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Religion and Healing in Native America: Pathways for Renewal. Edited by Suzanne J. Crawford O'Brien. Westport, CT: Praeger Publishers, 2008. 236 pages. \$49.95 hardcover.

What, to an American Indian, does it mean to be healthy or to heal? In *Religion and Healing in Native America: Pathways for Renewal*, Suzanne J. Crawford O'Brien, editor of the Native American contribution to Praeger's Religion, Health, and Healing series, brings together an impressive array of case studies about various American Indian traditions and communities. From "Healing the Soul Wounds of Colonialism" (part 1), "Cultural Reprise, Identity, and Social Well-Being" (part 2), and "Native American Notions of the Embodied Self" (part 3) to "Healing through Narrative and Storytelling" (part 4), O'Brien et al. make several American Indian health and healing paradigms crystal clear: health and healing are achieved through living in social and ecological balance and through strengthening one's community; health and healing of the individual are necessarily tied up with indigenous theories and praxes of balance and community because the wellness or illness of the individual often mirrors that of the group, and vice versa; and health and healing are fundamentally spiritual phenomena.

It can be a difficult task to review a compiled, edited work. Anthologized, and especially distinct, case study-driven works often lack the seemingly totalizing and hence harmonizing "arc" of a sustained monograph. This can be said of O'Brien's collection but only technically, and only barely. What her tome might lack in cohesion is more than made up for by its capacity to enliven the reader, scholastically as well as spiritually (many an epiphany and "ah ha" moment await the reader). Whether taken individually, in sections, or as a whole, these chapters and case studies—for example, "Contemporary Navajo Therapeutic Strategies for Cancer" (ch. 2), "Healing the Soul Wounds of Diabetes" (ch. 3), and "Alcohol Abuse Recovery and Prevention as Spiritual Practice" (ch. 4)—are not only edifying but also inspiring. This is likely so because O'Brien went out of her way to bring together a chain of case studies, her own included, that act as bridges between academic theories and community priorities. In short, it has what academics want, as well as what American Indian communities need.

Each chapter is a gem unto itself; thus, a mini-review of each would be required to do them real justice. Instead, this review will outline and unpack several key analytical lenses employed either implicitly or explicitly throughout the collection: analytical lenses that not only students and scholars of religious studies, anthropology (especially medical anthropology), and American Indian studies would find valuable, but also—and arguably more importantly—what Indian elders, Western-trained medical professionals (Indian and non-Indian alike), and practitioners of American Indian healing traditions would find invaluable. Taking a cue from Inés Talamantez (Mescalero Apache), O'Brien et al. seek to fuse the best of etic (Euro-American academic frameworks) with too-often-overlooked emic (American Indian) perspectives. Each case study is an exercise in what many of these scholars call participatory knowledge (as opposed to participant observation), that is, studies that

position American Indian—and especially American Indian elders’—traditional knowledge and lived experience at the forefront of analysis (as well as studies that aim to restore the Indian elders’ status as epistemological authorities). Related to (but going further than) Talamantez’s notion of participatory knowledge is the even more provocative theoretical direction advanced by Eva Marie Garroutte (Cherokee) of radical indigenism, which is an analytical approach that takes American Indian epistemological traditions seriously, as being capable of discovering and producing branches and bodies of knowledge. In short, radical indigenism “challenges researchers and health practitioners to risk encountering the claims of their research participants or patients not merely as colorful or interesting beliefs to be approached as curiosities or construed within foreign intellectual frameworks,” but rather radical indigenism “asks non-Native people to grant the possibility that, even while the philosophies underlying indigenous encounters with the world may proceed from assumptions that differ from scientific ones, *they may nevertheless include tools for the generation of knowledge*” (italics added; 165). Many other analytical lenses abound, including disease versus illness (disease being the diagnosis of a particular ailment, like breast cancer or type II diabetes, illness being the actual—and total—lived experience, including the symptoms, side effects of treatment, and impact on one’s sense of self; disease often being reduced to a single cause and single concern, illness being the ailment’s entire impact not only on one’s body but also on one’s self, family, and community); neocolonial theory (related to—but distinct from—postcolonial theory, as there is nothing “post” about today’s American Indian colonial situation; hence locating the causes and tracking the consequences of illness in the neocolonial context, like getting at the neocolonial dimensions of high rates of heart disease and obesity, can better enable Indian elders and medical professionals in Indian country to heal “soul wounds”); wellness as resistance (for example, establishing Native-run healthcare facilities, augmenting—or even supplanting—Euro-American biomedicine with one or more American Indian healing practice, and reviving dormant health-centered worldviews), among others.

What follows are not so much criticisms of *Religion and Healing in Native America* or of studies produced by culturally sensitive and often embedded (and hence often locally accountable) scholars like O’Brien, Talamantez, and Garroutte; rather, what follows will serve as constructive warnings to those working in American Indian studies, and especially religious studies with an American Indian emphasis. First, although O’Brien et al. touch on the creative, dynamic, and contextual nature of American Indian spiritual practices, pro-indigenous studies like theirs run the risk of self-caricature because nakedly advancing any “pro” position can lead, if ever subtly, into the intellectually indefensible wasteland of identity politics and ethnic cheerleading. If it was not—and is not—okay for non-Indians to demonize or romanticize, in short, to essentialize indigenous peoples of the Americas, then it is not okay for indigenous individuals or groups to engage in—or condone—bouts of self-essentializing: two (intellectual) wrongs don’t make a (moral) right, no matter how asymmetrical real-life power differentials happen to be. Top-notch

studies like Philip J. Deloria's (Dakota Sioux) *Playing Indian* (1999) and Robert F. Berkhofer's *The White Man's Indian* (1978) show just how self-serving and intellectually flaccid essentialism is, and both should serve as warnings to incipient apologists of indigenous practices of—or retreats into—essentialism. Devastating studies of self-serving notions like “whiteness” and “blackness”—see Matthew Frye Jacobson's *Whiteness of a Different Color* (1999) and Clarence E. Walker's *We Can't Go Home Again* (2001), respectively—could go a long way in helping American Indians and scholars of American Indian studies establish and fortify analytical frameworks to ward off essentialist thinking and the apologetics that too often attend essentialist modes; it seems long overdue for an American Indian deconstruction of “redness.” A second warning concerns the study of religion, in particular, the casting of religion in an unproblematically positive light. Scholars of religion (any religion) need to be careful (and honest) about religion's capacity to mislead and misinform in an age characterized by religiously sanctioned bigotry (the passing of California's Prop 8, for example) and religiously inspired murder (à la al-Qaeda). Scholars of religion also need to master—and hence have adequate responses to—the recent chorus of powerfully cogent atheist critiques of religious and spiritual beliefs (especially those advanced by Richard Dawkins, the world-renowned evolutionary biologist). Ignoring these critiques does not strengthen religious studies. Of the “trinity” of best-selling atheists (that is, Dawkins, Christopher Hitchens, and Sam Harris), the one who would likely be the most sympathetic to *Religion and Healing in Native America* would be Harris, as he is a student of religion, as well as a scholar of neuroscience, and hence has a keen interest in the neuroscience of the religious mind. Although he would likely dismiss much of the content of Indian religions as “metaphysics” and “mythology,” he nonetheless would likely be eager to learn if—as O'Brien and others argue—practitioners of indigenous healing traditions have higher rates of recovery than their peers who rely solely on Western biomedicine. Linking these statistics to a scientific field like neuroscience can only serve to strengthen religious studies.

These warnings aside, anyone—everyone—interested in academic theories of religion and healing, especially as these theories relate to topics of concern within American Indians studies, and/or anyone—everyone—with a stake in the health and well-being of members of one or more American Indian community should read this book. Academics aside, Indian elders, community activists, and medical professionals in Indian country would do well to tap *Religion and Healing in Native America*, because it shows in concrete application what books like Linda Tuhiwai Smith's *Decolonizing Methodologies* (1999) argued for in the abstract: how to conduct and advance research projects that have positive, relevant, real-life applications for indigenous individuals and communities suffering from the various physical, mental, and spiritual ailments resulting from the legacy of conquest and exasperated by conditions intrinsic to neocolonial life.

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