



# Aionkwatakari:teke

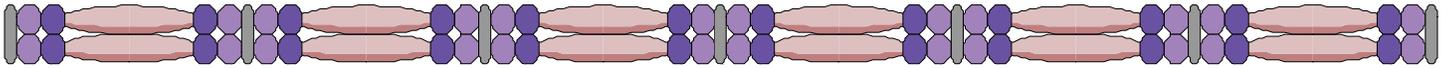
(A-YOU-GWA-DA-GA-RI-DE-GEH)

"For us to be healthy"

Vol. 20, No. 1

Kahnawake's Only Health and Wellness Newsletter

Enniska / February 2015



## Annual Memorial March for Missing and Murdered Indigenous Women

**Come out and show your love**



[missingjustice.org](http://missingjustice.org)

514-937-2110

**Atwater Metro, corner of St Catherine and Atwater  
CABOT SQUARE ~ February 14th ~ 3pm**

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## Aionkwatakari:teke

Aionkwatakari:teke is a newsletter published six times a year by Communications Services of Kahnawake Shakotia'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

It's always hard to come up with something to say for the editorial. Ours is not an instantaneous medium. Case in point: I'm writing this in mid-January, we go to print the last week of January, and the newsletter gets distributed the first week of February. So, no matter how relevant I try to be... my words and thoughts will already be at least three weeks old. Gah.

In any case, some sentiments are timeless and one of those sentiments is the hope that 2015 will bring you and yours health and happiness. Further, I hope that world wakes up to the global threat of climate change and that the world governments put real effort and resources towards specific and measurable targets to reduce greenhouse gasses. I also hope that with the falling oil prices we see investment in renewable energies and we stop relying on resources that are finite and detrimental to our environment through extraction, refining, and usage. None of this negates our personal responsibility to do more to reduce greenhouse gasses.

Now, onto this issue. We've got some great articles including violence prevention, what you should know about health care when travelling outside of Quebec, the dangers of being on thin ice (literally), some information about recycling your electronics, and activities to keep you and your family occupied during March break, as well as an article on how to stay motivated and keep that New Year resolution to get in shape. We also have a handy-dandy winter carnival schedule from the Kahnawake Youth Center. But first, on the following page, we have a few words from KSCS' Executive Director, Derek Montour. Lots to look forward to.

*Sken:nen,*

*Marie David*

*Photo on page 2: Skitterphoto.com. Images on pages 4, 8, and 9 from Pixabay. Photo on page 7: Adam Ciesielski/Freepik.com. Photo on page 12, courtesy of the Kahnawake Youth Center.*





## Walking our Talk

BY EXECUTIVE DIRECTOR DEREK MONTOUR, KSCS

I have been noticing lately that the community members sometimes question whether an organization actually takes action when an individual makes a complaint or they express confusion on the process, so I thought I would say a few words on this topic.

An organization can receive complaints in a variety of ways. How organizations respond to these complaints is usually written very clearly in their policies and procedures manual. This allows an individual community member, and the individual employee, to know exactly how an organization will handle the complaint. Sometimes a complaint is referred to a separate committee to address and sometimes to a separate individual, like an ombudsman.

Often, there is little information on what actions were taken that can be provided back to the person who filed the complaint. This can be a source of frustration, but it is important to remember that employees have the right to dignity and privacy regarding disciplinary action against them.

In KSCS' case, we recognize that the community has placed a high degree of trust and responsibility in our care

due to the nature of our roles. KSCS holds this trust and responsibility very seriously. We want to reassure the community that our primary concern is always the well-being of our clients and, in particular, our children. While any investigation of complaints is conducted, KSCS will take every precaution to ensure the safety of our clients.

The normal protocol for any organization when an employee is accused of something is for the organization to take specific precautions to minimize any additional risk. This risk may be considered further damaging of its reputation and/or clients it may provide services to. We are also not lawyers, or peace/police officers, so we also must ensure that we communicate with those agencies to receive proper advice to ensure everyone's rights are respected. We must proceed cautiously; this may not be at the speed others wish.

In conclusion, all community organizations have an obligation to institute a process to respond to complaints. Organizations have a responsibility to their employees, and to their stakeholders — our community members — to investigate complaints seriously and

diligently. We then must apply appropriate levels of disciplinary action the offense may warrant, up to and including, dismissal. With any disciplinary action we take, we must also anticipate any risk that may be involved with that decision (for example going to labour court).

If anything you hear, or read on Facebook, seems other than this, it would be best to ask for clarification first before jumping to conclusions.

# Suicide Chronicles: Transforming the Spirit of Suicide

## Part 2 of 5

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

*Tell all my mourners  
To mourn in red—  
Cause there ain't no sense*

*In my bein' dead.*

—Langston Hughes (1902—1967)

*“Yeah. I remember when I was a kid how adults were trying to control my grief, trying to tell me how I was supposed to feel or how I was supposed to behave... that there was a proper way to mourn... and I was interested in improperly mourning.”*

—Sherman Alexie

### AIN'T NO SENSE

Death by suicide is senseless, awful, and sorrowful in every way. We're not here to glorify suicide; we're here to talk about it because it needs to be addressed.

To clarify the context of Mr. Alexie's quote, he wasn't referring to any personal contemplation of suicide. He was talking about how he dealt with — or was unable to deal with — death within his own family. He expresses a memory of confusion regarding the appropriateness of his own coping methods, and the fact that other people seemed to have an opinion on whether or not he was doing it right. It's relevant to this suicide conversation, because it calls into question the idea of *how to grieve*.

And the fact is many of us — Indigenous people — don't know the answer. Sometimes, we just can't deal.

It's not that there's something inherently wrong with us. It's that as a people, our souls have been collectively

wounded. It's called historical trauma. We're still experiencing grief from the fairly recent genocide of our people,

followed by a *cultural* genocide through assimilation and boarding schools\*, compounded with a legacy of intentional oppression by the federal government/military, leading to epidemic conditions of poverty, alcoholism/drug abuse and familial losses, which has caused the overall suppression of our voices and dignity by the outside world. These are things that every one of us faces *to this day*.

Almost every Indigenous person struggles with something that came from this colonial legacy, and for many of us, these struggles are either constant or recurring.

Grief and traumatic events are hard enough to deal with when there's a beginning and end. For example, one loses a grandparent to whom they were extremely close. It's hard. I'm not going to say that it's *easy* to deal with by any means — but at the very least, when something like this happens, we can (usually) justify a reason for it: my grandparent grew old and sick, it was their time. We have the comfort of knowing that everybody has to deal with losing a grandparent at some point or another. While it's tragic and sad, it's also natural. It's something that we can recover from.

But for many Indigenous people, not only are we *born* with a sense of loss for our ancestors that we can't even put our fingers on, we experience and witness

heartbreaking and terribly devastating loss relatively frequently throughout our lives.

On one hand, we're strong in the sense that there's so much we've overcome. Our communities are intact, we share a deeply rooted love for one another, and we have incomparably powerful cultural heritage. On the other hand, the closer we are to our communities, the more it hurts that we experience and witness, on a near-daily basis, the collective struggle of our people. It hurts to see our brothers and sisters going through alcoholism, relying on drugs, losing their personalities to battles with substances, abusing our loved ones (contrary to our cultural traditions), struggling to pay the bills, encountering risky situations, and all too often, dying young.

“So often, as soon as an Indigenous person is able to start coping with one bad thing happening, something else comes up, and it's like, when does it end? Where is the time to heal?” explains Dr. Jacque Gray, research psychologist and associate director of the Center for Rural Health at the University of North Dakota.

Even during healing, there's the question of how we grieve. We know that prior to colonialism, our people were usually very in tune with the spirit world, experienced ceremony and prayer as a part of their daily lives, and were engrossed in the traditions of their people and without question were generally more comfortable with

the mourning process or how they dealt with sadness.

Today, our people are often — but not always — removed from ceremonies and culturally familiar ways of dealing with bad situations. Sometimes, suicide feels like the only option.

It's heavy stuff we're dealing with. But the good part is, there's hope and a lot being done to improve the situation.

## APPROACHING HEALING AND SOLUTIONS

The statistics are bleak — we're not going to go into the numbers — instead let's just say that yes, Indigenous people, especially youth, die by suicide at an alarming rate. The information is available through the CDC and IHS\* websites.

Instead of stats, let's look at solutions and techniques for addressing the issue. We've spoken with dozens of sources — individuals and organizations who are working to combat suicide — all with powerful stories. Here are a few things that stuck out.

*"If you're feeling helpless, help someone."*

— *Aung San Suu Kyi, Myanmar opposition leader*

Mark LoMurray has been working on suicide prevention for nearly 50 years. He runs an organization called Sources of Strength and they partner with tribes and villages all over Indigenous country. The organization recruits and trains peer leaders who have often been through traumatic situations themselves to mentor others and spread hopeful messages.

And that's the trick: staying positive and focusing on strengths, not

weaknesses. If you're in a situation where you can help somebody, remind them of how you *got through* something rather than emphasizing how difficult it was in the moment. Emphasizing the negative can lead to further feelings of helplessness.

LoMurray also reminds us that even though Indigenous communities experience very real post-traumatic stress and trauma, there are ways to spin that.

"Everybody knows about post-traumatic stress but there's also post-traumatic thriving," he says. "Some people have been through really, really rough stuff and they'll make a plan to change their life and get really resilient and grow from that."

That's exactly what Rayna Madero, founder and executive director of Native Cry Outreach Alliance, did. Years ago, several of her close family members died from suicide, and in her state of grief (coupled with the fact that she was in an abusive relationship at the time), she attempted suicide. Eventually, she decided to do something about it — not just for herself, but for others.

"I was grieving so hard and *knowing* that I'm not letting my loved ones rest — but I had to let them rest. But I figured the only way I could help myself was to help other people who are going through the same struggles."

## CULTURALLY APPROPRIATE BEHAVIORAL HEALTHCARE

Recent research shows that incorporating unique cultural needs in mental health treatment greatly reduces suicide risk.

The lack of well-funded, culturally appropriate behavioral healthcare

programs in Indigenous country is staggering. It's estimated that IHS is only able to fund about 7 % of actual behavioral health needs. And even if IHS programs were fully funded, many Indigenous people simply don't feel comfortable going to a sterile environment like an IHS clinic for emotional support.

As with regular medicinal treatments, Indigenous people are often better suited to counseling or psychiatric services that are rooted in traditional healing methods. And while there are many programs and non-profits out there who do operate such models (for example, incorporating traditional ceremonies or organizing healing activities based on what's popular in specific reservation communities), many of them are independent and relying on unstable funding sources.

One way to improve the longevity and stability of all of these programs — IHS, non-profit, etc. — is to get more researchers into Indigenous country who can "clinically" vouch for these programs in order to secure funding. Federal funding sources, like grants, almost always *require* evidence-based research before they'll offer the money. And of course, if these behavioral healthcare professionals are Indigenous themselves, they will be much more capable to understand and work with the communities.

## ADDRESSING THE "SPIRIT OF SUICIDE" HEAD ON

Dr. Duran is an Indigenous clinical psychologist who has dedicated his life to revolutionizing contemporary Indigenous behavioral healthcare.

*Continued on page 7*



# Violence Prevention

BY MARY MCCOMBER, PREVENTION

**V**iolence against women is a topic of concern to us all.

Violence towards anyone is a serious threat to the health and safety of our communities. It is important to be informed and to act as positive role models to youth.

The Canadian Women's Foundation (CWF) has some facts on crime rates and violence against women on their website including:

- Half of all women in Canada have experienced at least one incident of physical or sexual violence since the age of 16.
- On average, every six days a woman in Canada is killed by her intimate partner."
- Victims are less likely to report an incident to the police and more women are experiencing violence after leaving their abuser.
- Most men are not abusive to their families, but when family violence occurs, the victims are overwhelming female.

These statistics can be overwhelming, and change can only happen when there is a shift in attitudes, in policies, and supports for victims.

Societal changes take time, and change needs to involve all aspects of the community, family, youth, teachers, policy makers, and politicians. An important sector of the population to educate is our youth. If they can

be guided, and nurtured into positive adults, family violence may be decreased.

What can parents do to teach youth about healthy relationships?

- Parents may get involved with their schools, and support prevention initiatives.
- If schools do not have prevention programs, parents may support systems by involving leadership to assist.
- Parents may get educated on the issues, talk to youth about issues, and act as positive role models.

According to the information posted on the Canadian Women's Foundation (CWF) website, "the teen years are an ideal time to teach violence prevention, because the patterns of abuse are often learned early. Young people are highly focused on relationships and often yearn for opportunities to discuss them."

The CWF believes one way to teach youth about healthy relationships is to focus on assertive communication, conflict resolution, boundaries, empathy, and other social skills. These social skills can be promoted and encouraged in order to help youth to have healthy relationships and give them the skills to solve many problems. The following information was taken from the CWF website:

**What is assertiveness?** Assertive communication is the ability to express yourself effectively and

share your thoughts and feelings while respecting others.

## What is Conflict Resolution?

Conflict Resolution is a process of addressing differences of opinion or belief in a respectful and constructive manner.

## What are Boundaries?

Boundaries are limits we set in our relationships that allow us to take care of ourselves.

**What is Empathy?** Empathy is the ability to understand and share the feelings of others.

If you need more tips, see the website at [www.canadianwomen.org](http://www.canadianwomen.org) or talk to a professional.

**Upcoming event: Memorial March for Missing and Murdered Women,** February 14 2015 — keep your eyes and ears open for promotions, KSCS will again offer a bus service. For more information, please contact: Mary McComber at KSCS 450-632-6880 ext 153.

Sources: "Healthy Relationships: Tips for Parents." Canadian Women's Foundation. PDF. n.d.

"Facts About Violence Against Women." Canadian Women's Foundation. n.d. Web. Dec. 2014.



## Before Leaving Quebec

BY DOUG LAHACHE, COMMUNICATIONS

**W**hy you should purchase supplementary health insurance before traveling outside the province of Quebec!

When vacationing or whenever you travel outside Quebec, persons holding a valid Quebec Health Insurance Card can receive healthcare services that are covered by the Québec Health Insurance Plan. However, in most cases, the Régie de l'assurance maladie Québec (RAMQ) reimburses only part of the cost.

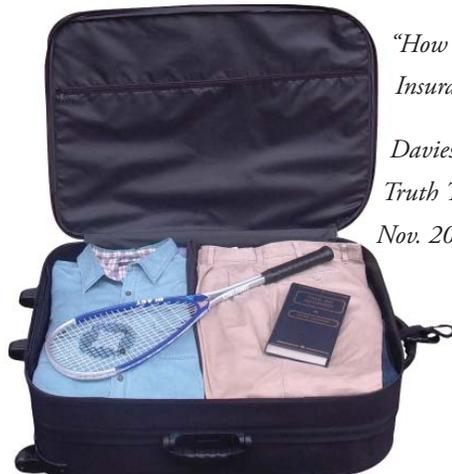
In the unfortunate event you are outside Quebec and have to go to a medical facility (hospital, clinic...) and do not have supplementary insurance, you'll have to bear the full portion of the costs not reimbursed by RAMQ, which could mean a considerable amount of money. Note: some health services may not be covered under the Quebec Health Insurance Plan which would mean you will be responsible to pay the full amount for these services.

Before leaving Québec, even for a one day shopping trip or to attend a sporting event or other event, it's important that you have supplementary health insurance to cover, in part or in full, the costs of health services not paid by RAMQ. Once you have accrued these costs you — and you alone — are responsible to pay, there are no public programs or services that can assist in covering these costs.

There are numerous ways to get medical travel insurance coverage; some credit cards offer their card holders these insurance, there are travel agencies, financial institutions, private insurance companies/brokers and many others that can help you access the coverage you need.

Source: "Temporary Stays Outside Quebec." Régie de l'assurance maladie Québec. n.page. n.d. Web. <http://www.ramq.gouv.qc.ca/en/citizens/temporary-stays-outside-quebec/health-insurance/pages/services-covered.aspx>

Other useful articles: Foss, Eric and Manmeet Ahluwalia, "Know What You Are Buying to Avoid a Vacation Disaster." CBC. 14 Dec. 2014. Web.



"How to Navigate the Risky World of Travel Insurance." CBC. 20 Nov. 2014. Web.

Davies, Matt. "10 Travel Insurance Myths...And the Truth That May Surprise You." Ingle International. 10 Nov. 2013. Web.

Continued from page 5

We'll end with a concept from his book, *Healing the Soul Wound*:

*If the spirit of suicide has come to visit you, make an offering. Change the relationship with that suicidal energy: welcome it. Acknowledge that it's not there to bring death, but rather to bring a transformative time. By making an offering and speaking to it, you can empower yourself to be in control, in case that spirit returns in the future. During this transition, a part of you may die — and that's okay. Let it happen. But don't let that suicide spirit take control — death is permanent, and death is not going to fix anything.*

Remember that the spirit of pain is directly connected to the spirit of healing.

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 Native health and wellness. Follow her on Instagram at [chelswoelse](#) 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](http://www.cutbankcreekpress.com) Twitter: [@BigIndianGyasi](#).

Read more on the Indian Country Today website using the author's names as the search term.

\* residential schools in Canada.

\* Center for Disease Control and Indian Health Services, respectively.

\* Statistics Canada compiles statistics of suicide rates of Indigenous people in Canada; however, statistics are incomplete due to some indigenous communities not participating.



# What to do During March Break

BY STEPHANIE HORNE, PREVENTION

**M**arch Break is a great opportunity to plan for some family fun and special activities.

Parents are often stressed with many commitments and activities throughout the year. A week off allows families to pause and change our normal routine.

The Family and Wellness Center aspires to give some ideas to bring families together and build on healthy family time. Below are some affordable ideas to try out during the March break:

**Visit our local library.** The staff is very friendly and there are many books to borrow or you can use the free internet connection and possibly research more fun activities to do in the area.

**Have you ever thought of visiting our Cultural Center and the Kahnawake Tourism office?** It is rather amusing to be a tourist in your own community. We are very fortunate to have such a rich resource of cultural information.

Bearing in mind, Kahnawake's top health priorities, and the March break is an opportunity for some fun family physical

activities at a reasonable cost which may include the following

- swimming at either the Aquadome in LaSalle or the Polydium in Chateauguay.
- sliding at the golf club.
- skiing and other outdoor activities – Oka Park has some rental equipment for cross country skiing, snowshoeing, and kicksledding.
- family skating.

## STAY ACTIVE – IT NURTURES OUR SPIRITS AND OUR BODIES!

You may also want to try out some activities in the Montreal area such as laser tag, indoor mini golf, rock climbing, or trampoline, or go to the movies, museums, etc. Our children often go to these places with their summer camps but wouldn't it be fun to be able to partake in the excitement with your child? You can also get some good ideas from the Montreal Families website – [www.montrealfamilies.ca](http://www.montrealfamilies.ca)

With our busy schedules, it's good to be mindful in actually planning some downtime for our

family – try spending one day with no electronics. Un- plug for the whole day! Make it a pajama day. When was the last time you played a board game as a family? This is a wonderful opportunity to get together and share some of your favorite memories as a child and make new ones. Perhaps you can do a family art project – Pinterest always has some inspiring ideas.

Have a date with each one of your children – individual attention is a positive way to connect and build a strong relationship. Let them know that they are loved and important. Most of all enjoy your time off because before you know it you will be busy packing school lunches and coordinating your family's coming and goings.



# Resolving to Get Healthy

BY ALEX MCCOMBER, KAHNAWAKE SCHOOLS DIABETES PREVENTION PROJECT

The post-holiday resolution to improve health, eat healthier, be more active and/ or lose weight is again upon us.

People who find themselves with a health issue such as diabetes, hypertension, or high cholesterol and/or high stress levels are often looking to improve in that area. While the solutions to eat healthy, to be more active, to live with a positive attitude, and to get enough sleep can be simply stated, putting these into practice is usually a complicated journey.

We all need some type of motivation to get started on a program and to keep us involved through the journey.

Positive role models, who have made significant lifestyle changes, are a good place to start. Find out what caused them to make these changes.

We can look at our own journey to see what positive changes we have made in the past and reflect on how we were able to do that. Identify different motivators, including a desire to be healthy, taking personal control of our lives, and wanting to make a difference for our children and grandchildren.

One strategy is to create a personal vision of success. Before beginning a journey, we need to know our

destination. “What do I want to look like”, “how do I want to feel physically and emotionally” and “what do I want my life to be like” are some questions that come to mind and we need to spend some time answering these questions.

This goes beyond wanting to lose ten pounds or getting in shape and helps define and describe our objectives.

The next step is to take an inventory of where we are with regards to our eating habits, physical activity and how we manage stress.

We ask ourselves questions about what we eat, how we eat and when we eat; how much and what type of activity do I do; how do I handle my stress and my responsibilities. From here we can identify goals and develop strategies to reach these goals.

The important thing is to decide on what actions you want to take and develop a plan that involves small, manageable steps.

Realize that going all-out does not work for most people; we need to build up a series of actions where we can see growth and improvement.

Overall, the goal is to be making healthy lifestyle changes.

Having a support group or cheering section is definitely something to consider, especially if they are in the same boat.

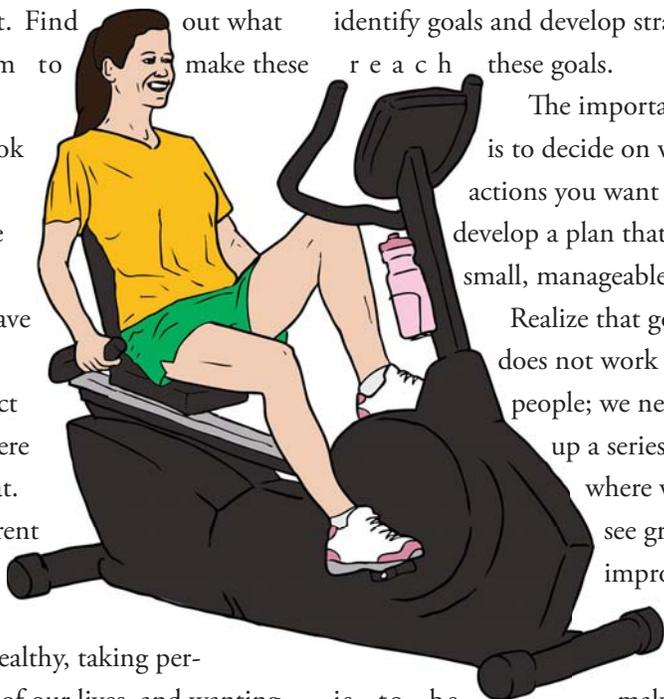
Attending a fitness program or class, a walking club, cooking classes or stress reduction program like yoga can introduce you to a new group of friends who can be supportive and encouraging.

Finally, a note for folks who find themselves at work or on the go all day with no time to exercise; there are lots of exercises we can do without having to join a gym or sign up with a program.

Finding time to exercise at the office is not as difficult as you may think. Most offices or jobs allow for morning and afternoon breaks. Take advantage of the time to go for a short walk or walk/run on a daily basis.

Simple exercises we can do at work or home includes jumping jacks, knee raises, squats and lunges, push-ups and tricep and bicep dips.

Contact KSDPP at 450-635-4374 or visit us at the building next to the rink for more detailed information on these tips and keep an eye open for upcoming Personal Empowerment for Healthy Lifestyle workshop series being offered later this winter.



# Re-E-Cycling

BY MARIE DAVID, COMMUNICATIONS

Perhaps you've received some new electronic devices over the holidays or for your birthday. Or you just needed to replace a worn out television, cellphone, or iPod. Or maybe your office or home office needed a new printer or copier. That's great, now what should you do with your old e-junk?

## E-WASTE THAT ENDS UP IN THE LANDFILL

According to the Electronics Take-Back Coalition (US), about 70 per cent of e-waste ends up in the garbage, even though "hazardous chemicals could leach out of landfills and into groundwater and streams. Burning the plastics in electronics can emit dioxin."

According the World Health Organization, "dioxins are highly toxic and can cause reproductive and developmental problems, damage the immune system, and also cause cancer." So, it's in our best interest, and the interest of coming generations, to recycle our e-waste.

Ninety per cent of e-waste is recyclable and many items can be reused or refurbished. For instance, pass on your old cellphone or tablet to a relative or friend.

Don't know anyone who can take them off your hands? That's okay, because some e-waste drop off places will also refurbish the item for low re-sale. Or consider donating it to a shelter or senior's home (call ahead first to confirm if they do accept these items.)

Remember to wipe your private data from the device.

If the item is not usable, check with your local collection agency to see what can be dropped off. In Kahnawake that would be either the Recycling Depot at 450-632-4321 or the Kahnawake Environment Office at 450-635-0600.

Outside Kahnawake, you should check with your local municipalities or check out the Electronic Products Recycling Association (EPRA) website, where you can do a search to find a nearby drop off point for e-junk not accepted locally.

Some places will take laptops and tablets but won't take computer monitors or televisions (e.g. the Kahnawake Recycling Depot). You can find out what can be recycled on the EPRA website.

There are no fees at authorized EPRA drop off points; however, there are restrictions (citizens only, or commercial or industrial clients).

The site also lists retailer drop off points. Retailers (like Bureau en Gros or Future Shop) will accept most "obligated" products no matter where the point of purchase was but they may have other restrictions, such as a fee. So it's best to call ahead before putting that 80-inch TV into your trunk.

There are also recycle bins located in some stores and shopping malls (the closest one being Carrefour Angrignon) where small electronics can be dropped off (e.g., cellphones, MP3 players, digital cameras, etc.) You can find these bins by looking on the Electrobaac website.

## DID YOU KNOW?

According to recycleyourelectronics.ca, recycling 1 million mobile phones would reduce greenhouse gas emissions equal to taking 1,368 cars off the road for a year.

## SO, WHAT'S CONSIDERED E-JUNK?

Cellphones, telephones, printers, scanners, copiers (including all-in-ones), faxes, ink and toner cartridges, video game consoles, devices, and video games, DVD/CD/cassette devices and DVDs, remotes, computer mouse and keyboard, mp3 players, pagers, home theatres and peripheral audio/video equipment, GPS/navigation systems, headphones, earphones, docking stations, digital and video cameras, digital frames, and more. Consult the EPRA website for more information.

*Further reading: "What Can I Recycle?" recyclemyelectronics.ca*

*"What to Look For in a Reuser." Electronics Products Recycling Association (EPRA) website.*

*Source: "E-Waste in Landfills." Electronics Takeback Coalition. n.d., web.*

*"Dioxins and Their Effects on Human Health."*



# Know the Dangers of Ice

SUBMITTED BY ARNOLD LAZARE, COMMUNITY PROTECTION UNIT

The Community Protection Unit (CPU) in conjunction with the Canadian Red Cross suggests you consider the following before on the ice. Many factors affect ice thickness including: type of water, location, the time of year and other environmental factors such as:

- Water depth and the size of the body of water.
- Currents, tides and other moving water.
- Chemicals, including salt.
- Fluctuations in water levels.
- Logs, rocks and docks absorbing heat from the sun.
- A change in air temperature.
- Shock waves from vehicles travelling on ice

## Ice colour

- The colour of ice may be an indication of its strength.
- Clear blue ice is strongest.
- White opaque or snow ice is half as strong as blue ice. Opaque ice is formed by wet snow freezing on the ice.
- Grey ice is unsafe. The greyness indicates the presence of water.

Did you know ice thickness should be:

- Fifteen cm (15 cm) for walking or skating alone

- Twenty cm (20 cm) for skating parties or games
- Twenty-five cm (25 cm) for snowmobiles.
- Check with local authorities before heading out. Avoid going out on ice at night.

## WHEN YOU ARE ALONE ON ICE

If you get into trouble on ice and you're by yourself:

- Call for help.
- Resist the immediate urge to climb back out where you fell in. The ice is weak in this area.
- Use the air trapped in your clothing to get into a floating position on your stomach.
- Reach forward onto the broken ice without pushing down. Kick your legs to push your torso on the ice.
- When you are back on the ice, crawl on your stomach or roll away from the open area with your arms and legs spread out as far as possible to evenly distribute your body weight. Do not stand up! Look for shore and make sure you are going in the right direction.

## WHEN YOU ARE WITH OTHERS ON ICE

- It can be dangerous to attempt a rescue while you're on the ice. The safest way to perform a rescue is

from the shore.

- Call for help. Consider whether you can quickly get help from trained professionals (police, fire fighters or ambulance) or bystanders.
- Check if you can reach the person using a long pole or branch from shore – if so, lie down and extend the pole to the person.
- If you go onto ice, wear a personal flotation device and carry a long pole or branch to test the ice in front of you. Bring something to reach or throw to the person (e.g. pole, weighted rope, line or tree branch).
- When near the break, lie down to distribute your weight and slowly crawl toward the hole.
- Remain low, extend or throw your emergency rescue device (pole, rope, line or branch) to the person.
- Have the person kick while you pull them out.

Move the person to a safe position on shore or where you are sure the ice is thick. Signal for help. For more information contact the CPU at 450-632-0635.

Source: "Ice Safety: Know the Dangers of Ice." Canadian Red Cross. n.d., Web.

## The Back Page....

*"If we don't believe in freedom of expression for those we despise, we don't believe in it at all."*

~ Ngam Chomsky

### Akohserá:ke lonte'nikonhroria'tákhwa – 9 shiskare tsi ni:iore 21shiskare, Enniska 2015 Winter Carnival – February 9<sup>th</sup> to February 21<sup>st</sup>

The Kahnawake Youth Center, along with numerous other community organizations will be co-ordinating the annual Winter Carnival from Monday, February 9 – Saturday, February 21. What began as a weekend of fun-filled 'snow' games over 20 years ago has now expanded to two weeks of action packed activities for all ages of the community. With over 3,500 community members taking part each year, this is an extremely popular and well attended two weeks of activity.

The Kahnawake Youth Center encourages and welcomes all community members to participate and enjoy the 2015 Winter Carnival.

Mon., Feb 9	Kid's afternoon floor tournament at 3:30 PM (KYC)	Recreational volleyball tournament for families, groups, organizations (KYC)
Tues., Feb 10	Youth basketball tournament (KYC)	
Wed., Feb 11	4 on 4 lacrosse tourney (KSS)	Dodgeball tournament (KYC)
Thurs., Feb 12	Outdoor carnival day at Karonhianonhna School	Karihwanoron Valentine's bake sale & instant raffle (Services Complex)
Fri., Feb 13	Elder's luncheon & bingo at the Turtle Bay Elder's Lodge	KSDPP family skating party at the Sports Complex
	Semi-formal Valentine's dance (KYC)	
Sat., Feb 14	KSDPP family bowling (K of C)	Community social at the 207 Longhouse
Sun., Feb 15	Family ice-fishing derby (marina)	Blizzard blast – team event (Island)
Mon., Feb 16	KOR Tetewatieronnonion Mohawk variety show (K of C)	4 on 4 ball hockey tournament (KYC)
	KSDPP organizational bowling challenge (K of C)	
Tues., Feb 17	Recreational broomball tournament (sports complex)	KSDPP organizational bowling challenge (K of C)
Wed., Feb 18	Competitive broomball tournament	Airbounce fun fair (KYC)
Thurs., Feb 19	Toy & grocery bingo (KYC)	
Fri., Feb 20	Fund-raising spaghetti luncheon (KYC)	Annual polar plunge (KYC)
	Voice-off singing competition kid's edition (Kateri Hall)	
Sat., Feb 21	Voice-off singing competition adult edition (Legion)	

### Enniska/February

- Heart Month
- Eating Disorders Awareness Week
- 2 Groundhog Day
- 4 World Cancer Day
- 14 Sexual & Reproductive Health Awareness Day
- 14 Valentine's Day
- 25 Pink Shirt Day (Bullying Awareness)

### Enniskó:wa/March

- Liver Disease Month
- Natl. Colorectal Cancer Awareness Month
- Natl. Kidney Month
- Natl. Nutrition Month
- 15-21 Poison Prevention Week
- 8 Intl. Women's Day
- 8 Daylight Savings Ends
- 17 St. Patrick's Day
- 20 First Day of *Spring!*
- 22 World Water Day
- 24 World Tuberculosis 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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