



Aionkwatakari:teke

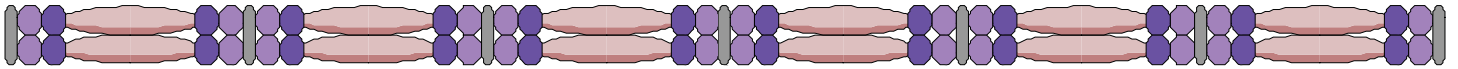
(A-YOU-GWA-DA-GA-RI-DE-GEH)

"For us to be healthy"

Vol. 22, No. 5

Kahnawake's Only Health and Wellness Newsletter

Kenténha / October 2017



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Aionkwatakari:teke

Aionkwatakari:teke is a newsletter published six times a year by Communications Services of Kahnawà:ke Shakotia'takehnhas Community Services (KSCS). Our purpose is to provide information on health and wellness issues that affect Kahnawà'kehró:non. All community members are welcomed and encouraged to submit articles provided that they are comprehensive to the general public, informative and educational. Slanderous material will not be accepted. Views expressed in the articles may not necessarily reflect those of KSCS. We reserve the right to edit all articles. All questions concerning this newsletter should be directed to:

The Editor**Aionkwatakari:teke**

P.O. Box 1440
Kahnawà:ke, Quebec J0L 1B0
Tel: 450-632-6880
Fax: 450-632-5116
Email: kscs@kscskahnawake.ca
(Attention: newsletter editor)

Editor/Layout/Design, Marie David
Executive Publisher, Derek Montour

Proofreading:
Bea Taylor
Winnie Taylor



www.kscs.ca

Contributors:

Marie David
Tracee Deer/KEPO
First Nations Child & Family Caring
Society of Canada
Alana Kane/Onkwata'karitáhtshera
Kaylia Marquis/Wahón:nise Tho
Niohtón:ne
Mary McComber
Kellyann Meloche/KEPP
Jessica Oesterreich
Karina Peterson

This newsletter is intended to complement, not replace, the advice of your health care provider. Before starting any new health regimen, please see your doctor.

Editor's Notebook

Weather-wise, this has been quite the year. From a late winter storm in March to the devastating floods that hit our area to the microburst that knocked down trees in an NDG park or the tornado that caused damage to several homes in Lachute to the hurricanes Harvey and Irma that have been the strongest on record yet, this year has seen many weather extremes. And summer, if you could call it that, was barely here, at least until September came and we experienced the kind of summer weather we should have had.

But we should be grateful that the weather events that did affect us weren't worse because they could have been. It always could be, especially with the effects of climate change stirring things up. So, as we head into the colder winter months, I can't help but hope this trend of extreme weather has run its course.

But that's the thing about climate change — it doesn't mean that the weather is warming, although that can happen (the oceans are warmer and the glaciers (that help keep the atmosphere cooler) are melting. Climate change means unpredictable and extreme weather is the new normal. Happy thoughts.

That's why it's nice to see a youth group in Kahnawake look at reusing plastic bottles to create a green house. Or the work of the Kahnawà:ke Environment Protection Office to educate young people about the areas plant and animal species. We also have articles from Kahnawà:ke Emergency Preparedness and Planning on what you can do to prepare for an emergency. We also have some information on Jordan's Principle along with a colouring page on the back for the kiddies. We hope you enjoy this issue.

Sken:nen,

Marie David



Cover photo courtesy of Karina Peterson. Cover design by Marie David



Talking With Your Teen About Marijuana

BY JESSICA OESTERREICH, PREVENTION

There's a lot of *buzz* around marijuana in the media these days, especially with the drug scheduled to be legalized and regulated in less than a year. Talking to youth about substance use has always been difficult, but legalization is adding a lot of confusion to the issues that adults need to wade through. When talking to youth, teasing out the distinction between medical and recreational marijuana is a good starting point.

Recreational marijuana is the result of decades of crossbreeding. This 'frankenplant' has an extremely high tetrahydrocannabinol (THC) content. THC is the chemical in marijuana that causes the *high*. THC content varies greatly, it can average as low as 14 per cent¹ to as high as 30 per cent². There is usually little to no cannabidiol (CBD) content. CBD is a naturally occurring chemical present in marijuana that helps to counteract the negative effects of THC. It's key to understand that today's marijuana isn't what Cheech and Chong were smoking in the 1970s. At that time THC levels varied from 1 per cent to 5 per cent³.

Many people still hold this sentimental perspective of marijuana, promoting the belief that its use results in a mild pleasurable high. However the plant is now strong enough to cause possible permanent changes to a young brain, as well as induce anxiety and psychosis in people prone to

these mental health issues. Just as with alcohol and prescription medication, legal does not mean 100 per cent safe. It's important for youth, especially those with a family history of mental illness and addiction to know about these risks.

Marijuana plants used medicinally are chemically very different than plants used recreationally. Medical marijuana has a higher content of CBD and less THC; in a few strains, there is no THC at all.

There are many strains of medical marijuana. Some are effective in treating life threatening seizure disorders in children, reducing the muscular spasms of multiple sclerosis, and others ease nausea and pain for people fighting cancer. Medical marijuana is also often used in the form of processed oils and pills, not smokeable marijuana. Just like any other medication, the decision to use medical marijuana should be made with a doctor's guidance and supervision.

We also can't forget about *tsi niionwkaríhotens*. As Onkwehonwe people, we respect the plants that creation has given us to heal. There is a very clear distinction in our culture between using a plant as medicine and abusing a plant. Marijuana is not indigenous to the Americas let alone a part of Kanien'kehá:ka culture. If you have questions about marijuana, call KSCS at 450-632-6880.

1 Health Canada. *A Framework for the Legalization and Regulation of Cannabis in Canada : The Final Report of the Task Force on Cannabis Legalization and Regulation*. Her Majesty the Queen in Right of Canada, as represented by the Minister of Health, 2016.

2 Brian Handwerk. *Modern Marijuana Is Often Laced with Heavy Metals and Fungus*. Smithsonian.com. <http://www.smithsonianmag.com/science-nature/modern-marijuana-more-potent-often-laced-heavy-metals-and-fungus-180954696/>.

3 Cohen, Miriam. *Marijuana; Its Effects on Mind & Body*. Chelsea House Publishers, 1985.



The Dangers of Second-Hand Smoke

Smoking: It Hurts More Than Just You

BY ALANA KANE, HEALTH PROGRAMS LIAISON, ONKWATA'KARITÁHTSHERA

Tobacco smoke contains over 4,000 chemicals, including at least 70 known carcinogens. Carcinogens are chemicals that are known to cause, initiate or promote cancer. What some might not be aware of is that a lot of these chemicals are also present in second-hand smoke. Therefore, similar to smokers, non-smokers exposed to second-hand smoke have an increased risk of lung cancer, heart disease and respiratory illnesses.

Children who are exposed to second-hand smoke by their parents or other family members have a higher risk of developing asthma, bronchitis and pneumonia, colds and sore throats as well as ear infections. For children who already struggle with asthma, more frequent and more severe asthma attacks may occur when they are briefly exposed to second-hand smoke.

Some parents try to reduce exposing their children to second-hand smoke by smoking outside the home. Until someone chooses to quit, that is definitely the right choice. However, many parents might not be as vigilant when smoking in the car.

Second-hand smoke in cars can be especially harmful to children because cars are small, confined spaces where children are closer to the smoker and the smoke. Because a child's lungs

are still developing, they can be easily damaged by exposure to the high level of second-hand smoke in a car. Even though many smokers choose to open a window or increase the ventilation, the child passenger is still not fully protected. Second-hand smoke lingers long after the smoking stops.

In response to the growing knowledge of these harmful effects, the province of Quebec made changes to the Tobacco Act in 2015. Changes include a new name for the Act, which is now called the Tobacco Control Act, and aims to:

- Protect young people and prevent them from taking up tobacco
- Protect the public from the dangers of second-hand smoke
- Encourage quitting smoking

As a result, an important measure that came into effect on May 26, 2016 is **that smoking is now prohibited in vehicles carrying persons less than 16 years of age**. Fines for smoking in a car carrying children range from \$250 to \$750 for a first offence, and anywhere from \$500 to \$1 500 for a repeat offence.

Quitting smoking is the best thing you can do to improve your family's life and health. That being said, quitting can be a challenge. The good news is

that you do not have to do it alone.

If you are ready to quit, contact your family doctor at the KMHC Outpatient Services at 450-638-3930 extension 2220.

Remember: until you can quit, choose to smoke outside your home and car.

Source:

Healthy Environments and Consumer Safety Branch. (2011). Carcinogens in tobacco smoke. (Catalogue no. H128-1/10-624E-PDF). Ottawa, ON: Government of Canada publications.

"Carcinogens in tobacco smoke." Carcinogens in tobacco smoke, Health Canada, Healthy Environments and Consumer Safety Branch, 2011. PDF. np.

Disasters Can Happen Here

BY KELLYANNE MELOCHE, KAHNAWÀ:KE EMERGENCY PLANNING

Hazardous materials spills can happen from many sources, train derailments, rail accidents, highway accident, and shipping and airline incidents.

Kahnawake is centrally located for all types of transportation incidents. Immediate action needed is to evacuate the area affected which could range from 50 yards to 5 miles depending on wind and direction. The only way the community would know what to do is by listening to K103 during an emergency. The WORSE action to take during that time is going to the scene to see what happening.

Disaster/emergency preparedness starts with you, the individual. You know and understand your needs. Families must have their family preparedness kits or supplies ready in the event of an unforeseen emergency. It will take at least 72 hours (3 days) for emergency management personnel to have evacuation centers and supplies ready.

A basic family preparedness kit should include:

- water – at least two liters of water per person per day; include small bottles that can be carried easily in case of an evacuation order
- food that won't spoil, such as canned food, energy bars and dried foods (replace food and water once a year)
- manual can-opener
- crank or battery-powered flashlight (and extra batteries). Replace batteries once a year.
- crank or battery-powered radio (and extra batteries) or Weather radio
- first aid kit
- extra keys to your car and house
- some cash in smaller bills, such as \$10 bills and change
- a copy of your emergency plan and contact information
- garbage bags
- toilet paper
- water purifying tablets
- basic tools (hammer, pliers, wrench, screwdrivers, work gloves, dust mask, pocket knife)
- a whistle (in case you need to attract attention)
- duct tape (to tape up windows, doors, air vents, etc.)

If applicable, other items such as **prescription medication**, infant formula, equipment for people with disabilities, or food, water and medication for your pets or service animal (personalize according to your needs)

Recommended additional items

- two additional liters of water per person per day for cooking and cleaning
- candles and matches or lighter (place candles in deep, sturdy containers and do not burn unattended)
- change of clothing and footwear for each household member
- sleeping bag or warm blanket for each household member
- toiletries
- hand sanitizer
- utensils

This is a basic family preparedness kit. Each family is unique in its requirements when considering children, medical needs and electrical needs (sleep apnea machines, medical devices, etc.). When developing your kit and plan, think about what was needed during the 1998 ice storms. It can help you prepare.

Remember in an emergency, listen to K103 or view notices on the Kahnawà:ke Emergency Preparedness Facebook page and heed any warnings given.

For questions or help developing your family plan, contact Kahnawà:ke Emergency Planning at 450-632-0635.



The Greenhouse Project

BY KARINA PETERSON, PREVENTION

Over the last few months, a *green* greenhouse has been one of our biggest components of the Á:se Tahonatehiaróntie Teen Group's activities. As a green initiative, Á:se Tahonatehiaróntie came across an idea to build a greenhouse out of water bottles and thought...let's do it!.

This activity turned out to be a huge project that demanded time, effort, and tons of team work. The group was learning skills in operating tools, following a work plan, budgeting, team building, advertising (for the water bottle collection), and earning a few hours of volunteering, as many members came to help outside of the group's meeting nights.

We began with collecting and cutting the water bottles. We received hundreds if not thousands of water bottles! We established a routine as we worked through the mounds of bottles and tasks were delegated for cutting and stacking the bottles.

Next, we had to allocate the materials to build the simple structure and frame that was needed to attach the

water bottles to. Jacob's Hardware donated the lumber, patio blocks, and hardware that we needed to get things started. Nia:wen!

We requested help from the group's parents and other staff members of KSCS and Wihse Stacey (father of group member Konwashennonni) went above and beyond and enthusiastically agreed to help us.

He came armed with all the start-up tools we needed and provided guidance to the group on how to use them. With a hands-on approach, a number of group members used a simple power saw, and learned angles and how to make cuts for the framing of the greenhouse. A few group members also used the hand drill to attach the pieces of the frame together. It took a few of us to hold and turn the frame for each section.

The structure consists of four walls that were framed out, the angled roof, and a hinged door. The walls were as follows: two walls at approximately 48 sq. ft. feet, and two walls at approximately 36 sq. ft. feet. The roof will reach its highest peak at 4ft. tall, making the overall structure about

6'–10' feet in height. The door will be aligned with the frame of the greenhouse and the structure lining will be made from water bottles.

Equipped with a drill, rope, and the water bottles, the next step was to stack and hang them off the frame. The group took turns with drilling out the holes in the frame to string the rope through. Everyone helped to string the stacks of water bottles onto the rope, and then through the frame. The last step was to secure the ropes with fencing staples, heavy duty staples, and some knots.

Nia:wen to all staff who contributed and helped with the progress of it and for the support of the community in our water bottle collection and donation of materials!

Special thanks to:

Wihse Stacey
Terry McComber
Jessica Deerhouse
Dallas Lahache
Megan Whyte
Beatrice Taylor
Jacob's Hardware
Environment Office
Racers for Health
KSCS staff
Candida Rice
Marlene Zachary
Michael Cross

And anyone else I may have forgotten to mention who contributed to this HUGE project!

Photos courtesy of Karina Peterson.



Kanenna'kè:ne Owenna'shón:'a

*FALL TIME WORDS
BY MARY MCCOMBER*

1. Kaienthókwen-harvest
2. Ontkenhnhò:kten- end of seasons
3. Kanenna'kè:ne- fall
4. Ienskanennà:ke'ne- next fall
5. Shitkanennà:ke- last fall
6. Okwire'shón:'a- trees
7. Onerahtase'kó:wa- white pine
8. Ónerahte- leaf
9. Onerahtón:ta- poplar
10. Ó:se- willow
11. Onèn:ta- pine tree
12. Ohósera- basswood

Ieniénthos Akotióhkwa Garden Group

BY KAYLIA MARQUIS, WAHÓN:NISE THO NIIOHTÓN:NE



Kahnawà:ke has a long history of being able to sustain itself in trying times. From the establishment of our community, to the Great Depression, to the blockade in 1990 and the ice storm in 1998, our community has typically pulled together and taken care of each other in times of need. Our community has a volunteer-run food basket program to help families that face uncertainty about where their food comes from.

We are also home to hunters, fishermen, farmers and gardeners. We have many talented and creative cooks and chefs and others who love to do things like canning for their own use or to sell at local craft and harvest fairs.

Ieniénthos Akotióhkwa Garden Group, through the Kahnawà:ke Schools Diabetes Prevention Project, is hoping to connect these essential skills together and share this knowledge with the community, so we can take better care of each other and honour

our traditional responsibilities to the natural world.

Part of our actions this year include workshops to share skills, save money, use local fresh produce, and discover who in your neighbourhood has similar interests and who you can ask for guidance.

On September 7, we held a salsa canning workshop led by Linda Delormier. In the past, we've offered tomato canning workshops and thought salsa might a fun way to mix it up. It seems you agreed, Kahnawà:ke. We had 26 participants and everyone ended up taking a jar of salsa home.

Autumn Workshops:

- October 5; Pressure Canning Meat with Chris Deere, 6:00 PM at the cookhouse of the 207 Longhouse
- October 12: Pressure Canning Vegetables with Chris Deere, 6:00 PM at the cookhouse of the 207 Longhouse

- October 15: Three Sisters Health and Harvest Fair! 10 AM–3 PM at the Knights of Columbus Hall
- October 26: Fruit Tree Propagation with Chuck Barnett, 6:30 PM at the United Church Hall
- November 2: Pumpkin Workshop with Kelly Marquis, 6:30 PM at the cookhouse of the 207 Longhouse
- November 9: Pasta Making Workshop with Judi Jacobs, 6:30 PM at the cookhouse of the 207 Longhouse

If you're interested in learning food-related skills – or have some skills you'd be willing to share – let me know.

If you have Facebook, you can find us at www.facebook.com/ieienthos.akotiohkwa or check for our and other community events at www.kahnawakecalendar.com.

Photos courtesy of Kaylia Marquis.

Onkwanera Summer Camp

BY TRACEE DEER, ENVIRONMENTAL EDUCATIONAL LIAISON - KAHNAWÁ:KE ENVIRONMENTAL PROTECTION OFFICE

Through a collaborative community pilot project, the Kahnawà:ke Environment Protection Office (KEPO) environmental education liaison and two junior environmentalists, Cole Delisle and Kenneth McComber, teamed up with the Onkwanera Summer Program and provided the young participants of the program the opportunity to learn about Kahnawà:ke's animal and plant species. The focus of the summer camp was to create environmental awareness and environmental responsibility through hands-on outdoor activities. The children were very knowledgeable of the Ohénton Kariwatéhkwen and relayed their understanding of the need to respect the interdependence and interrelatedness of all living species.


Environmental knowledge and skills building occurred through a guided walk of Tekawitha Island. One of the innovative tools KEPO developed for the Environmental Education Summer Camp was a bingo species card. The card, a visual aid, assisted the children to identify twenty plants and animal species that live on the Island.

The tour also included a history of the St. Lawrence River, the environmental impacts of the St. Lawrence Seaway, as well as a visit to the newly expanded pollinator garden. The pollinator garden was planted by KEPO in 2016 in an effort to attract declining pollinator species such as wild bees, monarch butterflies and hummingbirds. The participants learned about the importance of the garden and the effects of climate change on pollinators, plants and humans.

Another learning tool that the junior environmentalists developed was a prototype for the construction of a bee hotel. Wild bees are in decline locally and globally. The hotels are a means to attract wild bees which are often used as nesting spots. The participants built their own bee hotel which they took home to place in their backyards.

Listed below are the English, Kanien'kéha and scientific names accompanied with a picture of the traditional medicinal plants and trees that the participants identified on the Island. It was explained to the summer camp participants that there is a protocol on how to respectfully pick medicinal plants and that one should be accompanied by a traditional knowledge holder when picking medicinal plants. KEPO encouraged the participants to attend the annual traditional medicine walks provided by the Kateri Memorial Hospital Center to acquire more knowledge about Kanien'kehá:ka traditional medicine.






Photo credits: Burdock: Creative Commons, Dandelion: Lupus in Saxonia, Plantain: H. Zell, Red Osier Dogwood: Matt Lavin, Sumac: Daniel Fuchs, Wild Clover: Zampel, all found on Wikimedia Commons.

Plant	Kanien'kéha	Scientific Name	Picture
Burdock	Orhohte'ko:wa	Arctium lappa Arctium minus	

Continued on page 10

Onkwanera Summer Camp cont...

Continued from page 9

Plant	Kanien'kéha	Scientific Name	Picture
Dandelion	Kahonro'tótha otsi:tsa	Taraxacum officinale	
Plantain	Teionerahtarastarathe	Plantago major	
Red osier dogwood	Onekwénhtara niwatsherò:ten	Cornus sericea	
Sumac	Tara:kwi	Rhus typhina	
Wild Clover	Teioneratoken	Trifolium pratense	

Jordan's Principle

National Child Day is on November 20, 2017. To highlight this day, Aionkwatakari:teke is including a colouring page on the back for kids to have fun and colour. We also hope that family members and/or guardians will take a few moments to teach children and others about Jordan River Anderson and the important cause that's named in his honour.

Jordan's Principle is the child first principle named in memory of Jordan River Anderson, who was from Norway House Cree Nation in Manitoba. Jordan was born in 1999 with "complex medical needs and spent more than two years unnecessarily in the hospital while the Province of Manitoba and the federal government argued over who would pay for his at-home care. Jordan died in the hospital at the age of five-years-old, never having spent a day in his family home" ("Jordan's Principle: Timeline and Documents").

The First Nations Child and Family Caring Society (Caring Society) champions Jordan's cause on behalf of the Anderson family. The crux of the issue is to end the discrimination against First Nations children and to get the child the services they need without delay and to settle jurisdictional disputes surrounding payment later.

In 2007, the Canadian parliament stated its full support of Jordan's Principle in the House of Commons. But in 2008, the government began attempts to narrow the focus of Jordan's Principle from applying to all federal government services to only those cases of "complex medical needs and multiple service providers" (Ibid).

In 2007, the Caring Society and the Assembly of First Nations (AFN) filed a joint complaint with the Canadian Human Rights Tribunal (CHRT) against the Canadian government beginning a long and protracted battle with the federal and provincial governments to ensure First Nations children get the care they require and that is based on the needs of the child. Canada spent over 3 million dollars trying to prevent the case from being heard by the CHRT.

After six years of delay, hearings finally got under way in 2013 and on January 26, 2016 the Canadian Human Rights Tribunal ruled that Canada's failure to "ensure First Nations children can access government services on the same terms

as other children via Jordan's Principle was discriminatory and contrary to the law and ordered Canada to cease applying the narrow definition of Jordan's Principle and to take measures to immediately implement the full meaning and scope of Jordan's Principle." (Jordan's Principle: Summary of Orders from the Canadian Human Rights Tribunal).

Despite this ruling, Canada continues to resist implementing Jordan's Principle. The CHRT has filed three non-compliance orders against the government of Canada (the latest one rendered in May, 2017). In August 2017, Canada filed a judicial review of the CHRT ruling in a further attempt to delay implementation. Also in August, the United Nations Committee on the Elimination of Racial Discrimination called on Canada to fully comply and implement the CHRT's rulings.

Source:

"Jordan's Principle: Timeline and Documents." First Nations Child and Family Caring Society of Canada. 2005. <https://fncaring-society.com/jordans-timeline#2005>. Accessed 14 Sept. 2017.

"Jordan's Principle: Summary of Orders from the Canadian Human Rights Tribunal" Information Sheet. 24 July 2017. PDF.

Report a Jordan's Principle Case

Jordan's Principle aims to make sure First Nations children can access all public services in a way that is reflective of their distinct cultural needs, takes full account of the historical disadvantage linked to colonization, and without experiencing any service denials, delays or disruptions related to their First Nations status.

Indigenous and Northern Affairs Canada (INAC) and Health Canada have established regional contacts (called "Focal Points") to respond to Jordan's Principle cases. For more information call or visit:

Phone 1-800-567-9604

TTY 1-866-553-0554

Visit www.canada.ca/jordans-principle

If you have any difficulties reporting a Jordan's Principle case, please contact the Caring Society at info@fncaringsociety.com or 613-230-5885.

The Back Page....

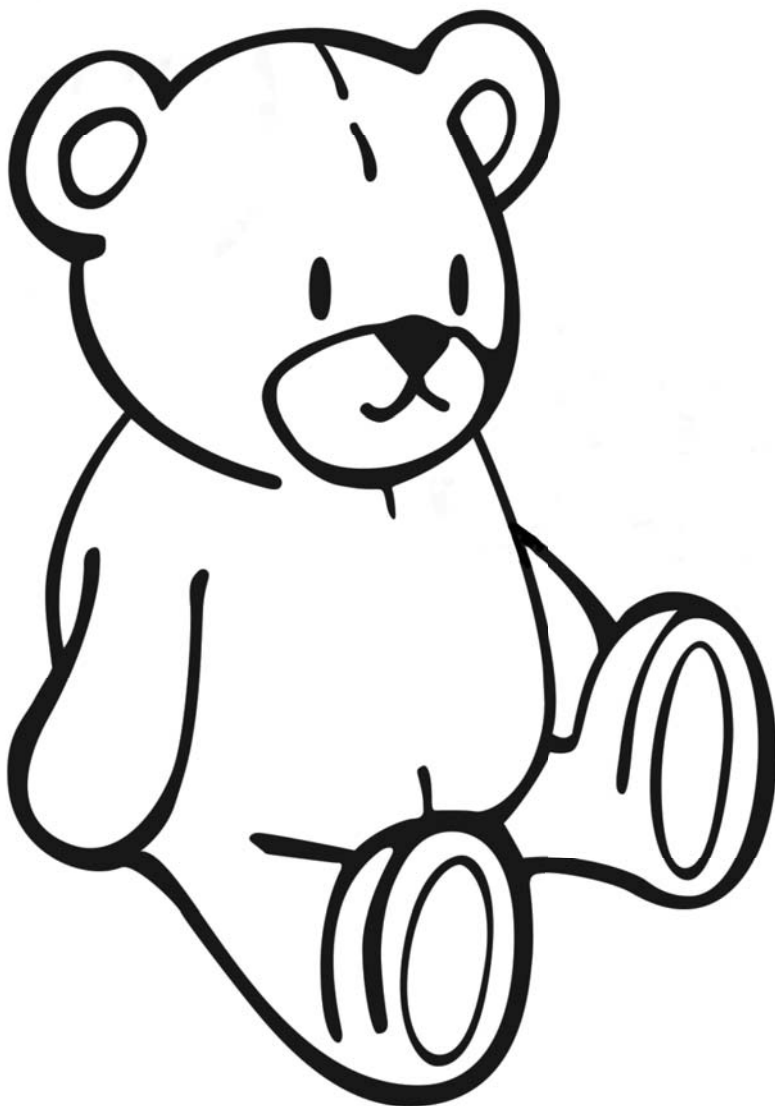
"Our greatest glory is not in never falling, but in rising up every time we fall."

~ Ralph Waldo Emerson

Colour Me!

GRAPHIC USED WITH PERMISSION BY THE FIRST NATIONS CHILD & FAMILY
CARING SOCIETY OF CANADA

Jordan's Principle



Kenténha / October

- Breast Cancer Awareness Month
- Mental Illness Awareness Month
- 1 – 7 World Breastfeeding Week
- 1 Natl. Seniors Day
- 9 Thanksgiving (KSCS closed)
- 10 World Mental Health Day
- 29 World Stroke Day
- 31 Halloween

Kentenhkó:wa / November

- Spirit of Wellness Month in Kahnawà:ke
- Diabetes Awareness Month
- Movember
- World Pancreatic Cancer Awareness Month
- Fall Prevention Month
- 11 Remembrance Day (KSCS closed Friday)
- 12 World Diabetes Day
- 20 Natl. Child Day
- 25 Intl. Day for the Elimination of Violence Against Women

Do you have questions or suggestions? Is there a topic you would like to see covered in a future issue of the newsletter? Contact us and let us know.

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P.O. Box 1440
Kahnawà:ke, Quebec J0L 1B0
Tel: 450-632-6880
Fax: 450-632-5116
Email: kscs@kscskahnawake.ca