

UCLA

American Indian Culture and Research Journal

Title

Plagues, Politics, and Policy: A Chronicle of the Indian Health Service, 1955-2008. By David H. DeJong.

Permalink

<https://escholarship.org/uc/item/6dc6h0nh>

Journal

American Indian Culture and Research Journal , 37(2)

ISSN

0161-6463

Author

Keleka Kaimanu, Theresa Julnes

Publication Date

2013-03-01

DOI

10.17953

Copyright Information

This work is made available under the terms of a Creative Commons Attribution-NonCommercial License, available at <https://creativecommons.org/licenses/by-nc/4.0/>

people at the sad disappearance of the doomed Indian" (*Writing Indian Nations*, 43). These historical accounts whip up sympathy for American Indians but fail to address how American Indians understood and dealt with their historical experiences. Still, this book will generate considerable debate in California and anticipates future discussions on an important subject in American Indian and United States history.

William J. Bauer Jr.

University of Nevada, Las Vegas

Plagues, Politics, and Policy: A Chronicle of the Indian Health Service, 1955–2008.
By David H. DeJong. Lanham: Lexington Books, 2010. 250 pages. \$73.50 hardback.

History can be interesting if told by a good storyteller. History can be informative if it captures the reader's interest. David H. DeJong's *Plagues, Politics, and Policy: A Chronicle of the Indian Health Service, 1955–2008* is a difficult read. His work focuses on historical government reports, providing one of many available readings to explain why Indian health and Indian health services are the way they are. However, the book lacks a connection to the people impacted by his writings. It also lacks a contextual tie to the federal trust relationship, covering only minimally the policies that influence the Indian Health Service's ability to care for the people under its charge.

The first one and a half chapters are a collection of brief facts about the pre-1955 history of the Indian Health Service (IHS) before it was given that name. The focus is on the Public Health Service in its transition from the Indian Medical Service in the Bureau of Indian Affairs. The passages taken from government reports cite statistics on disease and medical personnel, but is difficult to follow for readers unfamiliar with the content and the context. A reader with a federal Indian policy background might appreciate the connection between a specific policy and the agency data. But a reader without such a background would miss some of the significance of nonaction that reflects the policy periods in the federal trust relationship. To comprehend the political environment in which the health providers and administrators struggled would have helped the reader to understand why these appeals were ignored. These policies explain why it was so difficult to overhaul the health system for Native peoples.

The author provides a thorough review of annual Public Health reports and congressional records, as well as a comprehensive bibliography. Because the accounts given in the time period addressed by the author's research were dominated by non-Native writers, the historical perspective of the book reflects this perspective, as the author acknowledges. DeJong discusses this context as well as perspectives surrounding disease and other conditions in a sometimes non-chronological history of the IHS, which can occasionally be confusing.

William Willard pointed out the need for a "full-length book publication of the political history of the IHS" in his 1999 review of "A Political History of the Indian Health Service" by Bergman, et al., published in the *Milbank Quarterly*. The editorial review provided by the publisher of DeJong's book states that his book is the "gold

standard for chronological history of the IHS” and a “must read for those interested in how the Federal Government has treated Native Americans in their health care.” However, in this author’s opinion, the gold standard was already established by James P. Rife and Alan J. Dellapenna Jr. in *Caring & Curing: A History of the Indian Health Service* (2009). Rife and Dellapenna not only cover the communities impacted, but also the context. They explain the federal policy periods in the federal trust relationship as well as the marked impact of the creation of the IHS on the people, and offer a chronological explanation of IHS history.

In the third and fourth chapters of *Plagues, Politics, and Policy*, DeJong introduces the political perspective, although much of this information is contained in the footnotes. He discusses the challenges of providing health services with providers who are unfamiliar with the culture of the people they are treating. Here, DeJong also begins to provide context into the politics of the Indian Health Services environment, describing the hurdles associated with establishing an American Indian medical school, with hospital construction, and with the housing crisis. Again, while the footnotes provide more insight into the political setting of these policy issues, this section of the book is a marked improvement over the first few chapters.

In the latter half of the book, beginning with chapter five, the reader finds policy insights inserted into the text rather than having to rely on the footnotes. Chapter six includes some impacts of what is called “638 contracting” on self-determination, but the context—explaining the federal policy change enabling tribes to petition to provide their own services rather than relying on federal agencies such as the Indian Health Service—was missing. Without a previous background in 638 contracting and its significant departure from previous policy, it would be difficult to assess the magnitude of this change on the delivery of health services for Native peoples in the United States. Furthermore, a discussion of the role and relationships between reservation and non-reservation services, and of the emergence of Wellness Centers on tribal reservations with IHS 638 contracting monies, is missing. And, while the role of the tribal communities is mentioned as being integral to better services, the resulting Indian Health Boards and their significant impact were not mentioned.

These missing elements are a reflection of the lack of reports on the impact of 638 contracting. The Indian Health Boards (IHB) around the country have published reports of highly successful programs, such as smoking cessation and suicide prevention, introduced at the tribal level and disseminated through the IHB quarterly and annual meetings. DeJong briefly introduces the Indian Child Protection Act of 1990 and its importance to combating the abuse of Indian children. The Act was then linked to substance-abuse issues and the need for a public policy, but no mention is made of tribal programs that address substance abuse.

In his final chapter, DeJong notes the lack of sufficient research on the health needs of Native people, as well as the mistreatment of Native participants in some previous research aims. The omission to attain consent and the researchers’ lack of respect of the participants’ culture is illustrated well in chapter seven. Also well-covered are the complexities surrounding tribal and IHS eligibility and the uncertainty about the future of federal funding, all of which fuel the policy neglect of the federal

trust relationship. This, along with the reference to the mortality statistics in *Bridging the Gap: Report of the Task Force on Parity of Indian Health Services* (1986) is evidence of the need for improvement and commitment to the health care needs of our nation's First People.

In summary, DeJong's work helps to fill a gap about the history of the Indian Health Service. The rigorous review of Public Health Reports, US Congress House and Senate Reports, and other Government Printing Office publications offers primary source accounts of the epidemiological and financing history of the IHS. The author includes some of the pertinent policy impacts that he deemed appropriate. For a scholar of Native American people, this is an important reference. However, the information is not comprehensive enough to facilitate the reader's comprehension of the agency's actions. The book helps the reader to understand the data, but not the policy. By excluding this key information, the reader lacks the context to understand how Native people have been affected by IHS services.

I would recommend this book to someone who does not wish to review the primary government publication resources to gain an understanding about the Indian Health Service. This book would provide a doctoral student an excellent bibliography of sources to begin research in order to understand the Indian Health Service and/or the health status of Native people.

Theresa Julnes Keleka Kaimanu
Portland State University

Sing: Poetry from the Indigenous Americas. By Allison Adelle Hedge Coke. Tucson: University of Arizona Press, 2011. 352 pages. \$29.95 paper.

Ethnic literature and poetry have long been recognized as key sites for illuminating underrepresented histories. For this reason, Allison Adelle Hedge Coke's *Sing: Poetry from the Indigenous Americas* (hereafter *Sing*), a multilingual and transnational collection that features writers from South, Central, and North America, is a significant contribution to multiple fields of study. The high caliber of the writing and the collection's diversity in terms of content, form, language, rhythm, subject matter, and tone should be more than enough incentive to read this book. But it is *Sing's* critical project—Coke's commitment to creating an anthology composed of the sung and "unsung voices" of the Indigenous Americas (5)—that makes the text all the more relevant to readers and scholars who are interested in the parallels and intersections of Indigenous peoples' experiences in the Western Hemisphere.

Coke conducts numerous themes throughout the collection, particularly those of survival, the spirit of resistance, and the continued and contemporary relevance of Indigenous languages and land. Recollection and memory—through the body and otherwise—and the vast and varied experiences of Indigenous peoples under settler colonialism unite many of the collection's pieces. Perhaps unsurprisingly, considering histories of forced assimilation and removal, the motif of "homecoming" figures