

Understanding the Borders of Authentic Healing from Gambling Addiction among the Western Apaches

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This study examines the process of identity formation in a present-day Western Apache reservation community. It explores how member identities have been shaped by various postcolonial social and political boundaries and how these translate into concepts of mental health—specifically in the area of gambling addiction and its culturally relevant treatment. By examining Apache experiences of the realities of contemporary reservation life, which is characterised by an uneasy mixture of traditional and postcolonial values and practices, this work illustrates how modern Native Americans position themselves within overreaching and conflicting discourses about what it means to be Apache in the 21st century. We find that cultural and political boundaries are well-established among community members and reflected in their perceptions and evaluations of the recently introduced casino gaming enterprise and its economic, social and medical consequences, including the search for locally meaningful programmes for compulsive gamblers. These boundaries divide community understandings of tribal wellness and mental health care according to traditional/Christian religious beliefs, political affiliation, language (use of English and Apache language) and degree of participation in global discourses of science and Western education and medicine. These findings highlight the need for reservation-based mental health care clinics that recognise internal cultural boundaries in their current practices and for the development of therapeutic programmes that offer more efficient and sustainable treatment and prevention strategies for gambling and other addictions.



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Introduction

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Throughout the history of the US (and since before its foundation), the Southwest has been notorious as a region of geographical, political and cultural borders. Its topography is hemmed in by the Pacific Ocean, several orogenic mountain belts and volcanic mountain formations. All this is connected by vast desert areas that are interrupted by gorges, valleys and land depressions, dotted with countless mesas and red cliffs and dissected by the largest ravine on Earth—the Grand Canyon. Based originally in Asia, prehistoric people emigrated to the naturally shaped borderlands of the Southwest somewhere around 9000 B.C.¹ While prehistoric migration continued in both directions between North and Central America over the millennia, and many politically and economically independent groups of hunters and gatherers as well as horticulturalists and desert farmers settled in the region, it was not until the 16th century that it was politically divided in the modern sense.² Most of the area became a Spanish colony after the Spanish conquest of the Aztec Empire in 1521, and it was administered as a viceroyalty of New Spain until Mexico won its independence in 1821. Although serious attempts to dominate indigenous groups were made during both the Spanish and Mexican colonisation periods, true political subjugation, marked by the isolating, relocating and confinement of Native peoples within the newly created boundaries of reservations, came only with the arrival of Anglo-Americans in the area. This historical period was inaugurated on 02 February 1848 with the signing of the Treaty of Guadalupe Hidalgo followed by the cession of all North American Mexican territories to the newly emerged American nation state. This was also the historical moment when the seeds of the ethnic and social class divisions that characterise the contemporary Southwest were planted. American Indian reservations came to be seen over time as a paradoxical model: initially established as a way of separating the “civilised” from the “primitive,” they were eventually transformed into territorial symbols of tribal sovereignty and pride. To this day, they are associated with crippling poverty and social

disadvantage, issues that clearly stem from the differences constructed through the drawing up of reservation boundaries.³

The colonial practice of isolating people on reservations served to impoverish Native tribes by separating them from their traditional environments and destroying their traditional economies and subsistence practices. For the Western Apache people, who are the focus of this study, this meant the abandonment of elk, deer, rabbit and other animal hunting practices as well as their disconnection from traditions of subsisting on wild berries, agave and acorns, cooking mescal and using local plants and herbs for diet and healing.⁴ The result was a serious rupture in the culture's life-sustaining rites and rituals that were connected with the cycle of the seasons and associated with certain supernatural powers and the maintaining of balance in the cycle of human life. More specifically, there was a ban on Apache songs, dances, games and coming-of-age rituals for young women. Children were forced to speak English, especially in boarding schools where they were socialised into thinking, behaving and even looking like Anglo-American Christians. The forced assimilation and abrupt discontinuation of traditional pre-Contact ways of life translated into the chronic social and medical pathologies which are associated with contemporary life on Apache and other Native American reservations.⁵ The situation was also complicated by the introduction of a second and more recent set of boundaries. These stemmed from the new discourses on tribal emancipation that were launched with the 1934 Indian Reorganisation Act, which was adopted by the us federal government in a bid to reverse the atrocious consequences of previous policies of assimilation. Although well-intended, this Act remained focused on economic improvements, relegating the promotion of tribal health and spiritual and cultural values to a secondary position.⁶

It was precisely in the name of tribal economic self-sufficiency that the 1988 Indian Gaming Regulatory Act was adopted, paving the way for tribes to open casino gaming enterprises on reservation (or purchased tribal) land. While this road has since proven rocky and difficult due to the move by individual us states to block these efforts, overall it has represented a major political victory. Still, this success has come to Native communities at a time when their rates of unemployment, poverty and alcohol and substance abuse are high, creating real potential for a deepening crisis around tribal health, wellness and communal vi-

tality. It has also come at a point when communities are divided by the legacy of colonial practices of assimilation that have left the Apache and other tribes in a grey zone between the communal life of a tribal society and the individualising system of neoliberalism capitalism.

Against this backdrop, the current study seeks to deconstruct the definition and diagnosis of compulsive/pathological gambling within the context of a West Apache tribal community. To this end, it offers a detailed analysis of the emergence of competing and overlapping social discourses which contribute greatly to an identity crisis among tribe members and complicate the development of culturally appropriate healthcare services. The borders around these often conflicting discourses have been established by various historical paradigms in the Southwest, including the pre-Contact, colonial and postcolonial approaches of local indigenous people.

Current health science literature illustrates that despite on-going efforts to find ways to improve the health status of Native Americans, mental health care services in tribal communities remains largely ineffective. One commonly stated cause is the inability to provide culturally relevant diagnoses and treatments that would reflect “traditional ways of life” and lie within the “authentic identity” of Native patients. In exploring culturally sound treatments of gambling addiction within a Western Apache tribe, I argue that to integrate “traditional” or “authentic” components into healthcare in a meaningful way, it is necessary to grapple with the complex process of mapping out and discerning the many concepts of local native identities. If tribal clinicians do otherwise, they risk grounding their programmes in simplistic and essentialised understandings of Native culture.⁷ These multiple identities can point to distinct borderlands and overreaching discourses about what an Apache understanding of mental health and illness would mean. This account focuses specifically on issues that are highly culturally, socially and politically charged in modern Native American society: casino gaming and the behavioural problems potentially associated with it that have been labelled medically as “compulsive” or “problem” or “pathological.” Understanding these conditions from an Apache perspective reflects their many historical layers as well as the everyday socio-economic constraints of current existence on a Native American reservation. As Thomas Csordas argues, Native people are constantly positioning and repositioning themselves within the

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changing borders of a social order in which their lives are driven by the permeating mainstream American lifestyle and idealised through the image of the traditional Indian lifestyle.⁸

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Background

The data presented here come from ethnographic fieldwork that took place during an 18-month stay at one of the Western Apache reservations in central-eastern Arizona and over four month-long follow-up visits. The reservation consists of seven districts and three concentrated communities and is home to approximately 10,000 people who are predominantly enrolled Apache members, but also include Apaches from other tribes, Navajos, Pima, Hopi, Mexican Americans and a handful of Anglo-Americans. The Apache language continues to be spoken by the older generations and is used frequently at public events, however middle-aged people and the younger generation speak English almost exclusively. Young people attend both on- and off-reservation elementary and high schools where the vast majority of classes are taught in English. Widespread poverty means there are limited economic and natural resources on the reservation. Only about one-third of adults of working age have a regular job. Local jobs are primarily available in federally funded education, healthcare and social services. The largest non-federal employer is the local casino enterprise. During the course of my stay, I lived with two different Apache families and collected 45 life history interviews and over 50 semi-structured short interviews that focused on local understandings of social gambling and problem gambling. The interviews were evenly balanced from the standpoints of gender, age and political and religious views.

“Pathological gambling” is a condition which is classified by the American Psychiatric Association’s *Diagnostic & Statistical Manual IV-TR* as an impulse control disorder⁹ and conventionally treated with medication and individual behavioural psychotherapy. In the reservation community which I explored, the Western medical model was represented by a behavioural health clinic whose name had recently changed from the Behavioral Health Center to the Wellness Center. At the time of the study, this clinic employed four to eight non-Apache

clinicians and two to four Apache counsellors.¹⁰ In the last decade, it has had six directors of whom only one was a tribe member. That person only served as an interim chair for one year.

The Wellness Center has been making non-negligible attempts to integrate what it perceives as authentic traditional elements into its programme. These steps include constructing a therapy room in the circular shape of a traditional sweat lodge, bringing traditional prayers into clinical practice and encouraging some clients to complement their clinical therapy with healing sessions run by local medicine men/women. Despite these efforts, the institution is largely avoided by tribe members even when they are locally recognised as in need of intervention due to drug, alcohol or gambling abuse. Practically all of the Center's clients have been court-ordered to attend and/or institutionally mandated to do so via their schools, employers, etc. The accounts of tribe members collected in this study suggest that the Center is strongly associated with colonial federal practices of control and cultural proselytising.¹¹ At the same time, most Apache staff members believe the institution is playing an essential role in developing the modern tribal nation and creating "professional" and efficient therapy programmes for the community. This voice of the Center's staff is, however, only one perspective amidst many narratives suggesting what it means to be a modern-day Apache, and thus, how to approach addiction treatment.

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Exploring Apache Perspectives on Gambling through the Doors of the Desert Treasure Casino

To capture the main and often contradictory perspectives on gambling issues in the community, I want to approach the four entrances to the tribe's casino, the Desert Treasure, as metaphoric gates.¹² These gates lead to the four discourses I uncovered through which various Apache identities and self-perceptions emerge. Inside the cultural and political boundaries of each discourse, we find nested a distinct set of ideas about problem gambling and how it should be handled.

The Desert Treasure is itself an impressive structure with a large dome at its centre connecting four large wings (the separate entrance-

ways). Based on traditional cosmology and the position of these entranceways, we may understand them as an allegory for the four cardinal directions that together constitute Apache life.

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The Northern Entrance

The northern entranceway may best represent the traditional – pre-Contact – Apache world. It is decorated with artefacts such as handmade burden baskets, beaded moccasins and cradleboards that evoke a sense of pride in Apache culture. The hallway walls display a series of large-framed portraits of famous warriors and medicine men such as Victorio, Cochise, Mangas Coloradas and Geronimo. Within pre-Contact traditional culture, gambling was an integral part of Western Apache life.

Present-day primary locations of Apachean peoples



When people gambled, important processes took place that shaped individual characters and positive social relations were established. The pivotal role of these experiences was reiterated through the telling of creation stories. One of these narratives which is integral to the Apache cosmology that has survived the onslaught of Euro-American Protestant teachings tells the story of Slim Coyote and how light began:

The story takes place in the time when animals talked and acted like people.¹³ These creatures were divided into two bands. One band wanted the Earth to stay dark all the time as it had done until then. In this group were all the animals that stung or were poisonous or slithered or were otherwise considered “mean.” Bear was the leader of this group. The second band consisted of the “good” animals, and it was led by Slim Coyote. The good animals challenged the mean animals to a game of hidden ball to determine which side would have its way about the distribution of dark and light. If Bear’s team won, it would stay dark and the mean animals would get to kill Slim Coyote and his group. If Slim Coyote’s animals won, daylight would arrive with the sun, and Coyote’s side would also have the right to kill the mean animals. In a tie, the moon and stars would shine their light during the night. The game began. When it was Slim Coyote’s team’s turn, they sang, ‘Dawn, dawn, let it break,’ and the light began to glow in the east. And when it was Bear’s team’s turn, his animals chanted, ‘No dawn! No dawn!’ and it fell dark again. Thus, depending on the amount of light in the east, one could tell which group was in the lead.

As the game wore on, the good animals appeared to be losing and so they turned to Gopher for help. Gopher went underground and tied his rope to the ball. When a member of Bear’s team tried to guess where the ball was hidden, Gopher pulled the ball away. The opponent grabbed at the dirt but could not find anything. Bear’s group soon realised their defeat was imminent. They began making different excuses to leave and so avoid being killed. After Bear himself managed to run away, Slim Coyote’s band began killing his people. They slaughtered most of the mean animals, but some managed to escape. The fact that these creatures had escaped and the ways they did so came to explain their particular characteristics: ‘The red ants, for example, got on the bushes and weren’t all killed and that is why there are stinging bugs today. The snakes hid in between rock cracks and weren’t all killed and

that is why there are poisonous creatures in the Apache land. The Bear was in such a hurry when running away that when he tried to pull on his moccasins, he got them on the wrong feet and that is why his tracks look like his left paw should be on the right side and vice versa.¹⁴ The game ended in a tie, and as a result, the Apache see sunshine during the day and the moon and stars at night.

As this story suggests, traditional gaming not only recreated and reproduced a life-sustaining balance and harmony between people and the natural elements, but it was an important social outlet. It helped strengthen intergenerational and inter-tribal relations, sharpen survival skills and improve the exchange of goods (and later cash flow) within the community through bets, losses and wins. One of the lessons of gambling, especially addressed to young players, was that opponents should be given the chance to retrieve what they had lost so long as they asked for this in a humble and polite manner. The traditional Apache ways of life also laid out sets of rules and time frames that defined gaming's place in life. Large gaming sessions like the ones for typical hoop-and-pole and dirt ball hiding games only happened in the winter time to avoid interrupting hunting and harvesting season. Strictly observed taboos were also in place to protect vulnerable community members from the perceived harmful effects of gambling. Some of the elderly men I interviewed remembered, for example, that as children they had participated in a dirt ball hiding game but been discouraged from placing any kind of wager. Similarly, women took part in gaming sessions as singers and team supporters but were not encouraged to bet (and in some cases, their betting was forbidden).¹⁵

In the traditional discourse, concepts of mental illness or behavioural issues (like problem gambling) can only be understood vis-à-vis the semantics of the Apache language. Here the most significant attribute is that there is no expression directly comparable to a label like "pathological behaviour" or "addiction." In addition, labelling another person as "having a problem" is a highly sensitive and morally charged act, and this is even more the case if the problem relates to the person's mind or soul. Unless the speaker is a respected maternal relative, medicine man or recognised communal elder, this practice is considered highly disrespectful. While this is not the only reason why tribe members do not want to associate with the Wellness Center, understanding this issue is essential to grasping their preferences. For example, Western psychiatric diagnostic practices like comprehensive personality assessments on

client admission are often carried out by a practitioner of the opposite gender or one who is younger than the tribe member. Being labelled by such persons as “addicted,” “compulsive” or “chemically dependent” is highly stigmatising and dehumanising.

In the Apache language, the only occasion when people comment on someone’s condition is when that person is injured or visibly (physically) sick. Phrases such as *na dezgai* (he got sick) or *kaa sitii* (he is lying down) might then be exchanged. The questions that immediately follow, whether verbalised or not, are “What did he do wrong?” and “What taboos did he break?” In other words, in Apache epistemology, the cause of illness is identified with the infringement of a social rule or a taboo; this might consist, for example, of the inappropriate handling of ceremonial clothes, disturbance of burial grounds or ignorant interaction with a potent force of nature such as a mountain lion or a bear (whose significance is reflected in the above creation story). Stepping on bear tracks or walking across the trails of other powerful animals might indeed affect one’s health negatively. Similarly, treating another human being in a harmful or disrespectful way could bring on illness, especially if that person is one’s senior, a tribal elder or a maternal uncle, etc.

Rather than speaking of “being addicted to” something, the Apache choose descriptive language like *bil tsod*, which best translates as “becoming attracted” or “attached” or “drawn to” something, whether this describes eating chocolate, dancing, drinking alcohol or gambling. In the case of gambling specifically, the expression *idika’ bil tsood* (drawn to gambling) is used. It must be stressed that these are semantically neutral statements used to indicate that someone is engaging in the activity a lot or more than usual. Unlike the English terms “addiction” and “pathological gambling,” they are not *a priori* judgements or endowed with negative and stigmatising associations. Since the younger Apache generations operate primarily and often exclusively in English, these cultural idioms are gradually being replaced by English terminology through which the Western medical labels are becoming more common.

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The Western Entrance

The western wing of the casino consists of hotel premises and lecture halls and it is often used for religious gatherings. It may best repre-

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sent a type of post-Contact discourse that has been shaped by the predominantly Protestant values brought to the reservation around the 1890s by the German forefathers of today's Grace Evangelical Lutheran Church. Over the course of the 20th century, the Lutherans and their Apache disciples expanded their sphere of influence remarkably and today they enjoy one of the largest followings of the 15 or so Protestant denominations on the reservation. They have several hundred church members, maintain a Religious Center Facebook page and run three private schools for about 300 Apache students. Their mission is best summarised in a hand-out often distributed at the Sunrise Ceremony, a traditional Apache coming-of-age ritual. This hand-out has the title *A United Statement*, and its goal is to discourage Apache people from participating in traditional cultural rituals. This tool is used to educate tribal people about the "fact" that 'Apaches were one of the peoples that lost the full story about God, and made up their own creation stories wrongly believing the Sun, the Water, and the Changing Woman were gods worshipping them in the Sunrise Ceremony.'¹⁶ The Lutheran leaders reason that 'it is the devil's work [when a] ceremony gives honours to gods who are not gods.'¹⁷ Instead, their hand-out invites fellow tribe members to 'enjoy the freedom and peace that only Jesus Christ can give.'¹⁸

Within the cultural boundaries of Protestant ethics and Puritan asceticism, traditional games were gradually stripped of their positive social functions and they came to be perceived as irrational, instinct-based hedonism. They were understood as detrimental to the practical conduct of a life that should be lived to please God. The fundamental Christian belief that "tradition" is disruptive to the "true spiritual life" runs equally strongly through other fundamentalist churches on the reservation, many of which are run by Apache pastors. The following quote from a middle-aged Apache pastor from one of the Assembly of God churches captures both the principles of his church's teachings and its standpoint on casino gaming. What is noticeable in this narrative is how the pastor's position switches from being that of an outsider and recipient of Christian principles to being their source:

[T]he church is basically a fundamental Pentecostal church. Alright? It's like the Assembly of God. Similar. Or they call it Full Gospel. So it's Bible based, anti-smoking, drinking, cursing and stuff like that, you know. And they don't believe in

gambling [either]. No, we don't. And we don't believe in tradition, you know. So, the church is against, our church is... supposedly against all of that.

In line with these ideas, many of the Apache Christians define “problem gambling” as an “illness” and even talk about it as a “mental illness” though they understand that concept in non-medical terms. In their view, behavioural disorders are inflicted upon people exclusively by the devil. Consequently, while some Apache Christians remain open to the idea that Western institutions like the Wellness Center may help to prevent and treat addiction, most of them emphasise the church and the word of God as the ultimate authentic sources of therapy and cure. Traditional healing practices of local medicine men and women, including sweatlodge cleansing, sage smoking and prayer, are not acceptable as forms of therapy according to the Apache Christians. They interpret these approaches according to Lutheran teachings – that is, as tools used by the devil to tempt people and lead them astray.

Understanding the Borders

The Southern Entrance

The southern entranceway to the casino – located behind a bronze statue of a traditionally dressed, proud-looking Apache player of hoop-and-pool games – represents yet another area of the borderlands of Apache authentic identity. Here we find accounts of the tribe's economic and cultural revival, the promotion of ethnic identity and self-governance. Building on the legacy of the 1934 Indian Reorganization Act, Titles 11-vii of the Civil Rights Act (1968) removed states' powers to assume unilateral jurisdiction within Indian country; among other things, this brought an end to the prohibition of gambling on Native American territories (established in 1924 by the Code of Federal Courts). In an effort to compensate Native Americans for their long history of social and economic losses, the Indian Gaming Regulatory Act of 1988 allowed commercial gaming to become a gradual source of development and income for tribal governments. Since the 1990s, casino gaming operations have come to symbolise tribal political sovereignty, self-determination and economic self-sufficiency (at least prospectively). As such, they have pointed to a new mode of cultural representation and authentic tribal identity.

Ironically, this powerful discourse of political pride and economic self-reliance has also fuelled the conflicts of many tribe members

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over their values and transformed identities. An elderly Apache man, known in the community for his outgoing personality, humour, fluency in the Apache language and knowledge of traditional practices, revealed an internal conflict over his membership of the local Gethsemane Church and his past passion for gambling:

They got all that joy, fun, whatever over there [in the casino], you know... Unless like me, you're religious, you accept Christ over here, you are on this side. Like, I have something else above, you see, [different] from what I used to do over there. When I was on that side, I enjoyed myself, if I have a way, transportation, or money, I'll go over there, I enjoy myself over there. But over here is something... like you almost pray every day, you see, this way you are a different person. You are not yourself any more. So, I think it's better for people to start going to church.

Besides contributing to conflicts over social values and practices, the new tribal sovereignty narrative has the potential to shape into a health-related issue for some people on the reservation. A group of male tribal elders that I interviewed, some of whom had actually been described by their family as 'addicted to the local casino,' stated in their testimonies that for them – Apaches – 'gambling cannot be a problem.' They emphasised that 'the Apache people had always bet and played a variety of gambling games until the white man came and told [them] it was bad.' For them, the identification of people as "having a gambling problem" and creation of clinical programmes "for compulsive gamblers" on the reservation were two means of perpetuating colonial hegemony. As politically correct as this may sound, it is a view that clashes loudly with the Protestant discourse presented above and the social ailments discourse that I describe below.

The Eastern Entrance

The eastern wing of the tribal casino best symbolises the borders that mark out the final Apache discourse on problem gambling. This part of the gaming facility has a conveniently situated side entrance which is set back from the main incoming road and a central parking lot. It is often used by those who do not want to be seen entering the casino by fellow tribe members. Sneaking in through the side door is interpreted by many as a sign one's poor self-control in entering the casino house.

This tribal narrative fully recognises that for some people, gambling could potentially develop into a behavioural problem of a medical kind. This recognition points to a sharp divergence from the pre-Contact cultural idioms around illness (represented in the first/northern entranceway) in which Apache speakers find it demeaning and ethically unacceptable to identify others as “suffering from an addiction,” let alone as “mentally ill.”

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Within the borders of the fourth discourse, people interpret the casino as “a white man’s enterprise,” emphasising that casinos are founded on considerably different principles than those behind pre-Contact form of gaming. Unlike hoop-and-pole or the moccasin hiding games, casino games are set up to maximise the house’s profits. The casino is open 24 hours a day, seven days a week, and thus, there are no time or seasonal restrictions. Players do not have to answer to their immediate family or other relatives when placing a high bet and nor do they play against other tribe members. They play against programmed slot machines, which do not provide the benefits of social contact or give the loser the opportunity to humbly ask his opponent for possessions lost in the game. In addition, considering the difficult socio-historical context in which casino enterprises entered Native communities, many feel that Apache community members are in a vulnerable position that may encourage the onset of addiction. One tribal leader captured this idea as follows:

Our people are dealing with broken homes, poverty, domestic violence and alcoholism. The unemployment on the reservation is close to 76 percent. Lacking adequate housing and health care, they deal with [a] legacy of dependence on the handouts from federal and tribal government. There is a void somewhere. Something is missing, something that they are not, but wish to be. There is depression, low self-esteem. Definitely low self-esteem. They have illusions of power by violence and instant riches. Those are the standards set up by tv against which they measure themselves and come out depressed. Going to the casino, drinking, or abusing drugs then fill that void.

This quote vividly illustrates that problem gambling is perceived as a social ill rather than a discrete biologically-based disease, as the medical model defines it. While tribe members who share this view believe that the Wellness Center can play a positive role in alleviating

illnesses such as gambling addiction, their narrative stresses that clinical programmes cannot make significant and sustainable changes until the public rhetoric of tribal sovereignty and economic self-reliance translates into better housing and employment opportunities, culturally sensitive education and social programmes that promote positive ethnic self-images and confidence.

Conclusion

Understanding that interpretations of the causes and treatments of addiction are culturally mediated and politically negotiated is essential for increasing the cultural relevance of mental health care. The Apache discourses on tribal gaming and addiction which have been presented in this study show that modern Apaches live in a complex and uncertain social order shaped by historically and politically formed discursive boundaries that reflect traditional pre-Contact ways of life, colonial hegemony and religious assimilation, recent historical emancipation, and finally, recognition of the potential health risks which the casino venture may present. In line with the recent criticisms of some ethnographers that universal calls for the inclusion of “tradition” and “authenticity” within therapies may ignore their efficacy,¹⁹ this study has highlighted the need for a painstaking examination of the borders and boundaries within which many often contradicting explanatory models for health and illness arise. If institutions such as the Wellness Center are to provide effective prevention and therapeutic programmes for gambling (or any) addiction, they will have to move beyond Western/traditional dichotomies and incorporate values and tenets emerging from across the diverse borderlands of socio-historical discourses and practices.



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Notes

- 1 T. Douglas Price and Gary M. Feinman (2008), *Images of the Past*, New York: McGraw-Hill, p.296.

- 2 Edward H. Spicer [1992] (1998), *Cycles of Conquest*, Tucson: University of Arizona Press, pp.229-261.
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- 8 Thomas J. Csordas and Christopher Dole (2003), 'Trials of Navajo Youth: Identity, Healing, and the Struggle for Maturity' *Ethos: A Journal of the Society for Psychological Anthropology* 31(3), pp.357-384
- 9 American Psychiatric Association (2002), *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*, Washington, DC: American Psychiatric Association.
- 10 The majority of this research was carried out in 2003-2005 with follow-up (revision) sessions in 2007-2008 and 2014.
- 11 Joseph P. Gone (2008), 'Introduction: Mental Health Discourse as Western Cultural Proselytization,' *Ethos: A Journal of the Society for Psychological Anthropology* 36(3), pp.310-315.
- 12 A fictional name has been used for the casino in order to respect the tribe's anonymity (there are multiple Apache tribes).
- 13 These animals are, in fact, referred to as "people" throughout the creation stories.
- 14 Grenville Goodwin [1939] (1994), *Myths and Tales of the White Mountain Apache*, Tucson: University of Arizona Press, p.149.
- 15 It is significant that with the arrival of Mexican card sets in the 17th and 18th centuries, women became respected card players who regularly waged bets.
- 16 Grace Evangelical Lutheran Church (2002), *A United Statement*, San Carlos, Arizona.
- 17 Ibid.
- 18 Ibid.
- 19 See, for example, Maggie Brady (1995), 'Culture in Treatment, Culture as Treatment: A Critical Appraisal of Developments in Addictions Programs for Indigenous North Americans and Australians,' *Social Science and Medicine* 41(11), pp.1487-1498; Paul Spicer (2001), 'Culture and the Restoration of the Self among Former American Indian Drinkers,' *Social Science and Medicine* 53(2), pp.227-240.