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American Indian Health: Innovations in Health Care, Promotion, and Policy. Edited by Everett R. Rhoades. Baltimore: Johns Hopkins University Press, 2000. 484 pages. \$65.00 cloth.

Students and teachers of American Indian health have long awaited a comprehensive work that gathers together essays on prehistory, the political environment, current health problems, and traditional views of health. A full understanding of the health of American Indians can only be gained by considering all four of these broad topic areas. Doctor Everett Rhoades served as the director of the Indian Health Service and faculty member at the University of Oklahoma, College of Medicine and College of Public Health. Consequently, Rhoades brings together contributions of experts on Indian Health in this book, from both the federal agency that sets policy and provides health services and the academic institutions that conduct research and intervention trials. The result is a well-balanced, comprehensive reference seldom seen in the literature on American Indian health. The text is split into four parts, which correspond to the topic areas listed above. Each part contains essays contributed by over forty authors, some Indian Health Service professionals, others established academics. Rhoades has accomplished his intent to create a ready reference for all practitioners of Indian health care.

The first part of the text consists of three essays, each describing population demographics. Unlike other works on American Indian health demographics, such as the excellent volume edited by Gary D. Sandfur, Ronald R. Rindfuss, and Barney Cohen (*Changing Numbers, Changing Needs: Indian Demography and Public Health* [Washington, DC: National Academy Press, 1996]), this section is not limited to a description of modern American Indian migration and population statistics. The first two essays describe the prehistory of American Indian cultural groups, migration, and health status. This gives the reader an understanding of the relationships between Indian tribes and cultural groups as well as a context in which to evaluate recent changes in the state of Indian health. The focus on prehistory and cultural groups draws attention to the fact that American Indian people come with a cultural and political history that must be considered to understand current problems. The third essay is a summary of modern population statistics accompanied by a comprehensive bibliography for easy reference. The first part of this text gives a short but excellent description of the demographics that impact American Indian health.

The second part of the text is devoted to the politics and administration of federal Indian health programs. A discussion of Indian health is impossible without background on the political history and organizational structure of the Indian Health Service. Federal legislation has a substantial impact on Indian health care and the Indian Health Service is most often the federal agency responsible for the implementation of health programs. An accurate description of the history and authorities of the Indian Health Service has not been available except in federal publications such as the Office of Technology Assessment's report on Indian health care in 1986. The federal publications on the topic of Indian health tend to be status reports rather than critical

analyses of the agency itself. Rhoades draws on his years of experience with the Indian Health Service to present a comprehensive discussion of issues critical to Indian health care. Chapters four and five address the federal-tribal relationship as it pertains to health care. Terms such as *tribal sovereignty*, *trust responsibility*, *self-determination*, *trust status*, *eligibility*, *enrollment*, and *federal recognition* all have specific meaning in the federal Indian health care system and are carefully defined in this chapter. People unfamiliar with these terms will often misinterpret writings on Indian health, so it is gratifying to see a text on Indian health include a careful discussion of these terms and the federal role in health policy. Chapter six addresses the problems associated with data sources that have long plagued students of Indian health. A reader new to the field will appreciate the brief description of how data on health statistics is obtained, what they represent, and what limitations they present. Part two of this volume fills a critical gap in the literature on Indian health. The federal role and federal policies in Indian health care are accurately described. American Indian tribes are unique among United States minority populations because of the federal-tribal relationship; thus approaches to understanding minority health care do not necessarily apply to tribal communities. The clear and precise descriptions of the federal-tribal relationship found in this text are an invaluable resource that was lacking in the literature on Indian health.

The third part of the text is a series of essays on categorical health issues important in American Indian populations today. Environmental health, mental health, behavioral health, cardiovascular disease, nutrition, cancer, oral health, infectious disease, arthritis, and genetics are all covered in the sixteen chapters that make up part three. The majority of contributors in this section has held positions with the Indian Health Service. Subsequently, these essays are similar to the reports of health statistics and program summaries found in the publications of the Indian Health Service. In general, each essay describes the current status of the particular health issue, trends over time, variation in health statistics among geographic areas and cultural groups, as well as programs to treat and prevent health problems. In this section, Rhoades provides the busy health care worker or administrator with a quick reference for understanding current health care issues.

The fourth part of the text contains a series of four essays on cultural considerations specific to American Indian communities. This section is very brief. Rather than a comprehensive discussion of these complex problems, the chapters serve mainly to alert the reader to problems in the advancement of Indian health. These descriptions of some past and present approaches to cross-cultural health care leaves the reader with a caution for the future. Some topics touched upon are the coexistence of traditional and biomedical care systems, patient-provider relationships, the complexity of establishing partnerships with Indian tribes and communities for biomedical research, problems of overcoming centuries of distrust, and tribal-community involvement to foster true power sharing. Cross-cultural health care in an environment of self-determination and tribal sovereignty is difficult to carry out. The improvement of Indian health hinges on an understanding of cultural and ethical issues.

Rhoades gives us a collection of essays that provides a good overview of Indian health. It is a comprehensive starting point for the serious student and an easy reference for the health professional. The overall value of this text is that it draws on experience and knowledge of the professional corps of the Indian Health Service as well as academic research. The result is a single text that is a comprehensive resource on Indian health. No volume on American Indian health is complete without a discussion of history, politics, culture, and health status and Rhoades successfully addresses all four.

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The Archaeological Northeast. Edited by Mary Ann Levine, Kenneth E. Sassaman, and Michael S. Nassaney. Westport, CT: Bergin and Garvey, 1999. 313 pages. \$75.00 cloth; \$29.95 paper.

This edited volume is one of the first books in Bergin and Garvey's new series, *Native Peoples of the Americas*. It consists of fifteen chapters organized in five parts, along with a series foreword by Laurie Weinstein, a foreword by Alice B. Kehoe, a preface co-written by the volume editors, a references section, an index, and brief biographical information about the contributors. The book is intended to honor the distinguished career of Dena F. Dincauze, who recently retired from the University of Massachusetts at Amherst, and the profound impact of her scholarship on northeastern archaeology. Indeed, all fifteen authors were Dincauze's graduate students and, as her "intellectual progeny," they dedicated the volume to their mentor. Consistent with Dincauze's vast research interests and experience, the articles cover a wide range of topics from the earliest Native American settlement in New England by Paleoindians to the contact period of the sixteenth and seventeenth centuries. As the editors state in the preface, "The organization of the volume similarly reflects the thematic diversity of Dena's influence" (p. xvi).

Most authors address what Dincauze recognized as a misconception about prehistoric New England and other areas in the northeastern United States: the wrongly held notion that the region is a marginal cultural and archaeological outlier. Following Dincauze's lead, many of the book's articles call for a "centering" of northeastern archaeology to challenge and correct this common misunderstanding.

Part one, "Ancient People, Ancient Landscapes," contains three articles on human-environmental interactions. In chapter one, Mary Lou Curran presents two data sets (one metric and one lithologic) that may allow for a restructuring of Paleoindian site chronologies, population distributions, and social correlates. Chapter two, by George P. Nicholas, addresses numerous instances of Holocene landscape changes induced by nonagricultural populations. He critically examines the facile assumption that such groups "left a light footprint" (p. 37). Frederick J. Dunford