Book Reviews

Winona LaDuke. *All Our Relations:*
Native Struggles for Land and Life.
(Cambridge, MA: South End Press,
1999). 241 pp., US$16.00, paper.

Review by Laura A. Bathurst

Not often does one encounter a
book that describes environmental
degradation and oppression yet leaves
the reader with a feeling of hope.
Winona LaDuke's book, *All Our*
Relations: Native Struggles for Land
and Life does just that. LaDuke, a
well-known activist for native rights
and the environment, offers an
eloquently written critique of
continuing social and economic
practices that destroy both the
environment and Native American
cultures. Key to her analysis are the
ways in which indigenous peoples are
prevented from controlling their lands
and lives and the disastrous health
consequences that result. As activist
Katsi Cooks asks, "Why is it we must
change our lives, our way of life, to
accommodate the corporations, and
they are allowed to continue without
changing any of their behavior?" This
critical question, like the rest of
LaDuke's book, is relevant outside as
well as inside Indian Country.

Each chapter of LaDuke's
book describes how a distinct group is
struggling against powerful interests.
For example, Katsi Cook, a Mohawk
midwife, leads a fight to get General
Motors to clean up their Superfund site
of approximately 823,000 cubic yards

of PCB-contaminated materials. These
poisonous chemicals are concentrated
in the bodies of Mohawk women and
passed on to infants in breast milk.
Elsewhere in the book, LaDuke
discusses endangered panthers in the
south where the Seminoles of the
Florida Everglades are wrapped up in
efforts to save endangered species,
habitats, and life ways. In this case-
study, she highlights key issues of
cultural transformation, with radically
different choices of Seminoles
resulting in the federally recognized
Seminole Tribe of Florida and the
unrecognized Independent Traditional
Seminole nation.

The Innu of Quebec and
Labrador ask the critical question,
"Who has the right to make the earth
anew, and how is it made so?" Low
level flights and sonic booms from
NATO training flights, as well as dams
built to supply "green power" to the
United States are key change-making
mechanisms to the lands of Innu people
who neither agree to nor benefit from
these activities. The Northern
Cheyenne of Montana have been
ravaged by the health implications of
their proximity to coal mining.
Nuclear waste in Western Shoshone
territory is the focus of another chapter.
Not only was the 1951 Nevada nuclear
test site located on their lands, but
Yucca Mountain, also in Western
Shoshone Territory, is targeted to be
the "final" resting place for US nuclear
waste if the "Mobile Chernobyl" bill
ever passes through Congress and
across the President's desk.

Interweaving historic and contemporary sources and conflicts, LaDuke shows how issues deemed "economic," "environmental," or "cultural" are interrelated and inseparable. Contemporary corporate practices consider short-term profits over long-term human and environmental costs. LaDuke rejects the division of human and environmental, referring to Native American beliefs that include animals, trees, rocks, and other "natural phenomena" as living beings that are related to human beings. For LaDuke, to care for "all our relations" is to care for ourselves, and to neglect them is to neglect ourselves.

LaDuke refuses to romanticize anyone in the book, be they "noble savages" or the bearers of "progress." Rather, she looks at the dilemmas facing "just plain folk," Native Americans who are trying to come up with solutions to devastating problems that are the result of technologies applied without proper safeguards. Practices that result in severe damage to "all our relations" and ourselves are often rationalized by describing them as scientific and necessary for progress. LaDuke argues that Native practices (such as forest management) are often more rational and scientific than the profit and ideologically driven practices of corporations. To an anthropologist, it comes as no surprise that non-Western and/or local knowledge can be scientific and rational. An article in the *New York Times* that came out soon after LaDuke's book, for example, reported that researchers have found scientific proof that the indigenous Andean practice of staring at the stars to determine the timing of potato planting, so-called "madness," works. It turns out that their technique accurately predicted drought years. Nor does it come as a surprise that some of what is sold as "progress" has more to do with being "sold" than to making progress.

LaDuke proposes to combine the best of indigenous knowledge and Western science to come up with solutions that ensure that *everyone* has access to clean air, water, and other renewable resources. This book is a must-read for anthropologists concerned with health, the environment, Native America, corporate America, or who just want to be inspired by the will to life present in each environmental activist.

Christie W. Kiefer. *Health Work with the Poor: A Practical Guide.* (New Brunswick, New Jersey: Rutgers University Press, 2000). 239 pp., US$18.00, paper.

Review by Seth Holmes

Written by an academic cultural anthropologist, with health professions students in mind, *Health Work with the Poor* offers a unique combination of social analysis and practical suggestions for a broad audience, especially health professionals working with poor people.

The book is split into three major sections, followed by two short appendixes. The first section considers

what poverty is and why it exists. Kiefer begins by rejecting the dichotomy of deserving/undeserving poor as well as the definition of poverty simply as a lack of financial resources. Instead, he opts for an understanding of poverty as a "social problem" caused by inequality, with "the poor" as its victims. He sees poverty as related to both the control of economics and politics by those with wealth and to the resultant breakdown of "community," defined as shared values, history, beliefs, etc. Next, Kiefer briefly moves through ethnographic accounts of urban poor people to show their behaviors to be understandable responses to social conditions. He states that, while poor people are seeking the same basic human needs as middle class people, poverty requires them to have a "mind-set that is fundamentally different from the middle-class one" (34). He gives an extensive list of questions to prompt health professionals to consider the effects of class, ethnic, geographical, and gender context on the well-being of their patients. The author closes this section by calling the health care worker to be humble in interactions with patients and to advocate social change.

In this first section, Kiefer challenges important assumptions related to poverty, notably the conception of poverty as caused by the moral unworthiness of the individual. Rather, he understands poor people as positioned by social structures. At the same time, he maintains some aspects of a structural-functional, "culture of poverty" approach. In this way, the

understandable "mind-set" that poor people develop in response to poverty reinforces their poverty and implies the need to change their behavior and thinking. This may work to reinforce a "blaming of the victim." In addition, the author utilizes a social evolutionary framework that seems naively nostalgic of "traditional," "primitive" communities and pessimistic of modern, industrialized societies. Finally, writing for an audience of health professionals limits Kiefer's critiques. Although he challenges the power inequities in the physician-patient relationship, he is not critical of the monopoly on "knowledge" and "truth" held by the physician, or, more broadly, by "Science."

In the second section, Kiefer traces the history and politics of poverty and health. He begins by showing how poverty is linked to economic changes, racial and class segregation, and the control of politics by those with wealth. Next, Kiefer examines welfare from the inception of the Social Security Act of 1935 to the fallout of Newt Gingrich's "Contract with America." He critiques several understandings of welfare recipients, including those related to "teenage pregnancy" and "violence." He uses statistics to show that receiving welfare does not increase unwed pregnancy and that "street crime" is much less costly than white-collar crime. Next, Kiefer discusses health care reform and the ways in which Medicaid, Medicare, and welfare policies put the well-being of poor people in the U.S. at risk. He then considers the relationship between health and poverty, seeing the causality

as multi-directional: poverty leads to sickness, and sickness increases poverty. He argues that sickness is due not merely to the behavior of the poor, but to a mixture of structural forces as well as poor people's lack of skills in utilizing political power. He closes by arguing that illness is a social problem to be addressed on a societal level, not an individual problem to be addresses solely in the clinic.

In this section, Kiefer again offers important critiques of common understandings of poverty in the US and makes social theory accessible to a broad audience. His consideration of health and poverty as societal problems, not individual deficiencies, is key. At the same time, the understanding of illness as related to a lack of skills in poor people harkens back to the culture of poverty paradigm mentioned above. This theory is most problematic in relation to his dichotomizing of poor men into the ideal types, "villager" and "warrior," which may unintentionally reinforce the stereotype of poor and colored men as violent.

In the last section of the book, Kiefer explains the history of Community Health Centers (CHCs) in the US and their implications for health and poverty. He sees the CHCs as community-empowering places of high quality care that are at risk of disappearance due to federal policy changes. He also discusses the possible roles for the health professional in community organizing. This section draws on his experience in community action and as a member of the board of directors of Lifelong

Medical Clinic, a Community Health Clinic in Berkeley, California.

This last section offers an optimistic look at the possibility of social change, specifically related to health, and provides practical suggestions for advocacy. Problematic, however, is Kiefer's optimism about the good intentions and positive impact of health professionals. This could be balanced with an acknowledgement of the many critical representations of health workers and the effects of their science and practices. In addition, this section focuses primarily on changing health *care* without much mention of changing the social structures already acknowledged to be exacerbating sickness for poor people.

The book closes with two useful appendixes. Appendix A is a list of "Internet Resources for the Study of Poverty," allowing the reader to update their familiarity with social policies in the US. Appendix B is an interesting reflection on the author's experience of facilitating discussion courses on issues of social justice and health, including several suggestions for others wishing to teach similar courses.

Health Work with the Poor is an exceptional book offering social analysis and practical suggestions to a broad audience interested in health and poverty. Despite its few problematic threads, this book is a welcome addition to the rare literature bridging social theory and practical, social action.

Vilma Santiago-Irizarry.
Medicalizing Ethnicity: The
Construction of Latino Identity in a
Psychiatric Setting. **(Ithaca: Cornell**
University Press, 2001). 178 pp.,
US$16.95, paper.

Review by Angela C. Jenks

This book offers one of the few extensive examinations and critiques of the development and implementation of "culturally sensitive" psychiatric inpatient programs. Santiago-Irizarry, a professor of anthropology at Cornell University, focuses on three bilingual, bicultural psychiatric programs for Latino patients in New York City. Originally a member of the programs' evaluation team, she draws upon much of the data collected at that time, but with a new analytic approach and purpose. While the evaluation team was assigned the task of legitimating the programs and offering recommendations that could both be implemented by local administrators and replicated in other settings, Santiago-Irizarry is concerned with understanding the complexities behind an emphasis on "cultural sensitivity," and explores the unintended consequences of its institutionalization.

Medicalizing Ethnicity is concerned with the ways in which "culture" and "ethnicity" are defined and positioned within the sociocultural domain of medicine and public mental health care. By using the term "medicalizing," Santiago-Irizarry hopes to underscore her focus on "the power that medical discourses exert upon the processes of ethnicity construction,"

and to "evoke the interaction of mutually articulating categories, processes, and practices—'culture,' 'the medical,' 'ethnicity,' [and] 'identity construction'" (4). This discussion is couched in a close examination of the wide-ranging negotiations and debates that led to the establishment of the programs, as well as the everyday activities and strategies used to implement cultural sensitivity.

Santiago-Irizarry begins by discussing the irony behind the programs' implementation: while advocates viewed them as a much needed vehicle for social and political change, others saw the programs and the concept in general as not only discriminatory, but also as a self-interested strategy on the part of Latino mental health practitioners to increase their own job prospects. Ultimately, she suggests, the programs were legitimated when the emphasis was placed on demographic changes and on understandings of "linguistic regression" (the notion that even bilingual or U.S.-born Latinos, when faced with stressful situations such as a mental health crisis, will "regress," and be most comfortable communicating in Spanish). She continues by focusing on the specific local conditions for each of the programs, pointing to variation according to their location in the city and the patient population they served.

In addition to these chapters on the programs' localized debates and circumstances, one of the most valuable aspects of the book is her concern with the way "culture" is constructed and applied to psychiatric

care and policy making in general. Santiago-Irizarry points to the construction of reified, essentialized notions of culture, in which difference is emphasized, and the dominant Anglo culture is thus reaffirmed as the "normal." Within psychiatry, she argues, though it is true well beyond the field of health care, "culture" becomes positioned ambivalently as both pathological and curative; it is both the problem and the solution. "Culture" in this sense becomes something only Others have. It can be isolated from other areas of life, and becomes a reservoir from which relevant items can be drawn and then inserted into various culture-free, objective structures and institutions. Those who have been defined as culturally "different," then, are ultimately placed in a situation of having to perform their culture in order to have access to social services. Just as psychiatric patients must "make it crazy," Santiago-Irizarry suggests, they must also now "make it ethnic." Ultimately, Santiago-Irizarry argues, the worthy leveling agenda espoused by ethnic activists and leaders had "the unintended consequences of vitiating their efforts rather than fully empowering them" (2).

Santiago-Irizarry is successful in demonstrating the anti-discriminatory intentions of calls for cultural sensitivity, and in portraying the difficulties and failures of ethnic activism without condemning its goals. Perhaps most importantly, she presents her critique in a style and language that is accessible to not only social scientists, but to medical practitioners and policy makers as well. The book, however, unfortunately stops short of an examination of what the processes described mean for larger issues of identity, race, nationality, and citizenship more generally, or of the way anthropology itself has been taken up and used in these debates.