



Migizy Odenaw

www.evfn.ca



Eagle Village First Nation
P.O. Box 756
Temiscaming, Quebec
J0Z 3R0
Tel: (819) 627-3455
Fax: (819) 627-9428



Eagle Village Health Centre
3 Ogima Street
Kipawa, Quebec
J0Z 2H0
Tel: (819) 627-9060
Fax: (819) 627-1885



Eagle Village Police Dept.
P.O. Box 27
Kipawa, Quebec
J0Z 2H0
Tel: (819) 627-9624/8229

NATIONAL ADDICTIONS AWARENESS WEEK

SCHEDULE OF EVENTS

Friday November 17th, 2006

Youth Much Music Video Dance
Ages 10 and Under 6:00 pm - 8:00 pm
Ages 11- 17 8:30 pm - 12:30 am

Monday November 20th, 2006

Opening Ceremonies
5:00 pm - Smudging and Prayer
5:15 pm - Traditional Community Feast
6:30 pm - Drumming and Dancing by the
Eagle Village Youth and invited guests

Tuesday November 21st, 2006

Youth Video and Information Session
"The Reality of Drug Use"
6:30 pm at the Health Centre

Wednesday November 22nd, 2006

Lunch and Skating for the youth
at the Rec Center in Temiscaming
11:00 am - 1:30 pm

Thursday November 23rd, 2006

Awareness Activity at the Childcare Centre
Resource/Information Display at the Bingo

If you would like to volunteer at one of these events please call Vicky at the Health Centre.

Halloween in Eagle Village

The children from the Childcare Centre started their Halloween celebration early. They dressed up and went trick-or-treating at the Police Station, the Band Office, and Health Centre on Friday October 27th. A special thank you to the



We had many children go door-to-door Halloween night here in the community. It was great to see so many wonderful costumes. Thank you to the Eagle Village Police Department and the Fire Department for patrolling the community and handing out treats to the kids. It was however, very disappointing to see that a few people could ruin the fun atmosphere of a holiday that is for children. There was no need to mar this holiday by smashing pumpkins and throwing eggs at homes. Let's hope that next year they will keep these "tricks" to themselves. Thank you to all of the community members who gave out treats to all of the children ... Some pictures

Inside this issue:

Halloween in Eagle Village	1	Migizy Odenaw Childcare Centre Information	9
Education Department and Halloween Party Pic-	2	Nurse's Notes ... Influenza Season	10
Press Releases from the Socio-Economic Forum	3	Nurse's Notes ... Info concerning the Flu Shot	11
Eagle Village Notices and Announcements	4	The NNADAP Corner ... What is OxyContin?	12
Eagle Village Notices and Announcements	5	Nurse's Notes ... Hand Washing	13
Eagle Village Fire Department ... Caregiver's	6	November is Diabetes Month ... Diabetes	14
A Day of Remembrance	7	November is Diabetes Month	15
Health Director Update and Health Centre News	8	Calendars for November and December 2006	16

Eagle Village Education Department

Scholarships and Bursaries are another means of receiving funds to attend post secondary school. **FIRST NATIONS, INUIT & METIS HEALTH CAREERS SPECIAL BURSARY AWARD.** To find more information about this bursary please visit their web site: www.naaf.ca or contact Ms. Nadine Gros-Louis at 418-842-1540 or by email at ngrod-louis@cssspnql.com. It requires the student's attention to ensure that they have all of the required information when applying.

The **"Canada Post Aboriginal Education Incentive Award."** is an award that is given to only two students in all of Canada. This year one of our own community members has won it; Congratulations go out to Ms. Marsha Depotier. We are so proud of you!! Keep up the great work!



Our congratulations go out to community Member, Ms. Donna Robinson-Missalla, on her graduation from Registered Practical Nursing Program at Georgian College and Certification from the College of Nurses. As a Band Member of Eagle Village First Nation we are very proud of your accomplishments.

Glenda Moore - Trepanier

Estate Planning



ARE YOU PRE-PARED?

Did you know that if you die (without a will) Indian Affairs will automatically appoint an administrator.

What is a will? A unilateral act, revocable until the decease of its author, by which above disposes of all or part of his or her belongings he will leave in dying.

There are 3 types of wills ...

1. Holograph - Handwritten on any form e.g. birch bark, paper etc.
2. Notarial
3. English Form (with witnesses) We have this form at the Band Office. They are available upon request.

Preserving Our History and Culture



Announcing an independent film documentary now in production:

"Voices of a Nation"

Help us preserve Eagle Village First Nation's history! First Nations family seeks Elders of Eagle Village to share your memories and experiences on film.

Help us preserve our culture and history for future generations!

Filming Winter 2006

Call or email today to schedule a filmed interview for yourself or a relative.

Band Office: (819) 627-3455 Email: gailj@evfn.ca

USA: (908) 813-0185 Email: film@voicesofanation.com

Children's Halloween in Eagle Village First Nation



Press Releases from the Socio-Economic Forum

The following Press Releases were issued while Eagle Village Chief Lance Haymond and Councillor David McLaren were attending the Socio-Economic Forum in Mashteuiatsh Lac St Jean.

Charest Proposes Panel to Meet Yearly on Aboriginal Issues

By: Rhéal Séguin

MASHTEUATSH, QUE. Quebec Premier Jean Charest launched a last-minute initiative that helped the federal government save face yesterday at a first-nations forum where aboriginal leaders strongly criticized Ottawa's handling of native issues in the province.

Mr. Charest proposed that a committee of federal, provincial and aboriginal representatives meet at least once a year to deal with problems native communities face. He said he would sit on the committee.

Native leaders criticized Ottawa yesterday after Federal Indian and Northern Affairs Minister Jim Prentice left the three-day meeting early. He was heading to British Columbia where he is to sign a treaty with an Innu band on the weekend. Transport Minister Lawrence Cannon, who took his place, defended his government's role in Quebec native issues. "I don't think it's one of dumping it into the province's lap. I don't see any indication that we would want to dump [our responsibility] in the province's lap." Mr. Cannon arrived at the forum late into yesterday's final exchanges, just in time to hear the native leaders' frustration with Ottawa, despite the announcement of \$88-million in federal funding for various projects.

"We did not witness this week a significant change in attitude of the federal government, who contented itself, allowing for exceptions, to reinvest moneys which had already been announced some time ago. We received nothing new," Ghislain Picard, regional chief of the Assembly of First Nations of Quebec and Labrador, said yesterday.

At the top of the list of native demands was the need to address the serious housing shortage on Quebec reserves, where at least 10,000 new homes are urgently needed. The small Algonquin community of Kitchisakik, 100 kilometres south of Val d'Or in northern Quebec, has come to symbolize the plight. The 400 villagers live in run-down, poorly insulated houses where there is no running water or electricity, despite a nearby power generating station. The community has no school and children as young as age 5 live in Val d'Or during the week and are bused home on weekends.

Eagle Village Algonquin Chief Lance Haymond said Prime Minister Stephen Harper's government has failed to address what he considers a national tragedy. "It is a reflection of the mentality of this present Conservative government. Although we may call them Conservatives, the vast majority are Reformers and it is an indication of the [former] Reform [Party's] policy of assimilation of First Nations," he said.

Mr. Charest spent all three days co-chairing the First Nations Forum, the first of its kind in Quebec, and was accompanied by 15 of his ministers at various stages throughout the week. Native leaders argued that given the importance of the meeting and the crucial

as possible.

The chiefs saluted Mr. Charest's role at the meeting by having him perform a traditional dance during a closing ceremony.

The native leaders now want to take discussions further by using Mr. Charest's suggested committee to begin tackling land-use and revenue-sharing proposals for the development of national resources, which is a major bone of contention with the provincial government.

The Premier acknowledged that the only way to begin addressing aboriginal communities' social ills, such as the housing shortage, violence against women, high suicide rates among youths and health problems is to help native people generate wealth and prosperity to become full-fledged members of Quebec society.

The Regional Chief hails the First Nations Socioeconomic Forum as a "success"

"Our future rests on a joint management" Ghislain Picard

MASHTEUATSH, Oct. 27 /CNW Telbec/ - The Regional Chief of the Assembly of First Nations of Quebec and Labrador (AFNQL), Mr. Ghislain Picard, and the Chief of Council of the Innus of Mashteuiatsh hail this first Socioeconomic Forum of the First Nations as a success, in spite of the very little concrete gestures by the governments of Quebec, Canada and the civil society. "The First Nations attended their Forum in a large number and worked hard to bring out consensus of actions. We come out of this Forum with a common action plan and a common vision of the First Nations' future. From now on, we will increase our efforts towards the achievement of the goals we have set and lead the other governments into supporting our initiative", declared Ghislain Picard at the end of the Forum's proceedings.

Among other things, the leaders of the First Nations clearly indicated today their intention of putting the territorial rights issues at the height of their priorities. "To us, it's clear that the socioeconomic development of the First Nations goes through the access to territories and its resources. Our future rests on a joint management", explained Chief Picard. "The future that we have envisioned today is one of a harmonious cohabitation between the aboriginal nations and the Quebec nation who share a common territory", added Chief Dominique.

Very little pledges from the governments

"We did not witness this week a significant change in the attitude of the federal government, who contented itself, allowing for exceptions, to reinvest moneys which had already been announced some time ago. We received nothing new", declared Ghislain Picard, underlining in particular the refusal of the federal government to support the objective to build 10 000 houses over the next five years.

As for the Quebec government, the Regional Chief saluted the presence of the Premier and several ministers who made some significant announcements during the Forum. "However, it is crucial to initiate a dialogue on the more fundamental issues, since Quebec is now holding the key to the access to resources, which represents the only solution path for our peoples", declared Ghislain Picard.



**All youth are invited to come out
and dance ... dance ... dance at
the Much Music Video Dance !!
Free Admission & Door Prizes**

Friday November 17th, 2006

Ages 10 years and under from 6:00 pm - 8:00 pm

Ages 11 to 17 years from 8:30 pm - 12:30 am

Canteen will be open throughout the evening !!

\$\$ Hot Dogs, Pop, Chips, Chocolate Bars, Water and Juice \$\$

Bus Pick-Up Schedule

Stedmans Pick-Up at 7:45 pm Drop Off at 1:15 am

Restoroute Pick-Up at 8:00 pm Drop Off at 1:00 am

Yee Lake Church Pick-Up at 8:15 pm Drop Off at 12:45 am



Eagle Village First Nation's

New Year's Eve Bash

Sunday December 31st, 2006

Eagle Village Community Hall

Door Open at 9:00 pm

Happy Hour 9:00 pm - 10:30 pm

**Music - Whiskey Farmer Band
(Band that played at the Boat Rally)**

Tickets - \$20.00 per person

**Includes: Buffet, Party Favours, Prize
Draw**

Tickets can be purchased at:



Eagle Village
Elder's Club
Penny and
Bake Sale

Sunday November 19th, 2006

Eagle Village Community Hall

Soup and Sandwich Lunch

Begins at 11:00 am

\$5.00 Adults \$3.00 Kids

Bake Sale will begin at 1:00 pm

Penny Sale draw will be at 3:00 pm

(Unclaimed numbers will be in next months newsletter)

50/50 Draw after Penny Sale

Everyone Welcome !!

Eagle Village Notices and Announcements

*Happy Anniversary Wishes to
Marion and Wallace Tepiscum
They celebrated their anniversary
on November 4th !!
From Barbara and Fern Parisien*



Birthdays Wishes
to my husband Fern !!
Fern celebrated his birthday
on November 5th !!
Love from Barbara

Irene Perrier would like to send a
special "Thank You" out to
Arlene Chevrier who spotted the fire
in her shed and the Eagle Village Fire
Department for their fast response to
put out the fire.
Its nice to know that you can count on
the community to protect your home
while you are way !!



**The family of the late Francis Pariseau
wish to express
our deepest thanks to everyone
who helped us during our time of loss.**

**To the hospital staff who were so kind to us.
To everyone who donated food for the luncheon
and to the ladies at the hall for their great service.**

**Thank you to all who donated to the Cancer Society,
a donation of \$260.00 was made in memory of Francis.**

**Thank you for all of the sympathy cards
received from far and near.**

**A special thanks to Jackie Dorval, Danny Raymond
and the Eagle Village Health Centre for their support.**

**And mostly to our family and friends,
for every tear there was a hug.
It was greatly appreciated.**

**Thank you from the bottom of our hearts ...
Anita, Donna and Tim Pariseau**

TEXAS HOLD'EM



TOURNAMENT

**Saturday November 25th , 2006
Eagle Village Community Hall**

**Starts at 2:00 pm sharp !!
Must be 18 years of age or older !!**

REGISTER EARLY ...

*Slide into the Christmas Season
with the KCLA ...*

*Saturday December 2nd, 2006
1:00 pm - 4:00 pm
Kipawa Church Grounds*

Come out and enjoy ...

- * Activities*
- * Tree-Lighting*
- * visit Santa and Mrs. Claus*
- * Sleigh Rides*

*Admission to this event is a
non-perishable food item for the
Lion's Club and Food Bank.*

Hope to see you there !!



Eagle Village Fire Department

Caregiver's Guide to Fire Safety



Alzheimer Disease is a progressive, degenerative brain disease that destroys vital brain cells. As a result of the changes to the brain, it no longer works as it used to. People with this disease become less and less able to make sense of information from the outside world. They become unable to think, remember, understand, and make decisions as before. If a fire were to occur in their home, people with Alzheimer Disease or other dementia would be extremely vulnerable to serious injury, or even death. This fact sheet provides caregivers with important fire safety information that can help them to provide a safer environment for persons with Alzheimer Dis-

Smoking ...

Careless smoking is the leading cause of fire deaths in Ontario. For people with Alzheimer Disease, the risk is even greater. As the disease progresses, they are less likely to follow safe smoking procedures, such as extinguishing cigarettes. Caregivers may be able to discourage smoking by removing visible reminders, such as cigarettes, matches, lighters and ashtrays. With these articles out of sight, the person with Alzheimer Disease may forget about smoking. It is important to supervise an individual with Alzheimer Disease while they are smoking. Purchase large, deep ashtrays and consider putting water in the bottom for added safety. Cigarette butts and ashes should be submerged in water before being dumped in the garbage. Placing a cookie sheet under the ashtray can prevent cigarette and its hot ashes from falling onto furniture or clothing. Smoking outside, or while seated at a table, is safer than smoking on upholstered sofas or chairs. *No one* should ever smoke in bed, nor in a home where oxygen is in use.

Cooking ...

If the person with Alzheimer Disease likes to cook, it is important to provide supervision and assist where necessary. Make sure he or she wears tight-fitting sleeves that cannot come in contact with a hot burner. Keep all combustible materials a safe distance from the stove, including paper towels, utensils, recipes or tea towels. Removing the fuses or knobs from the stove will prevent its use during unsupervised times. Other appliances, such as toasters and electric kettles, should be unplugged and stored out of sight when not in use. While microwave ovens present less hazards than stovetops, they can still cause fires and burn injuries. The use of microwave ovens by people with Alzheimer Disease should be supervised at all times.

Heating Appliances ...

If space heaters are used in the home, make sure they are kept at least one metre (three feet) away from anything that can burn, such as furniture, curtains, paper or people. The surfaces of woodstoves and fireplaces get extremely hot, so keep metal fire screens around them to prevent contact burns.

Candles ...

The use of candles has increased dramatically over the past several years and so has the number of candle-related fires. All can-

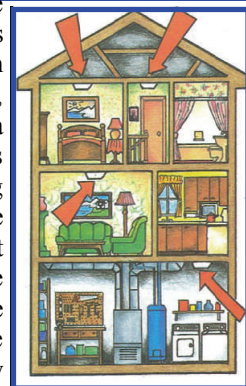
related dementia. Candles can be easily knocked over or brushed against, so if they do exist, make sure they are placed out of reach and enclosed in glass containers. Also, after lighting candles, store the matches or lighters out of sight. Remember to extinguish all candles before leaving the room or going to bed.

Burn Injuries ...

Scalds are painful injuries that can be prevented by adjusting the temperature of water heaters to 54C (130F). If a burn injury does occur, run cool water over the affected area for three to five minutes then seek medical attention, if necessary

Install Smoke Alarms: It's the Law

ONE ON EVERY LEVEL ... If a fire occurs in the home, caregivers need as much time as possible to assist the person with Alzheimer Disease to safety. By law, all Ontario homes are required to have a working smoke alarm on every storey as well as outside all sleeping areas. Having working smoke alarms help to ensure the earliest detection and warning of fire. Test smoke alarms once a month following the manufacturers instructions and replace batteries once a year. If alarms are more than 10 years old, replace them with new ones.



SMOKE ALARM FEATURES ... Smoke alarms are available with many different features that enhance their effectiveness. Alarms with a "hush" or "pause" feature are highly recommended as they permit the alarm to be temporarily silenced if it is activated accidentally. The alarm will automatically re-set itself after a few minutes. Smoke alarms are also available with long-life lithium batteries that last up to 10 years. For more in-



Eagle Village Fire Department
819-627-9624

A Day of Remembrance



Every year on November 11, Canadians pause in a silent moment of remembrance for the men and women who have served, and continue to serve our country during times of war, conflict and peace. We honour those who fought for Canada in the First World War (1914-1918), the Second World War (1939-1945), and the Korean War (1950-1953), as well as those who have served since then. More than 1,500,000 Canadians have served our country in this way, and more than 100,000 have died. They gave their lives and their futures so that we may live in peace.

We must remember ...

If we do not, the sacrifice of those one hundred thousand Canadian lives will be meaningless. They died for us, for their homes, families and friends, for a collection of traditions they cherished and a future they believed in; they died for Canada. The meaning of their sacrifice rests with our collective national consciousness; and our future is their monument.

These wars touched the lives of Canadians of all ages, all races, all social classes. Fathers, sons, daughters, sweethearts were killed in action, were wounded, and many of those who returned were forever changed. Those who stayed in Canada also served - in factories, in voluntary service organizations, wherever they were needed.

Yet, for many of us, war is a phenomenon viewed through the lens of a television camera or a journalist's account of battles fought in distant parts of the world. Our closest physical and emotional experience may be the discovery of wartime memorabilia in a family attic. But even items such as photographs, uniform badges, medals, diaries can seem vague and unconnected to the life of their owner. For those of us who were born during peacetime, all wars appear to be far removed from our daily activities.

As Canadians we often take for granted our current way of life, our freedom to participate in cultural and political events, and our right to live under a government of our choice. The *Charter of Rights and Freedoms* in our constitution ensures that all Canadians enjoy protection under the law. The Canadians who went off to war in distant lands went in the belief that such rights and freedoms were being threatened.

In remembering their service and their sacrifice, we recognize the tradition of freedom they fought to preserve. These men and women had faith in the future and by their acts gave us the will to preserve peace for all time. On Remembrance Day, we acknowledge the courage and gallantry of those who served their

all who have served, we recognize their willingly-endured hardships and fears, taken upon themselves so that we could live in

Facts on Remembrance Day

Remembrance Day commemorates Canadians who died in the First and Second World Wars, and the Korean War.

It is held every November 11.

The first Remembrance Day was conducted in 1919 throughout the Commonwealth. Originally called Armistice Day, it commemorated the end of the First World War on Monday, November 11, 1918, at

11 a.m.: the eleventh hour of the eleventh day of the eleventh month.

From 1923 to 1931, Armistice Day was held on the Monday of the week in which November 11 fell.

Thanksgiving was also celebrated on this day.

In 1931, MP Allan Neill introduced a bill to hold Armistice Day on a fixed day - November 11. During the bill's introduction, it was decided the word "Remembrance" would be used instead of "Armistice." The bill passed and Remembrance Day was first conducted on November 11, 1931. Thanksgiving Day was moved to October 12 that year.

The Poppy

When can poppies be worn daily?

The official start of the Poppy Campaign is the last Friday in October. This year the campaign will run from October 27 to November 11. Presentations of the poppies to dignitaries - for example, the Governor General, the Lieutenant Governors and Premiers - are normally made in advance of the official campaign start date. The distribution of poppies to the general public commenced on October 27 and can be worn at any time after that date.

Is it proper to wear a poppy to commemorative events at any point during the calendar year or should the poppy be worn only during the Poppy Campaign?

Although it is tradition for the Poppy to be worn only during the annual Remembrance period, a person may wear a Poppy any time he or she wishes to do so. It is not unusual for Poppies to be worn at commemorative events throughout the year, particularly during Veterans Affairs Canada (VAC) pilgrimages. The best approach is to follow the lead of the event organizers. If you are organizing the event, you can seek advice from VAC senior officials or the Royal Canadian Legion.

How should the Poppy be worn?

The Royal Canadian Legion suggests that the Poppy be worn on

An Update from our Health Director

Meetings Attended or in the Making

During the week of October 23rd, I was asked by our Chief to participate in the Socio-Economic Forum which took place in Mashteuiatsh Lac St Jean. As an active participant in the Health and Social Services pre-forum preparations, I was able to witness the results of months of hard work done by our regional organizations such as the FNQLHSSC, AFNQL, FNEC as well as many others. However, as a member of Council, I was able to appreciate the importance of the political jostling and strategic opportunities that come with a gathering of so many decision makers at one place.

During these 4 intense days of meetings, Chief Haymond represented us very well in both Regional issues such as housing and on our local front for economic and social development. Communication tools such as Press Releases and Conferences along with television interviews were amongst the strategies utilized by many community politicians. Although we often misconstrue the “out of town” regional or national meetings as unnecessary or unimportant as compared to local day to day activities, rest assured that the general orientation or strategy development needed for decision making on behalf of the government is dealt at the higher level. I’ve included some excerpts of the press within this newsletter for your own appreciation.

Using the Socio Economic Forum as a spring board for interests a little closer to home, we will, in the upcoming weeks, continue to put pressure on the government via different local communication tools. It is imperative that we exhaust all our options in order to advance our Water Power Project in partnership with Wolf Lake First Nation. We intend on bringing you up to speed with the latest development in regards to this project either at the next band meeting or at a special meeting.

Because of the time and energy consumed by this forum, most of our issues in the field of health were either put on hold or put on the forefront at these meetings according to the regional priorities. November will consist of analyzing the results of the Forum and moving forward with the various recommended consultation groups.

Water Quality

I would like to take this opportunity to inform our community members about the accolades we receive from other community actors or government officials when we discuss our monitoring of our potable drinking water. Although we have probably reached the maximum capacity according to the infrastructure of our water distribution system, we are nevertheless one of the most vigilant communities in the region in regards to the quality monitoring process.

Twice daily and 365 days a year, Terry Perrier, Melvin McKenzie and Tina Chevrier ensure that our water distribution system is functioning according to the established standards. Several months ago, I joined Terry, Melvin and Tina in a multi-module provincial training that required a base level of education and skill in order to participate and succeed. Needless to say that all the above passed with flying colours. Should you have any concerns about our drinking water, please do not hesitate to contact anyone of us at the

Foot Care Appointments

Jackie Dorval will be having a Foot Care Clinic on Sunday December 10th, 2006

If you would like an appointment, please call Cecile at the Health Center 819-627-9060.



Please cancel your appointment if you will not be attending. If you fail to show up we are still

responsible for the cost of your appointment.



Please remember to bring a clean towel

NOTICE TO ALL COMMUNITY MEMBERS

Legal Aid Services will now be available at the Eagle Village Health Centre on the following dates ...

Tuesday November 7th

Wednesday November 22nd

Wednesday December 6th

To make an appointment please call Nathalie Samson (Lawyer) 1-819-629-2314 or send an email to bajvillemarie@ccjat.qc.ca

Do you have anything for the newsletter ??

To make a submission to the community newsletter please do so by mail, email or fax. We will be happy to include your announcements,

articles, items for sale, personal biographies etc.

Please send to:

Tina Chevrier - Eagle Village Health Centre

3 Ogima Street Kipawa QC J0Z 2H0

Phone: (819) 627-9060 Fax: (819) 627-1885

Employment Opportunity

Migizy Odenaw Childcare Centre

Youth Coordinator

Summary:

Under the direction of the Health Director, and in accordance with the policies adopted by the Eagle Village Council and the orientations and priorities defined by the Youth Center Committee, the Youth Coordinator plans, coordinates and organizes social, recreation and sports activities for the youth population of the Eagle Village First Nation.

Salary:

To be determined according to education & experience.

Requirements:

- College degree in Recreation & Leisure or equivalent.
- High school diploma with experience in community and event planning may be considered.
- Flexible working hours (evenings & week ends)
- Demonstrated planning and organization skills.
- Possess strong leadership and group animation skills.
- Good communication skills in English. French would be an asset.
- Priority will be given according to Eagle Village First Nation hiring policy.

Please submit your application in writing, specifying your education, experience and skills, before 4:30 pm on November 23rd, 2006 to:

**Eagle Village Health Centre
c/o David McLaren
3 Ogima Street
Kipawa QC J0Z 2H0
Tel: (819) 627-9060 Fax: (819) 627-1885
Email: davem@evfn.ca**

Only the pre-selected candidates will be contacted for interviews.

Complete job description available by fax, e-mail or at Health

**MIGIZY ODENAW
CHILDCARE CENTRE
EMPLOYMENT OPPORTUNITY**

Migizy Odenaw Childcare is looking for a maintenance person to come in 2 hours per week to perform preventative maintenance and light duties.

**PLEASE CALL AND SUBMIT
YOUR NAME BY
NOVEMBER 17TH AT 627-1000**



I would like to congratulate those who participated and successfully completed the St. John Ambulance Babysitting course... Way to go!!!

- Tiana Jalabois
- Adam Savard
- Kayla Ledreton
- Ashley Fudge
- Donovan Fudge
- Tori McGregor
- Jessica Carapiet
- Amanda Hansen
- Teagan Schroeder
- Brandon Rousseau
- Kimberly Lariviere
- Brooke Courchesne

AS A PARENT ALWAYS BE AWARE OF WHO AND WHERE

NOTICE TO ALL COMMUNITY MEMBERS

**Please be advised that ...
Jennifer Presseault ~ Home Care Nurse and
Shirley Commanda Quedent ~ Community Nurse
will be out of the office the week of
November 27th - December 1st
to attend a Regional Meeting in Montreal.**

Thank You

Nurse's Notes ... Influenza Season

Winter is around the corner and that means that winter illnesses are heading our way. Influenza or "the flu" is a common infectious, respiratory disease that affects between one in four and one in ten Canadians each year. It can also be serious and deadly. Every year, up to 1,500 Canadians, mostly seniors, die from influenza-related pneumonia and many others die from other influenza related complications such as an aggravation of underlying chronic heart and lung disease.

It's time to take the flu seriously.

Recently it seems that newspapers are filled with reports of various infectious diseases around the world, with SARS and Avian Influenza as the most recent examples. In all cases, prevention is the key to containing and controlling the spread of infectious diseases.

As we prepare for the annual flu season, there are many practical things that Canadians can do to protect themselves against the spread of the flu.

What is the flu?

The flu or **influenza**, is an infectious, respiratory disease that begins in your nose and throat. The flu is caused by the highly contagious, influenza virus, and spreads rapidly from person to person - usually by a simple cough or a sneeze. It has nothing to do with what some people call 'stomach flu' which causes abdominal upset and diarrhea.

There are many viruses that are in the environment around us, passing from person to person or through contaminated objects. This is even more of a problem when we're all crowded indoors during the colder months. Some of these viruses cause a simple cold. Others cause influenza.

How do you know if you have the flu?

There are clear ways to tell whether you have symptoms of influenza or just a cold. A typical flu begins with a headache, chills and cough, and rapidly develops into fever, loss of appetite, muscle aches and fatigue, runny nose, sneezing, watery eyes and throat irritation. Nausea, vomiting and diarrhea may also occur, especially in children.

When you have a common cold you generally have a runny nose, sneezing, nasal congestion and throat irritation. Fever is uncommon and you will improve in 2-3 days.

The flu is miserable to have. If you have the flu, usually you will have a high fever that lasts for 3-4 days, a headache and muscle aches, extreme fatigue that may last 2-3 weeks, and a bad cough.

Fortunately, for healthy adults, the flu is very rarely a serious disease, but its complications can be severe, even deadly for some people, particularly the elderly or people with chronic illnesses. These complications can include bronchitis, pneumonia, kidney failure or heart failure.

How can the flu be prevented?

- Healthy eating, adequate sleep and physical activity are essential to your health, but won't protect you completely from the influenza virus. To prevent influenza, the most effective way is to get the vaccine. Flu shots are especially important for certain groups of people.
- Each year, the World Health Organization predicts the three most common strains of the influenza virus and a vaccine is developed for that year. Because the viruses are constantly changing, you need a new vaccine each year to make sure your body forms antibodies against these new flu viruses.
- And there is another reason to be extra cautious about influenza this year which is that the early symptoms of the flu are very similar to those of SARS. The difficulty of distinguishing between the early symptoms of SARS and the flu is one reason that world experts are recommending that all health care workers get the influenza vaccine this year.

Fall is best ...

It is best to get your flu shot between October and December, however, influenza immunization should be provided any time during the current influenza season from October to March, even after the influenza has been reported.

The flu shot takes about 2 weeks from the time the shot is given to provide full protection.

Getting yourself vaccinated also helps to protect those around you. This is especially important if you live or work with seniors and people who have chronic diseases, including asthma, diabetes, heart disease or other conditions that weaken the immune systems.

Flu shots do not give you the flu !

You *cannot* get the flu from the vaccine. This is because the viruses used to make the vaccine have been killed.

People who think they caught the flu after receiving their shot are confusing their symptoms with those of a cold, or another virus. They could also have caught another strain of influenza not included in the vaccine.

Wash your hands and cover your mouth !

Viruses can live for up to 48 hours on the surfaces of toys, coffee makers, doorknobs, computer keyboards, and other hard surfaces. It can take up to a week for flu symptoms to appear, and in that time you can infect others. To reduce the risk of spreading the virus, it's a good practice to wash your hands often with hot water and soap.

The influenza virus also spreads quickly from person to person through droplets in the air. These droplets come from our noses and mouths, so it's important to cover them when you cough or sneeze.

If you get the flu ...

of the risk of Reye's syndrome.

If your symptoms do not improve, see your doctor; you may be suffering from serious side effects of the flu. Antibiotics have no effect against a viral illness like the flu

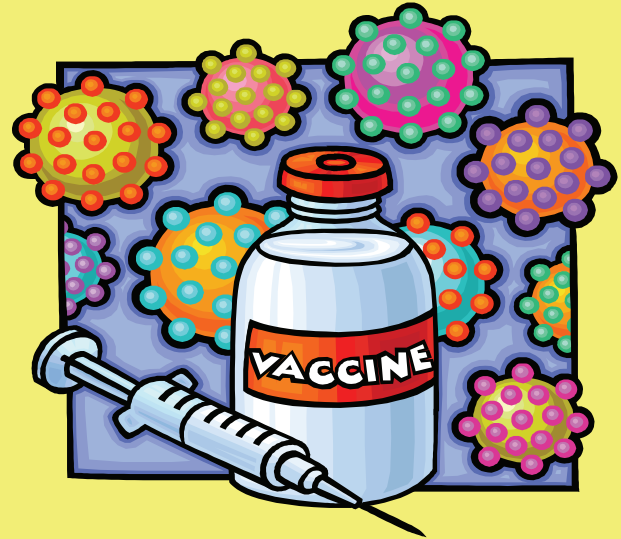
Who should get a flu shot?

- Adults and children with chronic heart and lung disease
- Anyone living in a nursing home or chronic care facility
- People 65 years of age and older
- People with chronic conditions such as diabetes, anemia, cancer, immune suppression, HIV or kidney disease
- Children and adolescents on long term acetylsalicylic acid (ASA) therapy
- Health care workers, other care givers and household contacts capable of transmitting influenza to the above at-risk groups
- People at high risk of influenza complications traveling to areas where influenza virus is likely to be circulating

What about children?

- Some children and youth are also at risk of serious complications from influenza. As of September, 2004, The Canadian Paediatric Society recommends universal funding of a yearly influenza vaccination for the following children:
- Healthy children between the ages of six and 23 months of age;
- Children with chronic cardiac and pulmonary disorders (including bronchopulmonary dysplasia, cystic fibrosis, and asthma) severe enough to require regular medical follow-up or hospitalization;
- Children who are immunosuppressed due to congenital or acquired immunodeficiency secondary to underlying disease and/or therapy;
- Children with renal disease;
- Children with anemia or hemoglobinopathy;
- Children with conditions requiring treatment for long periods with acetylsalicylic acid;
- Children with other chronic conditions, such as diabetes and other metabolic diseases that put them at increased risk;
- Children residing in chronic care facilities;
- Children who are household contacts of children or adults for whom the influenza vaccine is recommended, including household contacts of healthy children six to 23 months of age; and

Children who are household contacts of children younger than six months of age, as the latter are at risk of hospitalization but



WOULD YOU LIKE A FLU SHOT?

OUR INFLUENZA VACCINATIONS HAVE JUST ARRIVED !!

If you and/or your family would like to receive a flu shot this year, please call Cecile at the Eagle Village Health Centre to make an appointment 819-627-9060.

Flu Shot Clinic Schedule

Wednesday November 15th, 2006
9:00 am - 12:00 pm and 1:30 - 3:30 pm

Thursday November 16th, 2006
9:00 am - 12:00 pm and 1:30 - 3:30 pm

Thursday November 21st, 2006
1:30 pm - 4:00 pm and 5:30 - 7:30 pm

Thursday November 23rd, 2006

The NNADAP Corner



What is OxyContin?

OxyContin is the brand name for a semi synthetic opioid analgesic containing the active ingredient **oxycodone** (also found in Percocet, Percodan, and Tylox).

OxyContin is a legal narcotic that is available, by prescription, to treat severe chronic or long-lasting pain.

OxyContin contains between 10 and 160 milligrams of oxycodone in a timed-release tablet. Painkillers such as Tylox contain 5 milligrams of oxycodone and often require repeated doses to bring about pain relief because they lack the timed-release formulation.

Street Names ... OxyContin is also known as Oxy, O.C., OxyCotton, Oxy 80 (for the 80mg dose), or "killer".

What does OxyContin look like ...

OxyContin most commonly exists in tablet form. These round pills come in 10mg, 20mg, 40mg, 80mg and 160mg dosages. OxyContin also comes in capsule or liquid form.



OxyContin Abuse ...

OxyContin is a controlled-release medication, when used correctly it provides extended relief of pain associated with cancer, back pain, or arthritis.

OxyContin abusers crush the tablet and ingest, snort, or dilute it in water and inject it. Crushing or diluting the tablet disarms the timed-release action of the medication and causes a quick, powerful high. Eliminating the time-release factor allows for a quick and intense rush to the brain. Abusers have compared this feeling to the euphoria they experience when taking heroin. In fact, in some areas, the use of heroin is overshadowed by the abuse of OxyContin.

This practice can lead to overdosing on OxyContin's active ingredient, oxycodone, by releasing too much of the medication into the bloodstream too quickly. OxyContin is highly addictive -- so higher doses of the drug must be taken when a tolerance develops. Illicit users of the drug have risen drastically and steadily over the last few years.

What will taking OxyContin do?

When taken as prescribed, OxyContin is safe, but when it is taken in other ways, it can be very dangerous.

The problems start when people looking for a "rush" get around OxyContin's slow release of oxycodone by crushing or chewing the pill. When OxyContin is crushed/chewed, all the oxycodone

When you take OxyContin without a prescription or not as prescribed, you could:

- **Overdose.** Signs of overdose include difficult or slow breathing, and extreme sleepiness. This risk of overdose increases if you take OxyContin with other opioids, alcohol or tranquilizers. An overdose of OxyContin can lead to brain damage or death. If you think someone has overdosed on OxyContin, call 911!
- **Get hooked.** If you take OxyContin regularly to get high, soon it gives you less and less pleasure. And if you stop taking it, you go into withdrawal and feel terrible. Before long, getting the drug to avoid sickness takes over your life. How long it takes to reach this point varies from person to person, but it can be quick.
- **Feel lousy.** Apart from withdrawal sickness, taking OxyContin can have side effects such as constipation, sexual problems, swelling, nausea, sweating, itching and sleepiness.
- **Get busted.** Just having someone else's OxyContin is a crime – you risk arrest, conviction and a criminal record.
- **Make things worse.** Taking OxyContin to "self-medicate" for physical pain or to numb emotions only adds to your problems. OxyContin seems to make things better at first, but once you're hooked on it, your life will be much worse.

Short-Term Effects

The most serious risk associated with OxyContin is respiratory depression. OxyContin should not be combined with other substances that slow down breathing, such as alcohol, antihistamines (like some cold or allergy medication), barbiturates, or benzodiazepines.

Other common side effects include constipation, nausea, sedation, dizziness, vomiting, headache, dry mouth, sweating, and weakness.

Toxic overdose and/or death can occur by taking the tablet broken, chewed, or crushed.

Long-Term Effects

Using OxyContin chronically can result in increased tolerance to the drug in which higher doses of the medication must be taken to receive the initial effect. Over time, OxyContin will become physically addictive, causing a person to experience withdrawal symptoms when the drug is not present. Symptoms of withdrawal include restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps, and involuntary leg movements.

What should I do if I can't stop taking OxyContin?

There is help!

You can withdraw from OxyContin at home or, if needed, in a withdrawal center.

After withdrawal, you can get help to keep you from going back

Nurse's Notes ... Hand Washing

Is it important to wash your hands?

Simply put, yes. Hand washing is the single most effective way to prevent the spread of infections. You can spread certain "germs" (a general term for microbes like viruses and bacteria) casually by touching another person. You can also catch germs when you touch contaminated objects or surfaces and then you touch your face (mouth, eyes, and nose).

"Good" hand washing techniques include using an adequate amount of soap, rubbing the hands together to create friction, and rinsing under running water. The use of gloves is not a substitute for hand washing.

When should I wash my hands?

Different situations where people can pick up "germs" include:

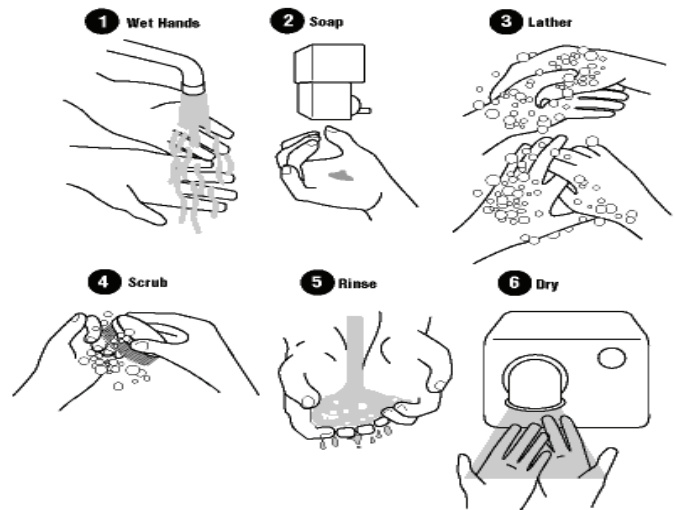
- when hands are visibly soiled,
- after using the washroom (includes changing diapers),
- after blowing your nose or after sneezing in your hands,
- before and after eating, handling food, drinking or smoking,
- after touching raw meat, poultry, or fish,
- after handling garbage,
- visiting or caring for sick people,
- handling pets, animals or animal waste.

Ensuring that employees wash their hands properly after using the washroom is very important in reducing disease transmission of stomach "flus" (which really is not a "flu" or influenza) and other gastrointestinal infections. Using soap and lathering up is very important (rinsing hands in water only is not as effective). Use comfortably warm, running water. Hands should be washed for a minimum of 10 seconds - longer if the hands are visibly soiled. To help people (especially children) wash long enough, one option may be to sing a short song such as "Happy Birthday". The idea of surgeons scrubbing for an operation (as on TV) is very similar.

How do I properly wash my hands?

For effective hand washing, follow these steps:

- remove any rings or other jewelry,
- use warm water and wet your hands thoroughly,
- use soap (1-3 mL) and lather very well,
- scrub your hands, between your fingers, wrists, and forearms with soap for 10 seconds,
- scrub under your nails,
- rinse thoroughly,
- turn off the taps/faucets with a paper towel,
- dry your hands with a single use towel or air dryer,
- protect your hands from touching dirty surfaces as you leave



Other tips include:

- Cover cuts with bandages and wear gloves for added protection (cuts are very vulnerable to infections).
- Artificial nails and chipped nail polish have been associated with an increase in the number of bacteria on the fingernails. Be sure to clean the nails properly.
- Keep your hands away from your eyes, nose or mouth.
- Assume that contact with any human body fluids is infectious.
- Liquid soap in disposable containers is best. If using reusable containers, they should be washed and dried before refilling. If using a bar of soap, be sure to set it on a rack that allows water to drain or use small bars that can be changed frequently.

What about antibacterial soaps and waterless hand scrubs?

While it is true that regular soap and water does not actually kill microorganisms (they create a slippery surface that allows the organisms to "slide off"), antibacterial soaps are typically considered to be "overkill" for most purposes. The exception may be in a hospital where special situations are present (e.g., before invasive procedures, when caring for severely immunocompromised patients, critical care areas, intensive care nurseries, etc.). Antibacterial agents should be chosen carefully based on their active ingredients and characteristics, and when persistent antimicrobial activity on the hands is desired.

When there is no soap or water available, one alternative is to use waterless hand scrubs. Some of these products are made of ethyl alcohol mixed with emollients (skin softeners) and other agents. They are often available as a rinse, or on wipes. They can be used by paramedics, home care attendants, or other mobile workers where hand washing facilities are not available. However, these agents are not effective when the hands are heavily contaminated with dirt, blood, or other organic

November is Diabetes Month

More than 2 million Canadians have diabetes There are three main types of diabetes.

Type 1 Diabetes, usually diagnosed in children and adolescents, occurs when the pancreas is unable to produce insulin. Insulin is a hormone that ensures body energy needs are met. Approximately 10 per cent of people with diabetes have Type 1 Diabetes.

The remaining 90 per cent have Type 2 Diabetes, which occurs when the pancreas does not produce enough insulin or when the body does not effectively use the insulin that is produced. Type 2 Diabetes usually develops in adulthood, although increasing numbers of children in high-risk populations are being diagnosed.

A third type of diabetes, Gestational Diabetes, is a temporary condition that occurs during pregnancy. It affects approximately 3.5 per cent of all pregnancies and involves an increased risk of developing diabetes for both mother and child.

Is diabetes serious?

If left untreated or improperly managed, diabetes can result in a variety of complications, including:

- Heart disease
- Kidney disease
- Eye disease
- Problems with erection (impotence)
- Nerve damage

The first step in preventing or delaying the onset of these complications is recognizing the risk factors, as well as signs and symptoms of diabetes.

What are the risk factors for diabetes?

If you are aged 40 or over, you are at risk for type 2 diabetes and should be tested at least every three years. If any of the following risks factors apply, you should be tested earlier and/or more often.

Being:

- A member of a high-risk group (Aboriginal, Hispanic, Asian, South Asian or African descent)
- Overweight (especially if you carry most of your weight around your middle)

Having:

- A parent, brother or sister with diabetes
- Health complications that are associated with diabetes
- Given birth to a baby that weighed more than 4 kg (9 lb)
- Had gestational diabetes (diabetes during pregnancy)

What are the symptoms?

Signs and symptoms of diabetes include the following:

- Unusual thirst
- Frequent urination
- Weight change (gain or loss)
- Extreme fatigue or lack of energy
- Blurred vision
- Frequent or recurring infections
- Cuts and bruises that are slow to heal
- Tingling or numbness in the hands or feet
- Trouble getting or maintaining an erection

It is important to recognize, however, that many people who have Type 2 Diabetes may display no symptoms.

Can you prevent diabetes?

Scientists believe that lifestyle changes can help prevent or delay the onset of Type 2 Diabetes. A healthy meal plan, weight control and physical activity are important prevention steps.

How is diabetes treated?

People with diabetes can expect to live active, independent and vital lives if they make a lifelong commitment to careful diabetes management, which includes the following:

Education: Diabetes education is an important first step. All people with diabetes need to be informed about their condition.

Physical Activity: Regular physical activity helps your body lower blood glucose levels, promotes weight loss, reduces stress and enhances overall fitness.

Nutrition: What, when and how much you eat all play an important role in regulating blood glucose levels.

Weight Management: Maintaining a healthy weight is especially important in the management of Type 2 Diabetes.

Medication: Type 1 Diabetes is always treated with insulin. Type 2 Diabetes is managed through physical activity and meal planning and may require medications and/or insulin to assist your body in making or using insulin more effectively.

Lifestyle Management: Learning to reduce stress levels in day-to-day life can help people with diabetes better manage their disease.

Blood Pressure: High blood pressure can lead to eye disease, heart disease, stroke and kidney disease, so people with diabetes should try to maintain a blood pressure level at or below 130/80. To do this, you may need to change your eating and physical activity habits and/or take medication.

Please come out to our

**DIABETES,
CHOLESTEROL
AND BLOOD PRES-
SURE
SCREENING CLINIC**

Tuesday November 14th, 2006

Eagle Village Health Centre

9:00 am - 11:30 am

1:00 pm - 3:30 pm

5:30 pm - 7:30 pm

**Prevention is the key
to a healthy life !!**

**Door Prizes
Free Recipe Books
Diabetes Kits**

EVERYONE WELCOME

Rates of diabetes among Aboriginal people in Canada are three to five times higher than those of the general Canadian population. Aboriginal children are also now being diagnosed with Type 2 Diabetes, a condition that in the past occurred mainly in older persons. Inuit rates of diabetes are not as high as those of other Aboriginal populations; however, there is concern that the rates of

Diabetic Broccoli Cheese Soup

- cooking spray
 - 1 cup chopped onions
 - 2 garlic cloves, minced
 - 3 cups fat-free low-sodium chicken broth
 - 1 (16 ounce) package broccoli florets
 - 2 1/2 cups 1% low-fat milk
 - 1/3 cup all-purpose flour
 - 1/4 teaspoon black pepper
 - 8 ounces light processed cheese, cubed (such as Velveeta light)
1. Heat a large non-stick saucepan coated with cooking spray over medium-high heat. Add onion and garlic; saute 3 minutes or until tender. Add broth and broccoli. Bring broccoli mixture to a boil over medium-high heat. Reduce heat to medium; cook 10 minutes.
 2. Combine milk and flour, stirring with a whisk until well blended. Add milk mixture to broccoli mixture. Cook 5 minutes or until slightly thick, stirring constantly. Stir in pepper. Remove from heat; add cheese, stirring until cheese melts.
 3. Place one-third of the soup in a blender or food processor,

Sugar-Free Banana Bread

- 2 cups whole-wheat flour
 - 2 teaspoons baking powder
 - 1/2 teaspoon baking soda
 - 1/2 teaspoon cinnamon
 - 4 medium bananas, cut into chunks
 - 1 egg
 - 1/3 cup vegetable oil
 - 1/2 cup unsweetened orange juice
 - 1/2 cup raisins
 - 1/2 cup walnuts, chopped (optional)
1. Preheat oven to 350 degrees.
 2. Combine the flour, baking powder, baking soda and cinnamon in a bowl. Stir to blend.
 3. Place bananas in blender and puree until smooth.
 4. Add the bananas and rest of ingredients to flour mixture and mix well.
 5. Pour into a greased loaf pan.
 6. Bake for 40-50 minutes or until a knife inserted comes out clean.
 7. Cool on a wire rack.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
NOVEMBER 2006			1 <u>Holidays</u> Terry	2 Bingo	3	4 Eagle Village Moose Party at the Community Hall
5 <u>Holidays</u> David McLaren	6 Terry is Montreal for a Conference (6th - 11th)	7 Legal Aid Services will be available at the Health Centre	8	9 Bingo	10 The Band Office and Health Centre are closed for Remembrance Day Moose Party	11 Remembrance Day
12	13	14 Diabetes, Choles- terol and Blood Pressure Screening Clinic at The Health Centre	15 Flu Shot Clinic at the Health Centre	16 Flu Shot Clinic at the Health Centre Bingo	17 Dr. Gurekas is at the Health Centre Much Music Video Dance	18
19 Elder's Club Penny Sale	20 Opening of National Addictions Aware- ness Week at 7:00 pm at the Hall	21 Flu Shot Clinic at the Health Centre	22 Legal Aid Services will be available at the Health Centre	23 Dr. Brock is at the Health Centre Flu Shot Clinic at the Health Centre Bingo	24 Lion's Telethon	25 Little Chief's Texas Hold'Em Tournament
26	27 Arlene will be in Montreal for training (27th - 30th)	28 Shirley and Jennifer will be in Montreal for a meeting (27th - 1st)	29	30 Dr. Zivkovic is at the Health Centre		

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
DECEMBER 2006					1	2 KCLA Old Fashion Christmas (1 pm - 4 pm)
3	4	5	6	7	8	9 Elder's Christmas Supper
10 Christmas Monster Bingo	11	12	13	14 Bingo	15 Eagle Village Staff Party	16
17 Children's Christmas Party	18 <u>Holidays</u> Vicky Constant	19	20	21 Bingo	22 Office closed at noon today for the Christmas Holiday	23
24 Christmas Eve 31 New Year's Eve	25 Christmas	26 Boxing Day	27	28	29	30
Health Centre and Band Office are closed for the Christmas Holidays this						