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Kahnawake's Only Health and Wellness Newsletter

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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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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



Telcome to the October/November issue. This issue contains the last installment of the Suicide Chronicles by Chelsea Luger and Gyasi Ross, courtesy of Indian Country Today. We've been running the series for almost a year and I hope you've been enjoying it.

The series was written, according to the authors, with the intent of opening up the conversation around suicide and suicide ideation. It's to bring suicide out into the open so that it's not a stigmatized subject and individuals don't feel isolated or alone. If you haven't read the previous installments of the series, I hope you make the effort to read this one. It's written by Gyasi Ross as a letter to his nephew. In my opinion, it should be read aloud or given to someone you love who is, perhaps, struggling. It's heartfelt. It's affecting. It's powerful.

In other news, November is Spirit of Wellness month in Kahnawake and that means a whole bunch of activities and events that are aimed at improving community health on a physical, spiritual, and emotional or intellectual way. Many of the events are open to the community so I hope you make the time and effort to check out the events.

Until next time, sken:nen. Marie



Cover design: Marie David. Photographs Unsplash and Marie David.



Addictions

BY TYSON PHILLIPS, COMMUNICATIONS

ovember 16 – 22 is National Addictions Awareness Week. What exactly is an addiction? Most people think of addiction as being addicted to alcohol and/or drugs; however, you can develop an addiction to gambling, food, shopping, Internet, and others. Recent research shows that people are developing an addiction to their cellphones and other technologies.

Jaime Samayoa, a KSCS clinical supervisor of the Addictions Response Team explained what an addiction is: "An addiction is when a person is dependent on a particular substance or behavior and is unable to stop the use despite repeated negative consequences. Their behaviour follows a pattern of repetition that causes negative medical, legal, emotional, psychological, psychosocial consequences. Typically, the person continues to engage in this maladaptive behavioral pattern," Jaime said. "Certain substances and/or experiences target the reward system in the brain. When the substance is appealing, it impacts the brain in such a way that the person constantly wants that reward."

Jaime explained how an addiction develops in the brain. "The brain learns through repetition. The more the brain engages into a specific behaviour, the more neurotransmitters flow in a certain direction creating neuro paths which in turn create neuro bundles. The acquired habits driven by pleasure-seeking behaviour could develop into addictive patterns," he said. "People affected with various types of mental

health or psychological problems are vulnerable to developing an addiction. Current literature in the area of addictions make a direct correlation between people who have experienced trauma, inadequate attachment, childhood abuse or neglect as people who develop some form of addiction."

For some, gambling can be recreational and fun. Others may become so consumed and preoccupied with gambling that they neglect other areas of their life and can signal an addiction problem.

The rush of hitting the jackpot is exciting so they continue to gamble, chasing that original rush however unlikely hitting the jackpot again is. Gambling affects their finances if they cannot stop, they can become secretive, going through great lengths to hide their gambling patterns.

A glass of wine at dinner, an occasional beer with friends doesn't mean you're addicted. It's considered an addiction when the substance is abused to a degree that it causes significant and persistent problems in people's lives and they are unable to stop their use or behaviour despite repeated negative consequences.

All mood altering substances, including drugs and alcohol, target the central nervous system. Some people seek pleasure in their use; others seek to self-medicate or escape emotional or even physical pain.

Once the effect goes away, the person wants that feeling again. Crack cocaine could give a person a euphoric

Áhsen ¦3

feeling and it tricks the brain into thinking that it needs this euphoria to survive. The user takes one dose after another to not lose the high; leading to an addiction to crack cocaine. Other drugs may have similar effect. Although alcohol is legal, some will consume to get intoxicated, use every day, etc. to the point where it could become an addiction.

As Jaime said "We all have basic biological needs and instinctively seek, food, water, sex and shelter. People gamble, enjoy a day of shopping, use the Internet," he said. "However, when certain activities and substances start to take over a person's life, it is leading them to addiction."

If you feel that you need help to overcome an addiction, please contact KSCS at 450-632-6880.

The Suicide Chronicles: A Letter to My Nephew, Antonic

Part 5 of 5

BY GYASI ROSS. REPRINTED AND EDITED WITH PERMISSION FROM INDIAN COUNTRY TODAY

(Gyasi's Note: I am privileged to be able to raise my teenage nephew Antonio. This is an actual conversation with him — I asked him if it was ok if I shared. He is not suicidal nor, to my knowledge, has he ever been. Yet, that's precisely the point, right? We never know and so we shouldn't wait until we think that they might be. This is also dedicated to ALL of our little brothers and sisters, nieces and nephews, biological or not — I think they all can benefit from reading this. Chelsey and I started this series talking about "uncomfortable conversations." This is the last in the Suicide Chronicles series and hopefully a model for one of those uncomfortable conversations for those who have difficulty with them almost all of us. Thank you for reading the series and Chelsey and I truly appreciate being able to have these important conversations with you. Love you all.)

Antonio,

First and foremost, I love you, Nephew. You're one of the main reasons that I do what I do.

I remember when I was 13 years old, my little brother (young uncle) *Sutah Gyiyo* was born — the brownest, spiky-haired-est, baby-smelling-est, Indian-est boy that I've ever seen in my life. I'm of mixed blood and I love all of my ancestry. But at that moment when I saw him, I knew that I *couldn't be* anything else but Indigenous because this little

Indigenous boy was going to look up to me no matter what I did.

I resolved at that moment — the first time I held him — that I wasn't ever going to drink alcohol or do drugs. Not for moral reasons, but because I am well aware of our peoples' history with those things and it seems like they affect Indigenous men worse.

People who say that Indigenous people do *not* have a particular problem with alcohol are lying — we do and we see it. Those are mainly people from outside of our communities who say that because they don't deal with our truths and many times are ashamed of our truths. It's nothing to be ashamed of — we just gotta work hard to fix it.

Therefore, I resolved at that moment that I was going to try hard to give Sutah and you and ALL my nieces and nephews a different example than I had. Thank you for giving me the strength to do what I do, Nephew.

Since your uncle Sutah was born, I've been blessed with many nieces and nephews. You're one of the youngest, one of the babies.

I've been blessed with so many for so long that I've now seen cycles repeat themselves. I've observed the continuation of poverty, alcoholism, and drug abuse. I know that if nobody takes strong steps to change those unhealthy behaviors, they

are almost guaranteed to keep repeating themselves in our communities.

Fortunately, I've also witnessed how families can change patterns of unhealthy behavior IF they really work and remain faithful and pay attention every single day to make sure that those spirits of bad health and drugs and alcohol don't creep into their families.

It can happen.

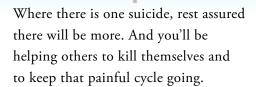
We can change our world.

It just takes hard work.

Similarly, I've seen how the spirit of suicide affects Indigenous men within our communities. I don't know if it's pride or testosterone or what, but it seems like that spirit attacks us men more than it does Indigenous women.

That's not to take away from the Indigenous women who are suffering and who *have* suffered from this spirit of suicide — but for right now, my concern is with you, Nephew. I'm speaking to you because I see so many of your friends, young men just like you, listening to that spirit of suicide... giving in to that spirit of suicide.

What you have to understand is that the spirit of suicide lies to you, nephew. You think that he wants *you*. But he's not after *you*. He wants to hurt your *family* and the ones you love. He's after your family's spirit. He's after your community's spirit.



That's the thing; suicide doesn't kill the spirit of the person who commits suicide. That's too easy. It kills their whole family's spirit.

If you were to give in to that spirit of suicide, your family will be wondering what they did wrong for years, and maybe even for the rest of their lives. They'll want to have happy memories of you, but they won't be able to.

Every single time your mom smiles thinking about you, it will quickly turn into tears and sobbing and uncontrollable sadness. There will be no more purely happy thoughts about you because every thought will lead back to "I must have done something incredibly wrong because why else would he leave us like this?"

You'd be hurting, in the deepest way, those who love you the most.

That's not an Indigenous man's role. I say that because you're almost a man—you're becoming a man. An Indigenous man's role is to protect his family. That always has been our role, since before time was called "time."

An Indigenous man's role is to feed and protect his family — to be someone that helps make his family's lives easier. Our

role is to take care of our mothers and dads as they become older.

Our roles are *not* to cause our parents and family eternal heartache. It is not to make them question themselves and to feel guilty for the rest of their lives. NO!

The men in our communities always had to think of family first — if they didn't, our communities suffered and sometimes disappeared. The men did everything they could to survive and avoid death because they knew their families needed them for protection.

They were necessary.

You are necessary.

You are loved.

There are times when you won't feel necessary *or* loved, but you are. That bad feeling will pass. I promise — it always does.

When you think your parents hate you or your girlfriend hates you or that the world hates you...they don't. That's part of the spirit of suicide's lies. It will tell you that they hate you but they don't.

They love you.

There *will* be pain and hardship and difficulty, but our people have worked through pain and hardship and difficulty for tens of thousands of years.

You need to understand that you can get through anything — just like our people always have — if you just allow

yourself time and forgiveness and space. Don't listen to the lies — this hard time will pass. I promise.

It will get better.

If I can help, I am here.

If I can *not* help, I am still here and we can work it out together.

I love you.

Your uncle,

Gyasi

ABOUT THE AUTHORS: Chelsey Luger is from the Turtle Mountain Chippewa Tribe & Standing Rock Lakota Nation in North Dakota and focuses on spreading ideas for Indigenous health and wellness. Follow her on Instagram at chelswhoelse or Twitter @CPLuger. Gyasi Ross is from both the Blackfeet and Suquamish Reservations and is a concerned dad, uncle and big brother who understands the need for awkward conversations. www.cutbankcreekpress.com Twitter: @BigIndianGyasi.

The original article and the rest of the series can be found on the Indian Country Today website http://indiancountrytodaymedianetwork.com/
Use the author's names as the search term. Our thanks to the author's and Indian Country
Today for allowing us to reprint.



Addictions & A Young Brain

BY MARY MCCOMBER, PREVENTION

Teenagers may look all grown up and at a certain age they may feel all grown up and may even have more freedom to make their own choices. However, development is a process and parents/guardians still play an important role in the supervision and guidance of youth. One area of concern: the use of drugs and alcohol.

Some youth may not be aware of the risks of underage drinking and substance use. They may disregard the risks and the possible impact on their health and development.

Aside from the fact that it is illegal for youth to drink under the age of 18 years, and that driving under the influence of alcohol or other substance can be dangerous, there are other factors to consider.

The young brain is still maturing, and "... doesn't look like that of an adult until the early 20s" (NIMH). Different parts of the brain develop at different rates and the areas responsible for "controlling impulses, and planning ahead — the hallmarks of adult behaviour-are among the last to mature" (NIMH). Of course, environmental and biological factors play a role in brain development, and individuals are different from one another.

Adolescents deal with the changes in their developing brains, as well reproductive hormones, and stress hormones can also impact the brain. As a result of research, scientists are learning that the use of substances at a young age can have an impact on the developing brain, their social behaviour, and their "lifelong mental health" (NIMH). Research also shows that the adolescent brain reacts differently to alcohol than the

adult. "Drinking in youth, and intense drinking are both risk factors for later alcohol dependence" (NIMH).

Another substance youth may have little information about is cannabis. They may think this is a "natural" drug and that it won't hurt them. According to the Canadian Center on Substance Abuse (2015), cannabis is the most reported illegal drug among youth ages 15-24 years. It is a concern because the brain is still developing and this makes them "especially vulnerable to the negative effects of cannabis use." (CCSA 1)

The earlier the regular use of cannabis starts, the greater the chance of damage to the nerve connections. This can cause problems with their thinking process, mental health and they may even become dependent on the drug.

As parents and caregivers, it is our responsibility to provide youth with accurate information about the use of drugs and alcohol. We also need to act as positive roles models, to provide youth with opportunities for support and success.

The use of drugs and alcohol by teens should not be taken lightly. If you or someone you know need further information, check the websites below for more information, talk to your doctor or health care professional, or contact KSCS at 450-632-6880.

Source: National Institute of Mental Health (NIMH). 2011. The Teen Brain: Still Under Construction. http://www.nimh.nih.gov.

The Effects of Cannabis Use during
Adolescence. 2015. Canadian Centre on
Substance Abuse. www.ccsa.ca.

Kanien'ke:ha Words

FOR FALL OR FALL RELATED ACTIVITIES

IeienthokwáhthaharvesttractorÉnska iokahkwèn:tontewheelbarrow

Atshò:kten hoe

Teká:naks rake

Tsi Thanksgiving

na'teiontenonhwerá:tons Day

Tsi niiontkonwaró:roks Halloween



Passion or Problem?

BY LESLIE WALKER-RICE, , R.N., B.SC.N. COMMUNITY HEALTH UNIT KMHC

xercise is a healthy lifestyle choice. The most recent Canadian guideline recommends a minimum accumulation of 150 minutes of physical activity per week. In fact just 30 minutes a day of moderate intensity exercise will reduce the risk of diabetes, high cholesterol, obesity, and hypertension. Most individuals have difficulty achieving this despite there being 10,080 minutes in a week.

On the flip side, there are some individuals who take exercise to an extreme. They log in hours of activity daily or exercise despite injury. They may also manipulate or exclude themselves from social or professional obligations in order to exercise. They no longer choose to exercise but are *compelled* to do so, despite the risk of adverse consequences.

Alayne Yates has deemed this behaviour as an "activity disorder" in her book *Compulsive Exercise and Eating Disorders* (1991). The cue to identifying this activity disorder is when an individual is found to be in the pursuit of excessive, purposeless physical activity. This activity may end up as a deterrent to health, both emotional and physical.

Healthy exercisers organize exercise around their lives. In contrast, unhealthy exercisers organize their lives

around exercise. For example, refusing to go to a vacation destination based on the hotel gym facilities.

Exercise addicts usually feel the need for extreme control in their lives and they may be strongly influenced by societal pressures e.g., to be thin, to be "in shape or buff." The addiction has been associated more with distinct personality types than profession.

While athletes can certainly display an intense driven quality to their training regime, there are also others who are not professional athletes who refuse to limit their activities even with injury. Training volume may be the same, but an addicted individual will not see the value in activities unrelated to exercise. There is a definite loss of balance, and the person may pass up interpersonal connections to train, run or work out.

Balance is key to healthy emotional and physical wellbeing. Choosing to exercise as an integral part of life that includes work, socialization, and family.

The first challenge of regaining balance is to recognize the addiction and work with a trainer or counsellor to plan workouts with reasonable goals including pre-determined mileage, intensity or time devoted to exercise. Balance exercise with brain enriching

activities such as learning a new skill (a language or handiwork), or schedule a "date night" with your spouse or child or a group of friends.

The goal of physical and emotional wellness can be obtained with a balance of life enriching activities — including exercise — to ensure that your passion does not develop into a problem.

References;

Gluck, Samantha. "Over-Exercising, Over Activity." Healthy Place (December 2008): n.pag. Web. Aug. 2015.

Allen, Arthur. "Exercise Addiction in Men: When Exercise Becomes Too Much." WebMD. (2007): n.pag. Web. Aug. 2015.

"Know the Signs of Unhealthy Exercise Addiction." Running & FitNews. American Running Associationz: Volume 18, No. 6

"Canadian Physical Activity Guidelines." Canadian Society of Exercise Physiology. 2012.



The Spirit of Wellness

BY BEA TAYLOR, PREVENTION



ith summer gone, fall arrives and "Old Man Winter" will come knocking once again.

November brings the arrival of fall and with that comes the Spirit of Wellness (SOW).

Kahnawake Shakotiia'takenhas Community Services (KSCS) coordinates this month long campaign that actively promotes physical, emotional, mental and spiritual wellness. Beatrice Taylor is this year's campaign coordinator.

A LITTLE BACKGROUND

The Spirit of Wellness campaign began as the Kahnawake Addictions Awareness Month (KAAM), which itself grew out of the National Addictions Awareness Week (NAAW). NAAW is still held in the third week of November and is incorporated into the Spirit of Wellness Campaign.

So what exactly takes place during Spirit of Wellness? KSCS prevention staff organize and collaborate with other community organizations to offer fun, family oriented, drug and alcohol free events that promote a healthy life style. Events are still being planned so keep your eyes open for the monthly calendar, which promotes activities throughout the month of November.

An opening activity will kick off the SOW month, with a tobacco burning and food and refreshments for those who attend. There will also be various workshops that will be held such as Responsible Server Training, Applied Suicide Intervention Skills Training (ASIST), and the topic being discussed at Tehontathro:ris (KSCS' grand rounds) is "Signs and Symptoms of Heart Attack and Stroke." Every Tuesday, Beatrice will be on the noon-hour talk show at K103 to promote SOW events for that week, as well as give a quick review of events that took place the previous week. Events and activities will be posted on the KSCS calendar at www.kscs.ca.

For more information on the SOW campaign, please call 450-635-8089 or email Beatrice Taylor at beatricet@kscskahnawake.ca.



Halloween Safety Tips

BY MARY MONTOUR GILBERT, PREVENTION

ost people are aware of what should be common sense Halloween safety; tips like how to cross the street, not to talk to or go with strangers, etc. As adults and parents, we know how exciting Halloween can be and that can make anyone forget to be careful such as:

 Never go into a stranger's house unless you're with your parents.

 Older kids should info your parents where yo are going and who you are going trick or treating with.

 If you're the driver, be sure that you have a clear visual and, of course, no drinking and driving!

 Vandalism is never cool! Stay respectful of other people's property. If caught, you can be arrested for vandalism and can be punished as a juvenile. Think before acting. If someone did that to your house how would it make you feel?

Halloween can and should be fun. Showing parents how responsible you can be will give you a feeling of pride and make them see just how respectful

ost people are aware of what you are. Your parents will trust you for should be common sense many Halloweens to come.

Parents need to be reminded that:

Swords, knives and other accessories should be short, soft and flexible.

Avoid trick or treating alone.

Fasten reflective tape to costumes

and tampering before hem.

a flashlight while trick or eating to help see others.

Always walk don't run from house to house.

oth ways before crossing eet.

the doorway, chil get frightened by barking.

Organize a route before lear and the time expected to re home.

Wear well fitted masks, cos shoes to avoid blocked vision trips and falls, try makeup instead of a mask. Eat only factory-wrapped treats. Avoid eating homemade treats made by strangers.

Enter homes only if you're with a trusted adult. Never accept rides from strangers.

Never walk near lit candles or luminaries. Never walk alone.

Source: Halloween Health and Safety Tips. Center for Disease Control and Prevention.

For more information on Halloween safety check out these sites:

"Halloween Health and Safety Tips." Centers for Disease Control and Prevention. 23 Oct. 2014. Web.

"Halloween Safety." Healthy Canadians. 21 Oct. 2014. Government of Canada. Web.



A Healthy Home

BY MARIE DAVID, COMMUNICATIONS

hen cleaning your house, do you give any thought to the chemicals in the products you use? Do you know what's in them or how they can affect you and your family's health? Do you know what VOCs are? Are green products any better?

You may think that when you keep your house squeaky clean that you are doing your part to help keep your family healthy and happy. But through no fault of your own you may be exposing your family, including your pets, to harmful chemicals like formaldehyde, phthalates, parabens, flame retardants and triclosan.

Now that you know the names of some of the harmful chemicals, you know what to look for on product labels so that you can avoid them. There are a couple problems however.

One, not all products list their ingredients or they only have a partial list. In fact, in Canada, manufactures of cleaning products are not required to list ingredients.

Two, some of these chemicals are also present in products like furniture and clothing and not just cleaning products...so they're a little harder to avoid.

Why avoid them? According to Environmental Defence "scientific evidence indicates that they are linked to human health problems such as cancer, endocrine-disruption, asthma, obesity and reproductive problems, yet they remain in wide use."

VOCs are Volatile Organic Compounds. They are organic chemicals that have a high vapor pressure at ordinary room temperatures. Health Canada states that "There is limited evidence that directly links VOC mixtures found in homes to known health problems. Concerns about VOCs arise from the hypothesis that, when combined, the toxicity of hundreds of VOCs could "add up" to create health hazards, but this remains unproven."

However, it should be noted that it's only been through the work of organizations and NGOs like Environmental Defence and the David Suzuki Foundation (and the Environmental Working Group in the US) that the governments of the US and Canada have moved to ban or curtail use of chemicals like Bisphenol-A (BPA) or triclosan. Governments tend to be slow to change when millions of dollars are at stake and companies lobby against change.

So, are "green" products better? Yes and no. Environmental Defence's research shows that green products release "significantly less" VOCs into the air. But you have to read the labels.

Look for products carrying a certified green label such as EcoLogo or Cradle to Cradle. Some products make the "green" claim but don't fully disclose their ingredients. If that's the case, look up the product in the Environmental Working Group's Guide to Healthy Cleaning database. Many of the products are also sold in Canada and a grade of A is good, a grade of D or F is bad.

Can you make your own cleaning products? Yes. There are plenty of DIY recipes available in books, magazines,

and online using common household products like vinegar, baking soda, lemon, salt, hydrogen peroxide, Borax, washing soda, etc. One place I always go is the Queen of Green, at http://davidsuzuki.org. Not only does she have recipes for household cleaners and disinfectants, she also has recipes for shampoo, shaving cream, hairspray and more.

Source:

"Kick Out Toxics." Environmental Defence. Web. Accessed: 19 Aug. 2015.

"Volotile Organic Compounds." Health

Canada. 14 Dec. 2012. Web. Accessed 19 Aug.

2015.

Resources:

Adria Vasil has many books and website with lots of tips. http://adriavasil.com

There's Lead in Your Lipstick and Green for Life by Gillian Deacon.

Children and Prescription Drug Abuse

BY FADI CHAMOUN, PHARMACIST

hile young children accidentally overdose on drugs they find in the family medicine cabinet, one in eight adolescents takes prescription drugs to get high. And 70 per cent of these teens only had to look to their bathroom medicine chest to find the drugs.

CHILDREN

Medications are the main cause of poisoning in children, outranking household products and cleaning supplies. Parents are aware of the danger, since 98 per cent of them feel that all medications should be stored under lock and key. Yet, 50 per cent of households keep them in an unlocked medicine cabinet.

Other substances commonly found in our homes can also be toxic for children. These include beauty products, such as nail polish remover, per-

fume, shampoo, and after-shave lotion. Make sure these too are stored out of the reach and sight of children.

TEENS

To get their "kicks," teenagers have been known to make explosive cocktails by combining prescription drugs taken out of the family medicine cabinet with other medications or alcohol. Teens are under the false impression that prescription drugs are somehow safer than illegal street drugs, since they are sold on the

mainstream market. But taking prescription drugs for non-medical reasons can have dangerous consequences, ranging from poisoning and addiction to overdose and death.

Some prescription drugs are more likely to be abused by teens. Parents should be keeping a watchful eye on painkillers, antidepressants, stimulants and cough syrup containing dextromethorphan (DM).

BE PROACTIVE

To keep medications out of the hands of teens, you need to limit access to them and have open, frank discussions with them about the issue. Here are practical things you can do to prevent the problem:

Make a list of all medications you have at home and check their quantity on a regular basis.

- Regularly return unused or expired medications to your pharmacist.
- Store medications safely and out of the reach of your children.
- Always be on the lookout for behavioural changes in your teen.
- Educate your children and other family members about this issue.

In the case of younger children, never compare medications to candy and always leave them in their original containers.

NOT IN THE GARBAGE

Keep in mind that medications are chemical products that can potentially contaminate our water and soil. Never discard medication in the garbage, down the toilet or in the sink. Instead, return them to your pharmacy where they will be disposed of safely.

PHARMACY SERVICES

Has your child taken a medication that was not prescribed to him? Are you wondering about possible interactions between drugs and food or alcohol? Your family pharmacist can answer your questions or, if need be, direct you to the appropriate resources. Just ask!

The Back Page....

"Don't judge each day by the harvest you reap but by the seeds you plant."

Robert Louis Stevenson



Growing Up Around Addictions

BY JADE MCCOMBER, PREVENTION

here are many different elements that help shape a child into an adult. One of the most influential elements is the environment of which one is brought up in. Children who grew up around addictions may suffer an adverse upbringing, even if the individual or family does not realize it.

Studies show that children who grow up around addictions, or any other adverse childhood experience, may have an increased risk of obesity, heart disease, cancer, chronic lung disease, skeletal fractures, and liver disease. These children also have an increased risk of alcoholism, drug abuse, depression, and suicide.

These problems arise in many families, and our community is no exception. In fact, within Indigenous and Inuit communities 33 per cent of the community members indicate that there is an addiction problem within their own family or household and 25 per cent say that they have a personal problem with alcohol (1).

Through research, we know that these alarming statistics stem from several events throughout our history and include our current situation. Contributors include multigenerational trauma from residential schools and economic problems such as poverty stricken communities.

The effects of growing up around an addiction may threaten the family bond and the mutual trust a child should experience growing up. It can be detrimental to the overall health of the child and family.

This is one of the reasons it is so important to properly identify and treat addictions in Kahnawake. Not only are we helping the addicted individual and driving ourselves towards decolonization but we are also helping ensure that our future generations live healthier lives.

Creating a sound environment for our children will allow them to grow up without the trauma — or the anxiety of being raised by or around, someone who may have a dependency issue — and allow them to freely focus on school, friends, family and culture.

Source: Khan, Saman. Aboriginal Mental Health: The Statistical Reality. Here To Help. bc. ca. 2008. Web.

(Endnotes)

1 Aboriginal Mental Health: The Statistical Reality.

Kenténha/October

Autism Awareness Month Breast Cancer Awareness Month Learning Disabilities Awareness Month

- 4-10 Fire Prevention Week
- 4–10 Mental Illness Awareness Week
 - 10 World Mental Health Day
 - 12 Thanksgiving Day (KSCS closed)
 - 31 Halloween

Kentenhkó:wa/November

Spirit of Wellness Month

Diabetes Awareness Month

Natl. Family Caregiver Week

Natl. Seniors Safety Week

16–22 Natl. Addictions Awareness Week

11 Remembrance Day (KSCS closed)

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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