



Aionkwatakari:teke

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

"For Us To Be Healthy"

Vol. 15, No. 4

Kahnawake's Only Health and Wellness Newsletter

Seskéha / August 2010



Mickey Phillips on Being True to Yourself



PLUS!
Kids and Music
and More!

INSIDE THIS ISSUE

Healthy Sex & Sexuality Programs	3	Music for Life	9
Profile: Mickey Phillips	4-5	Gardasil Vaccine for Men	10
How Breastmilk is Unique	6	Dating & Teens: What is Abuse?	11
Teens Online	7	Preparing a Survival Safety Kit	12
Parenting a Disability	8		



Aionkwatakari:teke

Aionkwatakari:teke is a newsletter published six times a year by Communications Services of Kahnawake Shakotiaa'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 & encouraged to submit articles provided that they are comprehensive to the general public, informative & educational. Slandorous 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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Persons Profiled

Mickey Phillips

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

Welcome to the August/September issue of Aionkwatakari:teke. This issue's theme is parenting. We have a great profile of Mickey Phillips, a young man from Kahnawake, who came out to his family and to the community a few years ago. It's not an easy decision to make, yet Mickey's decision was made easier through the love and support of his mother, Beatrice.

We also have an article on the importance of music in a child's life and how it not only enriches their lives but can also aid them in learning other academic subjects as well. Taryn Conlon has an opinion piece on why healthy sexual education programs belong in schools.

There's all that and a lot more. Thanks for reading and please recycle this issue when you're done with it.



Sken:nen,
Marie David

Cover photo of Beatrice and Mickey Phillips by Tyson Phillips. Inset photo courtesy of Step by Step. Cover design by Marie David.

Recommended reading on topics covered in this issue—and many other topics—are available from the Skawennio Tsi Iewennahnotahkhwa Library. Feel free to call them at 450-633-1016 or email klibrary@paulcomm.ca for more information.

- Cyberbullying: Activities to help Children & Teens to Stay Safe in a Texting, Twittering and Social Networking World
- In Love and in Danger: A Teen's Guide to Breaking Free of Abusive Relationships
- When Autism Strikes:Families Cope with Childhood Disintegrative Disorder
- Parenting an Adult with Disabilities or Special Needs: Everything You Need to Know to Plan for and Protect Your Child's Future“Caring for Mentally Ill People
- The Worst-Case Scenario Survival Handbook
- The Womanly Art of Breastfeeding
- Interactive Music Therapy In Child and Family Psychiatry



Healthy Sex and Sexuality Programs In or Out of School?

by TARYN CONLON, PREVENTION SERVICES

In 2008, the Quebec Ministry of Education announced that by 2010 sexual education would be removed from its high school curriculum.

Instead, teachers are being asked to incorporate these lessons into subjects such as science, math and history. “Ok, students. Can anyone tell me what the square root of two fallopian tubes is?” Can you tell I think this is a little ridiculous?

Sexual health is a major component to a person’s overall health and well-being. Studies indicate that 70 per cent of the population have had intercourse before the age of 20. In order to make sure that youth have the information, motivation, skills and understanding to protect their sexual and reproductive health, “it is imperative that schools, in cooperation with parents, the community, and health care professionals, play a major role in sexual health education and promotion.” (*Society of Obstetricians and Gynaecologists of Canada, 2004*).

Currently in Canada, teen pregnancy has slowly been declining. This is a direct indicator of teenage girls having the opportunities and knowledge of how to control their sexual and reproductive health. Sexually transmitted infections such as chlamydia, human papillomavirus (genital warts) and HIV are rising among teens at alarming rates in Canada. The rise in sexually transmitted infections (STI) may be

due to an increase in birth control methods (such as the pill) that doesn’t provide protection against the spread of STIs. Condoms are currently the only method available to reduce the potential risk of transmission of an STI.

Myth: *Teaching sex education to teens will only make them become sexually active at an earlier age and engage in more sexual activity.*

Fact: *Research has shown sexual education that addresses contraception and safer sex information does not lead to earlier or more frequent sexual activity. “Sexuality and HIV education programs that include discussion of condoms and contraception do not increase sexual intercourse; they do not hasten the onset of intercourse, and do not increase the number of sexual partners. (Kirby, D. Reducing the Risk: a new curriculum to prevent sexual risk taking. 1991)*

Published studies document how sexual health education programs are capable of significantly reducing sexual risk behaviour. The research

demonstrates the effectiveness of sexual health education programs in delaying first intercourse and/or increasing the use of condoms or other contraception methods among participants.

Sexual health education in schools makes a significant positive impact on the health and well-being of the whole community. To neglect such education will have significant social and economic consequences.

For my health, my neighbours’ health and my community’s health... I say yes to keeping sexual education in the schools.

Sources:

McKay, Alexander et al. “Sexual Health Education in the Schools: Questions and Answers.” 3rd ed. *The Canadian Journal of Human Sexuality*. 18.1-2. (2009): 47-60. Print.

Kirby, Douglas et al. “Reducing the Risk: Impact of a New Curriculum on Sexual Risk-Taking.” *Family Planning Perspectives*. 23.6 (1991): 253-263. Print.

McCall, Douglas and Alex McKay. “SOGC Policy Statement: School-Based and School-Linked Sexual Health Education and Promotion in Canada.” *Society of Obstetricians and Gynaecologists of Canada*. 146. (2004).



Being True to Yourself

Profile of Mickey Phillips

by TYSON PHILLIPS, COMMUNICATIONS

Ten years ago the Eastern Door profiled community member Mickey Phillips. He wanted the community to know that he could no longer live with a secret he had been hiding for so long.

“I could no longer fight against who I really am,” Mickey explains. “I knew since I was a teenager that I was gay, but I was very scared to come out of the closet,” he says. Fearing a backlash, he received a ton of support from his family, friends, and community instead. “There were a few negative comments but that didn’t outnumber the people who supported me.”

During his teen years, Mickey was frequently bullied for hanging out with girls and not being the typical tough guy. “I got into a lot of fights back then,” he says. Looking back, he feels being bullied actually made him a stronger person. In his late teens he also dated women. “That is what was expected of me,” he admits. “I knew this wasn’t the real me and I didn’t feel right to be sexual with a woman,” he explains. “I finally came out when I was 27 years old. Now, I hear of people coming out in their late teens. If my story opened the doors and has helped other gay men or women come out, I am very proud that I was able to pave the way for them.”

Mickey and his mother Bernice are very close. “Not only is she my mother, [she’s] my best friend. Just before the original article came out, I sat my mother down and told her that I’m gay. She was very supportive,” explains Mickey, the youngest of six children. Bernice, a soft spoken woman, explains “I immediately accepted that Mickey is gay. I love him no matter what, just as I love all my children equally. They are all my babies,” Bernice says with a smile. Some of Mickey’s friends wish their mothers were more like Bernice. “One friend told me that he can’t get along with his mother; they don’t have the close mother and son bond. It’s sad to hear that. All children and their parents must be open to communicate with each other,” Bernice says. When negative comments were made about Mickey, it was not always said to him directly, but to Bernice. “I call them fat heads with small minds. People like that have to realize there is nothing wrong with gay people. We are all human beings, heterosexual or gay,” explains Bernice.

Mickey built his own home in his mother’s yard and sees her all the time. “We do a lot of things together including playing a lot of golf. When I don’t cook, she’ll yell from her back porch to come eat supper!” he smiles.

“I even took her to the Gay Village in Montreal and all my friends loved her. They told me I am very lucky to have such an amazing and loving mother.”

Mickey was nervous to see what the reaction would be from his brothers. “Two of them came to visit and they didn’t use words, instead one patted me on the back, the other messed up my hair, with smiles on their faces,” he pauses. “I knew then that they were proud of me for telling my story. It took a little longer for one brother, but over time, he has come to terms with me being homosexual.”

With all the bullying that Mickey suffered through in high school, he never thought that the bullies would ever accept him. He was wrong. “I was at the movies and someone kept calling my name. It was a guy who bullied me the most, and we had not seen each other in many years,” he explains. “He gave me a hug and congratulated me for coming out. He apologized for the way he treated me. It was a very proud moment for the both of us.”

A chance meeting at a Madonna concert he was attending with friends in 2008 brought about another life change. Mickey and his friends met up with another group and hung out during the show. This is where he met Kyle Lahache. “It is so clichéd, but we saw each other across a crowded

room and we both felt an instant connection. It was like out of a movie,” Mickey explains joyfully. A few months later, they moved in together and on March 9, 2009, Mickey and Kyle were married. “We did not do this for religion or government, but as a promise to love each other and to have a stronger spiritual connection.” Bernice could not be happier. “Kyle is an amazing person, he and Mickey make a great couple.”

Many myths are associated with the gay population. “A common myth is that gay men dress up as women and act very feminine. There are gay men who act this way, but it’s not all of us. Also, many think we choose to be gay. *It is not a choice.* We are born this way,” he continues. “I hate shopping, I don’t watch *Sex and the City* and I’m not a fashion guru. If I’m invited to a wedding, I love to wear an Armani suit but I am not an expert in the latest fashions,” he explains. “When I was a kid, I didn’t play with dolls, I played with dinkies and trucks, typical stuff a young boy would do. I’m the same today. I love watching and playing sports. Just because I’m gay does not make me feminine.”

Currently Mickey is working in the management department at the Mohawk Bingo. “A few years ago I was a model and actor. I was part of



Photo courtesy of Mickey Phillips

Kevin Saylor’s Musical Entertainers group at one time.” He also modelled for Tammy Beauvais Designs. That led to his poster being displayed all over Europe and he’s also appeared in numerous commercials and movies including *The Day After Tomorrow*. Still, he admits to missing it, “But right now that part of my career is on hold as I have other things to concentrate on.”

Mickey has a very positive outlook on life and he believes coming out is one of the best decisions he’s ever made. “Coming out was a wonderful experience. I have a husband, a family and friends who

love me. I’m just like any other person, I live my life day by day.” When asked what advice he would give to someone who is thinking of coming out, Mickey strongly insists he or she accept themselves for who they are. He explains, “Before coming out, I did a lot of soul

searching and came to accept myself as a gay man. It was only then that I was comfortable to say that I’m homosexual. If you think a friend is gay, and you keep pushing them to confess, the friend will become more withdrawn,” he cautions. “Give the friend time, and when he or she is ready, be supportive. For those who are struggling with their sexuality or are afraid to say they are gay, give yourself time. Once you accept who you are, you will get rid of that guilt and your life will get better; you will become a stronger person.”



How Breastmilk is Unique

by VANESSASA RICE, KMHC

Mother's milk is especially suited for the nutritional needs of her own baby.

Colostrum and breastmilk are adapted to gestational age, and mature breastmilk changes from feed to feed depending on the baby's needs. Breastmilk is a living fluid that actively protects the baby against infection.

How breastmilk protects

A child's immune system is not fully developed at birth and takes to age three or more to fully develop. Breastmilk provides protection for the baby in many different ways.

- When the mother is exposed to infection her body produces infection fighting antibodies. These antibodies are passed to the baby through her breastmilk.
- Mother's milk stimulates the baby's own immune system.
- Factors in the breastmilk help the growth of the cell walls to the baby's gut, aiding the development of a barrier to micro-organisms and allergens, and in the repair of damage from infections.
- White cells in breastmilk destroy bacteria.
- Components in breastmilk also prevent the micro-organisms from attaching to the cell walls. If they do not attach, they pass out of the baby's system.
- The growth of beneficial bacteria in the breastfed baby's system leaves little room for the growth of harmful bacteria.
- Nutrients are not available for harmful bacteria to grow.

What are the components of breastmilk?



Colostrum: the first milk

- is produced in the breasts by the seventh month of pregnancy and continues through the first few days after birth. Colostrum is thick, sticky, and clear to yellowish in color.
- acts like a *paint* coating the baby's gut to protect it. If any water or artificial feeds are given, some of the *paint* can be removed, allowing infection into the baby's system.
- helps establish good bacteria in the baby's gut.
- is the perfect first food for your baby with more protein and vitamin-A than mature breastmilk. Colostrum is a laxative and helps the baby pass meconium (the first sticky black stools). This helps to prevent jaundice.
- comes in very small amounts that suits the baby's small stomach and immature kidneys that cannot handle large

volumes of fluid. Breastfed newborns should not be given water or glucose water unless medically necessary.

Preterm breastmilk

- is the milk of a mother giving birth before 37 weeks gestation. It has more protein, more immune properties than mature milk, and has higher levels of some minerals including iron,

making it more suitable for the needs of a premature baby.

Mature breastmilk

- contains all of the major nutrients; proteins, carbohydrates, fats, vitamins, minerals and water in the amounts the baby needs. It changes in relation to the time of day, the length of a breastfeed, the needs of the baby, and diseases that the mother has had contact with.
- provides nutrients as well as substances that help in digestion, growth, development and provides protection from infections. Breastmilk continues to provide these nutrients, protections, and other benefits as the child grows.

Resource: *Lactation Educator Training Manual*



Teens Online

by BRIAN WILLIAMS, PROMOTION & EDUCATION

Teenagers like to socialize with their friends and peers in a variety of ways. One of the more popular ways is by joining a social networking site e.g.: Facebook, Myspace, etc., where they join others sharing similar interests.

Social network users tend to be more candid about the information they provide. They may be more concerned about building their social connections than maintaining confidentiality and privacy. As users reveal a greater amount of personal information, the proliferation of personal data presents a variety of risks such as: identify theft, stalking, embarrassment, and blackmail.

Most people would be suspicious of the motives of a complete stranger asking them personal questions about their lives and the people they know. Online social networks are a different matter, giving the appearance of being *private* but only being as private as the controls you take the time to set. The type and amount of personal information users are willing to provide can be surprising.

Teenagers should be reminded that these websites are public spaces. This openness can leave them vulnerable, as personal information can be easy to obtain, social connections easy to follow, and the identity of a harasser hidden.

A survey on locations where youth are most commonly harassed and solicited for sex online reveals several interesting results. The stereotype that most adult sexual predators pretend to be youths in order to trick teens into meeting them is false. According to the study, the majority of these adults are honest about their age and their sexual intentions and many of the teens who

meet with these offenders offline will do so more than once. Instant messaging and chat rooms are where teens are most likely to experience harassment and unwanted sexual solicitation.



Girls are more likely than boys to report unwanted sexual solicitation and harassment on social networking sites than other online sites and harassment is more frequently reported by older youth on social networking sites compared with all other places. Youth are more likely to be targeted by someone they know for specific types of victimization e.g. spreading rumours about a classmate. It's also possible that some of these events occur between youth who are age-appropriately curious about sex but lose control of the conversation.

Parents shouldn't fear their child(s) access to technology. By allowing teens onto social networking websites, they allow their children access to building and expanding their friendships. A teenager could be using the Internet to harass (sexually or

otherwise) another just as easily as they can be victimized. It's not the tools that allow these connections (or determine its use) that necessarily need to be eliminated from a teenager's life. Rather, teens should be taught to understand what behaviour is appropriate both online and offline and to be cautious of the information they post online. They need to be taught how to use the technology responsibly.

Editor's note: Facebook recently changed its privacy policy requiring users to opt out if they want to keep information private. By default, this information is public until a user changes the setting. Critics, including the Privacy Commissioner of Canada, say the new policy is too bewildering to navigate through.

Sources:

Richter Lippford, Heather et al. "Understanding Privacy Settings in Facebook with an Audience View." UPSEC '08.n.pag.07 May 2010.

Ybarra, Michelle L. and Kimberly J. Mitchel. "How Risky Are Social Networking Sites? A Comparison of Places Online Where Youth Sexual Solicitation and Harassment Occurs." *Pediatrics*. 121.2 (2008): n.pag. Web. 07 May 2010.



myspace and facebook logos

Parenting a Disability

by TARYN CONLON, PREVENTION SERVICES

Being a parent is difficult. Children can be trying, time consuming and, at times, completely exhausting. Imagine yourself as a parent to a child with a disability, like Fetal Alcohol Spectrum Disorder (FASD); now imagine not knowing that they have this disability.

FASD is a term that describes a range of disabilities that may affect people whose mothers drank alcohol while they were pregnant. These disabilities may cause people to have physical deformities, problems learning, poor memory, difficulties with vision/hearing, and they may have serious problems controlling their behaviour.

FASD is known as an invisible disability. People who are affected have brain differences that can't be seen by looking at someone. Each individual is affected in various ways depending on when the brain was exposed to alcohol. Individuals with FASD can have an average IQ yet lack the memory or the cognitive ability to perform certain tasks. These individuals look and act "normal" but frequently end up in situations where they are troubled or have frustrated outbursts.

Example: Michelle is 10 years old and new to her current foster home. In the first few weeks, she is cooperative and helpful. Then, her foster parents notice that she seems to not follow through with requests. When asked to describe her behaviour she appears to have become a "selective listener." Several days later the foster mother notices mucus on Michelle's pillow and that she has developed a serious ear infection.

Michelle is immediately taken to the doctor where her ears are drained and treated. In this case, Michelle never complained because she has a high tolerance for pain and impairment of her verbal processing skills makes it difficult for her to communicate. The ear infection caused mucus to travel up and down her ear canal causing her hearing to fluctuate in and out like a *selective listener*. Now aware of this, Michelle's family uses more visual cues, such as asking and pointing to her ears to make it easier for her to understand and communicate.

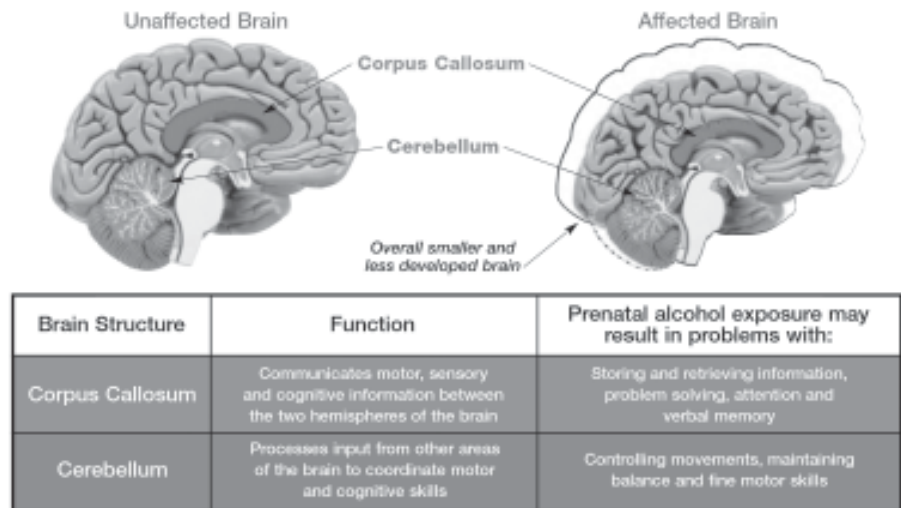
Many people who are affected by prenatal alcohol exposure have faces that are too flat in the middle, which can lead to multiple ear infections. They may develop scar tissue in the ear canal, leading to hearing loss. FASD individuals may also experience hyper or hyposensitivity where they feel too

much or too little sensory stimuli. In Michelle's case, she was hyposensitive and didn't feel the pain from the ear infection.

This is just one example of how an individual with FASD may encounter problems. It is our role in the child's life to pick up on their cues, focus on their strengths and understand the world through their eyes.

September 9th, 2010 is FASD Day. People from all over the world raise awareness about the dangers of drinking alcohol while pregnant and acknowledge the families and individuals knowingly and unknowingly struggling with FASD. Watch for FASD activities this September in your community. If you need more information regarding FASD you can contact: FASD Information Service (Canadian Center on Substance Abuse) at 1-800-559-4514 or Kahnewake Shakotiiia'takehnhas Community Services at 450-632-6880

Brain Structures Most Sensitive to Prenatal Alcohol Exposure



National Organization on Fetal Alcohol Syndrome (NOFAS)
1.800.66NOFAS or visit www.nofas.org



Music for Life

by NANCY ROTHER & ALANA ATWIN, STEP BY STEP

It is no question that music has an influence on us. It moves our bodies, affects our brain function and development, and can even have an effect on our emotions. But how *important* is it to introduce music to children? At what age? And how do you do it?

Music helps the body and mind work together by combining rhythm, melody, lyrics, motion and interaction. These cognitive, physical and social-emotional aspects of a child's engagement in musical activity are known to support early learning—including literacy skills—as well as relationship and communication skills. We know that all children have different ways of learning. We, as parents and educators, must teach to these multiple intelligences that include movement, music, and emotion in addition to the more traditional pathways. Music is one of the most powerful and inclusive teaching tools. Everyone can participate regardless of their learning challenges and everyone can learn through music activities.

Research has shown that learning music boosts school achievement even for children living in disadvantaged personal situations.



Studies of brain development and music have shown that music education can stimulate the growth and development of connections within the brain—the same connections also believed to be involved in the abilities to focus and sustain attention as well as to memorize and integrate information. In addition to what's *firing* in the brain, music fosters other kinds of connections too. In particular, music has the social and emotional power to connect people to each other and to a shared culture that is rich in meaning. Children can improve their future by gaining a deeper understanding of

music and its beauty. Music has the ability to transform us all.

Ways to introduce music to children

- Around five months gestation, fetuses can hear. Play music for your baby in utero! You can

use headphones—remember to keep music gentle, volume low, and limit to one hour a day).

- Sing to your baby. Babies don't care if you don't know the words or can't carry a tune! Rock your baby as you sing, or

bounce them on your lap to the beat.

- Teach them songs that go along with simple hand motions or dance moves. Try *Itsy Bitsy Spider* or *The Hokey Pokey*.
- Give your toddler a pot and wooden spoon to develop a beat or tempo. Change the tempo and try different surfaces like the floor, a pillow, or on a variety of different sized pots.
- DANCE!
- Take them to live performances. Summer offers great opportunities to take part in outdoor events like the jazz festival (which offers most shows FREE!).
- Share your favorite music with your preschooler: rock, blues, folk, popular, etc. They will probably not have the same opinion as you but it will make for an interesting discussion!

Nancy Rother & Alana Atwin are support staff at Step by Step

Photos courtesy of Step by Step



Gardasil HPV Vaccine for Men

by TAYRN CONLON, PREVENTION SERVICES

In the last few years there has been growing awareness about the Human Papillomavirus (HPV) vaccine for women called *Gardasil*. The vaccine was introduced in 2006 for girls aged 9-26 years in Canada and the United States to prevent the strains of HPV that are associated with cervical cancer and genital warts.

What Is HPV?

HPV causes cancer and 75 per cent of sexually active people are infected at some point in their lives. HPV is the most common sexually transmitted infection in Canada. Most people will contract the virus at some point in their life *without* any symptoms. (Palefsky)

HPV is an infection that can lead to cervical cancer, genital warts, cervical dysplasia and abnormal pap smears. HPV is spread through surface contact. This can be from skin to skin or through mucous membranes (inside of your nose, mouth, etc).

HPV in men can cause penile cancer, genital warts and anal cancer. These types of cancers are much less common and men present fewer symptoms and fewer serious complications from HPV infections than women do.

Gardasil for men?

Recently studies have proven that Gardasil is “just as effective in men as it is in women.” (Gaboury). These studies have approved the use of Gardasil for men and in February 2010 the pharmaceutical company

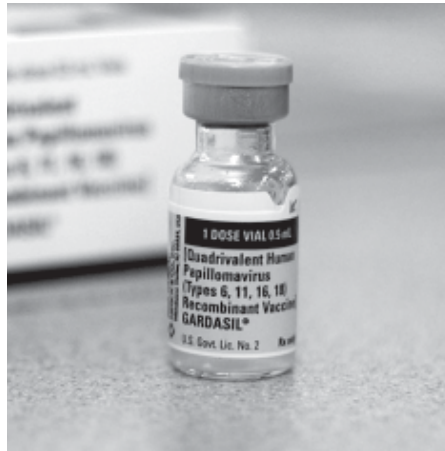


Photo by Jan Christian

Merck Frosst was granted authorization by the federal government to start marketing Gardasil to males 9-26 years of age.

The new vaccination for men will not just protect them from developing warts and cancers but also it will stop the spread of the virus.

The vaccine does not protect people from any other types of sexually transmitted infections (STI) including syphilis, chlamydia, gonorrhoea or others. Condoms are the most reliable method for preventing the transmission of STIs yet one must remember that any skin that is in contact with infected skin can spread HPV. It is also highly recommended that women who have received the vaccine continue to get regular pap tests.

If you have any questions or concerns regarding HPV or any other STI please contact Kateri Memorial Hospital Center 450-638-3930 or another health care professional.

Sources:

Gaboury, Ashley. HPV Vaccine for Men Approved Nationally. The Gateway.02 Mar. 2010. Web. May 2010. <http://thegatewayonline.ca>

Palefsky, Joel. What Your Doctor May Not Tell You About HPV and Abnormal Pap Smears. USA. Grand Central Publishing.2002. Print.



Kahnawake Fire Brigade - Volunteers Wanted!

Protecting the community is done by individuals just like you! Fathers, son, mothers and daughters. The Kahnawake Fire Brigade needs YOU!

The KFB will train and equip you to respond and help your community! You'll learn new skills, gain confidence and make new friends.

Call 450-632-2010 for more information



Dating and Teens: What is Abuse?

by CHRISTINE TAYLOR, PROMOTION & EDUCATION

Teens aren't the only people who can experience abuse. However, teens may be more susceptible to abusive relationships through inexperience and/or social pressure to fit in. They need guidance and help to better understand themselves in order to decide whether a relationship they are in is healthy or abusive and if they want to stay in it or leave. Obviously, if abusive behaviour doesn't stop...they should leave.

What is a healthy dating relationship?

- You enjoy the time spent together
- You respect each others opinion
- You can disagree and know that it's okay to have and talk about differences
- You can do things apart from each other as well as together
- You have no fear in this relationship
- You do not try to restrict or control each other
- You can be yourself, and do not have to act one way or another
- You encourage and support each other

Not all dating relationships are healthy. As many as a one-quarter of women and about one-tenth of men in their twenties have experienced dating abuse.

What is abuse?

Abuse is about power and control. Abuse is about one person trying to control or manipulate another.

Here are some of the tactics used to manipulate a dating situation.

Emotional Abuse

- Treating you with disrespect
- Calling you names, insulting, blaming, or humiliating you
- Interfering with and calling down your spiritual beliefs and what you do
- Being on an emotional roller coaster. Happy with you one moment, mad or sad in another
- Isolating you. Keeping you alone rather than with anyone else, keeping you away from your friends or family
- Being possessive, getting mad at you for spending time with other people

Sexual abuse tactics

- Pressuring you to have sex
- Engaging you in unwanted sexual touching and other unsafe sexual practices
- Making fun of you or making you feel bad if you do not want to do certain sexual things
- Forcing you into degrading, humiliating or painful sexual acts
- Anything sexual that makes you feel uncomfortable but they ask you to do

Intimidation tactics are actions meant to scare you

- Throwing or breaking things
- Destroying your possessions

- Threatening (to harm things you care about, to start rumours, to commit suicide)
- Stalking or harassing (following, watching your house, calling/texting/emailing all the time)
- Spreading false rumours about you to friends or family

Physical Abuse Tactics may include

- Shoving, punching, pushing, elbowing, slapping, kicking, biting, pinching, hair pulling
- Throwing things at you, threatening you with an object or weapon

If you are in an abusive relationship, you can get out. Dating abuse is just the tip of the iceberg, signalling other problems.

Talk or seek support from someone you trust, either from friends, professionals, in-school counsellors, or from a support agency like Kahnawake Shakotii'a'takehnhas Community Services. The Peace-keepers are available if the situation becomes violent or there are threats of violence.

You deserve to be happy and secure in your relationship. There is always hope and help available.

The Back Page...

“We don’t receive wisdom, we must discover it for ourselves after a journey that no one can take for us or spare us.”

Marcel Proust, French author

Preparing a Safety Survival Kit

Part three of a four part series

by KELLYANNE MELOCHE, EMERGENCY PREPAREDNESS

In the last two articles we learned about locating safety spots and preparing an emergency plan. This issue, we look at preparing a safety kit.

Explain to your child that after a severe storm there could be no power, and that means no access to bank machines or banks and possibly no access to shopping. Ask them what items they think they would need if that were to happen. Put it on a large paper that everyone can see and then group the items as food, clothing, entertainment, and shelter. Bring out a survival kit list to add to their suggestions or let daddy and mommy have turns with the kids, suggesting things they wouldn’t think of, like can-openers and tools.

- Having the kids draw pictures of items that should go in the kit and put them on the fridge with magnets. Have them close their eyes briefly and then guess which object you’ve taken from the fridge.
- Playing which of these things belongs together, grouping food items, etc.
- Allowing the kids to get the items to be packed in the kit. Suggest an item to each child and see who can come back with it the fastest. Make a list of the items you need to buy on your next shopping adventure.

- Sitting down with the kids and some photo albums. Allow them to pick out a few favorite photos for the kit. Ensure that they have one photo of dad or mom if they work outside of the community, since they may not be able to get home for several days.
- Replenishing the old water and/or food items stocks in the kit by having a disaster party. A disaster party should be held every six months when you change your food and water stocks and check your batteries.
- Letting the kids perform a special chore around the house in order to pick out a favorite treat (comfort food) from the kit e.g. granola bar.

Next issue, look for our final article in this series on preparing an emergency action plan.

You can get this and more information from the Kahnawake Emergency Preparedness Planning office located at the Old Peacekeepers Station at 450-632-0635.

August is...

1-7 World Breastfeeding Week

September is...

Breakfast for Learning Month
Natl. Arthritis Month
Ovarian Cancer Month
12-20 AIDS Walk for Life
9 FASD Awareness Day
19 Terry Fox Run
21 World Alzheimer’s Day
25 Terry Fox Natl. School Run Day
27 World Heart Day



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

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