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Healing Logics

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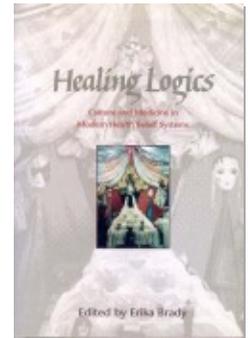
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THE HÓZHÓ FACTOR: THE LOGIC OF
NAVAJO HEALING

BARRE TOELKEN

Before entering into this discussion, I need to make clear that these comments and observations are not made by a Navajo but by a non-Navajo who has spent more than forty years as an adopted member of a Navajo family, the Yellowmans. This does not confer on me any special right to speak for or represent the Navajos in general or the Yellowman family in particular; it does not entitle me to dispense Navajo ritual “secrets,” or to claim that I am providing the reader with an inside view of Navajo spiritual healing. Indeed, I regard all books by non-Natives which make such claims to be exploitative and destructive frauds. This essay does not offer anything more complicated than some perspectives formed from years of acquaintance, respect, and love for the people who first became known to me when they saved my life (I had come down with pneumonia while camped near their home in Montezuma Creek Canyon in southeastern Utah). They made the simple (but expensive) decision to hire a *hataalii*, literally, a singer or chanter, to treat my illness.

At that moment, I was transformed from a stranger to a guest, from an odd prospector camping nearby in a flimsy tent to a familiar, coughing, fever-ridden resident in their one-room hoghan; from a hopeful employer of Navajo guides to a panicked consumer of Navajo medicine; from a harmless curiosity to a burden and a health threat; from a benevolent exploiter of Navajos to a desperate participant-observer of Navajo culture—a prime candidate, in other words, for achieving an experience-centered perspective on healing whether I wanted to or not.

Little Wagon, the elderly father-in-law of Hugh Yellowman, had dropped by at my camp a number of times to squint at all the strange equipment and to

satisfy himself that indeed there was a white person who was actually being paid to look for *tsé* (stones) in the desert. One day he found me barely able to sit up (my prospecting partner had gone to Salt Lake City some days before), and promptly (and roughly) hauled me to the back end of his wagon, dumped me in, and later—with a witty remark about having bagged a *bilagáana* (white person)—deposited me at the feet of his white-haired wife, who looked away with a stricken “Oh, God, now there’s one right here in our own home” expression.

Little Wagon’s daughter, Helen, and her husband, Yellowman, and several of their children also lived in the large, circular traditional hoghan (which is made of logs, branches, and rocks, covered with mud). The four adults and six children (sometimes more, when the older ones were home from boarding school) were now joined in their cozy circle by a sick man. Why did they take me in? Why did they go to the considerable expense of bringing in, first, a diagnostician, and then a *hataalii*? What did he do for me, medically, and how did it all work out? These are not only questions which I posed to myself at the time, but they are also important medical and cultural questions which lead us to some interesting observations about the validity of another form of healing. In trying to account for and understand what happened to me personally, I willy-nilly have to make sense of Navajo healing logic—or else conclude that I was coincidentally healed by a chance group of ignorant and untrained Indians. Naturally, in this case, it would be easier to end this account with the line used by so many storytellers and yarn-spinners when their young audiences demand, “What happened then, Grandpa?” “Well, I died.” But it’s a bit more difficult to account for an experience which initially makes no sense in one’s own mind: in order to achieve an understanding, one must do what all folklorists and anthropologists do, and that is to place the event fairly within the supporting frameworks of its own culture to find out not only what it “means,” but how it means. An experience-centered discussion, then, is not simply an exercise in self-indulgent validation of the participant-observer method, but rather must be viewed as an attempt to clarify and account for (1) an occurrence one might otherwise not have witnessed or been conscious of except for having been a participant, (2) utilizing the perspectives and nuances of the experience itself (not invented or imposed by the observer), (3) in a way that is true to the logical constellations of those among whom the event occurred and who understand its principal parts, and (perhaps most difficult of all) (4) articulated in such a way that the participant-observer brings the whole concept across as illustrative of something worth learning. It does us no good for someone to describe a fascinating cultural encounter and then just drop the subject as if it’s just too, too impossible to grapple with.

A serious account of this sort entails the responsibility to report not only the event’s surface features, but to examine fairly the system of thinking and

believing that renders the cultural occurrence normal and valid rather than inexplicable or nonsensical. An experience-centered discussion of Navajo healing requires me to look seriously at their assumptions about health and sickness, and it should provide me with a level of understanding which lies at least as close to their voice as it does to my theory. In my attempt to make sense of the way my adopted family healed me, I began by asking questions of the singer, and I had the luxury of augmenting my perceptions in ongoing conversations with the Little Wagon and Yellowman families. These perspectives have been enlarged through the years by a continual return to issues which were not quite clear to me, and slowly by this means, a traumatic personal experience has yielded a tremendous richness of insight into Navajo worldview. One of several things I have learned in this process is that experience-centered discovery can be profound; another is that it apparently never includes closure on the ramifications of the subject. Another is that such learning is not bounded or controlled by deadlines: the pace is measured in years, not in months. In 1954, I began the process by asking the hataalii what it was he had done; I am still processing the layers of information and cultural nuance as I write this essay.

A hataalii is the cultural equivalent of our doctor, but is often referred to in English by the primitive term “medicine man.” Suffice it to say, neither the term nor the practitioner is limited by gender. Most singers are indeed men, but this is mostly due to the years it takes an apprentice to learn a ceremony fully. There is no impediment to a woman becoming a singer, but since women own the children, the home, and most of the livestock, they seldom care to leave their position of power (where a husband can be divorced simply by his wife leaving his personal effects outside the door) to follow some older singer around—with little or no pay—for twenty years or so learning the words, tunes, rituals, sand paintings, and medicines necessary to the mastery of any one of the several hundred healing “ways” employed in Navajo healing. Besides, as several Navajo women have told me, men need something important to do in the world.

Actually, there are several kinds of healers in addition to the singers: diagnosticians (the most common employ hand trembling [*ndishniih*]), or crystal gazing [*déest’íí’ áshlééh*]), who determine not only what ailment the patient has, but what particular ritual would offer the most appropriate response; herbalists, whose own expertise is shared with singers and with others in need of a symptomatic cure (a colleague of mine, a sociologist doing field research on the Navajo reservation, came down with a sudden asthmatic condition and was cured immediately by a Navajo woman who had an herbal remedy on hand); and rare, talented practitioners who act somewhat like faith

healers. Only the last of these would come anywhere near the standard definition of shaman, by strict definition a person who—usually by having died and come back to life—has the magical or personal power to affect the health of others (for better or for worse).

Shamans are rare in Navajo culture except for the *yenaaldlooshi* (literally “evil trotting canine-like”), the Navajo embodiment of evil, or “skinwalker” as such a person is usually called in English. This is a Navajo who studies a kind of reverse medicine which is used to injure or kill others in the belief that in so doing the perpetrator gains personal health, power, or property. There is no doubt that there are such people: I have met a few of them and have seen the results of their work. While stories about them make up much of the legendary repertoire of young Navajos, the *yenaaldlooshi* themselves are not typical of Navajo medical thought (except insofar as they validate Navajo beliefs by contrast, working in opposition to the kinds of healing logic I will discuss in this paper). That’s as much as I want to say or think about the skinwalkers; I do not care to come any closer to them than reading about them in a Tony Hillerman novel. Most Navajo healers, from informal herbalists to carefully practiced singers, learn their profession through years of intense education in and memorization of medicines, songs, arts, psychology, and ritual practice. It’s medicine, not magic, and it constitutes the core of Navajo religious practice in general, since virtually every Navajo ritual focuses on a patient and a singer-doctor.

Of course, I did not know any of this in the winter of 1954, as I lay—dying, I supposed—on the dirt floor of Little Wagon’s family’s hoghan. Coughing uncontrollably one night, I was nudged by Yellowman, who was trying to offer me something out of a small container, shining a small flashlight’s yellow beam on it so I could see what it was. It was a tin of Sucrets cough lozenges, but how it got into that remote canyon—or how long it had been there—was a complete mystery to me. Yellowman kept saying, “*Nizee’! Nizee’!*” which means “your medicine,” but—because of the tonal possibilities in Navajo which allow for puns in almost any circumstance—also means “your mouth,” or, “shut up!”

Leaning on my elbow in the dark hoghan, I unwrapped one of the cough drops and got it into my mouth. My next memory is of waking—apparently a day or so later, also at night—and sensing that the hoghan was full of people. I had been dragged or carried to the west side of the hoghan opposite the door. I noticed that the door was open, the space filled by a white sheet that billowed back and forth as the wind blew outside. Next to my head sat a man I didn’t recognize, singing a chant I didn’t understand. From somewhere else in the hoghan I could hear another voice or two joining in. Occasionally, some

bitter liquid was poured in my mouth, and I was at least partly relieved to see that the bowl was then passed around so everyone else could share its contents. But I remember thinking I must be at the end of things; I would die in this roadless desert canyon and my folks in Massachusetts would never know the details.

As I learned later on, the ceremony which had now focused on me was the Red Antway, which had been recommended by the hand trembler diagnostician during a previous ceremony held while I was unconscious or asleep. Red Antway is usually used for lower intestinal complaints and maladies associated in Navajo custom with inadvertently breaking the taboo against urinating on ant hills, so why it was chosen for my upper respiratory problems I cannot say. My Navajo family later suggested that perhaps my camp had disturbed the ants somehow, and that was why the imagery came to the hand trembler. The ceremony made constant (and very effective) use of emetics, accompanied by songs which described evils being expelled from my lips, and so there was also the possibility that the ceremony was aimed at some form of witchery which had affected me. Later, I was told that the purgatives which made me vomit onto sand paintings of Horned Toad were expelling Red Ant People (later rephrased as “antness”) from me.

There was a succession of sand paintings depicting variously colored Ant People, Horned Toad, Sunray Girl, Pollen People, and Corn People (all of them icons of sacred living aspects of nature). I was bathed several times with yucca suds, required to crawl through a succession of hoops outside the hogan door, and on one occasion was frightened out of my wits by the sudden appearance of a “bear,” a man blackened with soot and decorated with bear footprints who jumped at me from concealment behind a blanket. Although the Red Antway often lasts for eight or nine nights, mine ended on the morning of the sixth day, and was followed by a short protection rite from the Blessingway. My fever was gone and, although I was too weak to walk around much, I was able to breathe better and was coughing less each day.

Now, in terms of medicines, I have no doubt that what I was given to drink, to chew, to swallow whole, and on one occasion to smoke, must have had actual healing properties. Some of them tasted like pine tar, one concoction had a light mold on it and a moldy taste, and the “mountain tobacco” I smoked caused my nose to run uncontrollably and loosened the mucous in my throat.

The ritual activities were somewhat more difficult for me to understand, and I cannot claim to this day that I have a full intellectual command of their logical principles. But I can come close. Navajo rituals are said to create or to restore the quality of *hózhó*, a term which means something like a combination of beauty, stability, balance, and harmony. The medicines are believed to

have the capacity of addressing the symptoms of illness, but not of curing the illness itself more than superficially, for it is thought to be the direct result of imbalances and disharmonies brought about by accident, by inattention to proper behavior, by reckless or immoderate actions (including excessive competitiveness), or by the ill will of others (including skinwalkers).

The sand paintings used during the ceremonies provide visual icons of the natural forces one must heed in order to be receptive to the restoration of balance and harmony; the songs and prayers (usually characterized by quadruple repetition of phrase, color, and action representing the four cardinal directions) set up a vocal context of redundant, interactive, circular patterns which are thought to reestablish normal reciprocative balances in the mind of the patient. Characters like the Red Ant People (living beings of the very first world in the Navajo Emergence story) represent the basic natural subterranean powers that epitomize the earth's "inner being," for which those who live on the surface constitute the "outer being" (yet another balanced, reciprocative model for natural relationships). When the patient is placed on a sand painting, he or she actually becomes part of, indeed an actor in, this sacred icon; when the colored sands are swept up and thrown away outside before sundown, the focused symbols are atomized, returned to their generalized presence in the universe, and the patient thus envisions the sickness, too, physically being taken out of the hogan and redistributed in the world instead of concentrated in the individual. Movement within the hogan is always circular, almost always sunwise. In other words, virtually all actions, words, tunes, movements, colors, and places are phrased in such a way as actually to *articulate* and dramatize the desired condition of balance for the patient (and by extension, all those present) in the setting of the natural world and universe. This reestablishment of *hózhó* is no more beautifully expressed than in the songs sung at dawn on each morning of the ceremony, with great detail on the last morning: the dawn is first described as a horizontal thin white line (indeed what the very first moment of dawn looks like in the desert); then dawn is depicted as spreading, then moving upwards, then passing overhead, then becoming complete; then the sunrise itself is described as it moves to completion; and then—in the formula so familiar to students of the Navajo—*hózhó*, or beauty, is described as spreading out around us in all directions, ahead of us, behind us, on all sides of us, above us and below us; finally, beauty has settled everywhere around us.

To understand the impact of such imagery on Navajos (of course it's admittedly powerful for anyone), we need to remember that Navajos do not see language as merely describing reality: rather, language creates the reality in which we live. With these images being sung close behind you, you experience

the moment of dawn as the conclusion of a healing ritual and the symbol of restoration (in fact, in some ceremonies, like the *Hózhó-jí*, or Beauty Way, the patient faces the dawn at the moment the thin white line appears and actually “breathes it in”); it is a powerful combination of personal experience and the ritual articulation of restoration.

This intersection of ritual, language, action, and reality is rarely found in Anglo-American medical practice, or at least so the Navajos feel. In fact, traditional Native people often encounter its principles in macabre reversal when they visit a non-Navajo medical doctor. Blood and urine samples, skin scrapings, and other “specimens” are taken away into other rooms (just what skin-walkers might do with them); long objects like needles, tongue depressors, thermometers, and doctors’ fingers are pointed at them in gestures exactly like those which indicate an intention to kill; and language is directed at them for its information capacity, not for its restorative powers. To be sure, times have changed, and Navajo people have been abroad in the world enough to have become sophisticated about such things: they may register such outrages today more as impolite behavior than as traumatic miscarriages of healing power. Nonetheless, especially for older patients, the aggregate impact of “Anglo medicine” can be quite frightening. And if it is true that the psychological state of the patient has a substantial effect on the healing process, we can say that much of what passes as healing logic for non-Navajos not only strikes the Navajos as deranged and dangerous, but indeed becomes an actual impediment to healing.

In this regard, I cannot think of a better example of the power of language to inhibit healing than the time I was asked to visit a physician to find out why he was “trying to kill” his elderly Navajo patient. The old man had refused to go back to his doctor, and indeed appeared close to terrified even at the thought of it. The doctor’s opinion was that the old man was endangering his own life by stubbornly refusing to take his medicine regularly (he was being treated for diabetes). “I told him right out, if he didn’t take his medicine, he was going to die.” I pointed out that in the worldviews of many Native peoples, speaking of something created a reality, and that probably the old man had been frightened by the doctor’s phrasing. “Well, what am I supposed to do? Hug him and tell him he’s a wonderful old man and just let him die? My obligation is to tell him the truth: and the truth is, if he doesn’t take his medicine, he’s going to die.” I said, “Why couldn’t you tell him: ‘If you do take your medicine, you’re going to live and be with your grandchildren?’” “Never thought of that,” he said. I mention this episode not only because it illustrates how language may function differently in such situations (in one case, the language is a vehicle of information—sterile, incontrovertible fact; in the other,

language is a creative, powerful force which actually had a palpable impact on the patient), but also to show how near we often are to each other without realizing it. Worldview differences can sometimes act like walls, but more often they are veils; realizing this might lead us to see these differences as exciting resources rather than as problems.

A psychiatrist doing research on the psychological dimensions of Navajo healing once remarked to a group of friends that while he was interviewing an elderly medicine man he himself had suddenly received something just short of a visionary experience. The old man was in the midst of recalling how many years he had “followed,” studied under, various elderly singers, each of whom in his own lifetime had spent years learning the words, songs, medicines, and ritual movements of several healing ceremonies. The old singer noted how difficult it had been to learn all the phrasing exactly, so that the depth of knowledge and power in the ceremonies would not erode over the years. The psychologist-researcher suddenly realized that he was listening to an oral account of unbroken medicinal and psychological practice and theory which had already been ancient when Freud and Jung were developing the modern field of psychology in which he himself had been trained.

Doctors at the Indian Health Service hospital in Tuba City, Arizona, told me that they had started “allowing” Navajo chanters to visit patients in the hospital, in the hopes that hearing a trusted and familiar voice would make them feel more at home and relaxed. Indeed it did, and the doctors had a sense that healing rates and successful treatments had gone up. They were not prepared to discover one day that the chanters also were able to bring Navajos out of comas almost every time (unless there had been massive brain damage). A chanter would sit at the head of the patient’s bed and quietly sing and talk to the comatose Navajo for hours on end, taking a break now and again, until the person came out of the coma. I am not aware of any formal study being made of this process, but one doctor friend of mine said that his impression was that the chanters had about an 80 percent rate of success.

What logic accounts for this? In the absence of data “readable” by Western science, we have the tendency to grasp for ideas like “coincidence,” but that would not account for a score of 80 percent—or even 40 percent for that matter. The Navajos do have a logic for this phenomenon, and it is based in part on their concept of the spirit or soul, *nílch’i*, literally wind, air, breeze. This is a living entity residing within us which relates us to the larger wind outside. It is shaped and mediated by our mouths when we speak (which is one of the reasons speaking is thought to have a direct effect on outer reality); but more to the point, it animates us in ways that are not under our conscious control. In other words, it functions not only as a life-force which ties us to the rest of

nature, but it also acts very much like what we call the unconscious. Navajo singers have told me that even when the body is incapacitated (as in a coma) or unconscious (as in sleep), the *níłch'i* is still alive and functional as long as the patient is breathing. The singer contacts the wind-spirit through the patient's ear, and, in effect, encourages it to reanimate the body. I have been told by non-Navajo friends who have experienced comas that they remember much of what was said around them, even though they could not respond, so it seems that the experience is not isolated to Navajos, though the logical assumption that the minds of comatose patients can be reached with therapeutic results is apparently more advanced among the Navajos than it is among us.

Other culturally constructed phenomena are not so easy to account for. One of the doctors at Tuba City hospital told me about the teenage boy they had taken in as a burn victim on one occasion. He had been repairing his motorcycle, and the gasoline he was using to cut the grease had exploded and burned him over much of his body. He was convinced the incident was no accident, and that it had been precipitated by an old lady in his neighborhood who was suspected of being a witch, a skinwalker. He had accidentally backed into her propane tank some months earlier, and she had threatened to get even with him. He begged the doctors and nurses to make sure the old woman did not get to him in the hospital. The doctors assured him they would protect him, assured him the old woman was not a witch, assured him that he was on the mend. His burns, while serious, were responding to treatment, and he was feeling better every day. Nonetheless, the old woman was discovered roaming the hospital corridors, and was noisily ejected by the staff on several occasions. And while everyone was sure she had never reached the boy's room, he died in his bed suddenly of undetermined causes.

The Navajo concept of witchcraft understands it as operating in opposition to healing: it separates and alienates, it kills and injures, it destabilizes and deharmonizes—all usually under the command of someone who thinks to gain power (or revenge) by destroying the health of another. A witch is characterized by aggressive behavior, by serious personal competition, by anti-social actions of any sort. The logic of it—especially in contradistinction to the logic of Navajo healing—is clear enough. But my intellectual appreciation of this neat, bifurcated symmetry does not allow me to penetrate the mystery of the burned boy in Tuba City. I could dismiss it as one of those many puzzles I will never understand were it not for the fact that the young man was the father of my Navajo daughter's first child, a baby boy who also died inexplicably soon after birth.

As we might expect, the Navajo assumptions about balance and harmony also work on a much larger scale than just the human. In fact, it seems clear

to me that the concepts of *hózhó*, “harmony,” “beauty,” and “balance,” that inform the logic of healing are the local manifestations of conditions thought to be ideally present in the whole of the universe. When these balances in nature are threatened or destabilized, the result can be devastating for everyone, as was richly illustrated in the Four Corners area in 1993, when healthy Navajos began dying of a mysterious flu-like illness. The Associated Press quoted local and Indian Health Service doctors who theorized that the “baffling syndrome” was some kind of plague, and in an attempt to capture the Native perspective, AP quoted Navajo elders’ explanations that the illness was a signal from nature that Navajos were neglecting their traditional values.

Scientists discovered that the virus was being carried by rodents, and the Center for Disease Control in Atlanta eventually identified the culprit as the hantavirus, named after the Hantaan River, where an outbreak had caused many casualties during the Korean War. Apparently, flooding and the bombing campaigns during the war had driven thousands of rodents from their homes and into the paths of humans, who picked up the virus from dust which carried dried mouse urine and droppings. In 1993 the southwestern United States had experienced unusually heavy and extended rains, one result of which was that the pinyon trees bore a tremendous harvest of nuts— attracting both the rodents and human gatherers into the same area.

Navajo tradition holds that when rodents, especially mice, become so numerous that people become aware of them at night running over their bedding, then all clothes and bedding should be immediately taken outside and burned. Navajo singers recalled that in 1918 and 1933 there had been similar years: heavy rains, large pinyon nut harvests, numerous mice, and—as one might expect—a pulmonary affliction that killed many people. The disease was considered to be the result of the imbalance in nature. By ignoring the older custom of burning clothes and bedding when such an infestation occurred in 1993, modern Navajos had indeed endangered their lives. And even before the scientists had isolated and identified the virus, the Navajo singers had already placed the event in the context of customary anecdote, oral history, and healing practice—to say nothing of understanding the phenomenon in terms of changes in the natural setting. Hantavirus is in fact the result of environmental imbalances, and is not simply a plague spread by human-to-human contact. While the Navajo understanding of this situation cannot be used as a claim that they somehow know something which the rest of us do not, it certainly stands as an example of how another culture’s logic of health can generate insights as reliable as our own.

Some years ago, it was common to see Navajos wearing strings of colored glass beads and juniper seeds around their necks and wrists. Called

“ghost beads” by white tourists to whom they were also sold in souvenir stands along the highways, these items were called *gad bi náá’* (literally, “juniper’s eyes”) by the Navajo. It was said that they represented in physical form the network of cooperation and reciprocation which could bring about harmony and balance in one’s life: the juniper tree supplied the berries; the small ground animals collected them, taking them to their burrows and worrying the cap off one end so they could get to the tiny nut meat inside; the Navajo children gathered them from the animals’ burrows, keeping only those which had already been opened (so they would not deprive the animals of food). The beads, worn around some part of the body, represented a physical surrounding by the interactive components of the natural world—the plants, animals, and people. To wear them was to feel enclosed in a symbol of environmental balance, of hózhó.

One doesn’t see the juniper necklaces as much these days (except on tourists), and I cannot help but feel that their absence from the scene may signal a departure—an apostasy, if you will—from the logical assumptions which gave them intense meaning for many previous generations. Sadly enough, during the hantavirus episode in 1993, many Navajo young people went to their doctors instead of to their singers, no doubt because their willingness to accept the validity of their own cultural logic had been undermined or denigrated by the culture around them, the culture which now dominates their education, their economy, their environment, and, alas, their sense of science. It seems to me that one advantage of study in the field of culturally constructed medicine—especially in the mode of what David Hufford has called “experience-centered” scholarship—is that we can help to foster the idea that cultural diversity in thinking is neither a virtuous political exercise nor a threat to science but a rich and underestimated source of insight for humankind in general.

NOTES

A personal essay of the sort attempted here is not dependent on secondary sources which can be footnoted. Nonetheless, a number of works provide further illustration and explanation for basic issues brought up here which have been dealt with more extensively by scholars of the Navajo, noted by anthropologists and other students of Native American cultures, and reported in the news media. Readers may wish to consult Leland C. Wyman, *The Red Antway of the Navaho* (Santa Fe, New Mexico: Museum of Navajo Ceremonial Art, 1965) for a fuller description of several versions of the central healing ritual discussed here. The complexity of

Navajo language, with special reference to worldview and logical assumptions, is explored by Gary Witherspoon in *Language and Art in the Navajo Universe* (Ann Arbor: University of Michigan Press, 1977). A basic and thorough study of Navajo healing thought is Gladys A. Reichard, *Navaho Religion: A Study of Symbolism* (New York: Bollingen Foundation, 1950; republished in one volume by Princeton University in 1974). The principal healing ritual of the Navajos, from which all others are said to branch, is discussed by Leland C. Wyman in *Blessingway* (Tucson: University of Arizona Press, 1970). The idea of cultural apostasy or despiritualization was put forward by Calvin Martin in an essay about the erosive effects of European disease and religion on the Micmacs of northeastern Canada, "The European Impact on the Culture of a Northeastern Algonquian Tribe: An Ecological Interpretation" (*William and Mary Quarterly* 31 (1974): 3–21). The hantavirus epidemic was discussed in Associated Press releases across the country in June 1993, followed by a special editorial in the *Baltimore Sun* on 28 July 1995. "All Things Considered" aired a lengthy interview on the subject on National Public Radio on 11 February 1995 (I am indebted to Bert Jenson of Vernal, Utah, for bringing the latter two instances to my attention). The reader of these notes may be relieved to know that "Navajo" is the Spanish spelling of a word which is still under contentious debate. During the 1930s and 1940s, wishing to downplay the Hispanic look of the word, the tribe and most scholars used the spelling "Navaho," but in recent years the preference has been for "Navajo"; hence, one finds both spellings of the term in the literature. The Navajos call themselves Diné, which means "people" or "humans."