

*Rehabilitation: Contrasting Cultural Perspectives and The Imposition of Church and State**

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As observed by Dr. White, Administrator of Psychology Services for the North Central Region of the United States Federal Bureau of Prisons, In the Beginning, and indeed throughout Judeo-Christian history, the desire for retribution has

characterized society's response to criminal behavior. The imposition of mutilation, torture, or even death was universally accepted as appropriate punishment for a wide range of social transgressions. The roots of this philosophy were inextricably entwined in our Judeo-Christian tradition and reinforced by years of biblical teaching which stressed the notion of an eye for an eye and a tooth for a tooth. However, by the beginning of the 18th century the more humane practice of imprisonment slowly began to replace branding, corporal punishment, and execution as the preferred method of dealing with lawbreakers. Under this new doctrine punishment actually served two purposes: to exact society's retribution and to deter the offender as well as others who may consider committing future crimes. Finally, the early 19th century saw the forerunner of the modern day prison system with the development of the Walnut Street Jail, a uniquely American creation designed to not only punish and deter, but to rehabilitate offenders by making them penitent (the penitentiary) for their actions by forced solitude and biblical reflection ... (White, 1989:31).

As I shall demonstrate in the forthcoming discussion, this forced biblical reflection continues as a matter of American correctional policy, though the force is employed in very subtle forms so that the policy-makers and "rehabilitators" may, as they steadfastly do, contend that their rules and procedures do not violate the establishment of religion clause of the First Amendment to the United States Constitution by forcing Judeo-Christianity upon the prisoners of America. This forced Judeo-Christianity comes under the guise of 'rehabilitative' programs which prisoners are required to participate in. Thus, in examining the contrasting cultural perspectives on rehabilitation from a Native American standpoint — which is the

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primary aim of this paper — the imposition of Church and State inherent in the government-sanctioned ‘rehabilitative’ programs quite inevitably becomes a fundamental aspect of the discussion.

Many of the existing policies and practices relating to the rehabilitation of prisoners in the various prison systems of North America are in fact producing results which are the opposite of the rehabilitative objectives which purportedly underlie the implementation and maintenance of those policies and practices. This can be attributed, in great part, to the administrators’, counselors’, and treatment personnel’s general lack of knowledge and understanding of the contrasting values, attitudes, customs, and life experiences of a great many of those for whom the existing ‘rehabilitation’ programs have been established.

The implementation and maintenance of Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) programs in most prisons, and the unequivocal sanction placed in them by the legislatures, prison administrators, and parole authorities are a case in point. In most states and in the Federal Bureau of Prisons, for example, prisoners are given a reduction in the time required for parole eligibility or discharge dates and/or are given special privileges or lower security status for their faithful participation in AA and/or NA.¹ These types of policies serve to corrupt the incentive of many prisoners to participate in the programs, effectually transforming the nature of the programs from rehabilitative to mere shortcuts to freedom. Indeed, at least one prisoner in this prison has disclosed to the author that he has never been involved with alcohol or drugs, but he is a faithful participant in both AA *and* NA because of the good-time credit he receives. It is common knowledge among most prisoners that these programs — due to their high standing with the parole authorities — are, as so adequately stated by one prisoner who is a veteran of these programs,

a complete farce, man. They’re a joke, because the majority of the men who are there, including myself, are only there because we were told by the parole board or the classification committee that we should get into the programs. You’ve got a few guys in there who are sincere, but this just makes it hard for them ‘cause they’re intimidated by the fact that the majority of us think the whole thing is a crock This causes the sincere ones to clam up and not really get anything out of the programs because they’re uncomfortable around [those of] us who are only there for parole or good-time reasons, or so we won’t have to wait as long to be transferred to a minimum-security joint

In many prison systems, the parole boards have such confidence in the AA and NA programs that they require prisoners to participate in them as a prerequisite to parole consideration even when there is nothing in the prisoner’s record to indicate any involvement with alcohol or drugs other than the prisoner’s own admission upon entering the prison system (when filling out questionnaires) that s/he has

experimented with drugs or alcohol at some point in her or his life. Once such an admission is made, it is, as standard procedure, used against the prisoner so long as the prisoner refuses to participate in the AA and/or NA programs after having been directed to participate in them.² In the view of the parole board in Ohio, for example, all evidence the prisoner might submit which indicates that s/he has no affiliation with alcohol or drugs is deemed irrelevant and is given absolutely no consideration by the parole board.³ The prisoner's failure to participate in AA or NA after having been recommended by the parole board or prison classification committee to get involved is automatically taken to indicate that the prisoner is uncooperative and incorrigible.

It is worth noting that AA has had a great rate of failure on a global scale. According to Carson, Butcher and Coleman:

AA ... does not keep records or case histories The generally acknowledged success of [AA] is based primarily on anecdotal information rather than objective study of treatment outcomes. One recent study, ... however, included an AA treatment in their extensive comparative study of treatments of alcoholics. The [AA] treatment method had very high dropout rates compared to other therapies. Apparently many alcoholics are unable to accept the "quasi-religious" quality of the sessions and the group testimonial format that is so much a part of the AA program. The individuals who were assigned to the AA program subsequently encountered more life difficulties and drank more than the other treatment groups (Carson *et al.*, 1988:383).

Assuming that AA isn't the failure it appears to be, let's take a look at this program from an Indian point of view to see if one needs to be "incorrigible" to reject it. This author certainly cannot speak for all Indians, but I think the voice of the great majority of the Native population will ring through in this discussion of how and why AA concepts, philosophies, and principles are inapplicable to Indians in general. This presentation is in no way intended to offend those individuals who agree with the concepts of AA or to attack the program itself. Indeed, the concepts are excellent for people from many different walks of life. I simply intend to show that AA is *not* the "universal" therapeutic program it is claimed to be, and that coerced participation in the program as a prerequisite to having one's liberty restored is morally, ethically, and legally wrong.

A passage from *Alcoholics Anonymous*:

Selfishness — self-centeredness! That, we think, is the root of our troubles. Driven by a hundred forms of fear, self-delusion, self-seeking and self-pity, we step on the toes of our fellows and they retaliate. Sometimes they hurt us, seemingly without provocation, but we invariably find that at some time in the past we have made decisions based on self which later placed us in a position to be hurt.

So our troubles, we think, are basically of our own making ... (1976:62).

Anyone with even the slightest knowledge of the historical and contemporary realities facing Native Americans will agree that this particular point does not reflect those realities.

Step Two of the Twelve Steps of AA requires the belief that a Power greater than ourselves, and *only* a power greater than ourselves, may restore us to *sanity*. To adopt this belief is to make an admission of *insanity*, which is pretty hard for most Indians to accept and understandably so. Assuming that we *are* willing to accept it, this Step contradicts the concept (cited above) that “our troubles ... are basically of our own making.” If we and we alone are capable of bringing about our own troubles without any external influences, how does it logically follow that we are absolutely incapable of restoring our alleged lost sanity — i.e. correcting the sum of our troubles — without a complete dependence upon an external power? This idea is ludicrous to most Indians; not because we lack a dependence upon or belief in external powers, but simply because there are such gross inconsistencies between these two concepts, concepts that must be adopted in order to fit into the AA program. Are non-Indians not also aware of these inconsistencies?

I would like to illustrate the totally unrealistic nature of this proposal for Indian people. As part of the AA program we list persons, institutions, and principles that we are angry at or consider enemies. We go to our enemies

in a helpful and forgiving spirit, confessing our former ill feeling and expressing our regret. Under no circumstances do we criticize ... or argue. Simply we tell them that we can never get over our drinking until we have done our utmost to straighten out the past. We are there to sweep off our side of the street, realizing that nothing worthwhile can be accomplished until we do so, never trying to tell him what he should do. His faults are not discussed. We stick to our own. If our manner is calm, frank and open, we will be gratified with the results. In nine cases out of ten the unexpected happens. Sometimes [our enemy] admits his own fault, so feuds of years' standing melt away in an hour ... (ibid.:77-78).

When shown this passage from the AA book, one of my Choctaw friends exclaimed “Oh good! Finally a solution to the ‘Indian problem’! But where do you think we should all go first, to the Bureau of Indian Affairs (BIA) headquarters or to the White House?!” But before I could respond, another brother broke in: “Do you really think that if we go to them in a helpful and forgiving spirit and take the blame for everything and say we’re sorry they will begin to honor perhaps nine treaties out of ten?” No response was necessary.

It is a rule of AA that the individual must remain free of anger. *Under no circumstances* is anger to be expressed, and if ever anyone offends the individual, he or she is simply to say, “This man [or government or agency or mineral company?] is sick. How can I be

helpful to him [it]? God save me from being angry. Thy will be done” (ibid.:67). If we do not have the “strength” and “courage” to do this, and if instead we express any anger, according to the philosophy of AA it is because we are selfish and dishonest. On the contrary, some people (including Indians) feel that the expression of anger can be pretty healthy at times, not to mention it being consistent with human nature. On the other hand, to uncompromisingly suppress one’s anger as a matter of rule — regardless of the justification for the anger or the circumstances from which it arises — can lead to an accumulation of frustrations that can prove to be quite unhealthy; especially in light of 1) the discriminatory actions that Indians are faced with day after day in the course of non-Indian custom, and 2) the stressful situations that are so commonplace in the prison environment where the potential for violence is magnified, and often encouraged by the administrators and guards.⁴ One must also wonder if such strict adherence to this rule may not enhance the probability of one’s development of a passive-aggressive personality disorder.⁵

According to the concepts of AA,

Resentment is the “number one” offender. It destroys more alcoholics than anything else. From it stem all forms of spiritual disease, for we have not only been mentally and physically ill, we have been spiritually sick ... (ibid.:64).

When hearing such language, one cannot help but wonder if it has ever occurred to the founders and proponents of AA that some people drink not because they are ‘insane’, ‘mentally ill’, or ‘spiritually sick’, but because they are trying to numb the pain caused by the fact that they are religiously, politically, socially, culturally and economically oppressed by an alien government and people who are imposing their religious, political, social, cultural and economic values and laws on them without their willful consent and in direct violation of the majority of the human rights and fundamental freedoms that appear in the various international human rights instruments. To this end, it is the view of many prisoners (regardless of race or ethnicity) that the AA and NA programs are no more than social control mechanisms — that is, mediums through which the ruling class effectively subdues the discontent of the lower classes and underprivileged by having their attention diverted from the true sources of their problems (poverty, unemployment, despair, etc.). “What other reasons can there be,” poses one black prisoner from the Cleveland slums,

for them to force us into programs that are known to be failures in the treatment of substance abuse? Not only are we being forced into these programs here, but every day the under-privileged are being ordered by the courts to participate in the same programs in the free world if they wish to stay out of prison. The programs are failures, so why? I believe the answer is because the programs aren’t really failures at all — they are highly effective at controlling the lower classes. That must be why the government sanctions them as they do

I want to examine another aspect of the AA/NA format, the very principle of anonymity itself from which these programs have taken their names. Anonymity denies to an individual the social and cultural identity which research has indicated is essential to the successful treatment of Native Americans with substance-abuse problems. As was stated by Grobsmith:

... Indian people for the last century have been lost. When their religion and languages and cultures were taken away from them in the period of forced assimilation on the part of the U.S. government, Indian people's knowledge of their own ways was largely disappearing.

Because of the introduction of alcohol, the lack of a strong economic base [and] tremendous unemployment, the situation has become very, very drastic and very depressing; drug use at an early age and so on. Indian people have, I believe, lost themselves.

The return to Native religion — and there are other sources that document this, and I'm not the only person who's observed this — indicate that this return to [their traditional native] spirituality helps them in ways that other kinds of programs do not, by giving them something strong to identify with that is Indian, giving them pride

Indian people are not comfortable in AA. They're not comfortable in a large rehabilitation program that's not basically Indian, because many of them are embarrassed or ashamed to admit their problems and their dependence on alcohol with people who are not going to understand them, and who may have prejudice against them.

And AA is an approach that requires an attitude of an admission of guilt. You get up, and you give self confessions. You admit guilt and shame. It is not suitable to the Indian culture. It is not effective. AA is notorious ... [for its] great rate of failure with Native Americans; and this is nationwide (Grobsmith, 1987:281-84).

In wrapping up the discussion on AA and NA, it is also worth noting that these programs unquestionably qualify as “associations” (see *Black's Law Dictionary*), and that Article 20(2) of the Universal Declaration of Human Rights states that “no one may be compelled to belong to an association.” It appears, therefore, that all policies and practices that demand the participation of prisoners in these programs as a prerequisite to the restoration of their liberty or as a stipulation in their parole programs are in need of an overhaul. Not only do such policies and practices violate the above-cited right, when the individual who is coerced into the programs holds cultural, social, political or religious values or beliefs that are in conflict with those propounded by the programs, such policies and practices may violate most, if not all, of the rights guaranteed by the following:

From the *Universal Declaration of Human Rights* of the United Nations:

Article 18: Everyone has the right to freedom of thought, conscience, and religion; this right includes freedom ... either alone or in community with others

and in public or private, to manifest his religion or belief in teaching, practice, worship and observance. [The freedom of manifestation is impaired when conflicting beliefs are imposed on the individual.]

Article 22: Everyone is entitled to realization ... of the ... social and cultural rights indispensable for his dignity and the free development of his personality.

From the United Nations' *International Covenant on Civil and Political Rights*,

Article 26: All persons are equal before the law and are entitled without any discrimination to the equal protection of the law. In this respect, the law shall prohibit any discrimination and guarantee to all persons equal and effective protection against discrimination on any ground such as race, colour, language, religion, political or other opinion, national or social origin, property, birth or other status.

And the First Amendment to the United States Constitution declares that no law shall be made which respects an establishment of religion or which prohibits the free exercise thereof. As used in constitutional provisions forbidding the establishment of religion, the term "religion" means a particular system of faith and belief in the existence of a superior being or beings exercising power over human beings by volition; man's submission to mandates, precepts, rules of conduct, etc., imposed by supernatural or superior beings; these concepts shared, recognized and practiced by a particular church, denomination, association, group or sect. According to the legal definitions of "religion" as promulgated by the United States Supreme Court in numerous decisions, AA and NA are in fact religions. When I suggested this to a social worker here in the Southern Ohio Correctional Facility and emphasized that these programs are "Christian-oriented", he and his fellows became very perturbed and summoned me into an office where I suppose they expected to intimidate me. They confronted me with my 'accusations' that these programs are Christian-oriented, and what followed only served to illustrate that they indeed are. They insisted that these programs have absolutely no connection with religion and are suitable for *everyone* regardless of ethnic or religious affiliation, *including atheists*. This is absurd since an atheist rejects all religious belief and denies the existence of any god. When I stated this to these social workers, they told me that *I* was being unreasonable and "copping out" for not wanting to participate in the programs. They insisted that the AA program doesn't really have anything to do with religion because the individual participant is to consider this "god" to be in whatever form or manifestation with which the individual is comfortable, i.e., "God as you understand Him." This "God", they assured me, can take the form of a tree, a group of friends, the Great Spirit, or anything at all — "as we understand Him". Regardless of what image this "God" takes, however, the fact remains that it is a religious symbol; a superior being

with supernatural powers; a superior being that sets standards of conduct for us to live by and believe in, and which happen to be standards of conduct which clash with the standards of conduct *my* god has set for *me* to live by and believe in. These social workers, or anyone, may conjure up all the abstract theories they wish in an attempt to make someone believe that the “God” in these programs is not really the religious kind. The abstractions do not and cannot eliminate the supernatural quality that makes it religious. According to the dominant society’s own standards and rationalizations that we Native Americans are so familiar with, the AA and NA programs are either religious in nature or are superstitious in nature — take your pick. And it should also be noted that the AA meetings here, as well as in other prisons, which these social workers and prison officials insist are in no way related to religion, conclude with the Lord’s Prayer. Amen.

And in returning to some additional Rights guaranteed by the United States Constitution, we must not overlook the Fifth or the Thirteenth Amendments:

Amendment Five: No one shall be ... deprived of ... liberty ... without due process of law [Please see my note following Amendment Thirteen below.]

Amendment Thirteen: [N]o ... involuntary servitude, except as punishment for crime whereof the party shall have been duly convicted, shall exist in the United States ⁶

In addition to the laws listed above, many other similar laws and administrative regulations are violated when programs such as AA and NA are imposed on prisoners against their will. Such practices and policies are a direct offense against the inherent dignity of the human being and are clearly demonstrative of the policy-makers’ and enforcers’ intolerance of and contempt for the pluralism and self-determination that are claimed to be held in such high regard in those societies that are allegedly ‘democratic’.

It should also be noted that this imposition of AA and NA is discriminatory. Black’s Law Dictionary (1979) defines discrimination as such:

In constitutional law, the effect of a statute or established practice which confers particular privileges on a class arbitrarily selected from a large number of persons, all of whom stand in the same relation to the privileges granted and between whom and those not favored no reasonable distinction can be found. Unfair treatment or denial of normal privileges to persons because of their race, age, nationality or religion. A failure to treat all persons equally where no reasonable distinction can be found between those favored and those not favored.

It logically follows that the effect of a statute or established practice which gives “good time” credits or any privileges (e.g. trustee status or the option to transfer to less security) only to those prisoners whose

beliefs correlate with the AA/NA programs — or to those who are willing to sit through the programs in violation of their beliefs — is discrimination and constitutes a violation of the equal protection of the law. In order to adhere to the International Bill of Human Rights and corresponding American constitutional law, it is necessary to neutralize such statutes and practices so that the privileges presently granted by participating in these programs will become available to all prisoners. For example, if a state statute or regulation credits good-time to prisoners who participate in AA or NA, then such good-time must also be credited to Indian prisoners who participate in programs such as the Red Road Approach to Recovery, or the United Native Alcohol Program, which I will discuss in greater depth in a moment.

I am emphasizing substance abuse treatment because it is time for some concrete measures to be taken to alleviate the problem. Alcohol-abuse has long been recognized by social scientists as “the foremost medical and social problem” among contemporary Indian populations (see Beauvais and La Boueff, 1985; Grobsmith, 1989a; Hall, 1986; Mail and McDonald, 1981; Pedigo, 1983; Price, 1975; Snake *et al.*, 1977; Task Force Eleven, 1976; Weibel-Orlando, 1984; Weibel-Orlando, 1987). It has been well-documented that Indian youth suicide, which is double that of the national population, is alcohol-related (French, 1982; Grobsmith, 1989a; Rosenstiel, 1989; Shore *et al.*, 1972; Weibel-Orlando, 1984); that the leading causes of death among the American Indian population are attributed to alcohol use (Grobsmith, 1989a; Indian Health Service, 1989); and that almost all arrests of Indians are alcohol-related, including juvenile arrests (Grobsmith, 1989a; Grobsmith, 1989b; Lex, 1985; Mail and McDonald, 1981; Weibel-Orlando, 1984). According to Grobsmith’s studies, 91 to 100 percent of Indian crimes are alcohol or drug related (1989b). As stated by Dale Smith, a former spokesman for the Tribe of Five Feathers, the Indian cultural/spiritual group at the Lompoc Federal Prison in California, “if we have, say 50 guys, 49 of them are here because of alcohol problems” (Thornton, 1984). And as observed by an Idaho/Montana prisoner who expresses the general feeling among Indian people: “I feel that [with regard to] our Native people, the percent[age] who are in prison on alcohol and drug related crimes [is] 99 ... if not 100 [percent]. Alcohol has been the most destructive factor to our people since the day we were introduced to it.”⁷ And a former president of the Native American Council at the Southern New Mexico Correctional Facility, Harvey Snow, has stated that “of our twenty members, 19 of us are [in for] alcohol or drug related [offenses].”

And the problem is not going to be alleviated through the use of ‘rehabilitation’ programs that fail to take cultural factors into account,

as observations and research have clearly shown. The failure of non-Indian programs to successfully treat Indian substance-abuse problems has been well-documented (Grobsmith, 1987; Heath *et al.*, 1981; Kline and Roberts, 1973; Native American Rights Fund, 1978; Pedigo, 1983; Stevens; 1981, Weibel-Orlando, 1989). Despite these observations, most substance-abuse intervention programs offered to Indians (including those on the reservations) are generally designed by non-Indians and are “based on Western schools of thought that have little to do with Indian values and beliefs” (Beauvais and La Boueff, 1985; Butterfield, 1989; Stevens, 1981). “Increasingly, evaluators, treatment personnel, and potential clients deplore the Anglo cultural bias of existing alcoholism intervention programs and call for the integration of more traditional [Indian] forms of healing practices into programs with ... Native American clients” (Weibel-Orlando, 1987:264).

Over a five-year period, the Alcohol and Drug Study Group of the American Anthropological Association visited and observed over 40 Indian alcoholism recovery homes as well as traditional Indian healers in California, South Dakota, New Mexico, Arizona and Oklahoma. The alcoholism treatment programs were categorized across a range of six different types running on a continuum from what can be described as culture-sensitive to assimilative. They had found that “Indian alcoholism programs with the highest rates of sustained client sobriety are those that integrate a variety of [traditional Indian] spiritual elements and activities into their treatment strategies” and suggested further that “involving the concept of sacred separation as a viable ethnic stance and abstinence as one of its demonstrable forms may be a culturally appropriate intervention strategy and the effective *first step* toward sustained sobriety for contemporary American Indians ... ”(Weibel-Orlando, 1985:219-23, my emphasis).

Harvey Snow sent me the Twelve Steps in the Native Way which were given to the brothers in the Southern New Mexico Correctional Facility by a medicine man who spends some time with them. The distinctions between these steps and those of AA are very pronounced. Table 1 compares five of the twelve AA steps with five of the twelve steps the Native Way, “Sobriety Through the Sacred Pipe.”

In studies conducted by Westermeyer and Neider, they found that “those [Indians] ... engaging in more traditional Indian activities ... tended to have better outcomes a decade later. It appears that more intense contact with one’s own culture ... favors a better outcome among Indian alcoholics” (1984:183).

The importance of cultural differences must be recognized in any program that is to be successful with Native Americans (Bowe chop, 1970; Guajardo, n.d.; Jilek and Jilek-Aall, 1972; Jilek-Aall, 1974; Miller

Table 1: Comparison of Anglo and Native AA Steps

	<i>Anglo AA Step</i>	<i>The Native Step</i>
Step 2	We come to believe that a Power greater than ourselves can restore us to sanity.	We come to believe that the Power of the Pipe is greater than ourselves and can restore us to our Culture and Heritage.
Step 5	We admit to God, to Ourselves, and to another human being, the exact nature of our wrongs.	We acknowledge to the Great Spirit, to ourselves, and to the Native American Brotherhood, our struggles against the tide and its manifest destiny.
Step 6	We are entirely ready to have God remove all these defects of character.	Be entirely ready for the Great Spirit to remove all the defects of an alien culture.
Step 8	Make a list of all persons we have harmed and become willing to make amends to them all.	Make a list of all the harm that has come to our people from Demon Alcohol, and become willing to make amends to them all.
Step 11	Seek through prayer and meditation to improve our conscious contact with God as we understand Him, praying only for knowledge of His will for us and the power to carry that out.	Seek through prayer and meditation to improve our conscious contact with the Equality and Brotherhood of all Mother Earth's children and the Great Balancing Harmony of the Total Universe. ⁸

Table 2: Comparison of Anglo and Native American Values

<i>Native American</i>	<i>Anglo American</i>
Uncritical attitude	Critical attitude
Cooperation	Competition
Sharing	Ownership
Humble	Outgoing if not arrogant
Happiness	Success
Honor elders	No respect for elders
Silence	Verbalism
Tribal values	Individualism
Simplicity	Complexity and sophistication
Tradition	Innovation
Spiritual values	Material values
Learning from elders	Learning in schools
Few rules	Multiplicity of laws
Mysticism	Empiricism
Smallness	Bigness
Natural medicine	Synthetic medicine
Unity of animal kingdom with humanity	Separateness of animal kingdom from Humanity
Accept others as they are	Change or proselytize others

n.d.; Pedigo, 1983; Task Force Eleven, 1976; Topper, 1976; Weibel-Orlando, 1987). The programs must be based on Native values (Alday, 1971; Grobsmith, 1987; Jilek and Jilek-Aall, 1972; Jilek, 1974; Reed, 1989; Topper, 1976; Underhill, 1951). Native American involvement and staffing are essential to the success of substance-abuse treatment programs for Indians (Ferguson, 1976; Leon, 1968; Native American Rights Fund, 1978; Pedigo, 1983; Provincial Native Action Committee, 1974; Shore, 1974; Task Force Eleven, 1976; Turner, 1977). Where such involvement and staffing are not feasible, it is imperative that any non-Indian attempting to counsel effectively (whether or not such counselling is related to substance-abuse), should have some knowledge of the historical and contemporary realities facing Native Americans and the differences in Indian and Anglo values (Guajardo, n.d.). As Guajardo pointed out, "what is a positive value for the Anglo (e.g., being outgoing, competitive) can be a negative value for the American Indian. Calling values 'positive' or 'negative' is always relative to those who espouse [them]," and to approach any type of counselling or therapy from the "'Textbook' ... [which] emphasizes white middle-class values, is both improper for, and antagonistic to, the Native American client"(ibid.:3). Guajardo, in citing Richardson (1973), listed examples of the contrast between Indian and Anglo values as shown in Table 2.

In returning to the discussion of substance abuse, the most effective approach to the problems among Native Americans is simply that of refamiliarizing them with the traditional values of their culture, and strengthening those cultural values and norms (Albaugh and Anderson, 1974; Pedigo, 1983), for as was observed by Lex (1987:298), "the erosion of traditional behaviors [and values of Indians] accompanies drinking problems." As stated by Dale Smith, founder of the United Native Alcohol Program (UNAP) at Lompoc, "we try to say to them, 'Hey, the pipe is good, and the pipe is strong' ... The difference [between our philosophy and that of Alcoholics Anonymous] is that they dwell on the negative aspects of alcohol, while we prefer to accentuate the strength of our traditional ways" (Thornton, 1984). We asked Dale if he would share some additional insights about UNAP. His response follows:

What is UNAP?

Dale: UNAP is a substance abuse rehabilitation and prevention program. It is designed specifically for Native Americans. UNAP employs traditional Indian spiritualism and culture as well as up-to-date behavior modification techniques applied in a traditional Indian context.

UNAP breaks with conventional rehabilitation programs in many areas. For instance, UNAP does not treat alcohol or substances as problems. Those are simply symptoms of the real problems which are deeper underlying turmoils.

Additionally, the program focus of UNAP differs from the conventional in that it chooses to focus on the positive nature and spiritual strengths of mankind rather than on negative case histories. Focusing on guilt complexes and personal shortcomings is not a practice of UNAP.

The ultimate goal of the UNAP project is to repair and rebuild the damage of substance abuse, prevent abuse from occurring, and to provide a lasting sense of direction through encouragement, support and instruction in the Native spiritual practices of regional tribes. Suggestions on uses of work and leisure time, an important aspect of program aftercare, are also provided in the UNAP program.

When and how did UNAP start?

Dale: The UNAP concept was conceived in 1978. Research and development, as well as a large degree of self-education on my part, continued for five more years until in 1984 the first draft of the UNAP program was completed.

I participated in AA back in those days, but somehow could not bring myself to say the standard AA greeting, which is, "Hello, my name is _____ and I am an alcoholic." I always felt that in the context of that greeting, the phrase was unnecessarily demeaning and demoralizing. It was like being asked to slap myself in the face then follow that with a few psychological kicks in the butt for my past indiscretions. I said, "no way, buddy!" Besides, what was AA giving me?

I still had difficulty understanding how the AA concept applied to me. And it didn't help that I didn't believe in the Christian concept of God. Eventually it became a real problem for me to sit and listen to other people's testimonials about their loss of things I never had, like big brick homes and high society girlfriends, and to hear of their salvation through religious concepts which were alien to me.

Finally, I listed the problems conventional rehabilitation programs failed to address for Native people. I spoke to many different Indians about substance abuse and listened with an Indian ear for the deeper meanings within the stories I heard. And after more than four years of studying the problems, I put together UNAP and offered it as an alternative solution.

Where is/was UNAP developed?

Dale: UNAP was first introduced at the federal prison at Lompoc, California. The very first sessions were conducted for the Tribe of Five Feathers, the Indian prisoners group there.

Like an underground movement UNAP traveled through the federal system. It surfaced at facilities in Phoenix, Arizona, Lewisburg, Pennsylvania, Terre Haute, Indiana, and it remains active at Lompoc.

It's unfortunate, but for the most part, federal administrators uniformly resisted the development of UNAP. Their spoken reasons ultimately revert to security concerns. However, even a streamlined UNAP proposal which addresses every conceivable security consideration meets with resistance. So, one must presume that other motives for the resistance exist.

Outside the institutional setting, UNAP has been made available to several organizations and tribes. The Sho-Ban tribes in Idaho and Fort Peck tribes in Montana are among the list. Additionally, the Indian Center in Kansas City and a clinical psychologist of Indian descent at Berkeley use concepts taken from the UNAP program.

Your vision for UNAP?

Dale: The UNAP concept is such that it projects its own future. The Medicine Wheel which is an integral part of UNAP tells the story.

As the outer circle of the wheel is symbolic of the cycle of life in our universe, I see UNAP as having limitless potential. It has the potential of reaching people from all age groups and all nationalities, if not directly then by proximity to those it does touch.

And as the cross intersects within the wheel, UNAP has the potential to draw people together. I see Indian people one day looking at each other as one nation, regardless of tribal or political affiliation and regardless of historical animosities, because it is my belief that we Indian people, and all indigenous people of the world, will see a day in the future when our unity will be the only thing that stands between us and the final holocaust.

My vision for UNAP? In a word, it is HOPE.

And Dale certainly isn't alone. Other people with the same vision have been pushing to see the implementation of similar programs throughout North America. The Red Road Approach to Sobriety, another culturally specific program developed by Gene Thin Elk, another Sioux, is an example. The Red Road Approach program is now being used in prisons in several states, as well as by various Indian tribes and centers. It is unfortunate, however, that these programs are being met with resistance not only by most prison administrators but by funding agencies upon whom the Indian people must rely for assistance in keeping the programs alive in Indian communities.

On the discussion of substance abuse in the first volume of the *Operations Guide Manual for the Cheyenne River Swift Bird Project*, the Native American Rights Fund clarified what is probably the most important distinction between Native American and Anglo attitudes and approaches toward the problem:

... [We] have made a special effort *not* to compartmentalize substance abuse problems. The problems of alcohol and drug abuse are not singular problems that can be identified and isolated out of the total life context of the [individual]. Other social, medical, spiritual and personal problems have not been adequately addressed in non-Indian correctional facilities. [We must be] careful not to disassociate these problems from the total context of the [individual's] life. Indian culture and tradition are not a distinct aspect of Indian life but form an integral set of qualities which pervade daily life. In the same way, the problems that exist for Indians cannot be addressed as isolated problems, but must be viewed in the cultural context as an integral part of the larger whole.

Substance abuse programming [must be] developed from this integrated cultural perspective ... (Native American Rights Fund, 1978:31).

To this end, *all* approaches to counselling at the Swift Bird Project, whether substance-abuse related or not, were designed from this integrated cultural perspective and within the framework of traditional Indian concepts and methods of handling antisocial behavior:

... The project integrates acceptable concepts from the field of counselling with the use of traditional Indian values and practices.

The primary goal of the counselling program is to meet the personal needs of the individual resident at Swift Bird and upon release and re-entry to his home community. Traditional Indian approaches combined with [acceptable] non-Indian approaches form the basis for a successful program. In conjunction with basic counselling techniques this approach has the potential for an effective and comprehensive counselling program for [Indians].

Counselling is conducted on both an individual and group basis. The total approach to counselling allows cultural flexibility and adaptability to accommodate the cultural beliefs and experiences of residents.

Important objectives of the program include:

1. Assisting the resident in developing and maintaining a positive self-image and sense of self-worth.
2. Assisting the resident in developing his psychological functioning, aptitude, interests, interactions, and personal goals.
3. Enabling the resident to identify his immediate and long-term goals.
4. Identifying and affirming strengths, achievements, and successes for building fulfillment of self and fulfillment of significant others.

The traditional Indian approach to counselling [differs from] current non-Indian counselling practices ... in the way ... services are delivered. Traditional Indian counselling is an ongoing process which is not characterized by sessions or meetings. Traditional counselling services are delivered informally, by providing positive models and examples, and by integrating supports and models into all aspects of daily life. Native American practitioners (medicine men) are essential to the counselling program... (ibid.:28-9).

It becomes evident, then, that the development of traditional Indian components to the greatest extent possible within the prison setting would (and has) served to enhance the rehabilitation of individuals.

As Larry McCook, Associate Director of the Native American Prisoners Rehabilitation Project, has pointed out with respect to the white man's theft of Indian things and labelling them white man's 'discoveries', the principles of Gestalt psychology and other types of contemporary psychology have been employed by Native American tribes since time immemorial (McCook, 1989). The ideas underlying Gestalt psychology have been absorbed and continue to have a significant impact on psychology (Saccuzzo, 1987:15).⁹ Carson *et al.* (1988) have pointed out that various comparative sociocultural studies of the incidence of psychological disorders have indicated significant

contrasts between those in the United States and those in native tribal populations. For example, while major depression is rampant in the mainstream United States, it is almost non-existent among native tribal peoples until their cultures are disrupted by Anglo influence (*ibid.*: 303-4). It seems probable that this is as it is, at least in great part, because the same ideas that are the core of Gestalt psychology are in fact integral concepts held within the religions and cultures of tribal peoples; whereas, in the mainstream USA these holistic concepts are generally ignored if not intentionally rejected.¹⁰

For example, while such things as the interpretation of dreams are often thought to be ridiculous, this Gestalt technique used to increase self-awareness and self-acceptance has been practiced by Native people for thousands of years. As a matter of fact, fundamental aspects of Gestalt therapy can be found in all the major individual and organizational functions of Native American cultures and religions. The vision quest, the sun dance, the pipe ceremony, the medicine wheel, the sweat bath — all are essentially Gestalt. And the definition of Gestalt Psychology is merely one way of defining the fabric of traditional Native American philosophy.¹¹

The purification ceremony of the sweat lodge and its associated practices is a critical ritual that is virtually universal among Native American tribes throughout North America. To Indian people, the sweat lodge has long been a center for spiritual, physical and psychological healing and strength, and is seen as a fundamental rehabilitative tool:

... It has become a major means of spiritual support for many young people. Its rehabilitative effects on troubled young men is particularly evident It is frequently used to combat the effects of alienation, such as alcoholism and other destructive, anti-social behavior ... (Walker, 1985:32-2).

The positive rehabilitative effects of the sweat lodge have been well documented (Hall, 1986; Hanson, 1983; Johnson, 1988; Navajo Nation, 1989; Nebraska Parole Board member, personal correspondence, 1989; Reed, 1989; Seven, 1988; Specktor, 1983; Spotted Eagle, 1983). Prior to the March 1989 decision by the federal court in Utah, Lee Bergen, staff attorney with the Navajo Department of Justice, pointed out that "Utah's ban on the sweat lodge ... effectively destroys the only successful rehabilitative tool available to [Indian] inmates" (Sisco, 1989). Statistics compiled by the Navajo Corrections Project, which serves the rehabilitative and religious needs of prisoners in at least 36 state and federal institutions, indicate recidivism rates of 7% for prisoners involved in sweat ceremonies as opposed to a national average of 30-to-50 percent.

The Native American Church and its associated practices have been described as the most successful Indian alcoholism program of all

(Bergman, 1971; Pascarosa, 1976; Roy et al., 1970; Underhill, 1951; Wagner, 1975; Weibel-Orlando, 1989). "Most Indian people working in alcoholism programs say, usually away from the funding agency, that the most successful Indian alcoholism program is the Native American Church" (Stevens, 1981:141).

In the mid-70's, when the people involved in the Seattle Indian Alcoholism Program recognized that over 90 percent of the Indians in jails and prisons are there for alcohol-related offenses, they set up culture-specific programs in Washington's four major prisons. Within four years after these programs were established, the proportion of Indian prisoners in the state's prisons had dropped from 5% to 3.5% (Walker, 1981). While this decline in the Indian population (of nearly 1/3) cannot be claimed as the direct result of the implementation of the programs in Washington's prisons, that possibility must not be ruled out, especially when these statistics correlate with other research cited in this paper. And as observed by Seven:

For prison officials, the [purification ceremony of the sweat] lodge and other religious programs are ways to reduce the high rate at which released inmates commit crimes.

Robert Lynn, religious program manager for the Department of Corrections, says inmates in Oregon's prisons who were actively involved in religious programs over several years in the late seventies had a recidivism rate of 5%, compared with the national rate of close to 75% at the time ... (1988).

With statistics like these, the relevance of and need for spiritual/cultural programs for Indian prisoners can hardly be refuted. In fact, it would seem that such statistics would encourage prison officials and administrators to actively seek the development of such programs with the tax dollars they are currently wasting in their attempts to defend the suppression of the religious practices which would be accommodated through the programs. As was stated by Hoffstetter in Scott:

It has been my experience based on twenty years of juvenile and adult correctional work, both as a clinical psychologist and program administrator, that ... the more an inmate is involved in his own rehabilitation process the more effective will be the outcome (1973:140).

We Indians think that's pretty sound logic. How can a prison official or administrator know what rehabilitation process will be effective for *any* prisoner when the values and beliefs held within the cultural context of the prisoner are contrary to those of the culture to which the prison official belongs? It is impossible unless the official is willing to sit down with the prisoner in an attempt to bridge that cultural gap. Repeated displays of insensitivity and indifference to the laws and to the basic human needs of the prisoners by prison officials such as those who force Indians into programs that propagate philosophies,

values, principles and beliefs that clash with those of the Indians serve only to enhance the alienation of the Indians and make them more bitter and resentful toward the society those prison officials represent. In other words, such practices not only fail to rehabilitate, but to the contrary, they serve to increase conflict (and undoubtedly the criminal recidivism rates). Consider what must run through the minds of many prisoners who are continually faced with these ethnocentric displays and attitudes. Better yet, consider what would reasonably run through your own mind under the same circumstances. Perhaps something to the effect of, “the officials themselves have no regard for my human dignity or for the laws they have made — so why should I?”

CONCLUSION

It is worth noting that while we are focusing primarily on the contrasting cultural perspectives on rehabilitation of Native Americans, the fundamental concept involved — the concept of giving consideration to historical, ethnic, cultural, socioeconomic factors, etc., in approaching rehabilitation techniques, rather than taking the textbook approach which emphasizes middle-class Anglo values — is also applicable to substance-abusers and prisoners of other cultural and ethnic minorities. If prison administrators throughout the country were to apply this concept to their approaches in the treatment of prisoners, there would undoubtedly be an overwhelming reduction in recidivism since the majority of prisoners in the country are members of cultural and ethnic minorities rather than the Judeo-Christian group upon whose ethos the contemporary American prison systems are admittedly based. Grobsmith (1989b:17) has summed it up well:

... [Many] correctional system[s] make no pretense of offering real therapeutic rehabilitation. Overcrowded and underfunded, they do not consider themselves ... rehabilitation center[s] but ... place[s] to house inmates and secure their isolation from society and protect the public for a time. One cannot help but wonder, however, whether investment in better therapy and the prospect of reduced recidivism rates might be more cost effective by paying for therapy now and helping the inmate NOT to return again....

In conclusion, I want to point out that all of this has tremendous significance not only to Indian prisoners, but to the entire Native American population, and as Dale Smith would say, “all age groups and all nationalities, if not directly then by proximity to those it does touch.”

According to the Indian Health Service (IHS), “75% of all Indian families have at least one alcoholic member, and ... nearly 100% have been affected in some way by alcoholism” (Butterfield, 1989). Meanwhile, the IHS has primary responsibility for funding tribal substance abuse programs, yet the IHS doesn’t seem to want to provide funds for programs that are culturally sensitive. In light of the

evidence I have presented here that our own programs are the answer to our problems, and that the non-Indian programs are not, we wonder why that is?

* * * * *

Hey Dale. A lot of social scientists have wasted billions of dollars over the years trying to answer the question, 'Why do Indians drink?' I personally know a lot of Indians who drink because of the poverty conditions imposed on our people while these social scientists waste all that money that could be used for real solutions rather than abstract contemplations and rhetoric. But of course, I'm not an expert (I don't tote a Ph.D.) so my opinion doesn't count for much. Also, some folks think I'm just too hostile to be listened to. So let me ask you, Brother. You've talked with thousands of Indians and listened with an Indian ear for the real causes. Why do you think Indians drink?

Dale: This is a good question. Why do Indians drink? Try to follow me.

Indians of modern times are born with a 'soul wound.' From the first moment of life we begin learning to understand Tunkasila's purpose for us. Indians are the guardians of Ena — Mother Earth. Tunkasila gave us logic and separated us from our animal relations. With logic we are capable of helping to regulate corporal activities on earth as a means of protecting the natural balances.

Look around. We have failed our mission. Moreover, as we grow toward adulthood we consciously and sub-consciously assume the suffering of all our ancestors.

The Trail of Tears, Sand Creek and Wounded Knee, the Nez Perce run for Canada. These events. The thought of them brings tears to my eyes, for the pain of our people, and for the shame mankind deserves for committing such atrocities.

Those are the cause aspects of the Indian soul wound. The soul wound is the cause of spiritual imbalance. Spiritual imbalance is the cause of substance abuse.

Those are the problems. The solution is to achieve spiritual balance and a clear understanding of our unique Indian psychological patterns. Indians have got to be damn smart to survive in this world today! Some assimilate, and if they find peace in that, I say that's great. But the ones who either don't want to assimilate or who have tried and found no spiritual peace in it, those are the people I am here to help find their way home.

Thank you, Dale.

ENDNOTES

1. 'Good-time' is a term used to indicate a reduction in actual time that must be served by the prisoner. For example, many states automatically give good-time credit to prisoners when they enter the prison system, and this good-time will only be taken away if the prisoner violates prison rules. For instance, in some states, if a prisoner is sentenced to five years, he will only have to serve an actual three years because he is automatically given two years good-time credit. On the other hand, in some states (such as Indiana) when good-time credit is taken away for rules infractions, it can be regained for faithful participation in AA or NA. Other states have different kinds of good-time laws and regulations. Ohio's House-Bill 261 is a good example. It offers good-time to prisoners for their faithful participation in 'programs' — AA and NA are the *only* programs this good-time law is applied to in the Southern Ohio Correctional Facility (SOCF), and it is probably the same way at the other Ohio prisons. When this law was passed and the prisoners found out it would become effective, it was a mad race to the sign-up line! Coincidentally, because of the limited capacity for participants in these programs, there are far more people on the waiting lists than there are in the programs, and the wait runs into the years (unless the policies and practices have changed since the turn of the year when I last checked).
2. For example, this morning one of my friends saw the parole board for the first time in sixteen years. He hasn't had a drink in sixteen years and claims that he's never been an alcoholic. His work evaluations have been above average the whole time he's been in prison, but the parole board has taken it upon itself to evaluate him as needing treatment because he has a "serious disruption of functioning" as a result of an alleged "frequent abuse" of alcohol.
3. My own parole was denied on the sole basis of my refusal to get into AA or NA. It was denied despite the fact that a substantial portion of this paper was submitted to the parole board verifying that the AA and NA programs propagate values and beliefs that clash with my own, that I do not use alcohol or drugs, and that those programs as they are implemented in this prison are almost completely without rehabilitative value. The members of the parole board decided that despite the evidence, they believe I have a "severe" drug and alcohol problem which renders me unable to function in my daily affairs. When you finish reading this paper, *you* decide who's functioning properly and who isn't.
4. Many prison officials tend to deal with isolated incidents of misconduct of prisoners by establishing policies or practices that inflict punishment on the whole prisoner population. There may be a stabbing one day; for the rest of the week the warden might let the prisoners know he is upset about it by locking down the whole prisoner population. If the stabbing involves possible racial conflict (i.e., white stabs black, or vice versa), tensions are going to rise between the races involved. Regardless of whether there are racial undertones or overtones, this collective type of punishment creates tension between prisoners and staff, and between the prisoners who have not 'caused' the collective punishment and those who have. What leads to violence if not tension?

There are many other ways the prison administrators and guards encourage violence. The prison guards here at SOCF wear coats (and often gloves and ear muffs) in the hallways, the cell blocks, and the chow hall in the winters. They do this to keep warm while the prisoners are cold and miserable. They open the windows in the chow hall to 'encourage' us to eat fast and to discourage us from sneaking through the line for a second helping of food. They often pile us into the chow hall by the hundreds, so that if we want to eat we must pay for our meals by standing in the literally freezing chow hall food line for up to forty-five minutes. We have no long-sleeved shirts. We have no jackets or coats. This is a form of corporal punishment for simply being in prison. Our complaints about this type of

treatment fall on deaf ears. Some guards laugh in our faces (is this not encouraging violence?). Some guards express sympathy but say there is nothing they can do about it.

In many prisons, "white power", very racist anti-color publications that promote violence against minorities (all non-whites) are permitted into the prisons without any screening, while in those same prisons, pro-black, *non-violent* publications are prohibited as a blanket policy regardless of content (Abu-Jamal, 1989). Is this not the encouragement of violence? These are only a few examples of how prison administrators and guards encourage violence. Any prisoner who isn't scared to speak out about the encouragement of violence on the part of the administrators and guards can give you examples all day long. It is unfortunate that the great majority of prisoners are scared to speak out until *after* they are released from prison and, of course, off parole. It is also unfortunate that by *that* time the ex-convict would rather just forget the whole ordeal, so the conditions persist.

5. A passive-aggressive personality disorder is characterized by never confronting a problem situation directly. Individuals with this disorder "typically express hostility in indirect and non-violent ways, such as procrastination, pouting, 'forgetting', or being obstructionistic, stubborn or intentionally inefficient" (Carson, 1988:233), such as the janitor who is angry at his boss and expresses it by smiling and saying "yes sir" when ordered to sweep the floor a second time, and then sneakily "putting one over" on the boss by intentionally leaving dirt on the floor where the boss *won't* see it. Before having ever made my acquaintance, the psychologist in this prison diagnosed me (for the parole board) as having this disorder on the basis of my responses to the 550-item Minnesota Multiphasic Personality Inventory (MMPI), an examination which is absolutely inapplicable to Native Americans (I am prepared to meet any scholar's challenge to this claim), and which all Ohio prisoners are required to take if they wish to see the parole board. After having become acquainted with me, the psychologist admitted (but only to me) that had he known anything of my background he would never have diagnosed me as he did. Nevertheless, because he is a blind conformist, I remain officially classified as a "passive-aggressive personality disorder." Ha ha. Who knows, maybe if I'm lucky I can advance to paranoid schizophrenia for my next parole hearing. "Alcoholic", "drug addict." I'm doing pretty well!
6. The refusal of a prisoner either to participate in AA or NA or similar programs, or to agree to accept a stipulation requiring such participation upon release in order to secure his/her liberty, is not a crime. If his or her liberty is delayed or denied on the basis of such refusal, the delay or denial constitutes involuntary servitude without due process of the law since the question of his or her original crime is no longer at issue.
7. This was relayed to the author in personal correspondence from Jim Spurlock, who at that time (mid-August, 1989) was in Orofino, Idaho state prison. At that time he had a petition for a writ of habeus corpus pending in the Idaho State Court for the Second District because he was being required to obtain "treatment for chemical dependency" as a prerequisite to being considered for parole while there was *absolutely no type of chemical dependency treatment available* at the Orofino prison and none of the Idaho officials or parole board were responsive to his repeated pleas to either have such programming established or to have him transferred to a facility that could provide the treatment that was being demanded of him by the parole board. Jim has since been transferred to the Montana Department of Corrections where he can obtain the treatment demanded of him, but it is worth noting that it took the Idaho Department officials two years to finally heed his cries (which were joined by concerned supporters on the outside), and those two years alone cost the tax payers from \$50 to \$80 thousand. Jim's situation was not unique. He is just another Indian in prison. Oh, and what for? Not for a crime, by the way. He is there for drinking in violation of parole

stipulations after having served time for any crime he may have committed in the past. No new offense. No new crime — only for drinking. They are *your* tax dollars.

8. It should be noted that these Twelve Steps in the Native Way were contrived strictly as an *alternative* for Indians in prisons where AA is “encouraged” by prison officials who at the same time resist the development of substance abuse programs that are suitable for Indians.
- 9 Gestalt Psychology is defined as “the school of thought that emphasize[s] the importance of studying the whole — that the properties of the parts depend on their relation to the whole” (Saccuzzo, 1987:14).
10. This failure of the mainstream USA to acknowledge holistic concepts (realities) can be seen by turning to the medical model’s view of criminality as a “‘sickness’ which could be treated, and the offender as a person who, once treated, could be returned to the community cured of his *social* disease” (White, 1989:31) (emphasis added). To face the holistic reality of the situation, one must begin by acknowledging the possibility that social diseases are manifested by the societies in which they manifest, rather than isolating the “sickness” from that society in an attempt to examine it. As noted by Pedigo (1983:274), “the holistic [Gestalt] value system necessary for tribal existence cannot regulate behavior where daily life is controlled by a society with an isolationistic value system.” And I note that prior to the disruption of our tribal cultures by Anglo influence, we had no need of prisons.
11. It should be understood that I am not suggesting that Gestalt Psychology as applied in the contemporary field is suitable for Indians, because it is not. Definitionally (see footnote 9 above) and theoretically, Gestalt Psychology suggests a holistic approach to analysis; however, the application of Gestalt therapeutic techniques can hardly be said to exemplify holism. For example, the Gestalt therapist places emphasis on the immediate present — the here and now — while consciously rejecting both past and future. This cannot be done in the application of a truly holistic-oriented theory or philosophy, for “*the properties of the part* [which is the present] *depend on their relation to the whole* [which includes both past and future].” If we ignore the past or neglect the future in our present, then we ultimately neglect our present responsibility for recognizing our relationship with the past and the future. It is this very negligence inherent in the dominant society’s value system which causes much distress to Indian people. For example, consider the rejection of the future consequences of raping and poisoning the earth for a present dollar bill. When our grandchildren have been robbed of their inheritance of a healthy environment to live in as a result of our present negligence and irresponsibility, and when they go to seek help for their distress, will the Gestalt therapist have an adequate solution in striving to have our grandchildren block out their past (our present), upon which their well-being (our future) depends?

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