straus, and Giroux, 1997). Conflict resolution and studying processes within organizations is referred to as *applied anthropology*, the fifth field of American anthropology.

⁴⁰ Sarah Ono and Gala True, "Research Highlight: Anthropology Offers Insights for How We Think about Science and How We Think about People," U.S. Department of Veteran's Affairs Health Services Research and Development's *Forum* (Fall 2020).

⁴¹ See Michael J. Kral, Paul S. Links, and Yvonne Bergmans, "Suicide Studies and the Need for Mixed Methods Research," *Journal of Mixed Methods Research* 6, no. 3 (July 2012): 236–49, <https://doi.org/10.1177/1558689811423914>; Melanie A. Hom et al., "Suicide Attempt Survivors' Experiences with Mental Health Care Services: A Mixed Methods Study," *Professional Psychology: Research and Practice* 51, no. 2 (September 2019): 172–83, <https://doi.org/10.1037/pro0000265>; and Pauline Lubens and Roxane Cohen Silver, "U.S. Combat Veterans' Responses to Suicide and Combat Deaths: A Mixed-Methods Study," *Social Science and Medicine* 236, 112314 (September 2019), <https://doi.org/10.1016/j.socscimed.2019.05.046>.

⁴² For more information on these concepts and anthropological research, see H. Russell Bernard, *Research Methods in Anthropology: Qualitative and Quantitative Approaches*, 4th ed. (Lanham, MD: AltaMira Press, 2006); and Carol R. Ember, Melvin Ember, and Peter N. Peregrine, *Anthropology*, 14th ed. (London: Pearson, 2014).

⁴³ This is often referred to as the "barefoot anthropology" of Nancy Scheper-Hughes. See "Celebrating 'Barefoot Anthropology'—A Q&A with Nancy Scheper-Hughes," Berkeley News, 28 April 2017.

⁴⁴ Diana Raab, "Transpersonal Approaches to Autoethnographic Research and Writing," *Qualitative Report* 18, no. 21 (2013): 2, <https://doi.org/10.46743/2160-3715/2013.1516>.

⁴⁵ Collaborative language is drawn from the tradition of community-based participatory research, a framework for cultural research involving sensitive issues and topics.

⁴⁶ For example, see Bilinda Straight et al., "Suicide in Three East African Pastoralist Communities and the Role of Researcher Outsiders for Positive Transformation: A Case Study," *Culture, Medicine, and Psychiatry* 39, no. 3 (2015): 557–78, <https://doi.org/10.1007/s11013-014-9417-4>.

⁴⁷ Yannis Hamilakis, "From Ethics to Politics," in *Archaeology and Capitalism: From Ethics to Politics*, ed. Yannis Hamilakis and Philip Duke (Oxford, UK: Routledge, 2016), 25.

⁴⁸ See Paula A. Holmes-Eber, *Culture in Conflict: Irregular Warfare, Culture Policy, and the Marine Corps* (Stanford, CA: Stanford University Press, 2014). Studying the processes by which Marines receive and negotiate policy directives on "strategic culture" may not be dissimilar from studying the processes by which Marines receive and negotiate policies regarding mental health and suicide.

⁴⁹ David H. Price, "Gregory Bateson and the OSS: World War II and Bateson's Assessment of Applied Anthropology," *Human Organization* 57, no. 4 (Winter 1998): 379–84.

⁵⁰ See Jesse Driscoll and Caroline Schuster, "Spies Like Us," *Ethnography* 19, no. 3 (September 2018): 411–30, <https://doi.org/10.1177/1466138117711717>; Geoffrey Ross Owens, "What! Me a Spy?: Intrigue and Reflexivity in Zanzibar," *Ethnography* 4, no. 1 (March 2003): 122–44, <https://doi.org/10.1177/1466138103004001006>; and Franz Boas, "Scientists as Spies," *Anthropology Today* 21, no. 3 (June 2005): 27, <https://doi.org/10.1111/j.0268-540X.2005.00359.x>.

⁵¹ See Vanessa M. Gezari, *The Tender Soldier: A True Story of War and Sacrifice* (New York: Simon and Schuster, 2013). Many “social scientists” recruited to fulfill the HTS contract were not anthropologists, nor did they possess requisite education and experience to fulfill HTS’s stated mission of contributing to misleading views of anthropologists and anthropology’s value by military professionals. See also *Human Terrain Team Handbook* (Fort Leavenworth, KS: U.S. Army Human Terrain System, 2008).

⁵² “American Anthropological Association Executive Board Statement on the Human Terrain System Project,” American Anthropological Association, 31 October 2007; *AAA Commission on the Engagement of Anthropology with the U.S. Security and Intelligence Communities: Final Report* (Arlington, VA: American Anthropological Association, 2007); and *AAA Commission on the Engagement of Anthropology with the U.S. Security and Intelligence Communities (CEAUSSIC): Final Report on the Army’s Human Terrain System Proof of Concept Program* (Arlington, VA: American Anthropological Association, 2009).

⁵³ Brian R. Price, “Human Terrain at the Crossroads,” *Joint Force Quarterly* 87 (October 2017): 69–75.

⁵⁴ For a recent authoritative overview of the relationship between the U.S. military and anthropology, see Kerry B. Fosher and Eric Gauldin, “Cultural Anthropological Practice in U.S. Military Organizations,” *Oxford Research Encyclopedia of Anthropology*, 26 April 2021, <https://doi.org/10.1093/acrefore/9780190854584.013.232>.

⁵⁵ Dave Matsuda, “A Study of Army Suicides in Iraq: A 2010 Study in 2014 Context,” LinkedIn, 24 May 2014.

⁵⁶ Jonathan Scourfield et al., “Sociological Autopsy: An Integrated Approach to the Study of Suicide in Men,” *Social Science and Medicine* 74, no. 4 (February 2012): 466–73, <https://doi.org/10.1016/j.socscimed.2010.01.054>.

⁵⁷ “Translational Research at the USMC Center for Advanced Operational Culture Learning,” *CAOCL Dispatches* 1, no. 2 (March 2011): 1–4.

⁵⁸ Paul Szoldra, “An Internal Investigation Spurred by a Nude Photo Scandal Shows Just How Deep Sexism Runs in the Marine Corps,” *Task and Purpose*, 4 December 2019.

⁵⁹ Rebecca Lane, *Insights from the Marine Corps Organizational Culture Research Project: Sexual Assault and Harassment*, Quick-Look Report: USMC.2017.0005 (Quantico, VA: CAOCL, 2020), 21.

⁶⁰ Lane, *Insights from the Marine Corps Organizational Culture Research Project*, 2.

⁶¹ Szoldra, “An Internal Investigation Spurred by a Nude Photo Scandal Shows Just How Deep Sexism Runs in the Marine Corps.”

⁶² “Divestment of Center for Advanced Operational Culture Learning and Establishment of the Marine Corps University Center for Regional and Security Studies,” Marine Administrative Message (MARADMIN) 227/20, Headquarters Marine Corps, 8 April 2020. See also Kerry B. Fosher and Lauren Mackenzie, eds., *The Rise and Decline of U.S. Military Culture Programs, 2004–20* (Quantico, VA: Marine Corps University Press, 2021).

⁶³ Sociocultural research is not actively provided in education and training curricula/programs for commissioned and noncommissioned officers, such as Naval Postgraduate School thesis projects. For an example of “off-base contexts,” see Kenneth T. MacLeish, *Making War at Fort Hood: Life and Uncertainty in a Military Community* (Princeton, NJ: Princeton University Press, 2015).

⁶⁴ Researchers at the VA employ mixed methods research by combining quantitative and qualitative data and analysis to provide context for pressing healthcare issues. See Lubens and Cohen Silver, "U.S. Combat Veterans' Responses to Suicide and Combat Deaths."

⁶⁵ Rajeev Ramchand, email message to author, 10 January 2022, hereafter Ramchand email.

⁶⁶ William M. Marcellino, email message to author, 10 January 2022.

⁶⁷ Ramchand email.

⁶⁸ Ramchand email.

⁶⁹ *Learning*, Marine Corps Doctrinal Publication (MCDP) 7 (Washington, DC: Headquarters Marine Corps, 2020); Williamson Murray, "MCDP 7: On Learning," *Marine Corps Gazette* (November 2019): 36–37; Maj Anthony Pollman, USMC (Ret), "Framing Marine Corps Culture," U.S. Naval Institute *Proceedings* 144, no. 6 (June 2018); *Annual Suicide Report*; and Gen David H. Berger, *Talent Management 2030* (Washington, DC: Headquarters Marine Corps, 2021).

⁷⁰ See Kerry B. Fosher et al., "Translational Research in a Military Organization: The Marine Corps Organizational Culture Research Project," *Annals of Anthropological Practice* 44, no. 2 (February 2020): 14–32, <https://doi.org/10.1111/napa.12130>.

⁷¹ *Department of Defense Suicide Event Report: Calendar Year 2017 Annual Report* (Washington, DC: DOD, 2017); and Lauren R. Khazem et al., "The Marine Suicide Prevention and Intervention Research (M-SPIRE) Study: A Randomized Clinical Trial Investigating Potential Treatment Mechanisms for Reducing Suicidal Behaviors among Military Personnel," *Contemporary Clinical Trials Communications* 21, 100731 (March 2021), <https://doi.org/10.1016/j.conctc.2021.100731>.

⁷² Qualitative research on life span development may enhance the value of concurrent neurocognitive and genetic research, such as the U.S. Army's Study to Assess Risk and Resilience in Servicemembers (STARRS). See Ronald C. Kessler et al., "Design of the Army Study to Assess Risk and Resilience in Servicemembers (Army STARRS)," *International Journal of Methods in Psychiatric Research* 22, no. 4 (December 2022): 267–75, <https://doi.org/10.1002/mpr.1401>. The lifespan development approach is especially pertinent given correlations between age and suicidal behavior.

⁷³ See Nancy Carter et al., "The Use of Triangulation in Qualitative Research," *Oncology Nursing Forum* 41, no. 5 (September 2014): 545–47, <https://doi.org/10.1188/14.ONF.545-547>.

⁷⁴ The concept of empowerment, which is reliant on cultural values and contexts, is highly relevant within integrative interpersonal-clinical and macro-level social work. See Linda Plitt Donaldson, "Toward Validating the Therapeutic Benefits of Empowerment-Oriented Social Action Groups," *Social Work with Groups* 27, no. 2-3 (2005): 159–75, https://doi.org/10.1300/J009v27n02_11. Empowerment is further relevant given the adoption by Marine Corps leadership of academic and leadership practices and philosophies that lean toward the empowerment paradigm. See "Commandant of the Marine Corps Professional Reading Program," Library of the Marine Corps, accessed 7 March 2022.

⁷⁵ See Sun Tzu, *The Complete Art of War*, trans. Ralph D. Sawyer (Boulder, CO: Westview Press, 1996); Miyamoto Musashi, *A Book of Five Rings*, trans. Victor Harris (London: Allison and Busby, 1974); Carl von Clausewitz, *On War*, trans. and ed. Michael Howard and Peter Paret (Princeton, NJ: Princeton University Press, 1976); and Ian T. Brown, *A New Conception of War: John Boyd, The U.S. Marines, and Maneuver Warfare* (Quantico, VA: Marine Corps University Press, 2018).

⁷⁶ “Thick description” is a classic phrase coined and attributed to American anthropologist Clifford J. Geertz. For a comparative discussion, outline, and appraisal of the role of cultural analysis in the contexts of strategy, see Ben Connable, “Structuring Cultural Analyses: Applying the Holistic Will-to-Fight Models,” *Journal of Advanced Military Studies*, Special Issue on Strategic Culture (2022): 153–67, <https://doi.org/10.21140/mcuj.2022SIstratcul009>.

⁷⁷ For examples of Marine officers who provide critical opinions on Marine Corps organization and culture, as well as discussions of pressing developments in the nature and future of warfare, see the winners of the Marine Corps Association and Foundation’s MajGen Harold W. Chase and LtCol Earl “Pete” Ellis annual essay contests, 2017–20.

⁷⁸ See Seth Allard, *Guided by the Spirits: The Meanings of Life, Death, and Youth Suicide in an Ojibwa Community* (New York: Routledge, 2018).

⁷⁹ The need to build rapport at this level is especially important for an external researcher seeking to embed with a Marine unit. This may not be the case as much for military anthropologists working with or within the DOD or the Marine Corps.