



# Aionkwatakari:teke

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

"For Us To Be Healthy"

Vol. 15, No. 1

Kahnawake's Only Health and Wellness Newsletter

Enniska / February 2010



## Shattering Violence Myths, Misconceptions, and Beliefs

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## Aionkwatakari:teke

Aionkwatakari:teke is a newsletter published six times a year by Communications Services of Kahnawake Shakotiaa'takehnas Community Services (KSCS). Our purpose is to provide information on health and wellness issues that affect Kahnawa'kehró:non. All community members are welcomed & encouraged to submit articles provided that they are comprehensive to the general public, informative & 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:

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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

**S**he:kon and welcome to the first issue of Aionkwatakari:teke for 2010. This issue is taking a look at violence in its many forms. There's an article by Doug Lahache on elder abuse, which sadly, is making its ugly face known— not just in Kahnawake but in many other Aboriginal communities as well. An article by Brian Williams looks at the more drastic consequences of teen sexting, anti-bullying tips, and myths about sexual abuse. There is also a quiz at the back to find out if you or someone you know is a victim of abuse.

On the lighter side of things is an article in time for Valentine's Day about the language of flowers. What message are you sending if you give your significant other yellow carnations, or what's the difference between yellow roses and a single red rosebud? You'll find out more in the article.

As always, if you want to send us feedback or suggest a story for a future issue of the newsletter, get in touch with us. Our snail mail and email address can be found on this page and at the back.

Finally, whether you trust Wiarton Willy, Shubenacadie Sam, or Punxsutawney Phil, let's hope they all agree on an early spring for all of us. I think we deserve it. Until the next issue, keep safe.

Sken:nen,  
Marie David



*Cover design by Marie David*



# Coping With Stress

Submitted by JEAN O'CONNOR, CASE WORKER

**S**tress affects your mind, body, spirit and overall health. When you are feeling stressed, changes may occur in your physical body which will also impact upon your psychological, emotional and spiritual well-being. For example:

- your blood pressure may increase
- your heart rate rises
- muscles tighten
- adrenaline rushes through your system
- your immune system does not function as well

Stress is simply a human response to the difficulties in life. Your body's response to stress could lead to illness. There is a general agreement between both the medical community and the public that stress is indeed a major contributor to diseases such as heart attacks, high blood pressure, ulcers and nervous disorders.

There are many means of managing stress which include:

- exercising regularly
- leading a healthy lifestyle
- involving yourself in a hobby you enjoy
- engaging in spiritual practices
- massage, reflexology or other forms of body therapies
- yoga, meditation, and aromatherapy

One very simple technique to reduce stress is to *practice* a breathing technique, described below:

1. Relax your arms and shoulders.
2. Close your eyes. Take a deep breath and exhale. Repeat.
3. Concentrate on your breathing and put aside all other thoughts. You can count your breaths and try to take slow *big belly* breaths and exhale the same

count as your inhale. So, if you counted in 10 breaths on your inhale, try to allow a slow exhale to a count of 10.

When you breathe from your chest, you inhale about a teacup of oxygen. When you breathe from your abdomen, you inhale about a quart of oxygen. The more oxygen you inhale, the better. How you breathe also affects your nervous system. Chest breathing makes your brain create shorter, more restless brain waves. Abdominal breathing makes your brain create longer, slower brain waves. These longer and slower brain waves are similar to the ones your brain makes when you are relaxed and calm. So, breathing from the abdomen helps you relax quickly.

The ideal recommendation is to take mini *breathing breaks* throughout the day to help instill a sense of calmness and relaxation throughout your day.

Source: Myss, Caroline PhD. The Creation of Health. New York: Three Rivers Press. 1998. Print. University of Pittsburgh Medical Center. Coping With Stress. PDF. [www.upmc.com](http://www.upmc.com).



Jean O'Connor is a case worker with Home and Community Care



## HIV is Still Around

by TARYN CONLON, PREVENTION WORKER

In the 1990s, young people were exposed to acquired immunodeficiency syndrome (AIDS) prevention messages in schools; which had very good results. However, today's youth believe many of the misconceptions about human immunodeficiency virus (HIV) and AIDS due to medical advancements and lack of information.

*HIV is the virus causing AIDS that attacks your body's immune system. When a person with HIV becomes sick from multiple infections, they are considered to have AIDS. You may not know you have HIV since many symptoms take years to occur. HIV is transmitted through sexual activity, by blood or from a mother to her baby. (Mothers who are HIV positive should never breastfeed their baby.)*

Studies show misconceptions about HIV and other sexually transmitted diseases has caused youth to engage in unprotected sex and risky behaviour, resulting in alarming statistics:

- ↳ Twenty-six per cent of new HIV cases are Aboriginal people.
- ↳ People 25 years and younger account for 66 per cent of the sexually transmitted infected (STI) population.
- ↳ Fifteen per cent of new HIV cases are people under 25 years of age.

- ↳ Seventy-three thousand Canadians are currently HIV positive, compared to 49,000 in 2001.

**HIV infections are rising in Canada.** Approximately one quarter of Canadians infected with HIV aren't aware they have it.

**There is no cure.** One major misconception about HIV/ AIDS today is that there is a cure. There are better treatments to help people cope with the symptoms and to slow down their progression. Unfortunately, antiretroviral drugs often have side effects that are almost as damaging as the HIV/ AIDS symptoms.

**Women account for half the worlds HIV infections.** HIV can affect anyone. The majority of women infected today became infected through heterosexual intercourse. Previously, HIV was viewed as something that was only present among the homosexual population and drug users; *this stereotype is false.*

**You should get tested for HIV if you and/or your partner:**

- ↳ has had unprotected sex with someone else.
- ↳ has shared needles or other material for injecting drugs or steroids.
- ↳ has received a blood transfusion or blood products between 1978 and 1985.
- ↳ are a steady couple and have stopped using condoms.
- ↳ are, or would like to, become pregnant.

**What you should know about HIV testing:**



- ↳ Results must be kept confidential and cannot be shared with another individual unless you give written consent.
- ↳ It's anonymous. You're assigned a number that will follow your results.
- ↳ Rapid HIV testing is available in Canada. A clinic will analyze your blood sample while you wait and deliver results immediately.

If you choose to engage in sexual activity, the best way to reduce your risk for contracting HIV is to use a condom. If you are in a relationship, you and your partner should be tested before having unprotected sex.

Canadian Aboriginal AIDS network:  
1-888-285-2226

CLSC–Blood Test–Chateauguay:  
450-699-7333

Kateri Memorial Hospital Center:  
450-638-3930

Info Santé:  
450-699-3333

*Resources:*

Canadian National Foundation for AIDS research: [www.canfar.com](http://www.canfar.com).

Ministère de la Santé et des Services Sociaux du Québec:  
[www.msss.gouv.qc.ca](http://www.msss.gouv.qc.ca).

# Sexual Health & Reproductive Health Day

by TARYN CONLON, PREVENTION WORKER

February 12, 2010 marks the celebration of sexual health and reproductive day. This is a day to raise awareness that encourages individuals, service providers and communities to:

- Talk and learn about all things related to sexuality.
- Take care of our own sexual and reproductive health.
- Organize and participate in fun, community based events.
- Embrace anything else that captures the sex-positive spirit of sexual health.

## Did you know about the recent updates in sexual health?

In the last few years there have been new advancements in birth control options. Women have more choices than ever before to customize their birth control to suit their lifestyle.

**The emergency contraception (EC)** or the *morning after pill* has been on the market for a while now. It's an emergency plan for women whose usual birth control method fails. The EC provides a safe and effective method of preventing unplanned pregnancies up to five days after unprotected sex and is available from a pharmacy without a prescription.

**HPV (human papillomavirus) testing** is now available in Canada. The test has proven to be more effective than a pap test in detecting pre-cancerous lesions that result from HPV (genital warts). Women can request this test from their health care professional at no charge.

**The HPV vaccine** is available for girls' ages 9 to 17 years of age and is given in three different stages. The vaccine is effective at preventing the strain of HPV known to cause cervical cancer and condylomas\*. It is highly recommended that women who have received the vaccine continue to get regular pap tests.

**A new oral contraceptive, Seasonale®**, is the first extended-cycle oral contraceptive pill where you only have four menstrual periods per year. Its potential side effects are similar to those of other oral contraceptives. There has been debate over the implications of taking a hormone for such a prolonged time period and over the safety of cycle-stopping contraceptives.

**Mycoplasma Genitalium** is a new sexually transmitted infection (STI) caused by a bacterium that is transmitted through unprotected anal, oral or vaginal sex or the sharing of sex toys. When left untreated its effects are pelvic inflammatory disease (inflammation of the uterus, fallopian tubes and ovaries, scarring

the tissue and organs), cervicitis (infection in the lower genital tract which can cause infertility, spontaneous abortion & cervical cancer) and NGU (non-gonococcal urethritis is the inflammation of the urethra resulting in painful urination, itching, irritation and/or discharge).

All of the new advancements in sexual health offer easy innovative ways to protect your sexual well-being. Before starting any new birth control method, contact your doctor and always use a condom to protect yourself from the transmission of STI's.

\* *condylomas is a growth resembling a wart on the skin or a mucous membrane, usually of the genitals or anus.*

Resources:

Canadian Federation for Sexual Health:

[www.cfsh.ca](http://www.cfsh.ca)

C-Health: <http://chealth.canoe.ca/>

# Myths About Sexual Abuse

by MARIE DAVID (ADAPTED FROM MYTHS ABOUT SEXUAL ASSAULT, WOMEN AGAINST VIOLENCE AGAINST WOMEN)

**R**ape myths minimize, legitimize, and/or deny the occurrence of sexual assault. They make it possible to blame the victim and make excuses for the perpetrator. These myths perpetuate sexualized violence because they fail to address the realities of sexual assault.

**Myth 1:** The best way for a woman to protect herself is to avoid being alone at night in dark, deserted places such as alleys or parking lots.

**Reality 1:** Most assaults occur in private homes (60 per cent) with most of these occurring in the victim's home (38 per cent). Most victims of sexual assaults know their attackers.

**Myth 2:** It is not an assault if a person consents to sex but change their mind and their partner doesn't stop.

**Reality 2:** Legally, a person has the right to change their mind at any point during sexual contact. If a sexual partner does not stop when a person says "NO!" this is sexual assault. Even if a person is in a relationship with someone or has had sex with that person before, they can still be sexually assaulted. Consent must be given every time two people engage in sexual contact.

**Myth 3:** Women secretly want to be raped.

**Reality 3:** There is a difference between fantasizing about aggressive sex and wanting to be raped. A woman is in control of her fantasies. Women are not in control when they are being sexually assaulted. Rape is a violent, terrorizing, and humiliating experience that no woman wants or asks for.

**Myth 4:** Rape is a sexual act that is *taken too far*.

**Reality 4:** Rape is an act of *violence* involving asserting control over another person and taking their power away from them. Rapists cannot control their sexual desires. Rape is often a premeditated crime.

**Myth 5:** Women *ask for it* by the way they dress or act; rape only happens to young *sexy* women.

**Reality 5:** According to accounts of rape, women are targeted based on their vulnerability, not their physical appearance. Females from two-months-old to 90 years old have been sexually assaulted. However, most women who are sexually assaulted are between the ages of 14 and 24.

**Myth 6:** It's okay to have sex with a person who is drunk or passed out from drinking too much.

**Reality 6:** Legally, a person who is unconscious or has impaired judgement due to alcohol or drugs cannot give their consent. Having sex with someone when they are intoxicated is sexual assault.

**Myth 7:** Women cannot rape other women.

**Reality 7:** Anyone can be sexually assaulted and emotional, physical, and sexual abuse does happen in same sex relationships. Women who are assaulted by other women often fear they will not be believed. It is important to realize that women who are assaulted by other women experience trauma as well.

**Myth 8:** Men of certain races and backgrounds are more likely to sexually assault women.

**Reality 8:** Men who commit sexual assault come from every economic, ethnic, racial, age, and social group. Women who are sexually assaulted are from every economic, ethnic, racial, age, or social group.

If you, or someone you know, have been sexually assaulted it is important to know that it is never the survivor's fault. Rape myths are often internalized and intensify a survivor's feelings of shame, self-blame, and fear of not being believed. We need to challenge myths that perpetuate and normalize sexual violence.

Source: <http://www.wavaw.ca/media/Myths.pdf>

According to the federal government, young Aboriginal women are five times more likely than other women of the same age to die as a result of violence. That figure could be higher since police often don't record whether or not a victim of crime is Aboriginal. Despite these statistics and recommendations from Amnesty International (AI) and the Native Women's Association of Canada (NWAC), the government has yet to adopt a comprehensive reporting protocol for police that recognizes the specific risks to Aboriginal women

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## Elder Abuse

by DOUG LAHACHE, COMMUNICATIONS COORDINATOR

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They've given them a year to report back to the status of such cases. These are not new calls for action and, to date, the Canadian government has done little to improve the situation.

The Native Women's Association of Canada (NWAC) has partnered with Amnesty International to raise awareness and get government action on the Stolen Sisters campaign. You can get more information, sign an online petition, and help spread the word at [http://www.amnesty.ca/campaigns/sisters\\_overview.php](http://www.amnesty.ca/campaigns/sisters_overview.php).

A report by NWAC documents 520 Aboriginal women who have either disappeared or been murdered, most within the last 30 years. 43 per cent of the murder cases remain unsolved.

Tiffany Morrison, 25 years old, of Kahnawake, has been missing since June 18, 2006. The Kahnawake Peacekeepers have asked that anyone with information on her disappearance contact Ed Stacey at 450-632-6505 or the Crime Stoppers Tip Line at 450-632-2802.

Sources: <http://www.cbc.ca/canada/story/2008/11/24/missing-women.html>  
<http://www.amnesty.ca/campaigns/>

In its many and diverse forms, violence is essentially a phenomenon that was not known historically by Iroquoian society.

More recently, the gap is widening between the values of our ancestors and the values we live by today. We believed that one's right and privilege never exceeded one's duties and responsibilities to the collective. Today, we fight more for personal rights, freedoms and personal gain. We fight for them, cheat to get them, and dodge our own responsibilities and obligations.

Though difficult to comprehend, many forms of violence against our children, our spouses, our disabled and our elders are on the increase. Domestic violence can be broadly defined as a pattern of abusive behaviours by one or both partners in an intimate relationship such as marriage, dating, family, friends or cohabitation relationships.

### The Abuse of Elders

Elder abuse is one component of domestic violence. The abuse of older adults is broadly described as harmful acts toward an elderly adult, such as physical abuse, sexual abuse, emotional or psychological abuse, financial exploitation, and neglect.

The World Health Organization defines abuse of older adults as "a single or repeated act, or lack of appropriate action, occurring in any relationship where there is an expectation of trust that causes harm

or distress to an older person". Unfortunately, according to these definitions, elder abuse is alive and prosperous in Kahnawake. We don't always hear about it because the majority of the abused are too ashamed to speak about it.

### Offering a Way Out

Sometimes, people know or suspect that a friend, family member, neighbor or acquaintance is being mistreated or abused and they are not sure what to



Photo by Neil, flickr

do. Most worry about getting involved by not saying the right thing or being accused of wrongly identifying the situation.

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## Bullying: How Can I Help My Child

by CHAD DIABO, PROMOTION & EDUCATION

**R**aising the subject with a child that you know or suspect is being bullied.

- Find a quiet place to speak to the child where you won't be interrupted.
- Tell them you are worried and that you want to help. Tell them that helping them to be safe and happy is the most important thing for you.
- Ask them if they are being bullied and if they want to discuss it.
- Remember that it is not easy to admit to, so praise them for managing to do this.
- Let them know that they have a right to get help and that you will help and support them in getting assistance from other organizations. Assure them that you will not go behind their back or do anything to get help without talking to them and having their agreement. It is important that you make this commitment and honour it.
- Listen without judging. Be sensitive to the child's needs and fears. Sometimes, children who are bullied may fear your reaction as their parent or caregiver. They may feel that you will be ashamed or angry with them for *being weak*, that you will personally intervene with the bullies, or that you will tell them to stand up for themselves. Be aware of these fears and try to set them at

ease. If you do feel exasperated or angry, remember that this is the effect that bullying has and that you will only make things worse for a child by expressing anger or frustration.

- Encourage and help the child to record and report any incident of bullying to you and a member of staff at their school, youth club, etc. Insist that the organization take action to stop the bullying.
- The child should never endanger themselves by standing up to bullies in a situation where he/she is outnumbered. If scared, they should run away and try to alert attention by shouting for help. Reassure him/her that it is far more shameful for a group of people to gang up on one person than for that person to get out of the situation.

If your child tells you who is bullying them, you may be tempted to go and talk to this person(s) directly or to speak to their parents/caregivers. This is a bad idea. Firstly, this usually make things worse for your child and gives the bullies more

to humiliate them with: *You can't stick up for yourself, you have to get your mom/dad to do it for you*, etc.

Secondly, if you approach another child or young person and accuse them of bullying you may lay yourself open to accusations of threatening behaviour. If you confront his/her parent directly, you may both get very angry and end up in a situation that makes life more difficult for your child. Wherever possible, take action through the school or the



Photo by Thomas Ricker

Kahnawake Peacekeepers.

Some types of bullying behaviour are against the law. The Peacekeepers will take them seriously and offenders can be prosecuted. For example:

- Theft of, or damage to, valuables (e.g.: jewellery, personal stereos, cell phones, designer clothing).
- Serious physical or sexual assault.
- Malicious or threatening phone calls, emails or text messages.
- Harassment and defamation online.

If a child in your care or one of their friends is experiencing bullying of this kind, you should help them to keep the evidence (e.g. photographs of damaged property and injuries;

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## Teens and Sexting

by BRIAN WILLIAMS, PROMOTION & EDUCATION/COMMUNICATIONS

**S**exting is the act of sending a nude, erotic, or otherwise sexual image of one's self to someone else over the cell phone.

Exchanging photos and messages with sexual content as a way of flirting has been going on for years and advances in technology have made it easier for teenagers to do so without the knowledge of their parents. "Young people are sexual beings who have explored their sexuality in all times, and all cultures and all places," says Peter Cumming, a York University professor who wrote a paper on children's sexuality.

The reality of technology and the Internet is that once an image or message is out there, the owner is no longer in control of it. A private photo is not private once it's shared.

Teenagers are known for making snap decisions and do not always think about the consequences of their actions. Most often when teenagers send out nude pictures of themselves to another teen the worse thing they face is embarrassment if their photo gets out. However, the sad and heartbreaking cases of 13-year-old Hope Witsell and 18-year-old Jesse Logan highlight the worse case scenario. Both girls had sent their nude pictures to boys they liked, and somehow those photos got around to other students at their respective schools. They were bright, cheerful, girls with promising futures, who ended up taking their own lives.

### Why?

Witsell and Logan became the target of bullies after their photos got out. They suffered incessant harassment by their classmates and were subjected to cat-calls and name



Photo by Meryl Swiatek

calling at school. They did not feel comfortable discussing their experiences with school counselors or family members and never found a healthy outlet for them. For Witsell and Logan, suicide was the only way they felt they could end their torment and in the process they left behind devastated family and friends.

Some professionals, like Cumming, argue that activities like sexting are safer than traditional sexual games (spin-the-bottle, playing doctor, strip poker, etc) because there is no immediate physical contact and

are thus less likely to lead to pregnancy or sexually transmitted infections. However, whatever safety from physical disease these technological means of flirtation provide, they do not protect someone from the emotional pain of having their private photos and messages shared with untold numbers of strangers. Nor does it protect them from the feelings of shame or the bullying that comes afterward.

Teenagers need to be made aware of the risks of sharing intimate and sexual images of themselves, which run the gambit of harassment, humiliation, blackmail, and sexual assault among others. Encouraging an open dialog with your teenager on sex, technology, and their cell phone and online actives is a healthy way to limit their likelihood of engaging in this behaviour. Remember to show support if they already have and are now facing the fallout.

*Sexting. Wikipedia.com. Web. 11 Jan. 2010. <http://en.wikipedia.org/wiki/Sexting>*

*Comte, Michael. 'Sexting' No Worse Than Spin-the-Bottle: Study. The Windsor Star. 27 May 2009, n-pag. Web. 11 Jan. 2010. <http://tinyurl.com/ybosess>*

*Inbar, Michael. 'Sexting' Bullying Cited in Teen's Suicide. Today/MSNBC.com. MSNBC, 2 Dec. 2009. Web. 11 Jan. 2010. <http://tinyurl.com/ydshkzr>*



# Wellness: Taking Care of Your Whole Self

Submitted by JEAN O'CONNOR, CASE WORKER

## What is Holistic Medicine?

In our society, it is common to think of wellness as the absence of illness. Holistic medicine emphasizes the need to care of the whole person – body, mind and spirit. The basic principal of holistic medicine is that optimal health results from harmony and balance in the physical, environmental, emotional, spiritual and social aspects of our lives.

## How to improve physical health

- exercise regularly
- eat a balanced diet
- drink lots of water
- practice abdominal breathing

## How to improve your environmental health

- go outside to get fresh air (indoor air can be as much as 100 times more polluted than outdoor air)
- sleep with your bedroom window open
- keep indoor plants
- take frequent breaks away from your computer
- clean carpets and rugs regularly with non-toxic cleaners
- ensure both your home and workplace are well ventilated

## How to improve your mental health

- replace negative beliefs with positive ones
- meditate
- pay attention to your dreams
- have a job you find fulfilling
- laugh
- regularly do something that you enjoy
- keep a journal
- practice breathing techniques

## How to improve your spiritual health

- pray
- meditate
- be grateful
- regularly take part in spiritual practices
- find spirit in nature, outdoors is an ideal setting to connect with your spirituality.

## How to improve your social health

- forgive yourself and others
- make and keep friends
- volunteer
- foster committed relationships



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copies of malicious emails or text/phone messages, along with the date and time they were received and the email address or phone number that they were sent from); and you should encourage and support them in reporting the incident to the Peacekeepers.

If a child or young person has been physically or sexually assaulted, contact the Peacekeepers immediately at 450-632-6505. Again, you should try to get the child's agreement to do this. You want to support them, not work against them. If your child tells you that he/she is



Photo by John Steven Fernandez

being abused during your conversation it's important to listen to them and believe them. For help and

guidance, or if you have concerns and are not sure how to act on them, contact the On-Call worker at 450-632-6880, 24 hours a day, seven days a week. If you suspect that your child may be abused but they don't actually admit that they are, ask them again what is upsetting them. Reassure them that you will help them no matter what the problem is and that nothing will change that. If you are caring for the child as a result of existing child protection concerns, report any worries that you have to the child's social worker.

# The Language of Flowers

by MARIE DAVID

Flowers are sometimes given on Valentine's Day, along with chocolates, jewellery, and cards. Whether you're on the giving or receiving end...you should know what you're communicating with your flower choice. That's because flowers have a language all their own.

Roses are the flowers most often associated with love but did you know your choice of colour is sending a message? For instance, what's the difference between sending red roses or pink ones? For roses:



- Red is the colour of passion, love, beauty, courage, and respect. Red roses say *I love you*.
- Yellow is the colour of joy and friendship.
- White is the colour of purity and innocence.
- Pink conveys happiness and friendship.

If you give a bouquet of roses, mixing the colours says things as well,

- Red and white: indicates bonding, harmony, and true love.
- Red and yellow: speaks of happiness and celebration.
- White and yellow: are a symbol of harmony and unity.

A single rosebud sends messages as well...

- A red rosebud: conveys purity and love.
- A white rosebud: speaks of purity, innocence, friendship, truth, and virtue.
- A yellow rosebud: denotes joy, friendship, and true love.

- A thornless rose is a symbol of attachment and love at first sight.

Of course, you can give flowers other than roses too, especially if they are a favourite of the recipient.

- Carnations: are a symbol of fascination and devoted love (though different colours can mean different things).
- Daisies: convey innocence, loyalty, purity, and beauty. It also denotes silence, as in keeping secrets.
- Freesia: mean innocence and trust.
- Iris: are a symbol of faith, wisdom, hope and valor.
- Lily: denotes majesty, purity, innocence and pride.
- Tulip: speak of a perfect love, a declaration of love.

Sources: <http://marriage.about.com/od/flowers/a/flowermean.htm>  
<http://www.meaningofflowers.ca/the-meaning-of-flowers/>  
<http://www.flowersforcanada.com/index.asp?PageAction=Custom&ID=7>

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The abused elder has the right to choose where and how to live, unless they are unable to care for themselves or their lives are in danger. Occasionally, the abused person may choose to stay in the situation rather than choose an alternative. However, more often, victims stay in the abusive situation because they are unaware of the options available to them. Providing them the information they need to make informed choices or connecting them with support services can be incredibly helpful.

It may also be appropriate to offer assistance to the suspected abuser. Counselling and support services may help alleviate the factors that contribute to the abuse.

If you know or suspect someone is being abused, make the effort to reach out to the person and talk to him or her and let them know there are options.

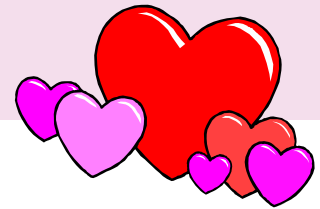
For additional resources on domestic violence and elder abuse see the contact information at the end of this publication.



# The Back Page...

"My bounty is as boundless as the sea; my love as deep; the more I give to thee, the more I have, for both are infinite. "

William Shakespeare, *Romeo and Juliet*



## Are You A Victim of Abuse?

by *CHRISSEY TAYLOR, PREVENTION/EDUCATION*

**A**sk yourself if you are being abused. Start with the following questions.

1. Does your partner continually criticise what you wear, what you say, how you act and how you look?  
Yes  No
2. Does your partner often call you insulting and degrading names?  
Yes  No
3. Do you feel like you need to ask permission to go out and see your friends and family?  
Yes  No
4. Do you feel that no matter what you do, everything is always your fault?  
Yes  No
5. Do you feel like you're always walking on eggshells trying to avoid an argument?  
Yes  No
6. When you're late getting home, does your partner harass you about where you were and who you were with?  
Yes  No
7. Is your partner so jealous that you're always being accused of having affairs?  
Yes  No
8. Has your partner threatened to hurt you or take the children if you leave?  
Yes  No
9. Does your partner force you to have sex?  
Yes  No
10. Has your partner threatened to hit you?  
Yes  No
11. Has your partner ever pushed, shoved or slapped you?  
Yes  No

If you answered yes to one or more of these questions, you may be a victim of abuse. The following support services are available to you. We realize that it's a very courageous thing for you to reach out for help if you are in a violent situation, there is help available for you in whatever way is most comfortable for you.

Source: *Rebecca J. Donatelle et al Health: The Basics. Pearson Education Canada. 2003. Print.*

- |   |                |
|---|----------------|
| Kahnawake Peacekeepers                    | 450-632-6505   |
| KSCS (on-call available, 24 hours)        | 450-632-6880   |
| Tel-Aide                                  | 514-935-1101   |
| Native Women's Shelter of Montreal        | 514-933-4688   |
| SOS Violence Conjugal-Domestic            | 1-800-363-1101 |
| Sexual Assault Center                     | 514-934-4504   |
| CLSC and/or the Montreal General Hospital |                |

### February is...

- Heart Month
- 2 Groundhog Day
- 12 Sexual & Reproductive Health Awareness Day
- 14 Valentine's Day

### March is...

- 8 Intl. Women's Day

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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