

## AUTHORS' NOTES

### Chapter I

1. Field notes from conversation in January 1985 with Connie McCloud, a former Tribal Council member who has occupied various health care delivery roles in the Puyallup health care system since the early 1970's.
2. Field notes of conversation with John Bell, Tribal Attorney, March 1985.
3. Ibid. Note 1.
4. This section based on: *ibid.* Note 1; a transcribed interview with Connie McCloud in April of 1978 by Marilyn L. Lebond, a student in one of Dr. Guilmet's University classes; and an unpublished manuscript entitled "Puyallup Tribal Health History" by Dr. Tim Byers, the first physician with the Indian Community Clinic.
5. This section based on: the written responses of Marsha Ostruske, former Director of the Puyallup Tribal Mental Health Program, Kwawachee Counseling Center, to a set of questions constructed by the authors; and field notes of a meeting with Kwawachee staff. Spring, 1985.
6. This section based on: *ibid.* Note 1; and the written responses of Leo Whiteford, Manager of the Substance Abuse Treatment Center, to a set of questions constructed by the authors. (Spring, 1985).

### Chapter II

1. See Smith (1940a) for a description of this process.
2. Data from the 1980 United States Census and the Office of Human Development Services (1981) were used in this section. These data are not specific to the Puyallup, but include other Indians on the Puyallup Reservation, in Pierce County and in Congressional District 6. However, there is every reason to believe the Puyallup and the other Indians in their community share similar socioeconomic conditions.

### Chapter III

1. We wish to thank Arthur Kleinman for discussing with one of the authors (George Guilmet) the methodology used in his research. However, any weaknesses this research and the accompanying analysis may display are entirely attributable to us.

2. Interviews were conducted in the homes of the families in the study. Individuals were correctly told that the study had the approval of the Puyallup Tribal Council. Interviewers emphasized that the interviews were confidential and that the interviews did not represent any government or private agency. Interviewers expressed the importance of this information for assessing the health needs of the community. Informants were told that the interviewers wished to learn about all health care decisions and choices, including folk or family care. Informants were even asked to recall any episodes they would hesitate to call sickness, for example, scrapes or bruises.

3. We wish to thank Christine Wright, Debra Peterson, and Kimberly Garwood for their commitment to this project. All three were seniors in the Department of Comparative Sociology at the University of Puget Sound. All had previously completed courses in social theory, research methods, and methods of data analysis. The project could not have been accomplished without them.

4. Several Puyallup individuals commented that sickness was more frequent during winter months and that we should have conducted our study at that time.

## Chapter IV

1. See pages 70 and 71 of Otis, Katz and Whited, 1981, for data concerning the decrease in the percentage of Indians committed to the Oregon State mental hospital and the corresponding increase in Indians incarcerated in Oregon State correctional institutions: "Ostensibly this pattern reflects a preference for criminal rather than civil commitments. . . . At issue is whether Native Americans are being singled out for this kind of treatment in preference to less severe alternatives" (p. 71).

2. Written responses of Marsha Ostruske, former Director of the Puyallup Tribal Mental Health Program, Kwawachee Counseling Center, to Chapter Seventeen of the Institute of Medicine's publication (Hamberg et al., 1982), January 1985.

3. Connie McCloud (see note 1, Chapter I) noted in a January 1985 interview the avoidance behavior of individuals seeking mental health treatment during the period when the Mental Health Center was conspicuously placed as a separate facility in a mobile home in a parking lot near the Indian Community Clinic and the Elders building.

## Chapter V

1. The authors would like to thank those who have commented on various drafts of this chapter. We would especially like to thank the mental health professional staff at Kwawatchee during the time of this research (Aleicia Charles, Steve Fenwick, Dr. Robert Houk, and Marsha Ostruske) for their involvement in the generation of clinical information and their comments during all stages of this work. Further, the authors wish to thank Ruth Currah (Childrens Mental Health Specialist who worked closely with the Tribal School, Tribal Childrens Services and Kwawatchee) for her observations. However, the authors accept sole responsibility for any problems that might exist with this chapter or our interpretation of their comments and responses.

2. Written comments by John Crumbley, Ph.D., a former Kwawatchee counselor.

3. We wish to thank Dr. Carolyn Attneave, Professor Emeritus, Department of Psychology, University of Washington, Seattle, Washington, for her experienced, astute and considered analyses and comments on a critical draft of this chapter.

## Chapter VII

1. Personal Communication with William H. Goetzmann. March 29, 1984.

2. This reference to serving the young is most likely due to the common situation in which children are referred to introduced forms of medicine much more frequently than adults; see Kleinman (1980). This situation arises for multiple reasons including the willingness to try all forms of intervention for serious childhood illnesses and the higher level of adherence to traditional medical beliefs and practices among adults. In many cultural contexts economic hardship is also an issue, adults being willing to forgo treatment if the cost is prohibitive.

3. Since nearly the entire land base of the Puyallup tribe had been eroded, almost no Puyallup would be eligible for care under this condition.

4. Public pressure and concern for the containment of tuberculosis remained at a high level throughout the early Twentieth Century. For example, Tacoma community clubs objected to the building of the Cushman facility tuberculosis home in 1929. Mrs. Ida McQuestem of Tacoma led the fight in Washington, D. C. against the establishment of the hospital:

She has written members of the Washington Congressional Delegation telling them that the health of Tacomans will be endangered if sick Indians are allowed to roam around ( Fight Hospital, 1929, p. 2).

5. Personal conversations with Paul Shields, former Director of the Tribal Maintenance and Engineering. 1984.