“Whether it is a wedding ceremony, coming of age ceremony, graduation ceremony, or funeral ceremony to me it means formal acknowledgement of the event being observed. Ceremony is tradition.”
Peggy Tatoosh, Hupacasath Nation

“I am proud of who I am and where I have come from, and what my ancestors kept underground so I can learn today freely. For me knowing things such as dancing, singing, drumming, playing traditional games, learning about medicines, hunting and fishing and when I go into the bush with my grandpa is what I know as culture.”
Nalh Dzoh Chan - Misty Rain Broadbent, Dakelh Nation

“Ceremony is a moment of spiritual work that helps people. It helps them remedy illness or call their spirit back. It can also be a ceremony to receive a name, a song, perform a wedding or celebrate peace or a relationship. It's the intent of bringing spirituality into all this work that makes it ceremony.”
Charles Nelson, Nuxalk Nation

“To me, ‘Ceremony’ means a special gathering which is led by the spirit and includes Prayer, Sharing a meal, the ‘Work’ – intention of the gathering, and a Give-Away. It is remembered by witnesses who are ‘called to witness and remember’.”
Virginia Peters, Sts’ailes Nation

“Acknowledging, celebrating and holding up the people using our First Nation traditions and protocols.”
Mae’xe - Chief Alice Thompson, Leq’á:mel Nation

“It is an event that has been passed down from generation to generation. It is celebrating an important or meaningful event. For example, giving a name to a loved one.”
Betty Cahoose, Ulkatcho Nation
Annual Aboriginal Day of Wellness
June 21st, 2013

Province-wide Wellness Activities on National Aboriginal Day!

Get active!
Host a 5 & 10km walk/run
Host a paddling event
Host a ride or roll
or design your own Wellness Activity!

About the event:
As BC First Nations health and wellness partner, the First Nations Health Authority will be sponsoring the 1st annual Aboriginal Day of Wellness on National Aboriginal Day June 21, 2013.

In partnership with the Aboriginal Sport, Recreation & Physical Activity Partners Council, the FNHA will be sponsoring community and regional events aimed to honour our active spirits.

Funds are available to host an event in your community! To host an event please visit www.fnhc.ca for eligibility info and an application form.

An online registration process for regional events will go live in May.

Please join us on Aboriginal Day for a day of fun and celebration!

For more information please email: active@fnhc.ca

First Nations Health Authority
Health through wellness
Ceremony has many definitions for each First Nation community, family, and individual that changes significantly throughout the boundaries of what is now known as British Columbia. This area is the most culturally diverse cross-section of First Nations people in the country and the celebration of culture, tradition and history through story, song, dance, and expression is a common bond for many communities. Ceremony helps us to honour each other, ourselves and the gifts given by the earth and Creator. It is a direct link to ancestors, our past and keeps us grounded in the present. Some ceremonies require seasons of mental and physical preparation, going onto the land – alone – reconnecting and honouring the sacred gift that is creation and realizing a better understanding of our place, our role and our life's work. Some ceremonies are individual and others require a collective.

Over the last few hundred years much change and transformation has taken place for First Nations people. There has been a troubling history of outsiders trying to force communities not to practice their ceremony, tradition, and culture. Sacred ceremonies and tradition went underground and families continued to practice in the confines of their homes, and behind closed doors. Youth today have their parents and grandparents to thank for continuing to practice these traditions amidst the pressure to take it away.

Ceremony plays a key part in keeping ourselves well. As Grand Chief Doug Kelly often shares, “Take care of the spirit and the rest takes care of itself.” First Nations traditionally did not rely on pharmacology and psychologists to heal mental ‘disorders’. Treating such mental issues involved a supportive community, sacred ceremony, and natural medicines. Mental wellness is much more than just an absence of mental illness and relates to the balance between the social, physical, emotional and spiritual aspects of a person's life.

Many historic events have taken place to impact the mental health of First Nations communities. These and other Social Determinants of Health are often noted but sometimes not recognized by the western medical, political or social systems, including the inter-generational effects of colonization related to residential schooling, child apprehension, racism and discrimination, economic hindrance, and a loss of land-base, tradition, language and culture, among others.

Today we rely heavily on the traditional western medical system. These interventions can sometimes be reactive, resulting in over-diagnosed psychological ‘disorders’, and over-prescription of pharmaceutical drugs. This issue of Spirit looks at how many Nations are celebrating, strengthening, and using new and traditional ceremonies to heal, while showcasing other Community-Driven programming that is guiding BC First Nations on their path to health through wellness.

Many communities are seeing the flame of sacred ceremony reignited with new songs and revived dances. Knowledge keepers and youth are bringing comfort to our Elders that our traditions will carry on.

Many communities are seeing the flame of sacred ceremony reignited with new songs and revived dances. Knowledge keepers and youth are bringing comfort to our Elders that our traditions will carry on.
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Cover: Evelyn Alec from the Penticton First Nation, performed beautifully in her traditional regalia at the Penticton Aboriginal Peach Fest in August.

Photo: Melody Charlie

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Please send story ideas, articles, photographs, subscription and distribution inquiries to:
Spiritmagazine@fnhc.ca

Contributors
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St’at’imx Nurse
Rose Casper
Retires After
50 Years of Service

First Native Nurse in Western Canada

By Philip Hogan

After a career spanning more than fifty years, St’at’imx Elder Rose Casper - the first Native nurse in Western Canada - recently retired. Born in Bridge River near Lillooet, Mrs. Casper like other First Nations children was not allowed into the mainstream education system and attended the Kamloops Indian Residential School.

“We weren’t allowed into provincial high school,” recalled Mrs. Casper. This limited career choices but fortunately, the policy changed to include high school equivalence at the Residential Schools while she was there.

Always a helping person, Mrs. Casper ‘had seen a lot of sick people at school and home’ and wanted to help. It was this desire to help people that made her decide to enter nursing as a career and led her to enrol in Saint Joseph’s School of Nursing in Victoria.

“Some people had never seen a First Nations person before but after a while they said ‘Oh, you’re just like us’,” she recalled. Mrs. Casper graduated from the three year program in 1955, becoming the first Native nurse in Western Canada. After graduation, she worked in Saint Joseph’s Hospital before moving to work at Vancouver General Hospital.

Rose married into the Shalalth community located at Seton Lake near Lillooet in 1958, and moved there to raise her family. When she moved to Shalalth there was already a Public Health Nurse working in the community. Mrs. Casper explained that the Chief at the time, aware that she had medical training, “wanted [me] to work a little more than [I] was doing so he approached the right people [Health Canada] and they got [me] to start as a Lay Dispenser.” In 1960, she was hired by Health Canada and worked in the community as a nurse until 2000.

At times during her career Mrs. Casper worked part time due to the small size of the Shalalth community. “I was on call – it wasn’t in the job description but I did it,” she recalled. “The need was there so I had to do it – that was why I was there.” When a medical emergency happened she would either drive the two hour trip to the hospital with her husband, or an ambulance would come.

Mrs. Casper became a Community Health Nurse (CHN) in 1978. When a new policy came down through Health Canada mandating CHN’s to have increased training, Mrs. Casper took training offered in Ottawa to achieve a certificate as a Community Health Representative. After retiring as a CHN, Mrs. Casper worked as a Home Care Nurse in Shalalth until 2012.

During her time in Shalalth, Mrs. Casper said she was responsible for helping people who needed medical attention, often helping them get to Lillooet for care. In some cases, when relocation was not possible, she had to provide care in the community. “I had to deliver babies when it was necessary, or escort [expectant mothers] to hospital in Lillooet,” she recalled. Mrs. Casper delivered many babies alone in the community though the last baby she delivered was more than twenty years ago. She has seen a lot of change in how health care is delivered, saying people can almost always make it to a doctor in Lillooet, unlike the early days she spent working in the community.

Over a 50 year period of dedicated work to the wellness and betterment of her community, Mrs. Casper has touched many lives, saved more than a few, welcomed a handful, and helped make her local area a better place to live. In her honour the Shalalth community gave their Healing Centre that opened in 2003 her name to live on long into the future. The Rose Casper Healing Centre is now a fixture in the surrounding area’s wellness offering many traditional and contemporary services for local communities.
Esketemc Nation members participate in a number of fun events during their community baby welcoming celebrations.

By Trevor Kehoe

As in the natural world, the cycle of life has a series of events that bring all range of emotions with the coming and going of lives to and from the Spirit World. For a community to be exposed to both the cycles of birth and death gives a complete view of this sacred cycle and an understanding of our place in it.

For a community to not witness birth would mean that all you may experience is the passing on of family and the sorrow attached to it without the celebration of a new life entering. Likewise, when family members must be evacuated from the community for serious illness or in the later stages of life, this again separates the community from the natural experience of death. In bringing the ceremonial traditions of the birth and death cycles back into the community BC First Nations are reconnecting the circle.

"Bearing witness to new life brings into balance the losses we face as humans in this lifecycle. Birth is our renewal - it's blank, fresh, innocent, and pure. It is a new beginning and it makes the other things make sense. It is as much a connection to our past as it is a connection to our future," said Evelyn Harney, an Anishinaabe midwife originally from Ontario but now living and practicing in Penticton. "When the community can experience and see the whole cycle of life, not just the cycle in broken pieces, it's like there is a connectedness that can't be replaced or imitated by other means.

"It's significant for the parents, especially the young ones who don't know our history and Nation family dynamics and may feel like they don't belong in the community, for us as a community to tell them 'this is your home and this is where you belong'," said Irene Johnson, Health Director for Secwepemc. "We honour them and their pureness as a new life who has just arrived from the Spirit World."

Harney always encourages families to do something special to welcome the baby in a way that is meaningful to them like during pregnancy in intimate ways, making decorations for their sleep space, and other small but important things like speaking in the language of the territory immediately at birth.

"From the time that little spirit has come to join its life to the parents, they show that they are happy and loving, and that they will be responsible and humbly do their best. Communities are collectively responsible for all children, and the connection that's made during a welcoming helps to create bonds with the baby, so the community becomes invested in the life of that child. You can imagine how if these traditions were practiced as universally as they have been how healthy our communities would be, just by simply being more invested in one another's children, and by supporting parents more."

Bringing birth closer to home and back into the hands of women is part of the future vision for better First Nations health outcomes in the Transformative Change Accord: First Nations Health Plan. It is also an important health action for the Tripartite First Nations and Aboriginal Maternal and Child Health Strategy Area. This Tripartite Strategy Area oversees the Aboriginal Doula Initiative which has trained doulas in the Vancouver Island and Interior Health Authorities to bring birthing support back into the hands of women and work continues to investigate sustainable community-based models for maternity care.

In Esketemc (Secwepemc Nation), their baby welcoming ceremony is as much for the newborn as it is for the family to feel reconnected to their wider community and Nation.

"It's significant for the parents, especially the young ones who don't know our history and Nation family dynamics and may feel like they don't belong in the community, for us as a community to tell them 'this is your home and this is where you belong,'" said Irene Johnson, Health Director for Secwepemc. "The community comes together and brings gifts, drum and sing honour songs, read poems translated into our language, have lunch with all our new families, and play some really fun games."

CONTINUED ON PG: 15
Chief Willie Charlie and the Sts’ailes community have been uniting service providers to educate them on traditional practices in respecting death protocol.

By Philip Hogan

The community of Sts’ailes has been working for a number of years to improve the interactions between various local organizations, government officials and their Sts’ailes family when dealing with the passing on of a loved one in the community.

Located in the Upper Fraser Valley, Sts’ailes have a system of customary laws called ‘Snowoyelh’. The system broadly covers how Sts’ailes people conduct themselves in a good way with each other, the land, resources, ceremony, and life and death. These customary laws have been around for generations but are often not understood or embraced by those outside the community.

In 2008, this lack of understanding for Sts’ailes’ protocols resulted in a great deal of grief and frustration for the family, friends and care of ceremony and burial.

The situation was resolved, but it showed a new path was needed and Chief Charlie wanted to ensure that other community members wouldn’t have to face the same problem in the future. Chief Charlie initiated meetings with the Provincial and Regional Coroner in the Fraser Valley, the RCMP, funeral homes, the Fraser Health Authority, emergency room frontline staff, and the BC Ambulance Service. The aim of the meetings was to give an overview of Sts’ailes Snowoyelh as it pertains to handling death ‘from the time of passing until the time we put them in the ground’.

Through these discussions and meetings, the Sts’ailes community began a process to educate the service providers on their cultural changes when interacting with government and health agencies in the timeliness of receiving the deceased, and their partners now have a much better awareness and respect for Sts’ailes protocols.

Chief Charlie related that since these sessions have begun they have seen concrete changes when interacting with government and health agencies in the timeliness of receiving the deceased, and their partners now have a much better awareness and respect for Sts’ailes protocols.

community of two young Sts’ailes members that were killed in a car accident. The Sts’ailes community waited with growing anxiety and impatience for someone from the RCMP, Royal Columbian Hospital, the Regional Coroner, Fraser Health, and other groups they contacted to respond to their concerns and release the bodies back to the family.

Sts’ailes Snowoyelh states that bodies should be buried four days after death. On the sixth day, Chief Willie Charlie eventually threatened to march directly into the coroner’s office to recover the bodies of their loved ones. It was only after this that the coroner released the bodies and the Sts’ailes community was able to take protocols surrounding death and how they could most effectively work together to achieve their respective goals. From these meetings they secured a commitment that all partners working with the community would engage in awareness training and follow traditional protocols to ensure respect in all cases.

Annual day-long educational sessions are now organized to educate people on Sts’ailes culture, the Snowoyelh in general and specifically about ‘death protocols’ that the Sts’ailes community follows. Held in the Charlie Longhouse, belonging to Chief Charlie’s family, the sessions are all very well attended by service providers, government and other First Nations who want to build on the Sts’ailes model.
Sometimes, the RCMP must investigate a death, but these investigations rarely hold up cultural protocols, for example if community members do not wish their loved one be embalmed, this desire will be respected by funeral homes. If there is an autopsy, Sts'ailes protocol requires all of the body to be returned for burial. This has been an issue at times, especially where the deceased is an infant.

The positive progress in this work shows how new and more productive relationships can be built between First Nations and service providers they interact with.

The coroner’s office often takes the brain to determine cause of death – an important way to promote education and prevention. This creates a conflict between Sts'ailes custom and science and, Chief Charlie explains, raises the question, “What’s the priority: science or spiritual beliefs?” The work Sts'ailes is doing, coupled with Chief Charlie's traditional training has also impacted other Nations in the region and even communities in the US.

Chief Charlie related that since these sessions have begun they have seen concrete changes when interacting with government and health agencies in the timeliness of receiving the deceased, and their partners now have a much better awareness and respect for Sts'ailes protocols around death. The result has been positive collaboration at every level and Chief Charlie is relieved to note that Sts'ailes “almost always meets our protocol to put the loved one away on the fourth day.”

The work Sts'ailes has done is an example of how cultural differences can be dealt with proactively to reduce conflict and improve relationships while dealing with the loss of loved ones. The positive progress in this work shows how new and more productive relationships can be built between First Nations and service providers they interact with.

### Tech Wellness

**With John Pantherbone**

Mobile technology and apps are quickly becoming the go-to way of handling your workout and exercise regimen. Through handy logging and recording of your progress you can quickly see how your exercise is improving or how often you’re doing (or not doing :0) your workouts. Through the social features of many of the current apps on the market you can share and compare your results with Facebook friends or Tweet them as you like. You can chart and graph your progress, see maps, even gamify your workouts for added incentive.

In this issue’s Tech Wellness feature we’re covering the Runkeeper app - one of the many running apps for the mobile market. Runkeeper is one of several apps I’ve tried over the summer to keep track of my jogging progress. Overall it’s a fave, with its handy web-login and non-intrusive sharing options. The app also has a web-login that you can check your progress through online graphs and maps. There’s the option to categorize your exercise (jogging, walking, biking, etc.) but one of the issues I had was the ability to combine exercise types. For instance jogging and walking, because I do sprints from jogging for a few minutes and cooling down by walking a few, a small annoyance but one of the few I had with this app. The paid version of the app has a few extra features like the ability to broadcast races, detailed metrics and more. The average new user looking to get into exercise apps would be fine with the basic account. In this reviewers opinion, Runkeeper is worthy of recording my exercise progress.
By Philip Hogan

On October 27, 2012 a 7.8 magnitude earthquake, known as Tllga Hildang in the Skidegate dialect and Tlag Hildangs in the Northern Haida dialect, struck the island of Haida Gwaii on BC’s North Coast. Felt across the North and Central Coast, the quake caused few injuries and minimal property damage, but offered a reminder of the importance of emergency preparation.

Lisa Kendall, Emergency Coordinator for the Skidegate Band, was prepared for the shaking but not the violent and random jarring that moved in different directions with a sound ‘like thunder’. Skidegate Health Director, Lauren Brown, was at home with her family. “We heard it before we felt it. A sound that came from the earth – sounded like a freight train.” Brown’s children, who had an earthquake preparedness class the previous week, “knew right away what to do - they just dove under the table.” Her husband took shelter in a doorway and watched the windows bending under the quake’s power. As the quake ended the power failed, plunging the village into darkness.

While property damage was minor, the quake’s impact was felt in other ways like the drying up of the culturally important hot springs on Gandll Kin Gwaayaaay (Hot Springs Island), though they have now started to return. Kendall explained that people were also feeling quite traumatized.

Following the earthquake, the Skidegate Band’s Counsellor provided Critical Incidents Stress Debriefing for community members and the community hosted a well-attended Emergency Preparedness Fair. Chris Duffy, Executive Director for Emergency Management BC (EMBC), encouraged people to develop family emergency plans, including a 72-hour emergency preparedness kit. The Haida used BC’s preparedness kit as a basis for their own, but incorporated culturally-specific supply recommendations like dried herring eggs and jarred fish.

Brown shared that her mother, Diane Brown, described an oral history of deaths from tsunamis known as Taaydlaa in the Haida language. Kendall said that Haida history includes accounts of entire villages being wiped out by tsunamis, one of their biggest disaster threats. When a powerful earthquake is felt, a traditional Haida response is to leave low-lying areas immediately. For quakes that occur far away, a siren warning system can alert the community to evacuate. The Band has a loudspeaker, but no tsunami warning siren, so the Skidegate Fire Department went house to house warning residents to move to higher ground.

The quake highlighted the importance of warning systems and plans. “If you feel the ground shaking significantly that is your (tsunami) warning, do not wait but move to higher ground immediately,” Duffy explained. EMBC is meeting with communities, reviewing emergency system responses, and Skidegate is in discussions with Canada to acquire a siren. Emergency preparedness infrastructure for earthquakes and tsunamis is the responsibility of all levels of government working together, along with engaged citizens being as best prepared as possible.

Duffy believes that the quake was not as bad as it could have been. “We had a 7.7 near-shore event in which there were no fatalities or destruction of critical infrastructure. It could have been a lot worse. We should all pay attention to this.”

Emergency preparedness infrastructure for earthquakes and tsunamis is the responsibility of all levels of government working together, along with engaged citizens being as best prepared as possible.

The BC Provincial Emergency Notification System provides tsunami warning bulletins to coastal communities and the media. EMBC maintains advisory warnings on Twitter, Facebook, Flickr and YouTube at: www.emergencyinfobc.gov.bc.ca
Preparing for an Earthquake

The best preparedness for an earthquake is having at least a 72-hour survival kit with food and water ready, and knowing what's best to do during and after the earthquake, including your plans for reuniting with family that may be separated.

If you are Caught in a Strong Earthquake:

- If you're inside your home, stay there. Get out of the kitchen, safer places are inside halls, in corners, in archways. Take cover under a heavy table, desk or any solid furniture that you can get under and hold onto. Protect your head and face. Doors may slam on your fingers if you're in a doorway. Avoid areas near windows.

- If you're in a yard outside your home, stay there and get clear of buildings and wires that could fall on you.

- Don't go outside where you may be hit by falling debris - sidewalks next to tall buildings are particularly dangerous.

- Avoid elevators - if you're in an elevator when an earthquake happens, hit all floor buttons and get out when you can.

- If you're in a vehicle, pull over to the side (leave the road clear), away from bridges, overpasses and buildings. Stay in your vehicle.

- If you're in a crowded public place, take cover and watch that you don't get trampled. In shopping centres, take cover in the nearest store and keep away from windows, skylights and display shelves of heavy objects.

- Remain in a protected place until the shaking stops. Anticipate aftershocks, they may occur soon after the first quake.

- Try to remain calm and help others.

- If near the ocean – head for higher ground and do not go near the ocean until tsunami warnings have been lifted.

Emergency supplies

Be prepared to be on your own without help for 72 hours or more - at home, in your car, at work. Assemble these emergency supplies and keep them in your emergency kit, stored in a secure place, ideally accessible from outside.

- First aid kit and instruction booklet.

- Shelter - a plastic tarp, a small tent, emergency “space” blankets, or even some large garbage bags.

- Water - at least four litres of water per person, per day, in tight-lidded non-breakable containers.

- Keep a supply of water purification tablets in your emergency kit. Water also can be made safe to drink by using four drops of liquid household bleach in 4 1/2 litres of clear water or 10 drops in 4 1/2 litres of cloudy water. Replace stored tap water at least every six months.

- If the water is still running, fill a bathtub and other containers. Remember, there's water available in a hot water tank and toilet reservoir.

- Food - keep a supply of non-perishable food handy, such as canned and dehydrated food, dried fruit and canned juices.

- Flashlight and spare batteries. Keep the flashlight near your bed. Batteries should be separate in your kit.

- Battery AM/FM radio and spare batteries, stored separately in waterproof bags for emergency updates.

- Essential medication and supplies for infants, elderly persons and those with special needs. Keep at least a one-week supply in your emergency kit. Include copies of prescriptions for your medicine and glasses.

- Personal toiletry items - toilet tissue, soap, toothpaste, toothbrush, etc.

- Class ABC fire extinguisher. Keep it in a handy location in your home, after testing according to directions.

- Wrench (crescent or pipe) to turn off natural gas. Keep it in a handy place or in your emergency kit.

- Shoes - heavy enough to protect from broken glass.

For more information about earthquake preparedness visit: www.embc.gov.bc.ca.
BC First Nations know what it is to be healthy and well, and when we practice our common knowledge we succeed in having a happy, healthy lifestyle.

Preventing chronic diseases such as hypertension, diabetes, and cancer requires a healthy, balanced life reflected in our daily activities.

The First Nations Perspective on Wellness is an image used to depict the balance needed on our many different levels of being in order to achieve health and wellness.

The basis of this model is to achieve health and wellness by taking a look at and nurturing the internal and external factors that affect wellbeing. Many of these concepts are based on traditional knowledge. This model has been derived from a holistic perspective, the medicine wheel, and the circle of life.

Although the model appears in layers, it is important to acknowledge that all the words and components in each circle are interconnected.

Send us your Perspective on Wellness: Spiritmagazine@fnhc.ca

Wellness FAST FACTS With Dr. Sarah Williams MD

Drinking just one regular pop a day equals an extra 10 pounds of weight gain per year. Keep your blood sugar at a safe and healthy level by avoiding drinks like pop, juice, energy and sports drinks that rapidly increase your blood sugar.

Instead of pop, try alternating your craving with sparkling water or herbal tea. If you are adding sugar to your tea or coffee, try doing this every second time so you can consider eventually stopping.

We can use the teachings we have learned from diabetes to be healthy and well because it shows us the direct connection between controlling our blood sugars and feeling well. We need to put the right foods and drinks into our bodies to prevent or manage any chronic disease like hypertension, diabetes and cancer.

From the BC Cancer Agency Prevention Program: More than half of cancers can be prevented by changing some lifestyle choices! The 5 main preventable risk factors for cancer are: using tobacco, being overweight, poor nutrition, not being physically active, and getting too much exposure to UV radiation from the sun and tanning beds.
My Wellness Worksheet

What is my vision and goal?

What’s working for me?

What do I need to work on?

What people, things and habits currently have an impact on my wellness journey?

Which of these help me on my wellness journey and how do they help?

Which of these do I need to release?

Who can I share my wellness journey with and who will support me?

What additional support do I need to help me on my wellness journey, and specifically to help me reach my goal?

Who am I doing this for and what is my inspiration?

Remember to look at your wellness worksheet often and check in to see how you're doing. Wellness is a journey and the small steps make a big difference!
Preparing for Your Doctors Meeting

What can I expect from a Health Care Professional?

Your health care professional should...
• Respect your rights as a First Nations person and a Canadian citizen
• Treat you fairly and with dignity and respect
• Explain your illness, treatment, necessary tests
• Keep your file and personal information private and confidential

Be specific:

When you call in to the doctor's office, clearly explain your reason to visit to the receptionist. Ask what you should bring with you. You may need all your medicines in their prescription bottles, plus any over-the-counter medications you take regularly. You might need to bring along your immunization record or medical records from previous physicians. Ask if your hospital or office has a First Nations or Aboriginal patient navigator, or a liaison person.

Ask for the amount of time you need when scheduling an appointment: Your list of questions serves as an outline for what you hope to accomplish during your meeting with the doctor. A 15-minute visit allows enough time to cover only a couple of questions.

During your visit...
• Treat office staff with courtesy during your visit.
• Have someone with you for support if you are uncomfortable.
• Present your list of health related concerns and/or questions.
• Advise if you are on any medication and/or treatment including traditional or alternative treatments or medications.
• Ask about resources and services available to you.
• Stop the examination or treatment if at any time you feel uncomfortable.
• Ask for information on tests that may be required.
• Ask questions on any prescriptions they give you – do you really need these? Have they been thoroughly tested? Be cautious about any “sample or test prescriptions” not related to your condition.
• Be comfortable asking for natural/traditional/alternative treatments instead of pharmaceuticals.
• Review your list of questions or concerns to ensure they have been answered to your satisfaction. • If you have run out of time, request a follow up appointment.

Answer a few quick questions for yourself before your visit.

What do I want to discuss? What are my health concerns? What are my symptoms? How long have I been experiencing this? What’s working? What’s not working?

What medications am I using?

Remember:
• Be honest with your doctor • Make sure you understand your doctor’s orders.
• Follow up with return visits or additional medical tests if needed.

If you’re not getting the care you need: Voice your concerns...

You know yourself better than any Health Care Professional – trust your “gut instinct.” If you feel that you or your family did not receive adequate health care services, or your rights were not respected, there are steps you can take to voice your concerns, or if necessary, to file a complaint.

Steps You Can Take...

1. Communicate clearly and firmly:
• I feel that I was not provided with proper health services because...
• I feel that my concerns are not being addressed because...
• I feel uncomfortable when...
• I know my rights.
2. Ask for clarification to avoid misunderstanding.
3. Contact the healthcare professional’s supervisor with your concerns.
4. For support contact your Community Health Worker, Patient Navigator, Liaison, or Representative.
5. If possible, get a new healthcare professional.
6. File a complaint with the appropriate Health Care Professional’s Association or College, such as the College of Physicians and Surgeons of BC (call toll free 1-800-461-3008).
7. If your complaint or concern is regarding a hospital, public health, or provincially funded health professional, call your local Health Authority about the complaint process.
8. Learn the steps to file a complaint, send written documentation to appropriate organizations.
9. If necessary, get a health advocate to act on your behalf.

For more information visit us online - www.fnha.ca
**Newborn Ceremonies**

Some of the games for adults include putting diapers on team members, baby bottle apple juice drinking contests, and other games that brings each other together to have a laugh and celebrate. The Q’wemtsin Health Society also has a welcoming ceremony annually in line with the Spring Solstice.

Their ‘Circle of Life’ program offers a wide range of peri and post-natal services for expecting mothers and the welcoming ceremonies generally have 100 per cent attendance from all newborns in the community, says Health Director Colleen Lebourdais.

Newborns are wrapped in an original quilt by Elders, drumming takes place, prayers are said, and many parents feel proud that they are a part of a traditional community welcoming ceremony. Chief, council and much of the community are present to recognize the new lives in a sacred way.

“It’s so important for communities to bring these traditions back to connect families, friends, and newborns. I’ve seen a lot of great work by Qwemtsin Health Society taking ownership of what they want in their communities by bringing in mid-wives, doulas,” said Diane Proctor, a community health nurse in Secwepemc. “These welcoming ceremonies bring everyone together to experience that joy and celebrate the next generation.”

**Doc’ Talk**

With Deputy Provincial Health Officer Dr. Evan Adams

Have an anonymous question you would like answered by the doc?

Send it to:

Spiritmagazine@fnhc.ca

**What causes ulcers in the stomach? Do stomach ulcers or acid reflux cause pain in the sinus cavities, ear-aches, and dizziness? Or are they related somehow with the respiratory and digestive systems?**

Infection with H pylori and taking nonsteroidal anti-inflammatory drugs (NSAIDs) – e.g. ibuprofen – account for most cases of peptic ulcer disease. Stomach pain is the most common symptom of gastric ulcers, but other symptoms include bleeding (dark/black stool), tiredness (from anemia), loss of appetite, unexplained weight loss, progressively difficult or painful swallowing, and recurrent vomiting. I’ve not heard of gastric ulcers causing sinus pain or earaches, but I would think blood loss from ulcers might cause dizziness (and tiredness too). Patients with gastroesophageal reflux disease (GERD), where stomach acid bypasses the lower esophageal sphincter and “refluxes” into the esophagus, can experience respiratory symptoms (coughing, “heart burn” – even pneumonia and asthma attacks) but not normally in peptic ulcer disease.

**How safe is the HPV shot? Can HPV be cured?**

The Public Health Agency of Canada states: “Yes, the (HPV) vaccines are safe. For both vaccines, the most common side effect is brief soreness at the site of injection. Also, you cannot become infected with HPV from the vaccines and the vaccines do not contain any antibiotics or preservatives, including mercury or thimerosal.” Can HPV be cured? The majority of new HPV infections clear spontaneously within 1 to 2 years. However, the risk of reinfection, if you are sexually active, is high, and some HPV infections can persist for many years. Persistent infections with high-risk (cancer-causing) HPV types can lead to more serious cell abnormalities or lesions (diagnosed by pap smear) that, if untreated, may progress to cancer.

**Are cold sores a result of oral sex with someone who has herpes?**

2 types of herpes simplex viruses exist: herpes simplex virus type 1 (HSV-1) and type 2 (HSV-2). HSV-1 is traditionally associated with disease of the face, while HSV-2 is traditionally associated with genital disease; however, lesion location is not necessarily indicative of viral type. HSV is transmitted by close personal contact, but not necessarily sexual contact. Oral herpes (“cold sores”) is easily spread by direct exposure to saliva or even from droplets in breath. Skin contact with infected areas is enough to spread it. Transmission most often occurs through close personal contact, such as sharing toothbrushes or eating utensils with an infected person, and kissing.
The First Nations Health Directors Association (FNHDA) held a special honouring ceremony for one of their esteemed members for years of dedicated work in her community and the positive influence she has had on many other Nations in BC and across the country. Cowichan Lake's Judith Gohn was celebrated on Coast Salish Territories in Vancouver in Fall 2012 during the FNHDA Annual General Meeting with kind words from her colleagues and a sacred dance ceremony by the Sts'ailes cultural committee.

Judith has spent over 20 years in the health field with 15 of them as a Health Director for Cowichan Lake. Over the years she has contributed to many positive changes within the Nation and their health services, as well as facing the challenges that have come up head on with her community.

Gohn helped to build up the Ts'ewulhtun Health Centre from a small operation with less than 20 employees in 1992 to a larger operation with a staff of 80 that now handles public health and communicable disease control for Cowichan Tribes, and provides health education programs for more than 7,000 Aboriginal people in the region, of which 4,500 are Cowichan Tribes members. The Health Centre was officially Accredited in June 2012 and has now been elevated to Exemplary status as of December 2012, a feat Judith is very proud of.

"It's great news for us. I want to express our appreciation to the community members, Cowichan Tribes staff, Health Advisory Committee members and Chief and Council for supporting us to reach our goal of becoming an officially Accredited health centre and now with Exemplary status," said Gohn. "We all raise our hands to the community partners who met with the surveyors and described Cowichan Tribes and the Health Centre as a leader in the Cowichan Valley in the areas of community building and integrated health care delivery."

Other recent developments in the community include the establishment of 50 units of assisted living for community members, collaboration between 7 local communities and local physicians through the Cowichan (Hulq'uminum) Hub toward the development of health plans, and the made in Cowichan ‘Embracing Life’ mental wellness and suicide prevention project.

The issue of youth suicide in the area is one that has affected many community members. Judith acknowledges it has been a challenge and that many external and internal community factors contribute to the issue, and that there isn't a simple cut and dry answer available. The Embracing Life project may be part of the solution.

The program is bringing together over 50 different agencies to collaborate on mental health and suicide prevention in the area through a number of initiatives and community events. One project called the ‘Blue Print for Life’ is a five-day workshop held during Spring Break with over 100 youth participants learning more about personal empowerment and offering tools to deal with life stresses like alcohol, drugs, and suicide. Other cultural events attract up to
After many years of dedicated work Judith has made a difference in the lives of her community, and while she knows there's still a lot more to do that's where she's at. Judith is planning on retiring soon but will stay involved in her community initiatives like a recent youth hip-hop week, brought many Island youth together to learn about the roots, meaning, and expression of hip-hop and how performance can bring many positives to them and their community. During her career Judith also helped to develop the Mustimuhw community electronic health records data collection service to help her and other communities gather all their health information into one easy to use and understand place.

We built it a little at a time and at the time it was the only one of its kind in the country. Every band needs to document their clients and now we have almost 50 bands across Canada using it," said Gohn who was inspired to create it from a similar project she saw in California. “Another focus of ours is on cultural safety and racism within our health system and our society. As the largest band in BC we're having an important conversation with our physicians about this. We feel that our First Nations youth need to see First Nations doctors, they need to access counseling when they need it and to feel welcome and open to talk about whatever they want.”

“We're in such a time of movement now and this is only happening in BC. It's about time we have control of our health care,” Judith Gohn.

Along with many in her community, Judith and Cowichan Lake have made big strides in their local health system over the last 20 years. Others in her community have said Gohn has shown ‘Tenacity, strength and wisdom during times of need within her community’. Judith is planning on retiring soon but will stay involved in her community's health needs. One of her last projects is developing a business plan for a larger regional health centre in the community. After many years of dedicated work Judith has made a difference in the lives of her community, and while she knows there's still a lot of work to do, she's positive for the future of Cowichan Lake and all First Nations in BC in taking control of their destiny in health and all the Social Determinants.

“As our founding President, Judith was instrumental in establishing our Association and the foundation for the collective work that we continue to do today. The Inspiration Award and the honouring ceremony gave us an opportunity to recognize Judith's passion and commitment to the BC First Nations Health Directors shared vision, as well as acknowledge her professionalism and dedication to supporting the Ts'ewulhtun Health Centre in achieving Accreditation with Commendation, the second highest rating in the Accreditation Canada system.”

Are you a Health Director in a BC First Nations community? The FNHDA is looking for new members - Join the organization and be a part of the growing FNHDA family!

Visit them online at www.fnhda.ca or email: info@fnhda.ca
Vancouver Native Housing’s Dudes Club offers men a safe place to get together and talk about their health.

Photo Courtesy: VNHS

Dudes Club Gets the Guys Talking Health

By Mark Carras

What can be done to get men to come together and talk about their health? It can be a tough question in any community, but for the past two years in Vancouver’s Downtown Eastside (DTES), the Dudes Club has been finding the answers.

An innovative program steeped in traditional First Nations culture and spirit, the Downtown Urban Knights Displaying Equality and Solidarity (Dudes) Club provides a safe space for men in the DTES to lend support to one another, share their stories, and learn how to create positive change in their lives. The group is guided by Dudes Club committee members, who come together to determine the meals, activities, and health care topics to be covered by facilitators in the coming meetings. Launched in August 2010 by the Vancouver Native Health Society (VNHS), the Dudes Club also provides men with access to a wide variety of health services including counselling, medical consultations, and much more. The Dudes Club approaches health holistically based on the medicine wheel, which emphasizes physical, mental, emotional, and spiritual wellness.

Dudes Club Medical Director, Dr. Paul Gross, thinks that this sense of ownership is a key factor in the program’s success. “The numbers have fluctuated, but grown since the beginning,” says Gross. “We now have close to 60 people consistently attending our meetings.”

Looking ahead, the Dudes Club is starting to gain traction beyond the DTES, with some members attending the World AIDS Conference in Washington this past July, and a potential program expansion being explored in Prince George. VNHS is also planning its 2nd Annual Dudes Club Men’s Health Fair for August 2013, and in partnership with UBC and federal and provincial governments, was recently awarded a 3-year funding grant from the Canadian Institute for Health Research to study what First Nations men would find to be the most culturally appropriate and gender effective methods to address their health care needs.

Many Dudes members are living with HIV, Hepatitis C, alcohol and addiction issues, or a combination of all three. “There’s no question that it’s a struggle living in this neighbourhood,” Gross said. “But what the Dudes Club asks of its members is that they take off their armour at the door.”

This has created the opportunity to build brotherhood and solidarity, and has acted as a catalyst for men to take back control of their lives, giving them a safe place to take off their shells and shed gender roles, to be free to share their stories, provide support to one another, and connect in non-stereotypical ways.

Donations to Dude’s Club of clothing, basic toiletries, or monetary contributions, are welcome and can be directed to:

Vancouver Native Health Society
449 East Hastings Street
Vancouver, BC
V6A 1P5

Find out more info on the Dudes Club at: www.vnhs.net
Tradition and Cultural Healing Take Root in ‘Namgis

By Philip Hogan

Based in Alert Bay, the ‘Namgis Nation has been working to strengthen and incorporate their rich cultural traditions into the promotion of health and mental wellness for their members for several years through a number of unique projects. Since 2007 the ‘Namgis Nation have been learning from their people through community based health research studies that show the connection to culture, language, and ancestral territories is critical to health promotion programming.

To support these connections, the ‘Namgis are partnering with institutions within and outside of their Nation using a Kwakwala concept, Sanala, that translates to ‘being whole’.

To support these connections, the ‘Namgis are partnering with institutions within and outside of their Nation using a Kwakwala concept, Sanala, that translates to ‘being whole’.

“Sanala involves our health, our culture and all the things that make us whole as human beings. It is a small part of the bigger picture but has been very helpful to our people,” said ‘Namgis Council member and renowned First Nations filmmaker Barbara Cranmer. Cranmer explained the work being done by the team is relying on traditional knowledge that had been around for generations and integrating it into the present day health system is showing big returns for the wellness of community members.

The work to improve the health of the community is a partnership between the ‘Namgis Nation, the ‘Namgis Health Centre and the Sanala Research Team comprised of members of the ‘Namgis and nurse researchers from UBC.

Previous work in the community has included a ‘My Big Fat Diet’ initiative – a year-long project in which some 90 community members followed a diet derived from traditional foods that saw a combined total weight loss of some 1,200 pounds. The ‘Namgis also hosted the Gawalap’a gathering last March in which different healing and wellness approaches were provided for community members. The components of the health program like journeying to territories, language immersion, medicinal learning, and traditional food harvesting and preparation are being integrated into programs implemented four times per year, to coincide with the significance of the four seasons.

The December 21 winter solstice ‘Gratitude Ceremony’ is built upon ‘Namgis cultural beliefs to provide an opportunity for community members to allow them to let go of pain, and things that are holding them back. The ceremony involved ‘brushing’, a traditional concept linked to releasing negative feelings and experiences, as well as having grandmothers who were there to provide emotional support and offer well wishes to the people who had participated.

By building culture and tradition into holistic health promotion the ‘Namgis are engaging their community and empowering them to take ownership of their health in a way that strengthens their health, culture, traditions and selves.

When a problem begins, no one wins.

BC Problem Gambling Help Line 1.888.795.6111 (24 hrs)

Confidential counselling, education and prevention services are offered free of charge.

Funded by the Province of British Columbia
Island Nations Focus on Mental Wellness

By Trevor Kehoe

In walking the road of healing for many BC First Nations, turning to traditional ways, community connections, practicing culture and ceremony is proving to be the best medicine when it comes to mental wellness.

On Vancouver Island, a number of individuals, organizations, and First Nations communities are taking steps to ensure their people are well mentally, emotionally, spiritually and physically. The South Island ‘Gathering Strength’ initiative offers First Nations youth positive influences and community connections to encourage well-being and build support systems. Started in April 2012 with a group of friends who were concerned about youth suicides in the region, the initiative has gathered steam and in growing has the potential to expand to the rest of the Island and even across the province over the coming years.

Since day one we have been asking ourselves - how many kids have we actually helped to make a difference? We can confidently say we’ve helped at least 50 high-risk youth get access to what they needed, and many more to know that they have a support system available to them. This could be health or counselling services, or just some new friends to hang out with, talk to and make connections,” said South Island HUB Coordinator and Gathering Strength organizer Will Morris. “We were just a group of friends who came together with a common vision. We know that we need to focus on prevention and intervention as well as follow up. It’s an ongoing healing cycle, not just a single treatment and you’re cured.”

In serving the South Island communities of Tsawout, Tsartlip and Sannich, the intimate connections within the villages and the region can make a tragedy in the area difficult news for many. Emergency crisis teams are a valuable resource for communities coping with tragedy but are unfortunately too late to save a life that may be lost. For those communities without crisis teams like in the South Island, a proactive approach and community led responses involve the Gathering Strength team following up with families to offer condolences, support, healing gifts and notifying them of services available to help the recovery process. Following a traditional First Nations approach by leading with culture, families feel more open to begin healing than when faced with a sometimes impersonal westernized emergency response plan.

“You have to remove yourself from the situation and discuss the causes for youth suicide. When kids are getting to that desperate place, there’s a reason for that. Why would they feel like they have no other options? That’s the reason why we know we need Gathering Strength in our communities,” said Morris. “We find it’s the close personal connections that make a big difference. Some of our youth are crying out for help but are afraid to go into a health building or afraid to phone someone, so we’re connecting with our surrounding organizations and linking our community with resources. Letting them know we’re here.”

The Gathering Strength team is always asking ‘How can we change the way things are currently done?’ to improve the way their communities interact with the health system. Less than one per cent of Canada’s health budget is spent on mental wellness and with no current national mental health strategy for First Nations or Canadians, many are calling for a change in attitude towards supporting mental health initiatives.

*Stay tuned for release of the BC First Nations and Aboriginal People’s Mental Wellness Substance Use 10-Year Plan: A Path Forward in late March*

Participants at a First Nations House of Healing sharing circle session celebrate many successes of healing together. Photo Courtesy: First Nations House of Healing

One of the Gathering Strength boxing participants laces up the gloves.
as part of a move towards preventative medicine. With effective mental wellness supports in community, other areas of our wellness are nurtured and when we are mentally well we are more easily able to be physically, emotionally, and spiritually well. By partnering with the Aboriginal Leadership Circle, Aboriginal Sport, Recreation and Physical Activity Council, and the local recreation centre, the Gathering Strength team was able to offer a number of sport camps and activity sessions including boxing, swimming, basketball, soccer, canoeing, and elite level lacrosse.

After some of the youth successfully completed their swimming courses they have set forward to become lifeguards and leaders in their villages. The boxing event in particular proved to be the most successful attracting youth as young as 7 and adults up to 55 to get in the ring and get fit. Elsewhere on the Island the Intertribal Health Authority based out of Nanaimo has been working on a number of mental wellness related programs including the First Nations House of Healing that began in 2000 delivering a number of different healing programs for survivors of residential school trauma. The House of Healing is one of 12 similar healing centres in the province and over a 13 year period has served more than 1,000 community members from nearly every region of the province as well as some from as far away as the Northwest Territories.

"Every community has suffered. A lot of First Nations people feel like they're not allowed to talk about the trauma they have experienced, they're not allowed to share it. But after you share the pain, it comes through in your tears and after breaking down you become stronger," said Wayne Johnny. "After you make it through it's a total turnaround, now I understand what trauma is and through healing I have gotten everything in my life back."

The House of Healing has a number of programs coming up throughout the year covering a wide range of mental wellness area including grief and loss, sexual abuse, residential school, anger, and shame. In walking the balance between the western medical system and traditional ways of healing, many First Nations are finding that stepping back into their cultural roots and ways of community healing is giving them strength to rise above the current challenges. While there is still much work to be done in communities across the province and country related to the circle of wellness and the Social Determinants of Health, the small successes that are taking place are turning into big victories and leading to even bigger projects worth celebrating now and well into the future.

Connect with the First Nations House of Healing for their coming events at: www.intertribalhealth.ca

"I've come a long way and done things I've never dreamed of 20 years ago and I'm continuing the journey thanks to these programs. I'm proud of the certificates I've received and now I have the confidence to speak at community events. I want us as First Nations people to get back to the good people we were, the proud people we were. A lot of people have lost their dignity, lost their voice, and pride, all stripped away from drugs, alcohol, and violence. But I know through my own healing we can get it all back. The job of healing is just now starting."

The House of Healing is a positive influence on many Vancouver Island youth.
Northern Nation Initiatives
Push Cancer Care Forward

By Trevor Kehoe

First Nation communities in Northern BC are taking part in Cancer education and awareness activities to improve understanding, causes, prevention initiatives, and how to cope with diagnosis and care. The recent opening of the BC Cancer Agency (BCCA) Centre for the North in Prince George and the introduction of the first Aboriginal Cancer Care Coordinator for the BCCA provides much needed support in the North.

The Aboriginal Cancer Care Coordinator is a key part of the Aboriginal Cancer Care Advisory Committee, formed in 2011 to help develop an Aboriginal Cancer Care Strategy (ACCS), and to provide support to families navigating the cancer care continuum. The ACCS’s four goals include a focus on patient navigation education, planning and advocacy, building on Aboriginal specific data collection, increasing cultural competency of health care providers, and enhancing awareness of the benefits of early detection and screening in communities.

“Our focus is on the continuity of cancer care – screening, prevention, and palliative care or survivorship,” said Terri Stewart, the Aboriginal Cancer Care Coordinator with the BCCA Centre for the North. “Finding cancer in later stages without screening and early diagnosis pushes mortality rates up and it can sometimes be too late or treatment can be more difficult.”

Cancer has been linked to wider Social Determinants of Health that impact community wellness like access to healthy food sources, housing, drinking water, and employment, among others. While it is a complex disease, with prevention, early detection, a healthy lifestyle and access to quality care, it can be more successfully fought.

Stewart works to improve cancer care experiences, promote cultural competency and bridge traditional and contemporary approaches to health. She also assists patients and their families with emotional and practical concerns during the cancer journey, and making referrals to support services.

The new Centre is one of six in BC, the first in the North and includes a spiritual care room, a smudging pavilion, healing garden, and a commitment to culturally competent service delivery. The centre, Stewart and the Advisory Committee all work to ensure the needs of Northern First Nation and Aboriginal communities are integrated into the services delivered through the BCCA.

The BCCA reports that up to 50 per cent of cancers are preventable – a significant number that shows us through respecting tobacco, healthy eating, physical activity and regular screening, we can take big steps to help beat the disease. Stewart is also currently working with Saint Elizabeth to deliver their www.atyourside.com online cancer care course that is geared towards helping participants better understand cancer.

A number of communities throughout the North have already started to hold various grassroots events and activities to build cancer awareness with local residents. The community of Gitlaxt’aamix celebrated cancer awareness in 2012 with an Aboriginal Day parade honouring survivors and remembering those who have been lost to cancer. Also on June 21, 2012, Tsimshian First Nation’s Dayna McKay inspired her community and many throughout the province and country with her ‘Into the Sea, Cancer Free’ fundraising swim from Port Simpson to Prince Rupert in 19 hours.

For information about support services in Prince George, contact the Aboriginal Cancer Care Coordinator, Patient and Family Counselling Services, BCCA Centre for the North, at (toll free) 1-855-775-7300 or by email at terri.stewart@bccancer.bc.ca
Nak’azdli Chiefs Lead the Way on Reducing HIV/AIDS Stigma in their Community

By Philip Hogan

The Nak’azdli Nation, located near Fort St. James in Northern BC, is taking a proactive approach to promoting HIV/AIDS education and prevention. Recently the Chief and Council were tested for HIV as part of a commitment to improve the wellbeing of their citizens and increase HIV awareness. Leadership in the community volunteered for HIV testing to help combat the stigma associated with the disease and encourage others to get tested, along with a campaign to inform the Nation about HIV and how to minimize harm to themselves and the community.

“We wanted to send a message to the people about accepting the person living with this disease and removing the stigma about it being a contagious disease,” said Nak’azdli Nation Chief Fred Sam. “We also wanted to stress as a Council the importance of being tested and setting precedence for other leaders to follow our example.”

Nak’azdli Health Director Aileen Prince spoke about the HIV work the Nation has been doing. “In 2005 we had community members who were moving back (home). One young man who was HIV positive and very sick came home to be taken care of.” Ms. Prince talked about the tradition of community and extended family coming together to care for people who were ill and passing. Frequently, when people live away from their communities and become ill they travel home to be with their family and community as they pass.

“When the time comes that their body can no longer look after them, they need to be around people that love them,” said Ms. Prince. She said that there are currently First Nations people dying in urban hospitals from HIV/AIDS who aren’t going home partly due to the stigma associated with the disease. She feels that this is not in keeping with the traditional way of looking after people. “How many of us want family members to die alone?”

To combat misconceptions about the disease, the Nak’azdli

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HIV: Did You Know?

• You can’t get HIV through a mosquito bite, sitting next to someone with HIV, hugging or kissing them, or living in the same house with someone unless you have a sexual relationship with that person.

• HIV can be prevented.

• Using a condom will significantly reduce the risk of contracting HIV.

• Sharing needles is a key risk factor for acquiring HIV and Hep C.

• HIV/AIDS medications are available free of charge in BC.

• Transmission of HIV from a pregnant woman to her child can be prevented by early testing and ensuring that she has access to treatment.

• It is easier to contract Hep C than HIV.

• The only way you can get Hep C is by having direct contact with the blood of a person who has Hep C. This means you should not share needles, syringes, toothbrushes, razors, or other items that may have trace amounts of blood on them.


Public Health Agency of Canada 2010:

• A person’s vulnerability to HIV infection increases or decreases based on income, education, unemployment, access to stable housing, early childhood development, physical environments (isolated communities, prison environments), access to health services, support networks and social environments (homophobia, HIV/AIDS related stigma and discrimination), gender, and a history of sexual violence.

• The overall HIV infection rate for Aboriginal people in Canada was about 3.6 times higher than among non-Aboriginal people in 2008. Injection drug use is the main category of exposure for Aboriginal males and females.
**Midwife**

**What do they do?**
Midwives are primary health care providers who offer comprehensive care to pregnant women and their babies during pregnancy, through labour, birth, and the early week of a baby's life. Midwives support the mother and her family to make informed decisions over the entire course of pregnancy. They are responsible for providing assessments, physical examinations, screening and diagnostic testing, and the delivering of normal births. They also provide a large amount of health promotion through education on nutrition, exercise, breastfeeding and parenting to mothers, families, and communities.

**Where do they work?**
Midwives generally work on-call shift work that fluctuates with the natural cycle of birth. Some work independently while others prefer to be on a team – they can be found working in the homes, birthing centers, clinics or hospitals. The career of midwife is holistic in nature involving all aspects health (social, emotional, cultural, spiritual, psychological and physical) through a woman's pregnancy and birth experience.

**Career Outlook:**
The field as a whole continues to be relatively small in comparison to the other health professionals that deliver babies. However, the role is expanding and the demand outweighs the current supply. all signs point towards a continuing steady growth in the profession.

**Education Programs and Certification:**
- UBC (Vancouver) - Bachelor of Midwifery degree
- National Aboriginal Council of Midwives - Educational Pathways

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**Environmental Health Officer/Public Health Inspector**

**What do they do?**
The role of an Environmental Health Officer and Public Health Inspector is to safeguard the environment and health of the public. They work in communities preventing, identifying and correcting environmental problems which affect the health of the population, doing this through diverse duties such as performing health inspections of homes, public building and facilities, as well as community events to assure they meet and exceed standards and regulations. They also are responsible for training and education of the public in health promotion activities related to water, food, housing, communicable disease, environmental pollution and occupational health and safety.

**Where do they work?**
Typically employed by health agencies (federal, provincial, regional, and First Nations), Environmental Health Officers and Public Health Inspectors can be found in communities doing a considerable amount of fieldwork and travel. Some also work in the private sector in the field of academics, public policy and management, research and information.

**What traits do they have?**
Environmental Health Officers and Public Health inspectors must have the ability to work independently, show good decision making and problem solving skills, and have an attention to detail. Often working with members of the public, communication skills (verbally and written), patience, and relationship building skills are required.

**Career Outlook:**
The occupation will be facing a shortage in near future as many current officers and inspectors are beginning to retire. The career is very diverse and there is ample opportunity to specialize in certain area such as housing or water, drinking water, and environmental management or ladder into related jobs.

**Education Programs and Certification:**
- British Columbia Institute of Technology (BCIT) – Bachelor of Technology
- Also, certification from the Canadian Institute of Public health Inspectors is required

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“It’s this amazing privilege we have as midwives, to be invited into the most intimate and important time in a family’s life. Welcoming that baby in a good way is important for the health of the whole community, young and old. It is my opinion that well educated and well trained midwives from within a community which they understand and care about will provide an exceptional standard of care that is both appropriate and empowering.”

**Evelyn Harney**, 
Aboriginal Registered Midwife

“Healthier, safer communities, in which First Nations peoples could live, work, eat and play”

**Melissa Daniels**, 
Environmental Health Officer 
Stz’uminus Nation
Difficulty sleeping? You are not alone. Millions of Canadians suffer from insomnia, which is defined as difficulty either falling asleep or staying asleep. While we often consider sleep to be a “passive” activity, getting sufficient sleep is increasingly being recognized as an essential aspect of health promotion and chronic disease prevention.

Sleep deprivation is associated with many conditions such as diabetes, cardiovascular disease, obesity and depression or other neurological conditions. It also has an impact on work performance, physical activity performance and can disrupt or impair the use of vehicles or machinery. Some possible causes of insomnia include: caffeine, alcohol, nicotine, anxiety/depression, hormonal imbalance (thyroid, adrenal, menopause, pregnancy, etc) blood sugar issues, sleep apnea, discomfort/pain, certain prescription medications and obesity.

The Importance of sleep:

Sleep helps us thrive by contributing to a healthy immune system, and balancing our appetites by helping to regulate levels of the hormones ghrelin and leptin, which play a role in our feelings of hunger and fullness. When we're sleep deprived, we may feel the need to eat more, which can lead to weight gain, which can worsen sleep disturbances. During sleep, blood moves to the muscles for tissue repair and growth, and provides energy to the brain and body. During this time energy is restored for the next day. Sleep is therefore needed for muscle repair, improved memory and release of hormones regulating growth and appetite. This improves mood, concentration, decision-making, and being able to engage fully in school, work, and social activities.

Natural Treatments:

When looking to improve your sleep it is important to look at your lifestyle by addressing the following:

Maintain proper sleep hygiene:

• Exercise: regular physical activity improves quality of sleep. Be sure to exercise in the day and not before bed.
• Complete darkness (no TV) is needed to activate sleep hormones;
• No electronics before bed which can be too stimulating;
• No sound or background sound;
• Going to bed and waking up the same times daily helps regulate sleep hormones;
• Aim for 7-9 hours a night depending on age (more if you are a younger person);
• Room needs to be a comfortable temperature—not too hot or cold with comfortable mattress and to ensure pillows/comforter cause no allergens;
• No heavy meals before bed and no stimulants in the second half of the day such as caffeine or alcohol.
• Relaxation before bed: Taking the time to unwind 30-60min before bed is important. Taking a bubble bath, reading, or meditating can help.

Supplements to consider: If further help is needed, taking a natural supplement can help improve sleep, be non-addictive, and be non-drowsy. It is always important to find the cause of insomnia and address appropriately.

Melatonin (3mg) will help only if levels are low, consider if you do shift work or have jet lag.
Magnesium (250mg) - (take with Calcium) consider if Restless Leg Syndrome or muscle cramps.
Many botanicals have sedative effects: Passion Flower (passiflora incarnate); Valarian Officinalis (valerian); Lemon Balm (verbanum)

There are many Homeopathics available that address insomnia. One combination homeopathic that is available in the drug store is Calm Forte. With all health conditions, it is important to consult your health care practitioner when starting any new supplements or medications. Also seek professional help when pregnant or breastfeeding.
Tsilhqot’in Gathering Brings Health Services to Camp

By Trevor Kehoe

Taking health care services out of urban centres and back to the land, member communities of the Tsilhqot’in Nation have found that holding a health fair at the same time as their annual Six Nation Gathering has helped to educate and increase use and awareness of health services many didn’t know were available.

Held alongside the Tsilhqot’in River in Farewell Canyon - 75 km west of Williams Lake, over 400 community members from Xeni Gwet’in (Nemiah), Tl’etinqox (Anaham), Tl’esqox (Toosey), Tsi Del Del (Alexis Creek), ?Esdilagh (Alexandria), and Yunesit’in (Stone), attended the event. The two day gathering was packed with a long list of fun family activities, great food, opportunities for community connections and health talks led by diverse organizations.

“The event took about a year of planning – the Nations were gathering anyway so we thought while everyone is out on the land and in one place it would be easier to expose our people to health services,” said Connie Jasper, Health HUB Coordinator with the Tsilhqot’in. “Usually we may not be able to connect with [them] at home. Being in such a comfortable environment I think it made people feel more open to talking about health. The Community Health Nurses sometimes find it difficult [to get] people to attend clinics or [to] get information out, so they felt like this served them well and would like to make it annual.”

The health fair included information sessions on many topics including HIV/AIDS, alcohol and drugs, sun and water safety, mental health, women’s and men’s specific health and cancer screenings, arthritis, nutrition, stress relief, communicable disease control, maternal child health, and much more. Organizations in attendance included the Carrier Sekani Mobile Diabetes Clinic, the Arthritis Society of BC, Interior Health, the RCMP, BC Cancer Society, as well as many nurses from local communities.

With many community members in one place it was a great opportunity to offer up-to-date immunizations and screenings for breast, cervical, and prostate cancer in a comfortable, welcoming and open setting. A focus on traditional foods and medicines was evident in numerous sessions and other fun activities including a ‘Moccasin Mile’ running competition, drumming, and hiking.

“Pulling health care out of a traditional formal setting and back onto the land was a big success for the Tsilhqot’in health fair and organizers would recommend a similar approach for other communities looking to increase community health education in such a welcoming environment.

“Pulling health care out of a traditional formal setting and back onto the land was a big success for the Tsilhqot’in health fair and organizers would recommend a similar approach for other communities looking to increase community health education in such a welcoming environment. With positive feedback from the community, visiting health professionals, support organizations and organizers already have plans in the works for next year’s event. It was great to get back to nature, connecting with the land, eating great food and getting a conversation going about health. Many of our community members don’t even know the services we have out there available to them so we have to sell ourselves a bit,” said Corrine Bayliff, a Community Health Nurse with Tl’etinqox (Anaham), Tl’esqox (Toosey), and Yunesit’in (Stone). “Our women’s health sessions with pre and post-natal information, mammogram and cervical screening, and immunizations were all well attended. One community member actually found out she had breast cancer so it was all worth it to find that out when we did and follow up.”
Wellness Diaries

In the coming issues of Spirit we will be interviewing First Nations Health Council representatives from around the province telling their stories of Health and Wellness, offering their personal stories of successes, challenges and what it takes to lead by example in being well.

This issue we are featuring Grand Chief Doug Kelly (DK) and Chief Willie Charlie (WC) from the Fraser Region.

What challenges have you incurred on maintaining your current Wellness goals?

DK: The first challenge for me was acceptance. While I have always been bigger than other males in my age group – I was always active and fit. With the evidence from the Gathering Wisdom V Health Assessment – I had to accept that my good health was gone. When I decided to do more work instead of exercising – I hurt my good health. When I left eating well after usual meal times because of work – I usually went with fast food and hurt my good health. I had to accept that my lifestyle had to change or I was going to become a diabetic, that I would suffer from heart and stroke related health issues.

WC: The biggest challenge is finding time, what I have committed myself to do is get up at 5:30 am before I go to work. I run 4 K round trips in the dark to our community’s school gym and back and exercise at the gym for an hour and a half. It took a lot of discipline to follow the tree line in the dark to the gym, there are no street lights, and I get asked often how I do it, it takes discipline and determination. I think time, is a challenge that can relate to everyone.

What are your current goals for Wellness?

DK: Achieve healthy blood pressure – at GWV – I was told that my blood pressure was dangerously high. When I saw my new family doctor in August 2012, she told me that my blood pressure was high but if I kept at it that I could bring my blood pressure down without medication. So I am well on my way to achieving healthy blood pressure. My first goal was to lose my membership to the 300 pounder club. I have achieved that goal and I am now working to lose my membership to the 250 pounder club.

WC: Workwise I am doing less work at home and even less work on weekends. I cut down significantly on fast food and junk food. More family time is a priority for me. Especially at meal times, big part of eating healthy is eating at certain times, not eating on the fly and eating with family. I would like to get down to the weight of 210 lbs. I had an assessment with Dr. Sarah Williams, and we discussed a realistic weight for me to achieve and maintain, and I’m set on my 210 lb goal.

What are some keys to success for long-term Wellness?

DK: It begins with me. I cannot blame others for the state of my health. I make decisions every day. These daily decisions over time will be good for my health or not. It is up to me. I will make choices that help me achieve my personal wellness. When I experience a setback, I will accept that I am human. I will get past the setback and move on to achieve wellness. I cannot do this journey alone. I need help. My dear mate helps me, Chief Willie Charlie. My children help me. My colleagues, coworkers, and team are my health partners. I am not alone on this journey to wellness.

WC: It has to become a lifestyle. When looking at wellness you have to look at changing your lifestyle for the long term. All too often people look for a quick fix, but it’s about eating healthy and eating smarter, training consistently and keep sight of your goals. Winter time is big for spirituality for me, participating in a lot of ceremonies drumming and singing, this helps me stay successful as well.

Tell us about some of your successes.

DK: I have dropped sizes in my jeans from a 44 to a 40 waist. I have more energy, more focus, and my endurance is developing. My mind and heart are clearer and stronger because I am managing stress. I have went from dangerously high blood pressure to normal blood pressure.

WC: Before I started working out and jogging, there was always someone around me or with me, very little time with myself. Now I get to spend time with myself in my own head for 2 hours a day and it really helps me be more productive and have a clear head when making decisions for the day. I think that time with myself in my work outs has been beneficial and successful. I challenged my council, directors and managers to lead by example and encourage them to allow staff to participate in a walk/run program at our work. We have 45 people participate and we run the program during the work day 1 day a week, over half the employees participate with more joining each time we go out. We support our staff to be healthy as well, they all have their own schedules to keep out of work, so we do our best to assist them in their journeys. Before I started exercising, I cut out junk food and pop I dropped 6 lbs! I was able to bring out old clothes, down three belt sizes, after incorporating exercise I have lost a total of 20 lbs.

How has your Wellness journey impacted those around you, friends, colleagues and family?

DK: My wife has lost weight and she is feeling much better. She is learning more about helping us eat healthy. What she learns – she shares with me. Chief Willie Charlie and I are competing without competing. When Willie succeeds, it helps me to stay on track. When Chief Maureen Chapman succeeds, she helps me stay on track. I post my results on Facebook every Sunday as part of my personal accountability. Facebook friends tell me that they are inspired to get off the couch. They tell me that they are paying more attention to what they eat. They are beginning to take steps to change their lifestyle. They want to become healthy and are looking for inspiration to perspiration. To build a First Nations Health Authority – we have to do things differently. We as the FNHC have to walk our talk. The FNHC is beginning to take its job as role models seriously and we are walking the talk.

WC: Everybody has been really encouraging, they are supportive of me finding time for myself to take care of myself, and happy for the results I’ve had. The journey I have started has started to rub off on them as well, they have been getting healthier themselves.

What challenge would you issue to readers?

DK: Please take a good honest look at the state of your personal wellness. Are you healthy? Do you need to make changes? After you do your processing, take small steps and begin to replace old and bad habits with new healthy habits. If I can do it – you can do it!

WC: I challenge all BC Chiefs to lead by example, if a Chief has enough time to exercise and eat right, it’s showing the community that they too, can find the time to improve their health.
“The healthier we are, the healthier our children and earth will be. Our ceremony is the pathway to achieve that. All ceremonies we can bring back and put into action as an individual, family, and community are so important for our future.”

Leonard George, Tsleil-Waututh First Nation