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Jordin Tootoo helps launch NAHO's National Aboriginal Role Model Program

By Nadine Solomon

Nearly 200 spectators, mainly youth, gathered at Lansdowne Park in Ottawa on May 13 to see role model Jordin Tootoo help launch the newly re-designed National Aboriginal Role Model Program.

"With youth making up such a large part of the Aboriginal population, it is important to have positive images of Aboriginal people. Youth need positive role models to strengthen themselves and their communities," said Noreen McAteer, National Aboriginal Health Organization's (NAHO) Chairperson, who began the event.

The role model program celebrates the everyday accomplishments of First Nations, Inuit, and Métis youth across Canada. Twelve role models between ages 13 and 30 are being selected as role models by Aboriginal youth. They are being announced in Ottawa on June 21, National Aboriginal Day.

Role models will travel to schools, community celebrations, festivals, and events to talk about being role models. They will share their experiences with other Aboriginal youth to encourage them to set goals and to work hard to achieve them. The role models will be available to speak about their achievements, to

discuss their special talents, and to encourage youth to make positive, healthy life choices.

Aboriginal youth nominated the role models. The deadline for nominations was May 21. There will be 12 new role models selected each year for the next five years of the program.

Having role models creates hope for many Aboriginal youth since growing up is difficult. There are many obstacles to

overcome to achieve one's goals in life. Many Aboriginal youth have to leave their communities to attend school. This means adapting to a different environment away from loved ones. Many young Aboriginal Peoples have a hard time adjusting and sometimes start using alcohol and drugs. Role models show that determination and perseverance achieves goals.

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At 21, Jordin Tootoo is the first Inuk to play in the National Hockey League. Tootoo has overcome adversity and worked hard to achieve his dreams. His appearance at the launch of NAHO's National Aboriginal Role Model Program excited fans both young and old. Here, Tootoo accepts a gift from a group of young fans.

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Launch of role model program a success



Above: Ottawa Inuit performers Siqiniup Qilauta had onlookers captivated with their dancing, singing, and drumming. On the right: Jordin Tootoo admires his poster.



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Jordin Tootoo is a perfect example of determination. He is a proud Inuk from Rankin Inlet, Nunavut. He is the spokesperson for the role model program. Tootoo is a forward for the Nashville Predators in the National Hockey League. The 21-year-old wants to inspire Inuit, First Nations, and Métis youth to pursue their goals. Tootoo told his eager fans, "the sky's the limit." His fans came from the Ottawa area and also from across Canada.

A talented group of Inuit women, Siqiniup Qilauta (The Sun's Drum), entertained the crowd by demonstrating

their rich culture through throat singing and dancing to the beat of their drums.

The successful launch of the role model program was accomplished with the direction of Program Manager Joyce Spence.

"Young people need to be acknowledged for their goals and achievements. They don't realize what they do impacts others and this can carry them a long way," Spence said.

Information packages, including nomination forms, were sent to more than 2000 Aboriginal communities from coast to coast to coast.

As well as posing for his poster, Tootoo recorded two public service

announcements (PSAs) that were sent to 200 Aboriginal radio stations. The PSAs encouraged youth to nominate their role models.

A youth working group was created to help re-design the role model program. The working group is reviewing the nominations to recommend 12 role models using criteria they set. The working group is made up of youth representatives from national Aboriginal organizations. You can see their names and organizations on page 8.

You can also see photos of the youth working group members on NAHO's website at www.naho.ca/rolemodel. The website also has information on the program. It will have information on the 12 role models once they are unveiled.

This story was written by Nadine Solomon, a 20-year-old Cree woman working as the Program Assistant for the National Aboriginal Role Model Program. You can read about what makes Nadine a role model on page 8.



Fans endured long lines to get an autograph from role model Jordin Tootoo.

ICAH provides one-stop shopping for Aboriginal health information

By Jane-Diane Fraser

More than 1000 books and reports on Aboriginal-health topics. More than 700 records on health careers for Aboriginal Peoples. More than 600 records on health programs and services available to Aboriginal Peoples. More than 700 records on health-related scholarships and bursaries for Aboriginal students. And the numbers are growing.

It's all available at the Information Centre on Aboriginal Health (ICAH), a virtual-library database run by the National Aboriginal Health Organization (NAHO). This free service can be used by anyone with Internet access.

"We offer a lot of value to ICAH users," said Gordon Jung, Acting Manager of ICAH. "We are a one-stop shop. A virtual library like this saves people a lot of time. We provide health information that is relevant to Aboriginal communities. It's going to be big. No one is doing this on a national level, in terms of both issues and accessibility."

Instead of spending hours searching the Internet for information on national and international indigenous health issues, log on to ICAH and immediately access thousands of relevant records. If there is no information specific to Aboriginal Peoples, ICAH will look broader and get the next best thing—more general information.

Want information on AIDS in Canada's Aboriginal population? Simply type the word "AIDS" into ICAH's search engine. You'll get a list of five online resources on AIDS in Aboriginal communities and five programs and services available to Aboriginal AIDS patients. Each record directly links you to the online source.

"Our users are at the community level: health care workers and health care representatives," said Jung. "We want them to get practical information they can provide and use for their clients within Aboriginal communities."

ICAH had nearly 160,000 hits in May. That's more than 5125 hits per day.

Jung's next goal is to get more people living in Aboriginal communities using the service. ICAH is doing this through an awareness campaign targeting community libraries, community health clinics, partner organizations, and regional organizations.

Once the word about ICAH spreads, another challenge will be accessibility. Some communities only have one computer. Remote communities may have a lack of bandwidth and dial-up connections are slow. Because of this, ICAH has two versions—one with pictures and text and one that is text only.

The site was launched in January 2004 and is still developing. "Right now we're doing a major review of the site, how we're wording things, how we're presenting it

aesthetically," Jung explained. "We still have changes to make. Once we make these changes, the usability of the site will be better. We want it to be as intuitive as possible."

Future projects for ICAH include developing guidelines for what types of services ICAH provides, a quick reference service, and a material loaning service for when a person has no access to resources. ICAH also wants to increase its French and Inuktitut records.

ICAH's library technicians and researchers find new records by continually searching online and physical resources. The researchers have a huge list of health topics. From there, the team divides the topics and looks for resources, programs, and career information on the subject. Then they decide if the material is appropriate for the site. Once a record is chosen, ICAH staff put it in the database and catalogue it.

ICAH helps NAHO, a knowledge-based organization, meet its objects of helping people understand health issues affecting Aboriginal Peoples and helping Aboriginal Peoples take part in delivering health care. You can visit ICAH on the Internet at <http://www.icaah.ca>.

To meet the ICAH staff, see page 4.



NAHO Bulletin

The National Aboriginal Health Organization (NAHO), an Aboriginal-designed and -controlled body, will influence and advance the health and well-being of Aboriginal Peoples through carrying out knowledge-based strategies.

The *NAHO Bulletin* is an electronic publication produced monthly to update readers on NAHO's activities.

If you have any questions or comments about NAHO or its publications, including having this and other publications sent to you, please contact us at:

National Aboriginal Health Organization

56 Sparks Street, Suite 400
Ottawa, ON K1P 5A9
Telephone: (613) 237-9462 ext. 510
Toll-free: 1-877-602-4445
Fax: (613) 237-1810
Website: www.naho.ca
e-mail: naho@naho.ca

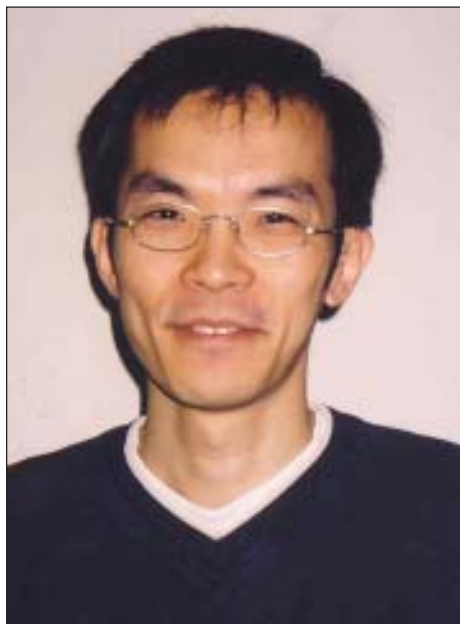
Les versions françaises de cette publication sont disponibles sur demande.

What's new at ICAH?

Check out these resources:

- ◆ *The Midwifery Option: A Canadian Guide to the Birth Experience* by Miranda Hawkins and Sarah Knox
- ◆ *The Canadian Aboriginal Medical Student's Guide to Scholarships, Awards and Bursaries* edited by Gilles Pinette
- ◆ *Salvaging Nature/Indigenous Peoples, Protected Areas and Biodiversity Conversation* by Marcus Colchester
- ◆ *A Guide to Indigenous Peoples' Rights in the International Labour Org* by Fergus MacKay

Meet the people who work at the Information Centre for Aboriginal Health



Gordon Jung, Acting Manager

Gordon manages ICAH's daily operations. He co-ordinates projects, streamlines ICAH's procedures, and gives guidance on research and selection. He works on development guidelines, promotes awareness of ICAH, and builds relationship with other organizations.



Debbie Prescott, Library Technician

Debbie selects resources and catalogues for ICAH's website. Resources include articles, books, brochures, fact sheets, newsletters, reports, videos, journals, and websites.



Suzanne Rose, Library Technician

Suzanne is responsible for the scholarships section of the database. She searches for specific scholarships and bursaries and catalogues them.



Melanie Evtushenko, Library Technician/Researcher

Melanie is increasing ICAH's French-language collection. She is also organizing ICAH's physical resources.



Sarah Normandin, Library Technician/Researcher

Sarah evaluates ICAH's website and how it appears to the public. She looks for usage errors to make the site more user friendly.



Victor Wong, Library Technician

Victor takes care of the health careers and the programs and services for Aboriginal Peoples. He spends most of his time searching for specific information on the Internet, which he then enters into ICAH's database.



Ajungniniq Centre

56 Sparks Street, Suite 400

Ottawa, ON K1P 5A9

Telephone: (613) 237-9462, toll-free: 1-877-602-4445

Fax: (613) 237-1810

Website: www.naho.ca/inuitcentre

Celebrating Inuit health victory

By Mark Buell

Country foods are both a healthy part of the Inuit diet and an important part of Inuit culture. This is why Inuit were concerned when scientists found high levels of persistent organic pollutants (POPs) in the northern food chain.

POPs are chemicals that are sometimes released as a result of manufacturing processes. They can travel great distances around the world and take a long time to break down in the environment. POPs are toxic and build up in the fatty tissues of mammals and fish. This makes them a key concern for Inuit, since much of their diet is made up of animals that may have POPs in their system.

In May, Policy Analyst Mark Buell, Centre Director Tracy O'Hearn, summer student Matthew Angecone, and Executive Assistant Sipporah Enuaraq attended a daylong event in Iqaluit, Nunavut. It was hosted by the Inuit Circumpolar Conference (ICC) Canada.

The event had a traditional feast to celebrate the Stockholm Convention on Persistent Organic Pollutants. The Stockholm Convention is a global treaty to protect human health and the environment from POPs. It requires countries to stop or reduce emissions of POPs.

The ICC hosted the feast to celebrate this landmark event and to highlight the importance of eating healthy country foods.

"What a wonderful occasion and a time to celebrate," O'Hearn said. "Inuit have worked very hard for a long time to achieve this ban on POPs. The Ajungniniq Centre appreciated the opportunity to partner with ICC Canada on this event and join in a feast with traditional Inuit foods."

O'Hearn went on to say, "Country foods are a safe and healthy part of the Inuit diet. The Stockholm Convention will



Inuit Circumpolar Conference President Sheila Watt-Cloutier shares a laugh with Governor General Adrienne Clarkson at the Stockholm Convention celebration.

ensure that they continue to stay that way."

A special surprise guest joined the celebration. Governor General Adrienne Clarkson came to the event to congratulate Inuit on this success.

Earlier in the day, Centre staff attended a briefing for Inuit leaders on the Arctic Climate Impact Assessment (ACIA), also hosted by ICC Canada. ACIA is an assessment of the impacts of climate change in the circumpolar world. It was initiated by the Arctic Council in 2000 and is being released in November. More than 250 authors from 15 countries, including indigenous peoples, have been involved in its production.

"Climate change isn't theoretical," O'Hearn said. "Inuit communities are already experiencing some serious impacts, yet these regions have the least capacity to deal with these impacts. ACIA will go a long way in bringing Arctic climate change issues to the attention of the rest of the world, and hopefully inspire them into action."

The Ajungniniq Centre is working on a climate change project. It looks at impacts of climate change on Inuit health and well-being.

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Ajungniniq Centre welcomes new staff

The Ajungniniq Centre is pleased to welcome Caroline Anawak to its team as a Special Projects Officer. Caroline joins the Centre after 30 years in the North. She is well-known to Inuit for her work on a number of issues affecting Inuit, most notably suicide.

Caroline is working on a maternal care project that brings Inuit women together who have had babies in the last three years. The project aims to understand their experiences and needs in the prenatal, delivery, and postnatal stages.

Caroline is also working on a project on suicide. She is looking at traditional Inuit protective factors for suicide from all four land claim regions and how these protective factors can be integrated into contemporary Inuit society.

The Centre also welcomes summer student Matthew Angecone, who studies law at the University of Ottawa. Matthew is an Ojibway from Lac Seul First Nation and of the Caribou Clan. He has a degree in Business Administration from Lakehead University in Thunder Bay, Ont.

One of the projects Matthew is working on this summer is on protecting Inuit intellectual property under land claim agreements and international documents.

"The Centre has already brought me a great opportunity to learn," Matthew said. "New people, new places, and learning new areas of law have made this a great learning experience so far."



First Nations Centre

130 Albert Street, Suite 1500

Ottawa, ON K1P 5G4

Telephone: (613) 233-1543 ext. 501, toll-free: 1-877-602-4445

Fax: (613) 233-1853

Website: www.naho.ca/fnc, e-mail: fnc@naho.ca

NAHO's maternal care study underway

By FNC Communications Officer

You're eight and half months pregnant. You're about to give birth. You live in a northern or remote First Nation reserve or community. The only way in or out is by air or a long haul down a rough dirt road. You have a family—a partner and children who depend on you. Perhaps you also have an extended family that needs you. You feel you can't be away even for a little while. However, you know you may be gone for a month or more to give birth.

For many First Nations and Inuit women, giving birth means being “medevaced” to the south. They're alone, away from their children. Their language may not be understood on the plane or in the hospital. They probably won't know anyone there. They're frightened. But the policy is, if a woman is going to give birth, she must board that airplane so she can deliver her baby in a southern hospital.

These are the prospects for many First Nations and Inuit women about to give birth in northern and remote communities. This is just the way things are. More children may survive prenatal complications, thanks to this fly-out policy. More children may live if something serious goes wrong during or right after birth. In a big city hospital, there are doctors, nurses, and modern medical facilities readily at hand. The question is, however, at what cost to the patient and her family?

“There's lots of research in this area,” said Effie Panousos, a Senior Policy Analyst at the First Nations Centre (FNC). Most research, though, is statistical—cold, hard numbers that detail the numbers of women flown out, the survival rate of the children, and the complications, if any.

“But there's very little experiential research, research that comes from the voices of mothers about their experiences.”



Senior Policy Analyst Effie Panousos is leading a study on maternal care in First Nations communities.

Panousos said it's time to present the human face behind the statistics that other research projects tend to overlook. “Birthing is important to a lot of communities. It involves more than just a doctor or nurse and the mother. It involves the whole community and the culture,” she said.

What happens when women lose the support of family and community during this critical time? What is the emotional cost? Are there unrecognized psychological, social, and cultural consequences? These are topics the maternity care study may reveal. It is a joint preliminary needs assessment involving NAHO's FNC and Ajunnginiq Centre with support from the Health Secretariat of the Assembly of First Nations (AFN) and the Health Committee of Inuit Tapiriit Kanatami (ITK).

The study began with a proposal to the First Nations and Inuit Health Branch (FNIHB) of Health Canada in November 2003. The FNC and Ajunnginiq Centre contracted Carolann Brewer and Patricia Baxter, First Nations consultants in Ottawa,

to help design, develop, co-ordinate, and carry out the needs assessment project.

“Soon after we launched a national call for volunteer women and practitioners to take part in the project,” said Valerie Gideon, FNC Director, “Effie's phone started ringing.”

“Women want to talk about their needs, their experiences, and their ideas to make things better for present and future mothers,” Gideon explained. “It's an emotional and highly rewarding project, for them and for us.”

The study is being done in three phases. The first phase sets the ground rules, method, timetable, and people's roles. Phase two is underway—health practitioners with experience in maternity care in First Nations and Inuit communities are being interviewed by telephone. Meanwhile, focus groups are being held in several cities across Canada with women who have given birth within the past three years. After these phases are complete, the researchers will go over the material to compile preliminary findings by the fall in a final report.

For more information on the recent activities of the FNC, see pages 9 and 10.

Monthly Reflection

“What is life? It is the flash of a firefly in the night. It is the breath of a buffalo in the winter time. It is the little shadow which runs across the grass and loses itself in the Sunset.”

Crowfoot
quoted in *Touch the Earth*



Meeting Métis in B.C.

By Michael Fisher

Centre Director Lois Edge and Community Liaison Officer Ken Drury delivered a presentation on the Métis Centre's achievements to the Board of Directors of the Métis Provincial Council of British Columbia (MPCBC) on May 29 in Vancouver. The presentation helped pave the way for future collaborations with the MPCBC and Métis regional organizations in B.C. Many people learned about the work of the Métis Centre and the National Aboriginal Health Organization (NAHO) for the first time.

It was also the first day on the job for the new Board of Directors, which was elected through provincial elections in April. About 120 elected officials, dignitaries, and community members attended the inauguration ceremony. Dignitaries included Lydia Hwitsum, attending on behalf of Ed John of the First Nations Summit, and Chief Stewart Phillips, president of the Union of B.C. Indian Chiefs.

"There was a lot of interest in the structure of NAHO because it incorporates the unique perspectives of Métis, Inuit, and First Nations and allows for collaboration in areas of mutual benefit and concern," Drury said. "I think this really raised a lot of interest because Métis communities on the West coast have been rapidly moving forward on a number of great initiatives—like child and family services, employment and training, language and culture programming, and natural resource management—to try to improve the overall health and well-being of the Métis population in B.C."

This is consistent with the population health approach adopted by the Métis Centre. This approach sees health determinants as a complex interaction of factors, both medical and non-medical, that

contribute to physical, spiritual, emotional, and social well-being.

A key part of the Métis Centre's mandate is to gather and share Métis health information and promote emerging Métis health issues. Métis have indicated that lack of capacity and resources in the area of health, including access to enough funding and reliable health information, are main concerns in Métis communities.

"While Métis share many of the same health concerns as other Aboriginal Peoples, the Métis Centre hears time and again the difficulties Métis have in accessing ways to address these concerns," Drury said. "Issues such as blurred jurisdictions and a lack of recognition of Métis rights to health and health care have not furthered Métis health issues and health outcomes. Regardless of such obstacles, many Métis community organizations have developed creative and innovative means for identifying and meeting the health needs in their communities."

Métis are mostly urban-based and live across a large geographic area. Developing long-term, collaborative relationships with Métis organizations across Canada and contributing to capacity development at the community level through training workshops and information sessions are priorities for the Métis Centre. Centre staff will continue to liaise with Métis provincial organizations throughout the summer.

Attendees at the Centre's presentation included MPCBC President Harley Desjarlais, who is Minister of Health with the Métis National Council, MPCBC Executive Director Keith Henry, and members of the Regional Board of Directors, including the newly appointed Métis Centre Governing Committee member, Rose Bortolon. She was elected for a second term as Regional Director for the North Central Region of the Métis Provincial Council of British Columbia.

Métis Centre Governing Committee welcomes Rose Bortolon

The Métis Centre is pleased to welcome Rose Bortolon to the Métis Centre Governing Committee. She lives in Prince George, B.C.

As a Métis woman living with diabetes, Rose has a keen interest in health issues, particularly among the elderly.

She has been involved in a six-week project to help Métis Elders in Prince George manage chronic illnesses and the Live Long, Live Well Elders conference held in November 2003 to help Aboriginal Elders learn to cope with health issues. Rose has also worked as a commissioner/liaison with the Métis Commission for Child and Family Services in Victoria. The Commission works with Métis communities, stakeholders, and governments to provide holistic and culturally appropriate support services to Métis families.

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Rose Bortolon has joined the Métis Centre Governing Committee.

National Aboriginal Role Model Program has a role model of its own

By Jane-Diane Fraser

When Nadine Solomon applied for the job of Program Assistant for the National Aboriginal Organization's (NAHO) National Aboriginal Role Model Program, she never thought of herself as a role model to Aboriginal youth. But that's just what she is.

Solomon is a Cree woman from Fort Albany First Nation, on the west coast of James Bay. The isolated community of 1000 is a two-hour plane ride to its nearest neighbour. The cycle of alcohol and drug dependence coupled with physical and sexual abuse is often passed down through the generations. It's a cycle Solomon is ending for herself and her younger brother Justin.

"I witnessed this cycle from a young age and I didn't like it," Solomon said. "I stayed away from all that. I never tried drugs and I didn't drink alcohol at a young age. I never smoked. Just seeing the cycle made me want to get away from it. It's never ending. If I wanted to change the cycle, I had to not do that stuff."

She left home at age 13 to attend high school in Timmins because her reserve only had an elementary school. She billeted with a local family. Solomon was one of only two students from her reserve to graduate in her year.

"It's very hard leaving your environment. When you go to the south, it's not the same at all. It's totally different," said Joyce Spence, Program Manager of the National Aboriginal Role Model Program and Solomon's supervisor. "Nadine is from a place where nature is just outside your door. When you come to a city, there are traffic jams, cars—it's another world. Leaving your family behind to pursue your education is very hard on young people. Many people can't handle that first contact with the outside world, when they're so young. They get culture shock."

After graduation, Solomon moved to Ottawa to take Chemistry at Carleton University. She plans to be a doctor or a high school chemistry teacher.

Once in Ottawa, Solomon became concerned about her brother, who was still



Nadine Solomon is one example of Aboriginal youth reaching their goals.

living on their reserve. Justin was starting to experiment with alcohol and marijuana. She decided to have him move to Ottawa and live with her.

"Nadine is not just considering her own future, but also that of her younger brother," Spence said. "She's taken him away from the peer pressure back home to smoke and do drugs. She took her little brother out of that so he could pursue his education, just like she is."

Since transferring to an Ottawa high school, Justin's outlook has improved. "He likes it here. He's got lots of things to do," Solomon said. "He's improving. He quit drugs. His grades are also improving."

While Solomon is a role model to her brother, her own role models also come from her family. Her grandparents taught her about their traditions. Her mother taught her good values and to respect others. She finds inspiration in her mother, who didn't graduate from high school but got her teaching certificate once her children were older. She is now a Cree teacher in Moosonee.

"My mom tried her best. She told us not to drink and to stick with school. I turned out pretty good," Solomon said.

That she has. She's made a success of her own life, she's making sure her brother

has the opportunity to make a success of his own life, and she's an inspiration for young people in her community.

"Nadine doesn't realize she's a role model. She's so humble," Spence said. "She doesn't know the impact she's making on the young people in her community. That's how most role models are. They don't realize they are role models. People should look around their communities and see who else is making an impact."

Solomon's message to Aboriginal youth is simple. "There are lots of problems out there but you have to persevere. Try to make a success of your life. Go for your goals. It's hard to do, but try. Break the cycle."

Youth Working Group

The National Aboriginal Role Model Program has a group of Aboriginal youth who are helping guide the program and select the 12 role models. They are:

Franco Buscemi, Inuit Tapiriit Kanatami (Ontario)

Raelene Carter, Aboriginal Youth Council, National Association of Friendship Centres (Alberta)

Albert Cater, Manitoba First Nations Youth Council (Manitoba)

Melanie Ferris, National Aboriginal Health Organization (NAHO) (Ontario)

Karin Kettler, NAHO (Ontario)

Neil Kigutaq, Nunavut Youth Consulting (Nunavut)

Jonathan Kurzweski, Métis representative (Northwest Territories)

Gwenda Lambert, Native Women's Association of Canada (Alberta)

Amanda L'hirondelle, Métis Nation of Alberta (Alberta)

Stephanie Paul, National Youth Council, Assembly of First Nations (Ontario)

Jason Whitebear, NAHO (Ontario)

Celebrating Inuit health

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The project is being done with Inuit Tapiriit Kanatami and the Public Health Research Unit at Université Laval. The project will result in a synthesis report of community-based climate change research. This information will be made available to researchers, leaders, and community members. It will highlight Inuit identified impacts of climate change in Inuit communities and possible adaptation strategies that communities can use to lessen the impacts of climate change.

A series of fact and information sheets are being developed to make information

on climate change available in plain language and Inuktitut. The synthesis report is being released in November, just in time to accompany ACIA.

Junior Policy Analyst Karin Kettler and Buell attended the Fifth International Congress on Arctic Social Sciences in Fairbanks, Alaska. This event is held every three years. It is a major gathering of social scientists to discuss research and research priorities for the Arctic regions of the world.

Kettler presented Building the Capacity in the Health Field. She also presented a poster called “Inuit Health Education—Gaps

and Recommendations.” Both presentations highlighted the opportunities and barriers Inuit face when accessing health-related education programs.

“Addressing the need for Inuit healthcare workers has to start somewhere,” Kettler said. “The more people hear and talk about this issue, the more support Inuit can start receiving at the elementary, secondary, and post-secondary levels.”

Kettler’s poster presentation is available for download on the Ajunnginiq Centre’s section of the NAHO website at <http://www.naho.ca/inuitcentre>.



Robert Corell from Harvard University presents some of the findings of the ACIA as Inuit Circumpolar Convention President Sheila Watt-Cloutier looks on.



Karin Kettler of the Ajunnginiq Centre explains her poster about Inuit health education.

Talking with youth about suicide

By FNC Communications Officer

Allen Deleary, Special Projects Officer at the First Nations Centre (FNC), walks into the office after a trip to Pukatawagan First Nation in northern Manitoba. It’s a small community of about 350 people. He jokes about the mud still on his boots and the one-hour flight in a small plane from Flin Flon. Then his voice grows serious. “Over the past three years, several cases of suicide have devastated the community’s youth” Deleary said.

Deleary went to the community with Dr. Ana Bodnar, a clinical psychologist from McGill University in Montreal, to test a Community Planning Tool Kit for Suicide Prevention developed by the FNC.

“We wanted a group of young people to look at the kit and help us to improve

“It was important for us to go there just to listen to what they had to say.”

it. But original intentions changed. In the end, we learned a lot more about these young people, their community, and the situation they face.”

It was one of the few times this group of young people had gathered to talk about the suicides in their community and share feelings about their lives. The local community health care workers were there too.

Deleary said, “For many of those young people it was a chance to tell people about their feelings. We planned

to spend most of one day on our tool kit. Instead, we spent most of the time sitting and listening to these young people and what they had to say. And they had a lot to say. We did a lot of listening.”

Deleary said the workshop was a great success because of the ideas this group of young people shared for improving the tool kit.

“But the biggest success has to be these young people speaking and having someone listen. It was important for us to go there just to listen to what they had to say.”

Deleary said he would like to return to Pukatawagan, depending on the community’s approval. The dialogue that began with this first visit should continue. “We’ve got a lot to learn from these youth.”

Learning lessons at the UN

By FNC Communications Officer

“We thought we knew what would happen when we arrived,” said Jane Gray, National Co-ordinator of the First Nations Regional Longitudinal Health Survey (RHS). She had attended the Third Session of the United Nations (UN) Permanent Forum on Indigenous Issues held at UN headquarters in New York City in mid-May. “We learned a lot and we’ll do even better the next time.”

Gray and a small team wanted to tell others, groups representing indigenous peoples from around the world, about the RHS—why it exists, what it has accomplished, and why it is a success. “We wanted to tell them how it is changing the way information is gathered on the health of First Nations peoples in Canada.”

Along with Gray, the team included Martin Paul (Regional Co-ordinator for the RHS in Saskatchewan), Ceal Tournier (FNC Governing Committee and First Nations Information Governance Committee), Brian Schnarch (Coordinator of Research Services for the RHS), and Chief Shirley Clarke (representing the Chiefs Committee on Health at the AFN).

Before leaving Canada, Gray and the RHS team checked the UN website, double-checked the agenda and triple-checked the dozens of other arrangements. The setting was impressive but could also be overwhelming. “Everything was okay when we left,” said Gray. “But it wasn’t what we had expected once we got there.”

A UN conference is unlike almost anything most people are familiar with in Canada. Hundreds of people are present, speaking dozens of languages.

“We went to the main conference room where people were presenting to the whole forum. There was an opportunity to make a formal statement to the forum, but I didn’t know how. I saw someone else from Canada, a woman from Six Nations (near Brantford, Ontario). Beverly Jacobs had just spoken. I asked her how someone gets to speak and she pointed to a board with names on it. She said, ‘Just put your name up there.’ It was just that easy.”

Gray and the RHS team were unaware that presenters made their own announcements about their workshops.

Still, Gray said their team’s presentation was a success. People who attended the workshop were impressed. However, the interest did not end there. Others were excited too, once they heard about the RHS and its accomplishments.

“We met the co-chair of the Canadian delegation, Willie Littlechild. We were asking him and others if they had heard about what we were doing, about the RHS. If they said they didn’t, we would tell them. Once they understood, they were all very enthusiastic,” Gray said.

“We also met the chairman of the International Indian Treaty Council a few days after the conference. He said the RHS ‘should be used as a model for UN policy development’ for health but also in other areas as well.”

“It was a good conference. We got our RHS message out. We made our presence known,” said Gray. “But, the next time, we will be more familiar with the UN process. We’ll make an even bigger splash.”

“Chalk it up to lessons learned,” Gray added. “It’s all a learning experience.”

Upcoming Events

Unity Ride and Run

June 24 to Aug. 27
Starting in Sioux Valley,
Man. and finishing in
Six Nations, Ont.

For more information, visit <http://www.mcmaster.ca/indigenous/schedule2004.htm>.

Where are the Children? Healing the Legacy of the Residential Schools

May 7 to Aug. 2
Edmonton, Alta.

Exhibition at the Provincial
Museum of Alberta.

International Conference on Sudden Infant Death Syndrome

July 2 to 6
Edmonton, Alta.

Shaw Conference Centre

For more information, visit <http://www.sidsi-canada2004.org>.

The 14th International Inuit Studies Conference

Bringing Knowledge Home: Communicating Research

Results to Inuit

Aug. 11 to 14
Calgary, Alta.

University of Calgary

This conference is hosted by the Arctic Institute of North America. For more information, visit http://www.ucalgary.ca/aina/inuit/inuit_studies.html.

The Future of Water Treatment International Conference

Sept. 13 to 17
Saskatoon, Sask.

Centennial Auditorium

Hosted by the Safe Drinking Water Foundation, this four-day conference is designed to bring science, in simple terms, into the everyday life of the people responsible for drinking water in rural and First Nation communities.

Job Posting

The First Nations Centre (FNC) is looking for a full-time Director.

To apply for the position, you need a Bachelor or Master’s degree in health or in a health-related field. You may also have an appropriate mix of education and work experience.

The FNC is looking for a true consensus leader with a track record of success in working with both internal and external parties. You should have demonstrated ability to achieve positive measurable results in a team environment. You should also have a background and thorough knowledge and understanding of First Nations health issues throughout Canada.

If you wish to apply for this position, please send your resume to Guy Poirier at gpoirier@naho.ca by **June 25**. You can call him at (613) 237-9462 for more information.

Supporting Aboriginal health professionals

By Jane-Diane Fraser

The National Aboriginal Health Organization (NAHO) is preparing for its next phase of development. The June Board of Director's meeting includes a focus on finalizing its vision of NAHO's strategic plan.

"This is an exciting time," said NAHO Executive Director Bernice Downey. "Our internal structure continues to evolve. The Centres are becoming more autonomous and are working collaboratively with each other and myself to develop new ways of working together. NAHO is making the leap into its next stage."

This change can be seen in all of NAHO's projects. Collaborations with external partners are growing. Downey recently met with the Aboriginal Nurses Association of Canada (A.N.A.C.) and the University of British Columbia School of Nursing to discuss mutual interests in the area of Aboriginal nursing theory development. A focus of the discussion included the necessity of ensuring that cultural safety is integrated into both the health professional education curriculum and the health care service delivery for Aboriginal people.

Downey and NAHO Policy Analyst Roberta Stout met with the Dietitians of Canada and the Aboriginal Nutrition Network to discuss recruiting Aboriginal students into the nutrition and dietetics field. NAHO will help promote the field to Aboriginal Peoples. The Dietitians of Canada will link to NAHO on the health careers section of their website (<http://www.dietitians.ca>).

Supporting Aboriginal health professionals, as always, was a priority in May. Downey and Noreen McAteer, Chairperson of NAHO's Board of Directors, attended the Aboriginal Nursing Day ceremonies at A. N. A. C. on May 13. "We recognize the excellent work they do on behalf of Aboriginal Peoples," said Downey.

Downey also took part in a ceremony recognizing and honouring the work of Madeleine Dion Stout. She received an honorary doctorate from the University of British Columbia School of Nursing. Stout is a nurse/educator and a leader in Aboriginal health strategies. She is recognized internationally for her work on the health challenges of indigenous people around the world.

"Madeleine is a perfect example of the leadership role Aboriginal Peoples can take in the field of Aboriginal health," said Downey. "NAHO strives to encourage others to follow in her footsteps and increase the knowledge of Aboriginal health issues."

A NAHO program that encourages Aboriginal youth to take leadership roles is the National Aboriginal Role Model Program. Downey and McAteer both attended the launch of the program in Ottawa on May 13. "A program like this puts the health and well-being of Aboriginal youth in their own hands. Taking ownership of their successes will encourage their peers to do the same," said Downey. "We're really proud of our youth."

The 12 role models are being announced at the end of June.



Madeleine Dion Stout received an honorary doctorate from the University of British Columbia School of Nursing. Stout was recognized at a recent celebration. From left: Bernice Downey, Stout, Evelyn Voyageur (A.N.A.C. Board Member), and Lisa Dutcher (A.N.A.C. President).

NAHO's second national conference

The National Aboriginal Health Organization (NAHO) is hosting its second health conference and information fair in Winnipeg between November 6 and 10. The conference theme is Sharing Knowledge: Aboriginal Paths to Health.

The conference is an excellent opportunity for health practitioners and community members from across the country and around the world to exchange health knowledge and share health research and community success stories.

More information on workshops, presentations, and registration is being made available shortly. Keep checking NAHO's website at www.naho.ca for more information.

Métis Centre Governing Committee

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Rose is also on the First Nations Senate at the University of Northern B.C., providing guidance on Aboriginal curriculum development; the Aboriginal Education Board, which is planning the development of an Aboriginal school in Prince George; two Elder's groups in her community; and the Northern Trust Advisory Committee for the Victoria Foundation and the Northern Aboriginal Authority For Families. The Advisory Committee oversees the transfer of provincial Child and Family Services for uniquely Aboriginal models.

Rose is helping to record the history of area Métis and preserve Métis traditional knowledge and healing practices through being involved in a project led by Associate Professor Mike Evans of Okanagan University College.

Rose feels one of her biggest achievements is the ongoing support and love that her husband, four daughters, and grandchildren give to her.