Karihwi:ios

2018 Brings the Return of Sadie's Walk

By Susan Oke

Sadie's Walk has been absent from Kanesatake since 2014 but it came back in a big way on Friday, April 26th. It wasn't sunny but it wasn't raining either, so our 68 walkers were in no danger of over heating. Participants came in all shapes and sizes; there were a few cyclists, joggers, rollers in strollers, many walkers and of course we can't have a Sadie's Walk without a canine walker or two. We had great participation from the community and we are happy to say that our most senior walker, Jacques Richard (80 years young), completed the 6.5 kilometer walk like a pro.

This year's walk was organized by Tanya Denis, Diabetes Prevention Support Worker, with help from the KHC staff. The walkers were escorted by the SQ and an ambulance and there was a bus for anyone who needed a break. All who signed up received a free event T-shirt and a healthy lunch after the walk. There was salad, chicken wraps, and a choice of carrot or beef barley soup, with fruit for dessert, catered by Keith Nelson.

Sadie's Walk takes place in many native communities across Canada. It's named after Sadie Ann Parker-Muik, an Okanagan community worker who passed away. The whole aim of the event is to promote a healthy lifestyle and prevent diabetes.

If you have not been active in recent years, regular walking is a great first step to achieve optimal health. All you need are a pair of good shoes to reap the benefits, such as, better control of your diabetes, lower blood pressure, improved mood, and overall better health. We hope to see everyone again at the next Sadie's Walk.





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The deadline for the July/August Issue of Karihwi:ios is:

Friday, June 29, 2018

karihwiios@hotmail.com
Look for the Kanesatake Health Center on
Facebook!



The toll-free number for the First Nations and Inuit Hope for Wellness Help Line is

1-855-242-3310

Old Age Security and Canada Pension Plan payment dates 2018

May 29, 2018
June 27, 2018
July 27, 2018
August 29, 2018
September 26, 2018
October 29, 2018
November 28, 2018
December 20, 2018

Father's Corner: Engaged Dad's

Taken from: https://www.beststart.org/resources/howto/pdf/BSRC_Engaging_Fathers.pdf

Submitted By David Belisle

ads are taking up the challenge to be more engaged with their children. They are waiting in line at the grocery store, sitting in the waiting rooms at the doctor's offices, watching dance classes and coaching sports. Today's dads are just more involved in their children's lives. Learning to be a father takes time and experience. Many men enter fatherhood without any experience with pregnancy and children and this could make new fathers nervous and maybe distant at first. This is normal behavior as a dad learns to get comfortable in his role.

Dads bring a way of nurturing and bonding that must be encouraged and affirmed for the benefit of the children. All men have a father to follow—some involved—some distant, and some somewhere in between. No matter the situation men have grown up in, they are impacted by the presence, absence, action, words, or silence of their father. The majority of men have high motivation to be involved fathers who are there for their children. When fathers have strong, reliable social supports around them, they are more likely to be involved with their families. This support includes their parents, their partners' parents, parents' peers, and social services they can have access to. Men raising children can be grandfathers, uncles, step dads, adoptive dads or big brothers. Fathers come from many different situations that don't reflect the traditional family structure, including single fathers, step fathers, newcomer fathers, and gay/bi/transgendered fathers. All types of fathers need to feel welcome, to be able to connect with other dads. Children with involved fathers are more likely to:

- Be securely attached to their father
- Be more resilient and handle stress better
- Experience less psychological distress (fear, guilt, depression etc.)
- Have higher sense of personal control and self esteem.
- Get along with their siblings and peers better.
- Have a greater sense of empathy, tolerance, and understanding.

Be the best Dad you can be for your child/children.

Chicken Scallopini With Mushrooms, Tomatoes and Spinach

Submitted by Tanya Denis, Diabetes Prevention Support Worker

This is the perfect do-ahead chicken dish that feeds a crowd and pleases everyone!

INGREDIENTS

1½ pounds chicken breasts (boneless, skinless, pounded to 1/4-inch thick)* – divide into 12 pieces

½ cup corn starch

½ tsp kosher salt for sprinkling on each piece of chicken freshly ground black pepper to taste

1/4 cup extra virgin olive oil, divided

12 button mushrooms, stems removed, sliced

16 shitake mushrooms, stems removed, sliced

4 cloves garlic, smashed and chopped

1 pint cherry tomatoes, halved

1 box (approximately 8 loosely packed cups) washed baby spinach

½ cup white wine

2 cups low sodium chicken stock

4 tbsp lemon juice

DIRECTIONS

Prepare a large flat surface with parchment paper and place the potato starch on one side of the paper. Lay the chicken pieces on the rest of the parchment and season both sides with salt and pepper. Dip each seasoned piece of chicken in the potato starch and shake off the excess.

Have a large oven safe serving dish near the stove. Heat a heavy duty pan over medium high heat, add about 1 tbsp of olive oil, and place 3-4 pieces of chicken in the pan. Do not crowd. Cook for about 2 minutes on each side, and remove to the serving dish (NOTE: you do not need to cook it all the way through, it will cook as it sits). Repeat with more oil and more chicken until all the chicken is browned.

Add remaining oil to the pan, add the mushrooms, a pinch of pepper and sauté until shrunken, and browned, and remove them from the pan and add them to the dish with the chicken.

Add the garlic to the pan, and cook until lightly browned. Add the tomatoes, season with a pinch of pepper, add the spinach, and



sauté until wilted. Add this mixture to the dish with the chicken. Add the wine to the pan, let reduce for a minute, scraping up any brown bits at the bottom of the pan and add the chicken stock. Let cook for 3-5 minutes (it should boil), and add the lemon juice. Pour this mixture over the chicken and arrange the vegetables around the chicken in a presentable way. Serve right away or cool and refrigerate covered overnight. Let come to room temperature for at least one hour before reheating and then reheat in a 300-400°F oven (depending on what else is in the oven) until heated through, about 30 minutes.

SERVES 8

Nutri Serving Size 1 s		n F	acts
Amount Per Serving			
Calories 204			
			% Daily Value
Total Fat 8g			12%
Saturated Fat	7%		
Trans Fat 0q	-		
Cholesterol 44n	na		15%
Sodium 190mg	-3		8%
Total Carbohyd	rate 11c		4%
Dietary Fiber	3%		
	U.Og		3 /
Sugars 2g			
Protein 20g			40%
* Percent Daily Values Values may be highe	r or lower depe Calories	ending on you	
Total Fat	Less than	65g	80g
Sat Fat	Less than		25g
Cholesterol	Less than		300mg
Sodium	Less than	2400mg	2400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Taken from: https://www.diabetescarecommunity.ca/diet-and-fitness-articles/recipes/chicken-scaloppini-with-mushrooms-tomatoes-and-spinach/

Avoiding or Delaying Eye Damage From Diabetes

https://www.diabetescarecommunity.ca/living-well-with-diabetes-articles/diabetes-management-articles/avoiding-or-delaying-eye-damage-from-diabetes/



One of the more common complications of diabetes is retinopathy. The retina is composed of a layer of nerves located at the back of your eye – it's what takes "pictures" and sends the images to your brain. In people with diabetes, nerve damage to the retina can occur when blood glucose levels remain high over a long period of time.

Four steps you can take to prevent or delay diabetic retinopathy.

1. The most important thing you can do to protect your eyesight is ensure that your blood glucose levels are in the target range. The Diabetes Control and Complications Trial, a large study conducted in the 1990s, found that lowering blood glucose levels into the target range – and keeping them there – reduced the risk of eye disease by a whopping 76%.

According to the Diabetes Canada's 2018 clinical practice guidelines, the recommended blood glucose targets for people with diabetes are as follows:

A1C (%) Blood glucose before meals (mmol/L) Blood glucose two hours after a meal (mmol/L) Target for most people with diabetes 7.0 or less 4.0 to 7.0 (4.0 to 5.5* if A1C targets are not being met) 5.0 to 10.0 (5.0 to 8.0* if A1C targets are not being met Balance against risk of hypoglycemia

2. Have your eyes tested at regular intervals. According to the clinical practice guidelines:

People with type 2 diabetes should be screened for retinopathy at the time that they're diagnosed. Women with diabetes or women who hope to become pregnant should be screened before conception, during the first trimester, as needed during pregnancy and within the first year after giving birth.

The timing of follow-up assessments should be tailored to the severity of the retinopathy. In people with no or minimal retinopathy, the recommended interval for re-screening is every one to two years.

3. Blood pressure and cholesterol are other factors that affect retinopathy – having high blood pressure or high cholesterol levels can make eye problems worse. If your doctor has given you any medications for blood pressure or cholesterol, be sure to take them as prescribed. The targets for people with diabetes are as follows:

Blood pressure less than 130/80 mmHg Low-density lipoprotein cholesterol less than or equal to 2.0 mmol/L.

4. If you smoke, quit smoking. A number of studies have shown that smoking can actually make retinopathy worse. Click here for tips and strategies to help you kick the habit.

How will I know if I have retinopathy?

See an eye care professional (either an optometrist or an ophthalmologist) if you notice any of the following symptoms of retinopathy:

- blurred vision
- flashes of light in your field of vision
- sudden loss of vision
- blotches or spots in vision

Remember, though, in the early stages of retinopathy some people don't experience any symptoms at all. That's why it is important that you have regular eye examinations.

Mini-Mohawk Lesson

Courtesy of Tsi Ronterihwanónhnha ne Kanien'kéha Language and Cultural Center

> Oh nihatiéhrha? What is he doing?

Eh tho nihaiéhrha That is what he is doing.

> Oh nihotiié:ren? What did they do?

Oh nihsatiehrha? What are you doing?

Health Center Calendar: May

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 Dr. Dumont-Maurice Blood Clinic 7:00-9:00 am	2 Dr. DeBroux 1/2 day	3 Dr. Moisan Blood Clinic 8:00-9:00 am	4	5
6	7 Dr. Moisan	8 Blood Clinic 7:00-9:00 am	9 Dr. DeBroux 1/2 day	10 Dr. Moisan Blood Clinic 8:00-9:00 am	11 KHC CLOSED building repairs	12
13	14 Dr. Moisan	15 Dr. Dumont-Maurice Blood Clinic 7:00-9:00 am	16 Dr. DeBroux 1/2 day	17 Dr. Moisan Blood Clinic 8:00-9:00 am	18 Dietician, Vinita Rawat	19
20	21 KHC CLOSED	22 Blood Clinic 7:00-9:00 am	23 Dr. DeBroux 1/2 day	Dr. Moisan Blood Clinic 8:00-9:00 am	25 Dr. Saba Dietician, Vinita Rawat	26
27	28 Dr. Moisan	29 Blood Clinic 7:00-9:00 am	30 Dr. DeBroux 1/2 day COHI	31 Dr. Moisan Blood Clinic 8:00-900 am		

Health Center Calendar: June

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 Dietician, Vinita Rawat	2
3	4 Dr. Moisan	5 Dr. Dumont-Maurice Blood Clinic 7:00-9:00 am	6 Dr. DeBroux 1/2 day	7 Dr. Moisan Blood Clinic 8:00-900 am	8 Dietician, Vinita Rawat	9
10	11 Dr. Moisan	12 Blood Clinic 7:00-9:00 am	13 Dr. DeBroux 1/2 day	14 Dr. Moisan Blood Clinic 8:00-900 am	15 Dr. Saba Dietician, Vinita Rawat	16
17	18 Dr. Moisan	19 Blood Clinic 7:00-9:00 am	20 Dr. DeBroux 1/2 day	21 Dr. Moisan Blood Clinic 8:00-900 am	22 KHC CLOSED	23
24	25 KHC CLOSED	26 Dr. Dumont-Maurice Blood Clinic 7:00-9:00 am	27 Dr. DeBroux 1/2 day	28 Dr. Moisan Blood Clinic 8:00-900 am	29 Dietician, Vinita Rawat	30

Breastfeeding Support Training 101



By Crissann Thompson, Baby Friendly Coordinator Family Development Coordinator

uring the month of April, the Kanesatake Health Center offered **Breastfeeding Support Training 101** to our new and expecting mothers, along with all family supporters. The work shop was facilitated by **Isabelle Cote**, a well known certified lactation consultant who has worked alongside the Kanesatake Health Center for many years. She did an excellent job sharing all sorts of great breastfeeding information, facts and tips to everybody involved.

The 8 participants who received a certificate in Breastfeeding Support 101 included six expectant mothers and two veteran moms, who are valued support moms within our community. It certainly is a great feeling when all the

right information reaches all the right people. Creating a network of supportive mothers for breastfeeding families in our community is the foundation to creating a strong future for our little ones.

All the participants who completed the training showed interested in becoming breastfeeding peer support team members. I have no doubt in my mind these women can give support in our community. We are working hard to make sure all breastfeeding supporters are equipped with the most valuable tools needed to strengthen our families in breastfeeding success.

Nutrition Month/ Healthy Eating Presentation

Presented by Vinita, dietitian and Tanya, Diabetes Prevention Support Worker.

he nutrition presentations at Rotiwennakehte Elementary School were a hit! We presented the first workshop before lunch to Grades 1 and 2. We started off by discussing healthy eating and then told them that we were going to make a recipe together. To say they were excited is an understatement. They were willing and ready! After washing their hands, they proceeded to mix all the ingredients together and made Chicken Tzatziki Tortilla Roll Ups. We had chosen the award-winning recipe from the "EatRightOntario" website. Some students stated that it was the best wrap that they had tasted. Others wanted to bring home their leftovers. We thought they may just be hungry because it was before lunch time!

After lunchtime, we once again did the cooking workshop with the grades 3 and 4. When they saw us, they seemed apprehensive. Like before, we first discussed healthy eating, going into more detail this time for the older students. Many told us that they helped their parents in the kitchen by making



breakfast. By the time we started making the recipe with them they were all into it, deciding who was brave enough to try hot sauce and who wasn't! Each group made one recipe. Despite having eaten lunch, almost all the students ate the tortillas and the ones with smaller stomachs asked to bring the rest home. They asked us when we would be back.

All in all, it was a fun day for us all. They learned about healthy eating and the role good nutrition plays on their health. But most importantly they learned that healthy eating can be delicious, they can play a part in meal planning and preparation and that cooking is fun!

Easter Hunt and Family Brunch

By Brandon Etienne

ith the success of last year's Easter Egg Hunt we decided to host the event once again. The 2018 edition was held on Sunday, March 25th, which turned out to be a beautiful sunny day. We held the brunch first, which was catered by Keith Nelson. After everyone was stuffed with as much as they could eat, we gave out our door prizes, which were very much appreciated by the community. The prizes included grocery or restaurant gift cards.

When all the prizes were given out we separated all the children into 4 groups ranging from ages 0-17. After all was said and done we had a total of 89 youngsters running around looking for eggs and other crazy gifts that were placed in the respective boundaries of each group.

As an event sponsored by Kanesatake Health Center we at the Child and Family Services Department decided on giving out as little chocolate as possible. So as a reward for all the kids' hard work during the hunt, we gave out gifts instead, ranging from toys, to sports equipment, to gift cards.

Seeing the kids eyes light up when they grab the egg during the hunt or receive a gift for their hard work, makes us at the CFS department want to continue to host these events. However we must always thank the Kanesatake Health Center for their continued support, as well as, the community for bringing their children out to these events. It's the community that makes these events successful.

Id like to say nia:wen to Keith Nelson and his team for providing the brunch, and to the CFS team for running the event.







2018 Sadie's Walk continued

























By April Kibbe, Family Support Worker

ordan River Andersen was a five year old child from the Norway House Cree First Nation in Manitoba who suffered from 'Carey Fineman Ziter Syndrome,' which is a rare muscular disorder that required years of medical treatment in a Winnipeg hospital. Jordan spent the first two years of his life in the hospital and eventually got cleared by his doctors to leave and stay in his family's home near the hospital. However, the provincial and federal governments could not agree on who would foot the bill for Jordan's care while at home. The federal and provincial governments continued to disagree for two years on who would cover the expenses of Jordan's care at home, and in 2005 Jordan died in hospital, at the age of five years old, never having the opportunity to live at home because of this dispute.

In response to Jordan River Andersen's case, **Jordan's Principle** was created. It is a child first principle, calling on the government of first contact to ensure First Nations children can access public services on the same terms as other children. Jordan's Principle was unanimously passed in the House of Commons in 2007. The overall idea was that native children would receive services right away and not be caught up in government red tape over jurisdictional disputes like Jordan Andersen did. Over the years Jordan's Principle was not being used as it was meant to be and in a landmark ruling on January 26, 2016, the Canadian Human Rights Tribunal ordered the federal government to immediately stop applying a limited and discriminatory definition of Jordan's Principle, and to immediately take measures to implement the full meaning and scope of the principle.

In November 2016, the Caring Society, Assembly of First Nations, and interested parties (Chiefs of Ontario and Nishnawbe Aski Nation) filed motions stating that **Canada has failed to comply with the tribunal's ruling and remedial orders**. Three days of hearings on the non-compliance motions were

held in March, 2017. On May 26, 2017, the tribunal found that the Government of Canada has continued "its pattern of conduct and narrow focus with respect to Jordan's Principle," resulting in unnecessary and unlawful bureaucratic delays, gaps and denial of essential public services to First Nations children. As such, the tribunal issued a **third set of non-compliance orders** and ordered Jordan's Principle to be fully implemented by the federal government.

Payment disputes within and between federal and provincial governments over services for First Nations children are not uncommon. First Nations children are frequently left waiting for services they desperately need, or are denied services that are available to other children. This includes services in education, health, childcare, recreation, and culture and language. Jordan's Principle calls on the government of first contact to pay for the services and seek reimbursement later so the child does not get tragically caught in the middle of government red tape

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

If you are trying to access services for your child and are getting nowhere or are in need of more information contact the Kanesatake Health Center's Child and Family Support Program:

450-479-6000, Karennahawi Ext. 288 or April Ext. 227

Women's Roles and Responsibilities

By Kevin Nelson

Women play a major role in our culture and have from the very beginning of time. In our creation story, Skywoman, falls from Skyworld, or is pushed, depending on the version you know. During this period of time, you have a pregnant woman leaving one world for another. She is experiencing a wide range of emotions, being pregnant and not knowing anyone; without Skywoman depending on the life forces around her she would not have survived. The medicines she grasped as she fell from Skyworld helped her plant seeds. The way she shuffled her feet counterclockwise on the turtles back caused it to grow into what we understand today as Turtle Island. This counterclockwise direction is still the way women dance today, in ceremonies and at socials. If you think about how we have practiced our teachings from the beginning of time, it gives you an idea of how much women contributed to our culture.

There is a common theme in our storytelling and that is how we depend on everything that surrounds us for our survival. There is no bigger way of understanding this than in the Ohenton Kariwatekwen. We are acknowledging and showing appreciation for the natural world and we acknowledge that we are dependent on one another for survival. Without the animals, the winds, water, trees, or even the sun; we cannot function. During a dark era in our history, it has been said that the five nations within our confederacy would have been wiped out within two generations if we continued to fight. Tsikonsase was the first to accept this idea of peace from the peacemaker. From the great law came a better understanding of how to treat one another by resolving conflicts through discussion and not violence. Treating each other with respect utilising the principles of the great law of peace, power, and righteousness while thinking seven generations ahead in our decision making. Clan mothers play a great role within our society. The Kanienkehaka nation has three clans: bear, turtle, wolf—3 chiefs in each clan—alongside 3 clanmothers. The type of people selected for each position is based on their knowledge of our culture and traditional practices (ceremonies, understanding of roles and responsibilities, knowledge of the Creation story, Great Law), as well as, their overall character. For example, someone who is unselfish and utilises the principles of the great law in their day-to-day life.

Our society is matrilineal. So, for example, if a wolf clan male marries a bear clan woman and had kids, the kids would sit with their mother's clan. The lakoiane or clanmother is a title which is passed down hereditarily through a clan. Among the five nations of the confederacy there are nine Mohawk clanmothers, nine Oneida, thirteen Onondaga, ten Cayuga and eight Seneca for as total of 49 clanmothers. It is her responsibility to look out for the welfare of the clan by overseeing the actions of the chief and ensuring that he is performing his duties in accordance with the Great Law. As clan mother, she will have her own wampum of two strings, one white and one purple signifying her title within the Haudenosaunee. Should she pass on, the string will then be passed to the next hereditary clanmother. If a chief acts improperly or is not living up to his responsibilities, his clanmother and faithkeepers will warn him about his actions. If he continues to act selfishly the Clan mother may symbolically remove his antlers, thus removing his authority as chief. Each clan was considered family so for example if a wolf clan member from Kanehsatake travelled to Seneca territory, he would be thought of as family by their wolf clan. Traditionally, women made the decisions within each clan in the village. The men went hunting or went away during warfare, so the women held a lot of responsibilities day-to-day within the village. The men had a connection to the elder brother, the sun and like the elder brother the sun, men had to travel east to west each day. If we look at a modern longhouse which stretches east to west, it is our responsibility to be like the sun and travel the territory to maintain our relations to the other nations within our confederacy. The women also controlled the garden and cooked, as well as, raised the kids; passing down the knowledge from generation to generation. Women are the voice of the people and life givers. We must respect and acknowledge the sacrifices of our women.

> k.nelson@kanesatakehealthcenter.ca 450-479-6000 Ext. 285

National Mental Health Awareness Week

By: Mary Jane Hannaburg Mental Health Worker

Edited by: Robert Marcheterre Program coordinator

ational Mental Health Week is from May 7-13, 2018, and with respect to this awareness campaign, Safe Talk is being offered at the health center on May 23, 2018. Safe talk is a training designed to learn about suicide alertness

for individuals aged 15-years and over. The three hour long training is presented by a Living Works certified trainer. The training will guide and assist participants on how to intervene should the situation present itself wherein an individual is experiencing suicidal thoughts. The role of the Safe Talk helper is to identify persons experiencing thoughts of suicide; and to connect them with caregivers who can complete the intervention.

Safe Talk will raise awareness on how to listen to and pick up on cues, known as invitations, which are often missed, dismissed, or avoided. Safe Talk will increase the participant's comfort level in discussing suicide ideation, and will increase in the number of suicide alert helpers, so needed, in the community to help our members, families, friends, and loved ones. Upon completion of the three hour session, each participant will receive a certificate from Living Works.

As a community member, I encourage you to take part in Safe Talk. The training is free, and a healthy snack and lunch will be provided on the day of the session. To sign up, please call the Kanesatake Health Center at 450-479-6000 Ext. 296 and ask for me, Mary Hannaburg. It will be my pleasure to place you on the participants' list.

Even if you have taken other trainings, Safe Talk could serve as an ideal refresher for your sills. Contact us early as space is limited.

SafeTalk Training is a three hour **suicide prevention** training facilitated by Mary Hannaburg, Certified Trainer (Living Works).

SAFE TALK TRAINING

Date: Wednesday, May 23, 2018

Place: Kanesatake Health Center Conference Room

Time: 9:00 A.M. - 12:00 P.M Lunch will be provided

Participants will receive a certificate from Living Works and lunch will be provided. *Note participants must be present for the full three hours to receive their certificate.

Open to participants 15-years over. Please call to reserve your place as we do have limited spaces.

Contact Mary at the Kanesatake Health Center 450-479-6000 Ext. 296

Learn and Play March/April Review

By Crystal Diabo, Child Support Worker

or the month of March, Learn & Play's theme of the month was all about Wahta. The children learned all about the Maple tree. We learned how to identify the maple tree, as well as, what it provides for us. We learned how to tap the tree for collecting the maple water and the process of making Wahta Ohses. At the end of the month a Wahta Family Gathering was held. Learn & play, KYOT and Parent's & Tot's invited their Families to join us for a Sugar shack style brunch. Local elder John Cree was our guest of honor, who came in to share his knowledge and teachings about Wahta.

Learn & Play also participated in March
Madness week. This was sponsored by
The Kanesatake Health Center and was
held the first week of March. We started
the week of with a tubing trip to Mont
Avila on Monday. Wednesday was a very
special day. Ruth Productions came
into the Learn & Play program with a day
full of fun activities and special guests

"Paw Patrol." Children were greeted by Marshall and Sky as they arrived. Parents & Tots and Daycare were invited to share this fun-filled day. After a photo shoot and dance session with Paw Patrol, we headed into the kitchen to cookie corner. All children got to decorate their own cookies with all kinds of sweet toppings. We then settled down for a Sesame Street themed puppet show followed by lunch. We ended the week of with a trip to the Bell center where Disney On Ice was performing their Dare to Dream show. It was a busy but exciting week.

For April our theme was **spring**. Children learned to look for the signs of spring, what happens in spring, spring cleaning and planting. For **Earth Day**, the kids geared up and helped clean the KYOT grounds. They did a great job picking up the trash and raking up the yard. We also started our **indoor planting** for our garden. A big niawen'ko:wa to all the children and their parents for donating this year's seed supply.

Photo: Dave Belisle



Photos: Crystal Diabo





Kanesatake Environment Indicators Project and Ottawa River Watershed Shed Study

Submitted by Valerie Gabriel

The Kanesatake environmental indicators project facilitated by Valerie Gabriel, (Environmental and wildlife technologist) and the Ottawa River Watershed Study facilitated by Dr. Isabelle-Anne Bisson (Lead, coordinator and manager of science and conservation projects globally for over 20 years including with Indigenous communities in Canada) is an endeavour under the Kanesatake Ratihontsanonhstats Environment Department.

What is an environmental indicator?

Environmental Indicators are a set of tools developed to track environmental progress, Environmental equilibrium and or regression. It allows us to have a set of data which is viewed without prejudice and allows for understanding how we interact with our environment.

There are many global environmental indicators already in existence, few of which are mentioned below. Although what is mentioned below are global scale environmental indicators, the point of this project is to research what environmental aspects are important for us as a First Nations community and to develop our own indicators with old-age knowledge specific to us here in Kanesatake.

The environmental indicators we choose as a community will be specific to what we deem important to us.

Global Indicators

Environmental: Species extinction rates, and threatened species; include plants, insects (bees)

Animal populations: decline – rise, new species migration due to change in the North, uncommonly found in the region. Temperature / Climate Change: weather changes, spontaneous combustion by heat, high winds, and heavy rain – snowfall, strong radical storms.

Land and soil: land use and C02 emissions, land use changes, wetland surface change, soil pollution; Waste accumulation.

Freshwater: freshwater fish stocks, species decline, River alteration, Rivers running dry, spring flooding.

Marine: Fish stocks, Ocean Temperature, Ocean acidification

Forest: Forest Area, Forest degradation, tree mortality, Distribution of tree species, new invasive species (plants, insects) due to globalization of importing fruits vegetables etc. Agricultural impacts of chemical use in modern day agricultural practices that affects land, water, and air quality.

Atmosphere: Ozone depletion, Greenhouse Gas Emissions, earth's temperature, air pollution of these pages

Ottawa River Watershed Study

There are more than 20 Indigenous Communities located within or near the Ottawa River, as well as, more than 200 municipalities. The river also supports 55 wildlife species and 213 plant species that have an at risk status under the Act respecting threatened or vulnerable species. The Ottawa River Watershed Study aims to identify 1. a governance committee 2. Important indicators (such as water quality, shoreline integrity etc.) 3. cultural values, economic values and natural values.

Some questions which are being asked are listed below:

What does the Ottawa River mean to you? What are your concerns? Do you have any historical knowledge on the Ottawa River? How do you think the watershed should be managed and protected? Who should sit on the governance committee for the protection and management of the river?

What we have done so far

Community Engagement Session, Crime Prevention Engagement Session, School grades 3-6 Engagement Session, Online Surveys, and in-house surveys, Meetings with the environment departments of our sister communities of Akwesasne and Kahnawake.

Where to find us next

Come and join us at the Kanesatake Emergency Preparedness expo May 12, from 10:00am-2:00pm.

There, you can fill out a survey or have a conversation di-

rectly with us.

How to contact us

If you are interested in participating in these projects, You can reach us at 514-830-2974 (Valerie Gabriel) OR 514-457-6360 (Isabelle Bisson) or email us at valerie.gabriel@hotmail.com and ibisson@terrahumanasolutions.com.

Paul Ferland 1959-2018 In our time of loss

The life journey is filled with twists and turns, ups and downs. Each of our life journeys are unknown. When our time is up.... our time is up. We return to sky-world. My soul mate returned to sky-world so suddenly. I was not ready for him to go. Alas may he be at peace in sky-world, no more pain, no more suffering. He is with the Angels held in love and grace. Now, we his loved ones are heartbroken at his sudden departure we must find in us the strength and courage to continue forward.

We are grateful for our family, friends and community that are holding us up in this very difficult time. We feel the love and compassion and it helps us to find our strength to continue our life journey without him, my husband, our father, our brother, our grandpapa.

Thank you for your kind words, the great foods you prepared, the donations and your understanding. As we walk through the grief your compassion and patience will help us get through.

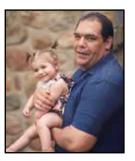
We want to say a very special thank you to Mimi & Vincent and Ellen & Tracee you have been so kind, helpful and loving.

Niawenko:wa from:

Wanda, Melissa, Pamela (Josh, Alexander, Emily), Catherine (Zoro, Rebecca) and Bernard

Announcements





Desiray Gertsch

Happy 2nd birthday to our energetic little princess. Grandma and grandpa love you so much!

Jeremy Gertsch Congratulations

Congratulations on your new career with Air Creebec. I hope you don't fly a plane the way you drive a car lol - just joking you're going to be an amazing pilot. Timmy and I are so proud of you.



Health Center Birthdays

Joyce Bonspiel Nelson May 2

> Susan Oke May 8

Crystal Diabo May 26

> Matt Barr May 28

Tim Cree June 22

Have a great birthday everyone!

Kid's Zone

By Jadyn Lauder

Kids Zone is an afterschool program that collaborates with the Rotiwennakehte Elementary School and the Child & Family support team at the Kanesatake Health Center Inc. The program runs throughout the school year, every Tuesday from 2:30-4:30 PM at the elementary school and participants are provided with healthy snacks.

The program currently has 20 children enrolled from grades 1-6. A monthly schedule is provided to inform the kids and parents about the upcoming activities that will be occurring throughout each month.

Some of the activities occurring during the course of the year include indoor/outdoor physical activities, arts and crafts, team-building exercises, anti-bullying workshops, traditional teachings/art, and much more! The program's final day will be May 29 2018 and will be starting back up in the fall.

May

National Health Week May 7-13

National Nursing Week May 7-13

> Mother's Day May 13

Victoria Day May 21

World No Tobacco Day May 31

June

National Health & Fitness Day June 2

World Environment Day June 5

> World Elder Abuse Awareness Day June 15

> > Father's Day June 17



Emergency Phone Numbers
Fire and Ambulance:
911
Police Emergency:
310-4141 *4141 (cell)
Police Non-emergency
(office) (450) 479-1313

Karihwi:ios serves to distribute health information from the Kanesatake Health Center to the community of Kanesatake. Karihwi:ios provides a positive forum from which to honor the achievements of community members.

Karihwi:ios promotes community services, their activities, and accomplishments. It advertises and promotes upcoming special events and activities to be held in and around Kanesatake.



May 11, 25

June 8, 22



May 8, 22

June 5, 19



May 2, 9, 16, 23, 30

June 6, 13, 20, 27

