This issue presents four articles on quite different mental health topics. "The Persistence of Traditional Medicine in Urban Areas: The Case of Canada's Indians," by Waldram, sheds additional light on several elements of the ongoing debate about the vitality of indigenous systems of healing in the face of increasing sociocultural change. The author reports data which indicate that Indian people continue to practice and to utilize traditional forms of medicine while living in the city. Moreover, such practices seem to be unrelated to the existence of western, biomedical services or to problems in accessing said services. Waldram persuasively argues that the meaning and importance of traditional Indian responses to illness are tied to cultural identity, as reflected by native language primacy and fluency. However, he also illustrates that these beliefs do not preclude utilizing western, biomedical services. Instead, one observes successive as well as simultaneous hierarchies of resort.

"Locus of Control and Drinking Behavior in American Indian Alcoholics and Non-alcoholics," by Jumper-Thurman, Jones-Saumty, and Parsons, extends an intriguing line of inquiry that has, over the last two decades, engendered considerable interest with respect to American Indians. Beliefs about the control of rewards or penalties -- specifically, whether they are the consequence of one's own behavior or of independent forces -- have been examined in terms of school dropout, cultural values, health behaviors, social adjustment, and life satisfaction. A recurrent thesis has been that American Indians, by virtue of primary socialization processes, are more "externally" oriented and, thus, attribute the course of certain events to forces beyond their personal control. Jumper-Thurman, Jones-Saumty, and Parsons explore this assumption in the context of potential differences between Indian alcoholics and non-alcoholics and their non-Indian counterparts. By and large, they find significant gender and cultural effects that warrant further investigation of the potential utility of this construct for theoretical as well as programmatic purposes.

"Psychiatric Function and Roles in an Indian Health Program Context," by Smith, chronicles the experiences of a young psychiatrist in the course of becoming a staff member and an important mental health resource at an urban Indian health clinic. The author describes this process in terms of various stages that marked the evolving definition of her contribution to the program. The complexity of this process and the multidimensional nature of a psychiatrist's role in such settings are vividly illustrated by several case examples. Being flexible, able to take the perspectives of others, and open to managing non-psychiatric aspects of patients' problems proved to be critical to her success. Smith calls special attention to matters which her prior training had not anticipated, and suggests ways in which others who may find themselves in similar circumstances might respond.
Finally, "Ojibway Adolescent Time Spent with Parents/Elders as Related to Delinquency and Court Adjudication Experiences," returns us to a theme that Zitzow raised in an earlier volume of this journal. In this instance, however, the author has taken the next step in depicting the consequences of significant reductions in the amount of time that Indian youth spend with family. Both the quantity and quality of such involvement bear strong relationships to self-reports of delinquent behaviors (e.g., smoking cigarettes, skipping school, running away from home) and actual court encounters that lead to legal dispositions. This work provides the clearest evidence to date for a series of concerns that have been the subject of considerable discussion throughout Indian communities. Zitzow, in turn, offers suggestions for special emphasis in the development of local, family-oriented resources to redress the observed imbalances in present day parent-child relationships within many Indian homes.

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