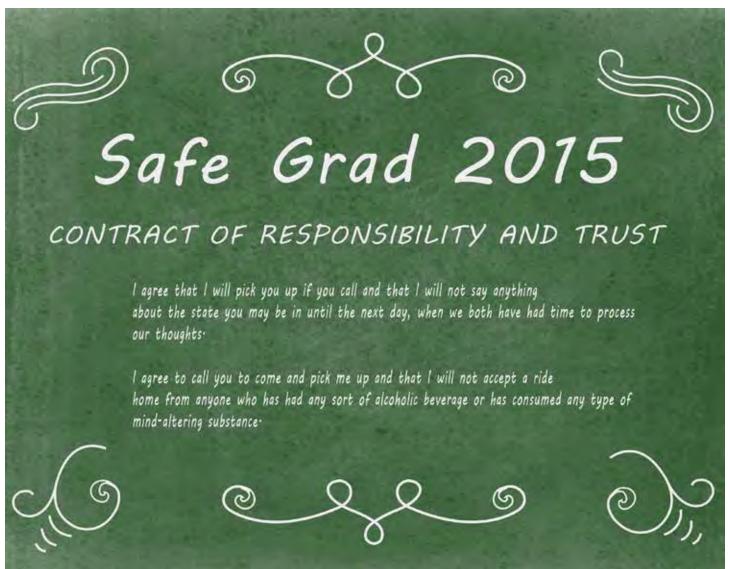


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Kahnawake's Only Health and Wellness Newsletter

Ohiarí:ha /June 2015





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Aionkwatakari:teke

Aionkwatakari:teke is a newsletter published six times a year by Communications Services of Kahnawake Shakotiia'takehnhas Community Services (KSCS). Our purpose is to provide information on health and wellness issues that affect Kahnawa'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:

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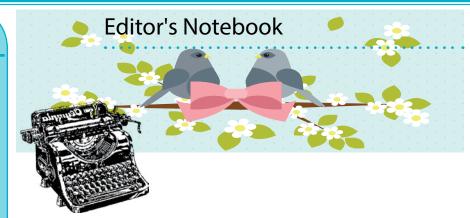
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This newsletter is intended to complement, not replace the advice of your health care provider. Before starting any new health regimen, please see your doctor.



pring is here! Finally! It seems like it would never get here but get here it did and the last few days have been wonderfully warm and sunny, maybe even – dare I say it – too hot! But I'm not complaining. Much. Winter seemed to last a little too long this year and then BAM! Summer. Let's hope winter doesn't arrive in similar fashion.

By the time the newsletter is printed, plans or celebrations are already underway as another school year ends and that means proms, graduation ceremonies, and parties. Please take heed of the Safe Grad information (some of which is included on the back page) and celebrate safely.

It's hard to believe but 25 years have passed since the 1990 "Oka Crisis." We thought we would take a look back at how KSCS mobilized to help people deal with post traumatic stress disorder. We realize that people have different ways or are at different points of dealing with PTSD or trauma, so if you feel you need help please reach out to KSCS or your family doctor for assistance.

Sken:nen, Marie

We are conducting a survey on Aionkwatakari:teke. It would help us a lot if you would take a few moments and fill it out and let us know what you think. Participants could win an iPad (KSCS staff are not eligible). Just go to https://www.surveymonkey.com/s/KSCS_newsletter and fill out the survey or catch us in the Services Building lobby. Nia:wen ko:wa!

Cover design: Marie David. The cover highlights one of the cornerstones of the Safe Grad campaign; the contract of responsibility between a parent and their graduating child so that they can both make responsible decisions during graduation celebrations.





The First Year of College

BY SKYE NELSON, PREVENTION

ollege can be the best or worst times of your life. If you are attending college where your friends are not attending, don't worry about making friends because it's easy.

You will be with the same group of students for two or three years, depending on the program. There are many groups or clubs that you can join that will make it easier to make friends.

College is somewhere you will most likely decide on what you want to do as your future career. Some of you may decide that college is not for you, which is okay. But take the opportunity of going to school; whether it is in Canada or U.S., there is something to further your knowledge and experience.

Attending college is sometimes frightening, especially if you are just graduating from high school. When I attended Dawson College, I got lost everyday and still continue to get lost.

Don't be afraid of arriving early to class, you will have a better chance at getting a good seat and won't have 30 eyes staring you down as you walk in late. Also, don't be afraid of talking to the person next to you, you will be

sitting with them for 15 weeks. You may also become good friends with them.

There are many courses to choose from, so choose courses that interest you as they will make your work and life easier. For example, the English classes have many different subjects you can take if you have the required prerequisits e.g., I took a Shakespeare class and a class where we watched movies each week and wrote about them.

When it comes to making your schedule, I suggest taking six or seven courses so that you don't burn yourself out by week 15.

There are options of taking intensive courses, which is a two week course taken each day that will be equivalent of taking a 15 week class. There is also summer school and there are night courses from 6 – 9 PM or 6 –10 PM you can do twice a week.

When you do have those two-hour breaks, I suggest exploring or catching up on homework in the library. Take advantage of tutors, meeting with group members to work on a project, or studying in the library because when you get home, you won't need to do anything.

Also, do your papers a few weeks before the due date. You won't stress yourself out because you are pulling an all-nighter to finish an eight page research paper the night before you're supposed to hand it in.

Make your college years memorable. Make friends and enjoy the new chapter in your life because it is for your future. Good luck future college students!

Suicide Chronicles: Slow Suicide, Slower Healing

BY CHELSEY LUGER & GYASI ROSS, REPRINTED AND EDITED WITH PERMISSION FROM INDIAN COUNTRY TODAY

"Drinking would shut down my seeing and my hearing and my feeling," she used to say. "Why would I want to be in the world if I couldn't touch the world with all of my senses intact?"

- Grandma from The Absolutely True Diary of a Part-Time Indian by Sherman Alexie

"In the moral universe all activities, events, and entities are related, and consequently it does not matter what kind of existence an entity enjoys, for the responsibility is always there for it to participate in the continuing creation of reality."

- Vine Deloria Ir.

In order to participate in this "continuing creation of reality" — the vitality of our communities — we have to be alive. That's step one. Not just to exist but to be alive. Present. Engaged. Aware. Intact.

Suicide is not necessarily an isolated event. It is not always a single incident — a gun, a rope, a jump. These things happen but are only part of the story.

The spirit of suicide is capable of longevity, of persistence, of gradual distinction. It can be sneaky, subtle, and even subconscious. I'm talking about slow death by suicide: the kind of killing that creeps up on us in the form of poor health and bad habits.

Life is not black and white. There's a lot of opportunity to save or revive those in our community who, for whatever reason, are only partially alive — but first we have to understand what that means.

Self-destruction: something that we need to acknowledge and stop in order to save ourselves.

In Indigenous North American communities, slow suicide is a common problem. Alcoholism, drug abuse, obesity, diabetes, improper tobacco use, accidents, and other variables and conditions associated with those account for thousands of deaths every year among Indigenous people. Very often, these deaths are not categorized as suicide.

But if we shift the paradigm from a non-Western perspective and move toward an all-encompassing, Indigenized approach, we are able to take

a step back, look at the whole picture, and clearly see that in many cases these

"other" types of death are, in fact, suicide in disguise.

SLOW SUICIDE BY ALCOHOL AND DRUG ABUSE

First, let's talk about alcohol and drug

"I don't think that hanging, taking pills, shooting yourself, is the only form of suicide. Drinking yourself to death is also a form of suicide."

"Rotting your brain with liquor is a form of suicide because you've rotted it so much you don't have the cognitive ability to raise a child."

— conversation
between two
Indigenous social
service workers, from
"Rebuilding our
community": Hearing
silenced voices on
Aboriginal youth
suicide, published
in Transcultural
Psychiatry, February
2014. Melissa L. Walls,
Dane Hautala, Jenna
Hurley.

abuse. We know that these things kill us and cause health problems: that's obvious.

Strictly speaking, alcohol alone is involved in at least one-third of all suicides — people under the influence simply become less capable of making good decisions. Inhibitions aside, sometimes "liquid courage" emboldens folks to become brave enough kill themselves in a solitary suicidal act.

But these numbers do not include slow suicide; it's infinitely more common within our communities for alcohol and drugs to kill you over time.

We should acknowledge these deaths as a form of

suicide. Bringing this form of self-destruction out of the subconscious to

a state of awareness is the first step in becoming well again.

When you allow drugs and alcohol into your life on a regular basis, you are killing yourself slowly. It's harsh but we have to face the reality in order to change it.

SLOW SUICIDE BY FOOD AND SUGAR

Next, let's talk about eating and drinking unhealthy stuff. Sometimes our people get uptight when folks talk about our food — "You think you're too good for our food!" No. Just like when we talk about any other type of suicide; IT'S NOT ABOUT JUDGMENT OR SHAME. It's about HEALTH. It's about LIFE and about predatory economics and history.

There's a reason why we've been trained to eat in this unhealthy manner; it didn't come from us. That said, it's odd that alcohol and drug abuse are the only two things technically categorized under substance abuse, because unhealthy foods and drinks are also addictive, toxic, and extremely damaging to one's body — capable of killing. These are dangerous substances that are commonly abused because they are addictive. Again, substance abuse.

Today, because of the rapid change from an active to sedentary lifestyle, along with the prevalence of high fat foods in our communities, obesity is one of the most serious public health problems facing all Indigenous people — including children. And the problem doesn't end at being overweight—the problem is that being overweight leads

to other things: hypertension, diabetes, cardiovascular disease, gallbladder disease, joint disease, and even cancer.

How can we make small changes for improving the health and wellness of our families? It starts by being honest with ourselves.

One example is to take frybread off of its pedestal. A lot of people might hate us for saying this but frybread is not power. Frybread kills us. Frybread is not traditional. It was once a way for us to make a cheap, filling food with limited ingredients but now we understand that it hurts us, so we should stop feeding it to our children. It doesn't do them any good.

There are dozens other legitimately traditional foods that are often entirely absent from our diets. Start looking into foods that are Indigenous to your homelands and incorporate those into your meals instead. Make it a priority. Buffalo, salmon, wild rice... the list goes on — these are the foods that we should really be proud of. These are real Indigenous foods. Not frybread.

Dr. Kyle Hill is an Ojibwe/Lakota clinical psychologist. He's only 30 — relatively new in the field — so in comparison to a lot of other researchers and clinicians, he has a fresh yet informed perspective regarding what we can do to improve overall community wellness.

Dr. Hill suggests that the best way to address these slow suicides is to implement the inverse: slow healing. That means: start the healing process with the kids before they even realize the healing needs to happen; while they're still innocent and impressionable.

"The issue with healthcare in general right now is that we treat the symptoms, we intervene, but we don't foster healthy growth. But it's really about restoring a healthy developmental trajectory from an early period," he explains.

"For example, in schools — instead of saying the pledge of allegiance every day, say a prayer in the Native language. Instead of nap time have gardening time. Have classes where the kids build sweat lodges. There's science in that stuff — it's our science. Developing social/cultural capital at a young age... that's sovereignty. That's health."

We talk about sovereignty, we talk about self-determination, and sometimes we forget that the next generation is where our power really comes from. We have the opportunity now to set our children up for success. But all of this is rooted in public health. We can't allow ourselves to continue succumbing to the perils of post-colonial life. If we remain fully alive and intact, if we simply avoid substances — we will see the end of slow suicide and the return to real sovereignty.

Dr. Hill puts it like this: "You know that saying 'it takes a whole village to raise a child'? That's really true. That's what's going to bring us back."

aabizhiishin: s/he revives, comes
to; s/he comes alive again
— definition from the
University of Minnesota
Ojibwe People's Dictionary

Continued on page 11.

Post-Trauma Reaction

KSCS and the 1990 Crisis

BY SUZY GOODLEAF, M.ED, PSYCHOLOGIST, O.P.Q.

he Crisis of 1990 still rings clear to the ears and minds of all those who survived that historic summer. For many, this was a summer of proud defiance, as we stood up for our rights and our land; sister communities coming together to support and defend each other, as had never been seen before.

There was a surge of unity and pride amongst all Indigenous people, giving a clear message to the Canadian government that we are here, unafraid and ready to fight.

As we personify strength, unity and fearlessness to the enemy (the government), there is, unfortunately, a toll on the human system.

In a situation of danger — or perceived danger — the body protects itself from emotional and physical harm by shutting down some of the emotional processing, in order to fully be ready to fight and protect.

Whether people were on the front lines at the barricades or the Treatment Center or going on food runs across the police lines on boats, cars or by foot, providing emotional support for elders or children or simply sitting by the TV or radio waiting for the latest update — we were all traumatized and our feelings were put on hold until the crisis was over.

As a health care provider and front line social worker working for KSCS during this time, the team I worked with recognized that our communities were severely impacted by the 78-day standoff.

We consulted with trauma experts to find the best method for processing such trauma; we chose structured healing circles.

At the onset, KSCS organized a debriefing process for our whole staff. About 50 community and non-community staff members came together and experienced the first debriefing process.

The events of the 78 days were put together, as each participant expressed their memories, thoughts, and feelings about what they had experienced.

Although we were all in different places physically during this time, each person's story helped to open a memory that each of us could relate to, and we connected more fully as a group.

It was difficult to hear some of the stories that our own had endured at the hands of misinformed, angry non-Indigenous people. But allowing the feelings of anger, vulnerability, fear, and even shame come through, allowed us to connect with each other and — more importantly — to reconnect with ourselves.

The process of debriefing in a safe environment, allowed all of us the opportunity to access those feelings that had been frozen inside. This then freed us to be emotionally available for others who also needed to debrief.

It became clear that everyone in Kahnawake should have an opportunity to heal (debrief) from the Mohawk Crisis. A crisis team was set up and operated for two years out of the old White House near the Band Council offices.

The goal of the program was to help people debrief as soon as possible after the event to prevent the development of post traumatic stress disorder (PTSD).

The mandate of the team
was to reach out to as many community members
as possible, to allow
them to debrief the memories, thoughts and feelings
experienced during the
Crisis period.

Healing circles were then offered to all community organizations and families.

Many participated, but many preferred to speak in private or simply within their families.

Another
team of
community
members, who were
coached in trauma
and the debriefing process, was established
to go from house to house
to give people
a private

and more

personal opportunity

to express their

feelings.

People were at different levels of processing this trauma, and although there was a united front for all of Kahnawake and Kanehsatake in 1990, there were many private struggles, personal and family disagreements about the bar-

ricades and the handling of the crisis.

Many people were not able to express their views because of a greater fear from the common enemy: the government.

Withholding one's true feelings can cause a more complex trauma situation, which is more difficult for an individual to process. The process of healing from a trauma is simple, yet complex; it requires the ability to find a safe person and place to reconnect with the difficult memories. and to allow the frozen feelings to come through.

This process can be very

frightening, and

many people

prefer to leave the

past in the past; saying "It isn't bothering me so why talk about it?"

But for some who experienced the 78 days standoff, they may still have a startled reaction today when they hear the noise of a helicopter overhead. This is because they have experienced trauma but are missing access to pieces of themselves, usually feelings. Eventually, an accumulation of non-processed traumatic material can cause symptoms known as PTSD.

Although these symptoms can vary from mild to severe in individuals, it can lead to difficulties in functioning. PTSD symptoms can be divided into three basic categories:

- The individual may feel as though they are re-experiencing the event (flashback).
- The individual will do everything to avoid thinking of the event, including avoiding people, places, or any reminders.
- The individual will have a more generalized anxiety or arousal, including constantly being on guard for danger or be easily startled (DSM).

As Indigenous people, this is compounded by the fact that we also hold the blood memory of the historic trauma experienced through the excessive losses and the implementation of governmental legislation over the past two centuries.

Trauma is held personally and is transmitted over generations. Most people do not realize that they carry it, but being repeatedly told that we are no good for who we are, can create a soul wound, and lead us to be insecure in our identity as Indigenous people.

For those of us who lived through the Mohawk Crisis of 1990, we have experienced a life-changing event that has undoubtedly made us stronger.

However even after 25 years some of us may still need healing. This will come through self-awareness, open mindedness and an ability to reach out for connection.

One of our resiliency traits as Mohawk people, as cited in the Roots of Resiliency Project, is "having the need and willingness to build stronger relationships and connections with each other" (Phillips, Dandeneau, and Kirmayer, 23). This is our continued path to healing.

Source:

American Psychological Association. Diagnostic and Statistical Manual of Mental Disorders, 5th ed. Washington, D.C.: American Psychological Association, 1994. Print.

Phillips, Morgan Kahentonni, Stéphanie Dandeneau, and Laurence J. Kirmayer. Roots of Resiliency: Stories of Resilience, Healing, and Transformation in Kahnawake. A Community Report. Network for Aboriginal Mental Health Research. Montreal. 2012.

llustration by John Kahonionhes Fadden and the Six Nations Indian Museum. Used by permission.



Addressing Residential School Student Needs

Traditional Support Program

BY MERRICK KAHRONIAKETE DIABO, PREVENTION

n the 1870s the federal government aided in the development and administration of Indian residential schools, separating well over 150,000 Indigenous children from their families and communities in Canada alone.

Prior to the actual implementation, the federal government established two primary objectives of the residential schools:

- "Remove and isolate children from the influence of their homes, families, traditions and cultures."
- 2. "...assimilate them (the children) into the dominant culture."

All Onkwehonhwe, no matter what nation they belong to, share similarities within their communities. One striking similarity is that they have people who were directly impacted by the residential school system or indirectly through multi-generational impacts.

There are several stories that have been shared since the 1870s. Some accounts contain reports of sadness, malnutrition, physical and sexual abuse, while others have accounts of being treated with respect, with recollections of laughter, and a sense of belonging and purpose.

No matter what the memories are that are carried forth, our communities are entitled, almost obligated, to inquire about those moments in our collective history so that we may have a broadened sense of where we are and where we want to be in the future.

In terms of the future, it has been seven years since Prime Minister Stephen Harper delivered the apology on behalf of the government of Canada. This apology was delivered nationally and observed by millions to start the reconciliation and resolution process for surviving students of the governmentally implemented Indian residential school system.

Since Harper's mediocre apology, the government of Canada made movements towards monetary contributions towards survivors entitled the *Indian Residential Schools Settlement Agreement*.

The settlement was negotiated by representatives from various Indigenous organizations, church entities and legal representatives for former students. This settlement agreement could only be reviewed after filling out a common experience survey which indicated their experiences, and the duration of the stay.

Eligible applicants who applied for the *Common Experience Payment* (CEP) were qualified to receive \$10,000 for their enrolment in residential schools and \$3,000 for each subsequent year of attendance.

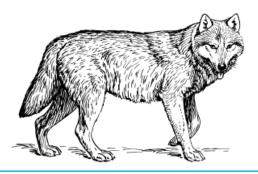
In an ideal world this monetary settlement could solve so many problems; however, we know that this isn't entirely true as the memories tend to resurface. We are aware that even reading this article may trigger some reactions and memories within the community.

However these memories — whether they're good or bad — have value, so much so that KSCS has implemented a shakotisnien:nens traditional support counsellor to address students needs. The former students will be able to access traditional as well as contemporary support from healing circles, support groups, sweats...etc.

In addition, this support is not just subject to residential school students, but day school students, and families who express difficulties as a result of multi-generational trauma. If you would like more information, please call Merrick Kahroniakete Diabo at the Family and Wellness Center at 450-638-0408.

Source: Statement of Apology – to Former Students of Indian Residential Schools. Prime Minister Stephen Harper: Government of Canada. 11 June 2008.

Illustration by John Kahonionhes Fadden and the Six Nations Indian Museum. Used by permission.





Profile: Skye Nelson

BY TYSON PHILLIPS, COMMUNICATIONS



Skye Nelson. Photographed by Tyson Phillips.

hen Skye Karonhiano:ron
(Precious Sky) Nelson
was a teenager, she never
imagined that she would be a social
worker. That all changed when Skye was
finishing high school and decided to
continue her education.

By the time this issue is printed, Skye will have graduated from Dawson College as a social services technician. "It has been a hard four years, I've worked very hard to get to where I am today and it is worth it," said Skye. Originally from Kanehsatake, she moved to Kahnawake at the age of three when her mother remarried.

"I was a rebel when I was a teenager. There were things I did that I am not proud of," she admits. "By the time I turned 17, I knew I had to smarten up. The guidance counsellor at the Kahnawake Survival School (KSS) introduced me to social work. I applied at Dawson College, never thinking I would get it."

The social work program is a three year program; however Skye is in her fourth year. "I didn't want to burn myself out, so I took fewer courses. With working part time and doing stages, I couldn't fit everything in."

Going to school to be a social worker has a stereotype attached to it. "Many people have told me I will become a worker who breaks up families and takes away children. I had to explain that social work is not just youth protection."

Skye started working part time at KSCS last fall where she worked in Prevention with Mary McComber. "I've learned a lot at KSCS. I love working with people and I enjoy working with our youth the most." Skye has also co-facilitated a young women's group and a social development group at her former school, KSS. "The last group I worked with were grade one and two students." To round out her stage, she's also done intake work and individual / family assessments.

Thinking beyond graduation, Skye would like to work for a year and then attend a university and is actually considering living somewhere else while furthering her education. "I have friends who go to university in Syracuse, New York, and another friend who went to university in Nova Scotia," she explains. "I'd like to see what else is out there and experience life outside of Kahnawake."

Skye tries to emphasize continuing education in her work with youth groups, telling them that there is a big world outside of Kahnawake that is full of possibilities.

"Take the opportunity and continue your education after high school," she said. "You will learn so much and will experience new things. I was a bit nervous going to school in Montreal," Skye admits. "It turned out to be great. I loved going to college. Continuing your education will open up so many doors for you in the future, take advantage of this great opportunity."

Family Emergency Preparedness

How We Can All Chip in and Help

BY KELLYANN MELOCHE, EMERGENCY PREPAREDNESS & PLANNING

Ithough emergencies and disasters don't happen on a daily basis, we need to be prepared for when it occurs. The sudden disruption of your daily life can cause havoc if you're not prepared.

Think about driving to school or work: you suddenly get a flat tire and you don't have a cell phone to call for help. Are you prepared to change your own tire? Do you have the knowledge and tools to do so?

Now imagine while you're at home with the family, the power goes out and the basement (or even the neighborhood) begins to flood. What are the steps that should be taken to mitigate further damage and not cause injury?

Each member of the family has a role in family preparedness. Knowing what the essentials are and who is responsible for them is the first step. Review this to do list and discuss with your family what they can be responsible for:

Determine who would be your outof-town contact. Write down all their information/location along with phone numbers that each family member could contact in the event you get split up and cannot return home.

Determine a meeting place in case you have to evacuate your home.

In the event that you can stay home during an emergency, **make sure** you have an adequate water supply and dry goods to sustain each family member for three days. This will allow enough time for emergency workers to set up shelters if needed.

Prepare an emergency preparedness kit that includes flashlights, candles, batteries, a spare radio, and other essentials.

You can find a complete listing of an emergency kit on the Kahnawake.com website under Community Protection. Go to emergency planning/ preparedness campaign.

Discuss what types of emergencies could affect your area. Do you live near a highway or the train tracks? Know how to respond in the event of a chemical spill and where you would get reliable information (K103 radio).

Does your family have pets? Who would be responsible for their care and feeding during those times? Is there back-up food for them as well?

The biggest step in family emergency planning is discussing it. Once you've talked about it and decided who would be responsible for each step, then you can test out your plan.

Just like you should hold evacuation tests in your home each time you change the batteries of your smoke detector (twice a year), you can hold an emergency exercise. Perhaps try contacting your out-of-town contact. Hold a small drill in your home. Pretend there's a flood and try out the steps of your plan.

Knowing the potential of an emergency is there and what you can do about it is a great accomplishment in preparedness. Practicing will help you to be physically and mentally preparedness when the real emergency strikes.

To learn more about the hazards in your area and how to prepare for them contact the Emergency Planning department at 450-632-7500 ext: 2529.

Kellyann Meloche is the general manager with Emergency Planning & Preparedness.

Graphic from Pixabay.



How We Label Our Children

BY KATERI OESTERREICH, PREVENTION

eterosexism, according to the dictionary, is the discrimination or prejudice by heterosexuals against homosexuals.

It is a term that describes the social fabric of our society. A heterosexist society makes two assumptions: everyone is heterosexual and everyone belongs to one of two genders.¹

As parents, we need to understand that children by the age of three are able to identify gender and can identify themselves as male or female. By this age they start to identify the difference between genders.

Raising a child who is open to diversity starts at a young age; it's about how we interact and speak.

How do we do that? By becoming aware of heterosexism and doing our best to remove it from our everyday language is a start.

Examples of heterosexism are everywhere. It starts with the language we use with our child; small comments such as:

Parent to daughter: "Awe, so cute. Is that your boyfriend?"

This implies to your female child that they should have a boyfriend. It seems innocent and cute; however, the long term message implies that a girl has to have a boyfriend and anything other than that is not ok.

Parent to son: "You can't play with that toy, it's only for girls."

1 http://gayteens.about.com/od/ glbtbasicsforteens/f/heterosexism.htm This implies that your male child shouldn't play with certain toys because it's for a girl, and playing with girl things is "bad." Liking things that are not designed for boys makes you weak or not good enough.

Co-worker to a new female coworker wearing a wedding band: "So, what's your husband's name?"

This implies to the person that they are heterosexual, yet it is possible that the woman is not.

As adults, how do we make change? How do we demonstrate diversity?

The simplest step is to change our vocabulary. Become aware of how we are inadvertently labelling our children.

Instead of asking someone what their husband's or wife's name is, ask what is your spouse's name? Or what is your partner's name?

Changing the way we speak to our children and peers, will help remove some labels and assumptions we unintentionally make. Our words and our actions speak loudly, the implications of these words can leave a mark on our child that would limit their growth because of fear; fear that they are not "normal" or that they would not be accepted.

As parents, we have the ability and the responsibility to teach our children acceptance and openness to all. Continued from page 5.

Language is very telling. There isn't a word quite like this in English. The reason words like this exist (in Ojibwe, and probably in a lot of other Indigenous languages) is because the people in the past went through struggles, too. Life was not perfect, problems abound. But still, there was always opportunity to revive, to renew, and to get back to the good life. That reclamation of hope was a very real, tangible concept.

Every day is full of choices, and it's never too late to start making healthy ones. Open-mindedness is tradition. Community healing is tradition. Coming alive is the best way to prevent premature death and slow suicide.

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who understands the need for awkward
conversations. www.cutbankcreekpress.com
Twitter: @BigIndianGyasi.

The original article and the rest of the series are on the Indian Country Today website http://indiancountrytodaymedi-anetwork.com/. Use the author's names as the search term. Next issue: Part V, the final part in the Suicide Chronicles.

The Back Page....

"The duty of youth is to challenge corruption."



Safe Grad 2015

BY JAMES LAZARE, PREVENTION

t's that time of year when grade II students are filled with excitement about graduation time. They're embarking on a new journey; some will continue on to university or a trade school, while others will enter the work force. It's an exciting time.

Besides exams and planning for the future, there are many things to consider when it comes to graduation such as buying the perfect dress, renting a tuxedo, renting a luxurious ride in a limousine and of course, finding a date.

There are other situations to be wary of that can be potentially fatal. Some of the risks that students may face on graduation night or at a grad party are alcohol poisoning, date rape, sexually transmitted infections, and drinking and driving.

Aware of these perils, Kahnawake Shakotiia'takehnha Community Services created a Safe Grad Awareness Campaign that is designed to educate the graduating students and the community on the dangers that can happen during graduation time.

The Safe Grad Awareness Campaign does not focus only on the risks surrounding graduation celebrations but also on the roles and responsibilities of parents or guardians.

Some of the responsibilities that parents may have but aren't aware of are the legalities of hotel room rentals and creating a safe environment for the graduate during a house party. The Safe Grad Awareness Campaign encourages a safe and healthy relationship between the parent or guardian and the graduate.

With that in mind, we offer a contract of responsibility and trust to the students and parents or guardians. The contract is an agreement between a trusted adult and the graduate in which he or she will contact the trusted adult in the event that there are complications regarding overall safety.

In turn, the adult will pick up the graduate no questions asked; however the contract also stipulates that both the adult and the graduate agree to have the opportunity to discuss the night in question in a calm and respectful manner the following day.

On behalf of the Safe Grad Committee, I would like to encourage all Kahnawakero:non to help keep the 2015 graduates safe so they can have a fun, enjoyable and unforgettable evening while celebrating this milestone.

If you see anybody driving under the influence of drugs or alcohol please call the Kahnawake Peacekeepers and 450-632-6505.

If you would like more information on the Safe Grad Campaign please contact James Lazare at 450-635-8089.

Ohiarí:ha/June

ALS Awareness Month Relay for Life Stroke Awareness Month

May 30 — Canadian Environment

June 6 Week

- 1 7 Natl. Sun Awareness Week
 - Natl. Cancer SurvivorsDay
 - 5 World Environment Day
 - 5 Clean Air Day
 - 14 World Blood Donor Day
 - 15 World Elder Abuse Awareness Day
 - 21 Aboriginal Day
 - 21 Father's Day
 - 29 KSCS Closed

Ohiarihkó:wa/July

- I Canada Day (KSCS open)
- 4 US Independence Day (KSCS open)
- 11 25th Anniversary 1990 "Oka Crisis"
- 11 12 Kahnawake Pow Wow

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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