



Religion and Healing in America

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Gender and Healing in
Navajo Society

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The Navajo are among the three largest indigenous tribes in North America (the Cherokee and Lakota, or Sioux, are the others) and as a people possess a land and natural resource base larger than that of any other tribe. Ritual healing, in the context of either traditional Navajo ceremonies, Native American Church (NAC) peyote prayer meetings, or Pentecostal Christian revivalism, is a prominent feature of contemporary Navajo life for both men and women (Csordas 2000).¹ Navajo women have been recognized as having relatively high status and considerable social power in relation to men (Kluckhohn and Leighton 1962), yet they are only infrequently encountered among ceremonial practitioners of the prestigious chantways. This chapter is a step toward understanding the motivation and experience of those Navajo women who do become healers.

Navajo society was traditionally both matrilineal and matrilocal, with women able to own property and exercise significant authority within the family. Navajos express a strong spiritual connection to Mother Earth. In contemporary society women are often the stable centers of extended families. The Navajo word *shim1*, or mother, has powerful associations of warmth and nurturance that encompass the senses of one's birth mother, Changing Woman, and Mother Earth. Men may also be strong presences in families, and there is a clear articulation of the importance of Father Sky as a complement to Mother Earth, but men are relatively more likely to be absent from the home for extended periods to engage in wage work or to be indisposed because of alcohol abuse. With relatively little stigma attached to divorce, serial monogamy is not uncommon. Domestic vi-

olence, especially associated with alcohol abuse, is widely reported, and father-daughter incest (especially by stepfathers) is a long-standing concern.

It is perhaps not surprising that the relatively high status of women can coexist with domestic violence and tension between the genders, or that with respect to the place in society of women the ideal and real are in some ways inconsistent. In myth the Navajo are said to have originated from Asdzaan Nadleehi, or Changing Woman, who remains highly venerated today. At the same time, gender relations are underpinned by a mythic charter contained in the widely known story of the "separation of the sexes." The story is of a time when men and women tried to prove they could live without one another by segregating themselves on opposite sides of a river, with abominable consequences, including the begetting of monstrous offspring as a result of some of the practices resorted to during the ultimately unsuccessful experiment. It is possible that some male ceremonial prerogative is rooted in the claim that it was women who begat the monsters and who relented first in asking the men to return.

In practical terms, with the noted exceptions of expertise in herbalism and ritual diagnosis, ceremonial knowledge and practice are largely male prerogatives. Though women are not expressly excluded, they are often considered out of place when inquiring about such matters, and medicine women often begin their careers as apprentices to an immediate male relative, particularly when there is no male apprentice on the horizon. Yet it remains important to acknowledge and examine the role and experience of women ceremonial practitioners in contemporary Navajo society. Indeed, such an undertaking offers a highly specific view of gender among Navajos: women are unique among healers because they are women; and they are unique among other women because they are healers. In this respect our principle is that a general cultural situation can well be understood by a close look at exceptional cases within that situation.

The impressive but inconsistent Navajo Ceremonial Practitioners' Directory, dating from 1981, which includes herbalists, Traditional chanters, and Native American Church ceremonialists but not Navajo Christian healers, allows us to add a degree of specificity.² Frisbie and Tso's (1993) summary of the directory shows that 21.5 percent of Navajo ceremonialists were women. Among those whose primary specialization was divination, 68 percent were women, and among those whose primary specialization was herbalism, 66 percent were women. On the other hand, among Blessingway chanters, only 6 percent were women, and among Native American Church healers, only 8.5 percent were women.

The data presented by Frisbie and Tso also allow for a regional breakdown within Navajoland of the proportion of women with different types of ceremonial knowledge (table 18.1). Uniformly across the geographic regions of the reservation, the representation of women declines as the level of ritual special-

TABLE 18.1. Proportions of Women Navajo Ceremonialists

Agency/Region	Women Hand-Tremblers (%)	Women Blessingway Chanters (%)	Women Major Ceremonial Chanters (%)
Chinle	34	1.4	2
Fort Defiance	57	6.0	2
Shiprock	43	6.5	1
Tuba City	37	0.0	1

Source: Frisbie and Tso 1993

ization and prestige increases. Handtrembling (*nidilniihi*) is perhaps the most frequently sought form of Navajo diagnosis or divination, but while diagnosticians are gatekeepers who direct patients toward major healing ceremonies, they generally carry less prestige than chanters. Blessingway is the central and most frequently performed of Navajo ceremonies, but it is also the one that chanters often begin with before moving on to more specialized and advanced rituals. Regionally, among chanters women are represented in the highest proportion in the eastern area of the reservation (Crownpoint), which is regarded as relatively more acculturated, or at least much more thoroughly exposed to influences from the dominant Anglo-American culture. By the same token, the lowest proportion of women chanters is reported in the western region (Tuba City), which is typically regarded as most "traditional" in orientation.

Frisbie (1992: 496) reports being told by one of its administrators that the Rough Rock Demonstration School's Mental Health Training Program for Medicine Men and Women, funded by the National Institute of Mental Health from 1969 to 1983, had "14 or 15" women among its 104 graduates during this period. Our own work beginning a decade later, in 1993, was conducted among Christians and Native American Church practitioners, as well as among adherents to Navajo Traditional religion. Although healers were recruited primarily from the personal networks of Navajo members of our project staff, the reservation-wide character of the work and the use of four separate ethnographic teams that tended to cancel one another's recruitment biases lend credence to the suggestion that this group of healers is to at least some degree representative. Indeed, the overall proportions of women healers across all three religious categories corresponds closely to those cited by Frisbie as having completed the Traditional training at Rough Rock: during the period since 1993, we worked with a total of 112 healers (38 from the NAC, 39 Traditionalists, and 36 from various forms of Christianity), 15 of whom were women. Women accounted for 5 percent of NAC healers, 12 percent of Traditional Navajo healers (including both Blessingway chanters and chanters of other ceremonies but excluding diagnosticians numbering 5 of the total, with 3 of these 5 being women), and 16 percent of Navajo Christian healers.

TABLE 18.2. Marital Status of Male and Female Navajo Healer

Healers-Gender	Single/ Separated/ Widowed/ Divorced N (%)	Married/ live with partner N (%)	Total N (%)
Male	15 (16.7)	75 (83.3)	90 (100)
Female	7 (46.7)	8 (53.3)	15 (100)
Total	22 (21)	83 (79)	105 (100)
Pearson Chi-Square	value = 6.987 df = 1		Asymp. Sig. (2-sided) = .008
Fisher's Exact Test	Exact Sig. (2-sided) = .015		Exact Sig. (1-sided) = .015

Source: Navajo Healing Project

In this preliminary discussion, I will present brief sketches of three women (one representing each religious healing tradition) from among the fifteen with whom my research team worked. I make no claim that their experience is typical, but rather that their experience is likely to be distinct from that of their male counterparts in a variety of ways. To begin, we can note a prominent difference in marital status (table 18.2). Whereas 83.3 percent of the males were married or living with a partner, only 53.3 percent of female healers were married; 20 percent were single, 13.3 percent widowed, and another 13.3 percent divorced. This is significant even given the small number of people involved. It is a social fact that appears to be in accord with the observation that, for women, marriage and its responsibilities are perceived to be in conflict with the demands of being a healer. Stated otherwise, the cultural expectation is that women should be married instead of becoming healers, and to a certain extent the choice of being a healer is a choice to remain unmarried. For men, in contrast, being married is a sign of the stability and maturity expected of a healer, and the role of healer's wife is often one not only of active support but also of considerable influence both ceremonially and socially.

What a Women's Libber He Made Out of Me

The Traditional Navajo chanter, to whom I will refer as Desbah, is unique among women healers in her relative youthfulness: whereas eleven of the fifteen women we encountered were over the age of fifty, she was in her early forties. Despite her age, she was, she averred, one of only two women on the Navajo reservation capable of performing a ceremony in its full nine-night version (many Navajo healing rituals are performed in one-, two-, or five-night versions, which lack the elaboration of many ceremonial details). She is among five of the seven Traditional women healers we interviewed who is unmarried

(in her case never married) because she "didn't like to be controlled" and "wanted more independence," though she has had boyfriends. Yet in an interesting affirmation of the traditional pattern, not only did she inherit her practice from a great uncle, but that uncle's wife remains as her principal assistant. In other words, the elder woman continues in her accustomed role of "medicine man's wife," though her husband's place in the practice has been taken by her younger kinswoman. Desbah is relatively well educated, having completed slightly more than two years of college and having experience as a mental health consultant. Moreover, her interviews were more extensive, articulate, and reflective than those of any other healer, male or female, with whom we worked. She clearly understood the experiential focus of our work, commenting that our interest in healing was not so much in the details of how she performed her ceremonies but in "things like states of mind."

Desbah was born the middle child of eleven siblings, at least two of whom attended college before her. She is comfortably bilingual in Navajo and English. She attended a Catholic high school until her junior year, when her parents were divorced and she transferred to a public school on the reservation where there was no tuition. Following graduation she earned an associate's degree in college, then worked in several tribal government jobs. Desbah was raised in the Traditional Navajo religion, saying of the elders, "I always thought that they had some kind of power. They had a way to, even by just speaking a word of advice or something, to heal or correct something." She remembered her mother relying on a medicine man, and being healed of a bad headache by a medicine man when she was quite young. She began attending Traditional ceremonies regularly in her early twenties because "it appealed to me . . . made sense to me, so I would follow different medicine men. They would be doing it and I would be there. And then slowly I got drawn into it. . . . And it never dawned on me that I was going to sing [or] do actual ceremonies. It just happened." During this time she was part of a group of ceremonial dancers when a significant event occurred: "We did our part of the ceremony, and somewhere along the way, I felt overwhelmed with what was going on. And it affected me in a way where I felt like I was depressed. And there was a longing in my thinking, a certain longing in my life that I wasn't quite able to grasp. . . . And pretty soon it started bothering me to a point where I was not really able to sleep and not really able to eat. So there's a certain breakdown, emotionally."

A Traditional diagnostician told her that the spirit of the ceremony had affected her in a way that indicated a potential calling to become a healer, for after expelling the spirit he said, "You might think about learning it in a little more depth, maybe. There's really no harm in knowing some of these things, because it will eventually make you a little wiser, and eventually make you think a little deeper and make you think a little more about a lot of the things that are going to be taking place in this world, in your life. So, it will add more

meaning to your life." She discovered that this healer, whom she had barely known, was her uncle. As they continued their conversations, he told her, "This ceremony itself has all the luxuries that you are probably wanting throughout your lifetime—what you are going to accomplish, and what you're going to have to live comfortably. It has all the luxuries, plus knowledge and some little bit of wisdom. And you get to travel all over the reservation, too." In this way he attempted to persuade her that the ceremony was a self-sufficient way of life—a philosophy, a spirituality, and a way of making a comfortable living.

During a second period of depression, she was again diagnosed by a hand-trembler who told her that "Lightningway was bothering me." She returned to her uncle for assistance and asked him to administer some peyote to her during the ceremony. This is unusual, since many Navajos say the two forms of religion should not be directly mixed, but her uncle was among those who accepted peyote when it first came to Navajoland in the 1930s. Her visionary experience included a moment in which the Navajo deities appeared and identified themselves to her and told her they were placing her on a particular path. She felt that this was a critical crossroad in her life and that "my being alive, my existing today, depended on that very decision I made that day." Her uncle encouraged her, saying, "Quit your job, get rid of your vehicles. This ceremony has everything. There is not anything that you would want that's not in there. All you have to do is ask." From that point she had a strong thirst for knowledge, for stability, and for a clear state of mind. Although she had wanted to go back to school for further education, she realized she had no need for it.

Initially her relatives were skeptical, wondering why with a good education and a good job she would want to start all over with a new career as healer. Eventually, she reports, her siblings came to treat her with respect and seek her advice, recognizing her status as a "medicine lady." When we asked if she felt that people act differently toward her than toward others, she responded affirmatively, attributing the difference to her role as a medicine person who was younger than most—not to her gender. Her sense of calling is strong, and she reports being able to see and hear things others can not, to have revelatory dreams about her patients, and to be able to tell if someone is ill or distressed. "It's a gift," she says, "not something that was handed down through teaching. I think I was selected for the gift."

Desbah made the following response to the question of why there are so few female chanters:

Maybe because they're not as determined as I am. It's harder for a female person to get the corporate jobs, or a real high-range job, maybe their colleagues are male, and maybe [the idea that] it's a man's world kind of rubbed off on them. And while they were growing up, maybe they were taught the only way a female should make

a good life is to find a good man, and find a good home and maybe stay home. And have kids, you know. . . . So far, I haven't seen a place where a male medicine man would come up to me and say, "What you're doing is wrong; you shouldn't be doing it because you're a woman." I haven't seen that. Because most of the people that do come and help me [i.e., assist in her ceremonies] are medicine men anyway, and I guess they are in position where they say, "It's real easy for her to learn, and now we're wondering why our kids can't learn."

These men, well respected themselves, ask her to perform ceremonies on their children to instill in them a sense "somewhere in the back of their mind, that this ceremony is a way of life that's for real and for keeps." In addition to being regarded as a good example for young people, she acknowledges not only that many men do not have the knowledge that she does but that her mentor himself is regarded as a kind of "chief"—and hence an influential senior male sponsor for her. Nevertheless, this mentor himself is not exactly an enlightened feminist. As Desbah says, "He has a theory that since time began, back in the old days, he said the woman's role is just like from here on, he said the woman only meets the man's equal from the hip on down. That means you're always the underdog. [But I say] the hell with it [laughs]. I think that's one of the main reasons why I became a medicine lady—to kick around his theory. See what a womens' libber he made out of me! [laughs]."

In her practice Desbah recognizes men and women as fundamentally the same in that they are human, but different with respect to gender. In our interviews, this observation leads not to the discussion of psychological differences between men and women but to that of sexual appropriateness: "Now if I was doing a ceremony and a man was physically handicapped and he couldn't pull down his pants, and say he lost his pants, I wouldn't be the one standing there laughing. Because I would be the one that would have to understand and say, 'Cover it up.' Maybe the peer group would be laughing. And the same with a lady." She mentions instances she has heard of in which a male medicine person has "decided to carry on, maybe makes passes at the patient, and then, you know, touches her in a way that wasn't called for." Such an action is a serious violation that requires correction through performance of a major ceremony for the patient, and Desbah reports having had to deal with three such cases in her role as healer. The healer must also atone ceremonially for such a mistake, whether it was made through negligence, ignorance, or intent to harm the patient. Otherwise the consequences of divine retribution may be severe: "If you've done something wrong like that, then you better pretty well answer to the Beings for it. If you don't—we've lost a lot of medicine men before they reached old age."

God Does Favor Men

Nora, our Christian healer, is in her midfifties, with five grown children. Two grandchildren live with her and her husband, to whom she has been married for more than thirty years. She is a full-time teacher studying part-time for a doctoral degree and is fluently bilingual in Navajo and English. Nora and her husband are also skilled and highly successful silversmiths, making jewelry in the distinctive Navajo style. She was raised in the Traditional religion; indeed, her grandfather was a distinguished chanter and her father a Blessingway singer. Her mother died when she was two years old, and by tradition she and her baby brother went to live at her grandmother's home, where she was physically and psychologically abused. This included being called such insulting names as "devil's daughter," "cruelty's daughter" and "coyote's daughter," and being told she "killed her mother" by constant crying, which in Navajo thought can bring witchcraft on the family. By age six she was able to return to live with her father, but by the time she was seventeen he, too, had died. Then she felt truly abandoned: "And then from there, I'm DANG! I just went crazy. [loud banging on table; interviewer laughs] I said, 'Okay, guys.' I said to my mother, 'You left me when I was a baby.' My dad, 'You left me just when I needed you the most. So what? I'll do anything I want to.' But fortunately, I never did anything so bad that . . . [laughter] I never smoked, I never drank." Though her early education was (not atypically) marked by several episodes of running away from school, by her early teens she settled in and completed an education that led her ultimately to a teaching job that she had held for twenty-six years at the time of her participation in our study. She was deeply respected and sought out for advice and was addressed as *shim1* (mother) by students and colleagues alike. Nora is thus a mature person with a long and stable marriage, and a long and stable job, highly skilled in the respected craft of silversmithing, and not only a successful teacher but an innovator in Navajo language curriculum development—and a prominent member of her Pentecostal church.

Nora was converted to Christianity through the process of healing. When her beloved husband contracted cancer, he underwent two major surgeries and was in the hospital for chemotherapy four days of every week. She says:

We were just living like that, and we began to sink. When you're sick, you'll do anything, you'll go anywhere to get healed, and that's how we happened to go into church. But we didn't stay in church the first time we went in. We ran out three times. The fourth time, we stayed [note that the number four is often sacred in American Indian myth and ritual], . . . and I think it was the word of God that got to me. [But] I said, "Wait a minute. Before I really take hold of it,

I want to settle it with you." I said [to God], "I want my husband back. I want my husband healed. Make yourself real to me. I will walk, I will talk, I will live the very essence of what you're telling me. That God is God." I guess I let my faith loose. And I gave my mind, my whole being to God, and I came out a different person. And my husband was healed instantly. . . . They named the cancer by name, and they commanded the cancer to leave his victim now because he is the property of God.. I didn't see the cancer leave, but I felt it. Because my husband and I, we have been so close. . . . They were praying for my husband, and I knew. I knew that I knew—they call it the touch of God. And I thought, understood it, that touch of God, because I felt it myself. And I said, "God, is this what it is to be one in a husband and a wife?" I said, "You touch him, and you touch me, too. Let it be that way, when you touch him in any way. Anything that touches him, it touches me." And that's why I believe in prayer so much. . . . I pray for people that have marriage problems. I pray for people that have other ailments, illness, name it. And I do believe it very much.

This event had occurred twenty-two years earlier, and Nora and her husband had remained loyal members and leaders in the church ever since, attending services typically three times per week. Prominent in this narrative are several distinctively Christian themes: Nora's assertiveness in making deals with God, the personal basis for her willingness to embrace healing prayer, and her conception of a certain kind of gender ideal embodied in the relation between man and wife.

Nora noted that much of her healing prayer has to do with troubled marriages:

Most of the time, the problem is there because we really believe as Christians that the husband is anointed by God to take care of his family. He has to make a choice, and this is really biblical. If I get ahead of my husband, and start making a big decision on my own, I'm going to get in trouble. I may not see it, but it's going to manifest itself down the road somewhere. I'm not going to be happy with my husband. He's not going to be happy with me until I come back and respect my husband as a man of the family. He rules his house. . . . And the Bible calls the wife a worthy woman. You have to be worthy of your husband and your children. In other words, your husband is going to call you a blessed woman. A blessed mother of my children. And the children are going to call you a blessed mother. That is happening in most every [home], even in Christian homes.

The concern with marital relations is not distinct to Christian healing; what is distinct is the overtone of Christian patriarchy in her words. When we asked Nora about the meaning for her of the important Navajo word *shim1*, she said, "I think a [real] mother is a mother that makes a stand by her family . . . a mother is somebody that stays home for her kids." Yet Nora also told a story in which she exhorted the mother of a sick child to pray for healing with the words "You are the mother, you are the key." I regard this latter statement as a clue, subject to further research, that despite the overall tone of conservative Christianity projected by Nora and other Navajo Christian healers, the traditional notion of maternal prominence remains subtly in the background.

Man also has greater spiritual power than woman. Nora attested to this in referring to a male healer in her congregation who is "more powerful. Because, it could be that he's a man. And God does favor men. Well, not only does he favor, but he's just anointed them as the head of the family." The same male healer affirmed this notion, mentioning that Nora requested prayers for a health problem of her own based on her knowledge of "the power and prayer of a man, of a male—the male is very powerful, and God has planned it this way, also. So she recognized her position that way, and my position as a male . . . [his prayer had effect] by recognizing my authority, as a man, and then the faith that I have, with her faith, what we believe we share, and putting all that together." In recognizing a hierarchy of spiritual power in the congregation, Nora interestingly invoked the analogy of the pastor as being like a medicine man in "holding more power than anybody else that we know of within the church structures." She then immediately shifted to a more conveniently gendered analogy to conventional medicine, saying that the hierarchy included the equivalents of nurse's aides, nurses, doctors, and beyond that a head doctor equivalent to the pastor. In elaborating this analogy she variously referred to herself as a nurse's aide, a registered nurse, and a surgical nurse assistant to the head doctor, but though she was willing to promote herself with the female side of the hierarchy, she deferred to the males as invariably more powerful spiritual equivalents of doctors.

She Told Me That I Should Take Over the Fireplace

In the Native American Church, a person who runs peyote prayer meetings and heals or "doctors" others is called a road man because he leads others on the spiritual path of life called the peyote road. Effie is a rare example of a road woman. Sixty-seven years old when she began participation in our project, she had been married for forty-four years. Unlike Desbah and Nora, she has had only a few years of formal schooling and speaks Navajo almost exclusively. She has part-time employment providing home day care for senior citizens, but much of her time is spent in her healing practice.

Effie's family became involved with the NAC when she was fifteen years old, in the early years of peyote's presence in Navajoland. Her mother became seriously ill. As she recounts, "My mother participated in Navajo Traditional ceremonies several times and had gotten worse. She did not want to go to Traditional ceremony and the hospital. So she decided to take peyote because she heard about its healing power. She wanted to overdose on peyote to really feel the effect. So she sent my father up to Towaoc for peyote buttons. Whatever she got she took it all—about a hundred or more pieces of peyote. She got well from that." Effie said that at the time, her mother did not care whether she lived or died. Some people had told her that the peyote could cure her and some that it would kill her, and she was apparently aware that such an incredibly large dose would be either deadly or miraculous in its effect. Not knowing how to prepare the medicine, she got a pot of water and cooked all of it, including the bag it was in. According to Effie,

When my mother was passed out on peyote, she had a dream. She saw in her vision the cause of her illness. There was a blockage in her digestive system. An angel being also came to visit with her and told her that it was not time to pass on. The being went into all types of commotion afterward. She kinda got down and started crying. Afterward she felt light and well. I guess you know when you are going to die from your sickness. Your body feels like dead weight, and you are very tired out. This was what she felt. She was at the verge of dying. She could not breathe. So overnight the Lord had given her renewed strength and breathed a breath of life back into her. That is how she got well.

From this time on, Effie's family was devoted to peyote, rejecting Traditional ceremonies. Unlike many adherents of the NAC, she expresses a degree of hostility toward Traditional practices. She teaches that her method of healing can be successfully substituted for Traditional ceremonies even when the cause of illness is one of those typically recognized in Traditional religion, such as exposure to lightning or violation or injury of an animal. In contrast, along with her NAC involvement, she claims membership in the Christian Reformed Church and expresses affinity with many Christian ideas. Indeed, her ceremonial hogan is decorated with several portraits of Jesus.

Following her mother's cure, Effie's father himself became a renowned road man, developing a distinctive form of the peyote meeting based on the use of water. When Effie was twenty-three, she had an experience of sudden trembling in her body, beginning from her feet and moving through her body and hands. Her father identified this as a calling to become a Traditional diagnostician or handtrembler, though a peyote meeting is not the most typical setting for the onset of this Traditional form of giftedness. Effie did develop this capacity and uses it to diagnose and treat patients to this day, but true to

her unique attitude toward Traditional practices, she does not attribute her diagnostic insights to inspiration by Gila monster spirits, but to angels from God understood in a Christian sense.

Prior to his death, Effie's father indicated that she should prepare to become his successor as leader of peyote meetings. As Effie recalls,

He said to keep practicing it, and he told me that I had a lot of potential to carry this practice on, since I already knew the handtrembling. He told me that the peyote will give you the wisdom and advice on how to run the meeting and that my mother, who knows about NAC meetings, will instruct on the finer points of doing things in the meetings. [He said,] "She already knows and has observed how I ran the meeting, so it will take another thirty years, maybe." So he gave the fireplace to her [i.e., passed on his practice, including knowledge of and responsibility for the fireplace or altar constructed during prayer meetings], but he always just told me that I had the most potential to take care of the fireplace. So it was at that time in my life that this fireplace was already prepared for me and given to me. The same fireplace as taught to Arthur Wilson, a Cheyenne, who gave it to my father. He had instructed me, but I did not really understand everything, and I depended on my mother, but she passed away. We were just out in the open then. So Emily [a kinswoman who later became her first patient] said that I should take over the fireplace. So that was given to me and voted on [by the congregation]. So I told them that "you're asking me to conduct the meeting and take over the fireplace," and I told them, "Okay. You guys have to help me and correct my mistakes and do not look at me. You are sending me into this business of running the meeting and I will need your support. Although I got reassurance back then, here to this day, it is only my children and I that are involved in the NAC practice.

In Effie's story we see a kind of female line of succession, in that her mother's self-medication was the beginning of the family's involvement with peyote, her mother was the caretaker of the family fireplace following her father's death, and Emily was the person who sanctioned Effie's taking over the fireplace after her mother. That devotion to the peyote fireplace as a kind of family cult is not unusual; what is more worthy of note is that Effie's practice as a road woman whose following is largely composed of an extended family is supplemented by a more traditionally female practice as a handtrembler (i.e., Traditional ceremonial diagnostician or diviner) whose clientele appears to be drawn from a broader base. Those who come for handtrembling may or may not pursue treatment in a full-scale peyote prayer meeting; meanwhile, within her peyote

meetings Effie often makes use of her handtrembling ability to help individual participants.

Conclusion

Arguably, the three women I have discussed are remarkable. To the extent that this is so, their stories must in some ways be read as exemplary rather than as representative; but perhaps, given their relatively small numbers in comparison to their male counterparts, all Navajo women healers are best regarded as exemplary rather than representative. At the same time, we must understand that each of these women represents a particular spiritual healing tradition, either Traditional Navajo, Native American Church, or Christian. Although these modes of ritual healing are inextricably intertwined in Navajo social life, each has distinct features, and in the stories of these healers are hints that there are modes of gender enactment distinctive to each of the healing traditions. Thus Desbah, the Traditional healer, insofar as she adopts the stance of the chanter of a major ceremony with a broad public reputation, exhibits a personal style that is in some respects masculinized, having taken over her mentor's practice and maintaining his elderly wife as a primary assistant. Nora, the Christian healer, has adopted the stance of a devout advocate within her congregation, a stance that might be characterized as militantly submissive insofar as she defers to male authority without abdicating the role of strong and competent Navajo woman. Effie, the Native American Church healer, adopts the stance of the wise, nurturant bosom of the family, playing the dominant maternal role of the Navajo woman whose followers are primarily members of a tight, extended family network.

Finally, for contemporary Navajos the issue of gender per se—that is, of women in relation to men—is in some sense subordinate to the pivotal issues of the healer's identity as a Navajo and in relation to biomedical professionals of the dominant society.³ Desbah touched on this issue in expressing her desire to be recognized for her knowledge as an indigenous doctor with an honorary degree from a mainstream institution of higher learning. Nora, despite her Christian commitment, touched on it in describing her Traditional grandfather as a "big-time medicine man. . . . If he lived today, he would have several titles, for sure M.D., a neurosurgeon because he had to deal with the brain, a psychologist or psychiatrist because he talked right along his ceremony, he had to counsel people." Effie, in the context of noting that it was inappropriate for a Navajo healer to set a fee but that the more a patient chose to pay, the more effective the prayer would be, remarked on the inequity between the pay that physicians receive and what religious healers receive: "Your surgery over there probably cost you thousands of dollars, that's what it cost, the

doctor's bills, too. On this side, when you wanted help with the Handtrembling Way, you paid me forty dollars." Closely related to the issue of identity, the equation is that therapeutic efficacy is in part based on respect, and that respect is in part expressed by money. In the domain of healing, as a woman, as a Navajo, as a person who by the standards of the dominant society is of an impoverished class, the common denominator in the healing equation is expressed by one central idea: respect.

NOTES

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1. Traditional Navajo religion is composed primarily of major ceremonial events that may last as many as nine days and nights, and a variety of procedures for ritual diagnosis or divination. The rituals address the *Diiyin Din*, or Holy People, who have strong correspondences with forces of nature. The Native American Church entered Navajo society in the 1930s under the influence of Plains Indians, among whom it originated. It is based on direct contact with the divine stimulated by sacramental ingestion of the hallucinogenic peyote cactus during prayer meetings that last from dusk to dawn of one night, and that are characterized by inspired prayers and songs performed to the accompaniment of drums and rattles. Christianity gained its foothold in Navajoland with the influence of Franciscan missionaries around the turn of the twentieth century. It was followed by various mainstream Protestant denominations, and then, beginning around the 1950s, by various strands of Pentecostalism, which account for much of the contemporary Navajo Christian healing activity.

2. For example, spouses with ceremonial knowledge, most often the wives of male ceremonialists, may or may not have separate entries (Frisbie and Tso 1993: 57).

3. On the relation between Navajo ritual healing and identity politics, see chapter 5 in Csordas 2002.

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