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Review of *Medicine That Walks: Disease, Medicine, and Canadian Plains Native People, 1880-1940* By Maureen K. Lux

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Medicine That Walks: Disease, Medicine, and Canadian Plains Native People, 1880-1940. By Maureen K. Lux. Toronto: University of Toronto Press, 2001. Tables, photographs, notes, bibliography, index. xii + 300 pp. \$50.00 cloth, \$22.95 paper.

Medicine That Walks recounts the impact of the federal government's Indian policy on the health and well-being of Canadian Plains Indians. The end of the bison as a staple of life, the treaties with the Crown, and the subsequent removal of Indians from the land, followed by settlement replacement—these form the backdrop for a thesis on historical cause and effect. The thesis is that race-based federal policies resulted in social, physical, and spiritual degradation for Indian people. Lux's account unfolds as a clash of cultures in which Indian traditions and practices struggle to survive the relentless onslaught of western domination and pressures for assimilation. While the theme is not new, the premise of multiple and interacting causation for a decline in the Indian condition is provocative.

The text is written partly in narrative form, with numerous details bolstering the general premise. The survival and ongoing influence

of traditional practice as a mainstay for Indian cultural continuity is supported by a general account of Indian pharmacological and spiritual medicine. Some insights are given into various Indian spiritual beliefs and ceremonies and their continued role in promoting health and healing. The book introduces the reader to imposed culture change and its impacts on the health of the Canadian Plains' Native Peoples as a result of increasing dependencies on federal programs, isolation on reserves, attendance at residential schools, as well as susceptibility to infectious diseases. Descriptions of traditional Indian medicine and the application of the western medical model are provided in contrast, along with their relative efficacy for Indian health during the post-treaty period.

Lux concludes that conditions of degradation in the health and well-being of Indian people continue under a legacy of generations of paternalistic intervention and control. Yet there is an acknowledgment that advances are being made in self-determination along many fronts, including health care. The revival of traditional medical knowledge and practice in turn provides a support for cultural continuity. The prognosis would indicate that greater autonomy through cultural renewal may result in a long-term positive outcome for Indian people.

The book presents a holistic approach to the analysis of culture contact and health impacts for Indian people of the Canadian Plains, questioning explanations of Indian degradation in health through the single cause of biological invasion of European infectious diseases. This approach opens the way for analysis of other contact experiences and their influence on Indian health, including present-day policies for the management of Indian affairs. The volume is a good resource for Indian studies, especially regarding the history of Plains Indian health and healing.

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