

These are exciting times with respect to American Indian and Alaska Native mental health, for children as well as adults. A new generation of studies are underway, characterized by state-of-the-art diagnostic and intervention techniques coupled with a critical perspective on the cultural relevance of the ensuing results. Funding for alcohol, drug, and mental (ADM) disorder services has never been better. New legislative mandates have dramatically increased treatment and prevention resources in Indian/Native communities. There is a keener appreciation of the frequent co-occurrence of ADM disorders that requires significant levels of collaboration across once disparate elements of a highly fractured service system. Tribal, Indian Health Service, and Bureau of Indian Affairs leadership in health care is being revitalized. Such advances, however, may not reach full promise without more careful attention to the infrastructure and processes upon which their translation into regular, sustained practice depends. This is the focus of Gordon Neligh's monograph, indeed, his work over the last 12 years.

I read Dr. Neligh's first draft of this treatise nearly six years ago. Excited by its comprehensive vision and emphasis on the incorporation of current knowledge as well as technologies into local programming, I pushed him toward publication. Though dedicated and well intentioned, the tribal and federal health planners of my acquaintance seemed at a loss for an overarching framework within which to organize and pursue programmatic objectives. Instead, they appeared to be responding to an endless stream of poorly articulated special initiatives, each undeniably needed but not necessarily thought out in terms of the broader implications for systematically reducing the nature and extent of mental illness in their respective communities. Dr. Neligh's work in the Billings and Portland Area Offices of the Indian Health Service sought to alter these circumstances. This monograph represents his detailed blueprint for introducing planners, providers, administrators, and policy-makers to a more rational strategy for assessing, prioritizing, and delivering mental health care to Indian and Native people.

Mental Health Programs for American Indians: Their Logic, Structure and Function should be required reading for every person in and concerned with the Indian/Native health care system. It forces one to (re-) consider the assumptions that underpin the kind and manner of service provided. In light of the changing complexion of Indian/Native mental health care needs and organization of programmatic responsibilities, the discussion of these assumptions has begun in earnest at local, regional, and national levels.^{1,2,3,4,5,6,7} This volume adds considerably to that discussion by providing a unique view that has not yet been represented.

Hopefully, it will assist us in making proactive decisions about the shape of services to come, rather than finding ourselves reacting to decisions that have been made for us by forces less sensitive and committed to the well-being of this special population.

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