

2016 Eeyou/Eenou Regional General Assembly on Health and Social Services,
Waskaganish, April 12-14, 2016

Notes from Open Space Discussion Groups

Transcription from flip charts during the Open Space held Wednesday, April 13, 2016



Conseil Cri de la santé et des services sociaux de la Baie James

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Cree Board of Health and Social Services of James Bay

CBHSSJB www.creehealth.org

Discussion Topics

[Sexual abuse](#)

[Sexual awareness and prevention](#)

[Teen pregnancy](#)

[Land Based Healing](#)

[Traditional Medicine](#)

[Regional Therapy Centre](#)

[Health Care Services](#)

[CPS](#)

[Dialysis](#)

[Parenting](#)

[JBNQA Registration](#)

[Youth Protection and child development](#)

[Partnership](#)

[Respite Homes](#)

[Men's Shelters](#)

[Women's Shelter](#)

[Marriage Counseling](#)

[Human Resources](#)

[Special Needs](#)

[Research Committee](#)

[Sports Leagues](#)

[Alcohol/Drug Addictions](#)

[Gambling Prevention](#)

[Diabetes](#)

[Mental Health](#)

[Mental Health for Support Services](#)

[Elders](#)

[What is an elder?](#)

[Elders Care and Elders Abuse](#)

#	Topic	Results of discussion
A1	<p>Sexual abuse</p> <p>Session Note Taker: Jeraldine Coon Come</p> <p>Transcriber: Katherine Morrow</p>	<p>Issue: Victims feel hopeless when resources are not available.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> • A resource person in schools or community, CMC to talk about sexual abuse • A safe place where victims can talk and find help • Criminal reference check in every department • Training on sexual abuse (therapeutic communication) to be provided for frontline workers • Vulnerability sector check • Referral process (a road map) <p>Issue: Discussing sexual abuse</p> <p>Recommendations:</p> <ul style="list-style-type: none"> • To have a workshop for parents and youth, or even younger kids • Define what is good secret and what is a bad secret or; • What is a good touch and what is a bad touch • To have an elder involved to educate parents about parenting skills • To have a support group for victims; sharing experiences-Trauma • Break the Taboo talking about Sexual Abuse. <p>Issue: Younger children are susceptible to sexual abuse when not talked about.</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Teach children about manners, rules, at an early age <p>Issue: Need to be more cautious bringing outside resources or employee.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> • Criminal check and need to be well monitored • Educate employers about harassment • To have sex offenders registry – notify the community public <p>Issue: Talk openly about sexual abuse (leading to alcohol and substance abuse, and bullying)</p> <p>Recommendations:</p> <ul style="list-style-type: none"> • Start a campaign on sexual abuse awareness • Have someone go to school to talk about sexual abuse

		<ul style="list-style-type: none"> • Have a school social worker accessible • Have access to services and programs for victimizers and victims, families that are affected. • Hotline accessible <p>Issue: Education about self-respect</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • To have a guideline to educate the population on Cree values • To gain knowledge about Rites of Passage and bring this important practice back- elders involvement. • To have a workshop on self-esteem and loving yourself <p>Issue: Safety</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Provide Self-defense courses within the communities • To have a program like ASIST (suicide intervention prevention training) <p>Issue: Confront victimizers</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Restorative justice process <p>Issue: Parenting skills workshops or programs to be implemented</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • cultural friendly, elders involvement • teach about what are good values • couples counseling by the elders • talking about dating or before dating to your kids • high parental involvement
A2	<p>Sexual awareness and prevention</p> <p>Session Note Taker: Jeraldine Coon</p>	<p>Issue: Youth at school getting mocked because this individual caught STD, ending up dropping out</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Secondary students to be more informed what is STDs • Have more awareness's on STDs • Sex education to be provided in schools • To see more "Chii "Kiyeh" program in schools in each communities • Bring a motivational speaker into schools and outside of schools to talk about STDs

	<p>Come</p> <p>Participants: Thomas Hester Emily Hester</p> <p>Transcriber: Jeraldine Coon Come</p>	<p>Issue: Have easy access to services</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Sex education to be provided by the teachers • Hire full time ushchinichsuu or school nurse *CREE NURSE* • Educate general population on sexual transmitted diseases and how much has impacted in Eeyou Istchee • More advertisement _radio shows, broadcasting, video streams • Have the CHRs, public health officers, family service workers, youth department, Cree women of Eeyou Istchee work together on prevention <p>Issue: Surveys to be done yearly and make it known to the public</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Publish on social media, Nation magazine, broadcasting.
A3	<p>Teen pregnancy</p> <p>Session Note Taker: Jeraldine Coon Come</p> <p>Participants: Lucy Petagumskum Bianca</p> <p>Transcriber: Jeraldine Coon Come</p>	<p>Issue: Teens feel overwhelmed and feel ashamed being pregnant at a young age</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Remove taboo- talk openly • Have education on parenting skills • Have a similar pilot project like Elizabeth's house (available in Montreal) • Mentorship on life skills • Have partners work together on teenage pregnancy: CHB, wellness, Youth dept. Cree women, Justice, elders, Daycare, CHRD, Police, Headstart; supporting young parents in parenting. • Contraceptives/birth control methods to be talked about <p>Issue: Have a program on self-esteem/self-respect for youth</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • Chii Kiyeh program to be implemented in schools in all Cree communities • To have a concrete foundation on Uschiniichisuu program (Like Awash) • Bring elders into schools to talk about Cree values and sexual health • Educate children at an early age on women/man hood. • Teach children and youth about kinship during Cree Cultures • Promote family group conference-hire a coordinator • Teach about safe sex • CHB to provide parenting skills programs in all communities <p>Issue: Services for youth</p>

		<p>Recommendation:</p> <ul style="list-style-type: none"> Youth clinics have activities provided for youth from 13-17 years of age (GAP IN BETWEEN) Teach the knowledge on midwifery Cree commandments: knowledge passed down on marriage, healthy relationships (encourage techniques on how to have a baby boy or a baby girl, using boughs and pine cones) Cree culture to be provided instead of arts and crafts (Cree values and knowledge, becoming a man/woman) Transferring Cree knowledge to students (knowing the meaning of ceremonies)
B1	<p>Land Based Healing</p> <p>Session Note Taker: Matthew Mukash</p> <p>Participants: Emily Hester Joshua Iserhoff Louisa Wynne Matthew Mukash Alice S. Blacksmith</p> <p>Transcriber: Lucy Trapper</p>	<p>Have a Land Based Healing Center</p> <ul style="list-style-type: none"> Community, Justice Department <p>Offer seasonal operations</p> <ul style="list-style-type: none"> Health Canada, CBHSSJB, TRC recommendations <p>Train Traditional Healers</p> <p>Create accredited Cree Way of Life and Language Training</p> <p>Offer various programs to specific target groups and age groups</p> <p>Oral transfer of traditional knowledge/wisdom</p> <p>Use Eeyou/Eenou medicine and healing methods and practices</p> <p>Offer choices (education)</p> <ul style="list-style-type: none"> spiritual and biblical <p>Traditional education</p> <ul style="list-style-type: none"> Medicine (land based) Place names
B2	<p>Traditional Medicine</p> <p>Session Note Taker: Matthew Mukash</p>	<p>Traditional medicine offered in clinic</p> <ul style="list-style-type: none"> Land-Based Medicine Plant, animals, marine (fish , etc), earth (rock, etc) Medicine Wheel (physical, emotional, mental and spiritual); 4 aspects of health (holistic approach) <p>Issue: Legal Protection for Traditional Knowledge</p>

	<p>Participants: Lucy Trapper Eva Louttit Sam Petawabano Raymond Blackned Paula Napash</p> <p>Transcriber: Lucy Trapper</p>	<ul style="list-style-type: none"> • Educate ourselves in intellectual property rights to protect & patent our traditional medicine practice • Apply or develop a Eeyou/Eenou secrecy law to protect the traditional medicine and healing; Form a law to legalize it for preservation • Form a Cree Research Committee that it owned by the Cree Nation Government • Protect the traditional research on our medicine • Pass laws on traditional medicine. <p>Have a lab for traditional medicine - Offer training for Crees to do research and lab</p> <p>Practice-based medicine research study</p> <p>Find ways to recognize our traditional medicine/healers practiced-based</p> <p>Find a way to have our elders recognized/accredited for their practice, for example honorary and Dr. recognition</p> <p>Form a Cree (eeyou/enou) dialogue on Traditional Medicine with collaboration in our resources</p> <p>Negotiate to find ways to recognize our traditional practices such as traditional medicine, healers, midwives</p> <p>Provide spiritual awareness our on the land</p> <p>Land is the ultimate healer (land-based link)</p> <p>How do we prescribe our traditional medicine in clinics? - Have council of medicine, dentist and pharmacy on board to prescribe land-based healing vs. western medicine</p> <p>Teach our younger generations on traditional land-based practices</p> <p>Create a Cree traditional medicine model</p> <p>Create another book on the Gift of Healing (book documenting traditional medicine)</p> <p>Offer alternative options for ADHD Clientele</p>
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		<p>Applying the best of both worlds in Medicine</p> <p>Sustainability, conservation, preservation, on traditional food/animals/environment</p> <p>Create a Cree Eeyou/Eenou Research Institute involving traditional healers/elders, traditional medicine, Traditional food/Environment and traditional healing practices</p> <p>Community-Based Healing Centre offerings</p> <ul style="list-style-type: none"> • Traditional medicine • Storytelling • Snowshoe making • Men's teachings • Woman's teachings • Gender roles in family • Journeys • Seasonal activities and practices of traditional teachings <p>Community- Based Clinic</p> <ul style="list-style-type: none"> • Traditional designs <p>Partnerships to ensure sustainability, including: Local governments, Justice Department, CBHSSJB, CSB, CTA, Health Canada (Brighter Futures, Building Healthy Communities and NNADAP), Miyupimaatisiun Committees, Youth Council, Elders, Tallymen, (have them to hire their staff), Local and Regional Woman Associations. (CWEIA), men's groups, church groups, police, CNG, Niskamoon</p>
B3	<p>Regional Therapy Centre</p> <p>Session Note Taker: Matthew Mukash</p> <p>Participants: Paula Napash Fred Mowatt</p> <p>Transcriber:</p>	<p>Suggested partners</p> <ul style="list-style-type: none"> • Use committees to develop the programs offered at the regional therapy centre, including: Community Organizers, Miyupimaatisiun Committees, Social Development, Mental health and Nishiiyuu • Work in collaboration with existing programs with CMC (such as AMA), Community Wellness, Cree School Board, Child Family Services, Cree Justice, and other community resources • Create trust in partnerships to break the barrier of working together • Involve leadership (institutional, local and regional) • Elders to lead in traditional ways of healing • Professionals in mental health and rehabilitation to work in the Centre <p>Identified target groups/clientele:</p> <ul style="list-style-type: none"> • Youth, women, men and elders • Family groups

	Jeraldine Coon Come	<ul style="list-style-type: none"> • Couples • People with mental health issues and addictions • People with disabilities <p>Services/programming</p> <ul style="list-style-type: none"> • Focus on the grassroots issues/challenges faced in the communities • Teach lessons from Mother Earth; offer traditional healing methods • Residential School impacts recovery program • Develop our own programs such as our own AA program using our Cree expertise & values; detoxification therapies using natural ways <ul style="list-style-type: none"> • Detoxification therapy geared to nutrition, drugs, alcohol, prescription medication using natural ways and resources • Life skills training, guidance and counseling and goal-setting • Family Group Therapies offered by Social Services, CMC and Community Workers, and elders <ul style="list-style-type: none"> • Family Group Conferencing and Workshops to empower families and groups • Offer Cree teachings in marriage to help build healthy families • Suicide prevention/intervention/postvention • Support for special needs/FASD/ADHD/ ADD and Autism Provide aftercare for youth, adults to help elders out on the land <ul style="list-style-type: none"> • Offer mental health services for depression, anxiety, and other conditions <p>Before and aftercare for mental, spiritual, emotional, physical health</p> <p>Accessibility</p> <ul style="list-style-type: none"> • Can start at any time • Services on weekends • Short-term and long-term services • Open to different beliefs or values • Teach acceptance, and respect of other beliefs as long as the clientele are happy and healthy
C1	Health Care Services Session Note Taker: Darlene Kitty Transcriber: Katherine Morrow	<p>Two major themes emerged: increased emphasis on helping patients take charge of their health through education and prevention programs, and use technology to strengthen services.</p> <p>Recommendations to improve healthcare services</p> <ul style="list-style-type: none"> • Move from a reactive approach to proactive/preventive <p>Suggestions related to health education and empowering patients to take control of their health</p> <ul style="list-style-type: none"> • Translate medical terms into Cree • Greater resources (\$) to help patients learn • Encourage patients to speak their concerns about health, ask questions and learn about health

		<ul style="list-style-type: none"> • Clinicians make time for teaching • Full time school nurses and health education in the CSB curriculum • Health education - teaching about health, medical conditions, pharmacy/medicine, the body, medications, sex ed • Nutritionists do traditional activities too • CHRs and professionals collaborate on health education outreach eg newsletter, podcasts, Facebook messages • Elders need support and teaching about available services <p>Information and Communications Technology Infrastructure:</p> <ul style="list-style-type: none"> • Strengthen IT system for centralized accessible and secure electronic medical records and information systems, access to diagnostic tests eg MRI, and other telehealth services. • Fix fibre optic (eg Waskaganish) <p>Other needs:</p> <ul style="list-style-type: none"> • Supervised home for patients with chronic mental health conditions • Needed specialists: pediatricians, psychiatrists and pediatric psychiatrists, ophthalmologist
C2	<p>CPS</p> <p>Session Note Taker: Darlene Kitty</p> <p>Transcriber: Katherine Morrow</p>	<ul style="list-style-type: none"> • Treat patients according to their needs; for example, have flexibility in the escort policy to deal with patients on a case by case basis • Social worker to support medical/social situation • Financial support for families of very sick patients <ul style="list-style-type: none"> - Use emergency budgets? Create a CHB Foundation? - E.g. Money raised in Wemindji casino helps families • No boarding home in Amos • Espresso - improve the food • CPS communication plan to improve understanding of the policies and procedures • Include traditional setting in new building • Clean, healthy, tasty meals, better service • Educate patients about services
C3	<p>Dialysis</p>	Discussion did not take place (see topics C1 and H3)
D1	<p>Parenting</p> <p>Session Note Taker: Catherine Jolly</p> <p>Transcriber: Catherine Jolly</p>	<ul style="list-style-type: none"> • Roles and Responsibilities of parents, grandparents, God parents, elders, churches need to be established • Teenage parents need educational support such as parenting support groups and programs to help them understand their roles as new parents • Awareness and instruction on stages of child development • Obtain Youth Councils' support in creating parenting programs • More awareness and support surrounding postpartum depression • Traditional approach in welcoming new mothers, involving elders and having the on-going support from the elders

		<ul style="list-style-type: none"> • Teaching the traditional family values • Support for before and after marriage counseling • Providing counseling and empowering parents
D2	JBNQA Registration Session Note Taker: Catherine Jolly Transcriber: Catherine Jolly	<ul style="list-style-type: none"> • Encourage new parents to register their children as Beneficiaries for access to JBNQA benefits • Advertise importance of applying/renewing health cards • Assistance from local band office for registrations of birth, Indian status cards etc.
D3	Youth Protection and child developmen t Session Note Taker: Catherine Jolly Transcriber: Catherine Jolly	<ul style="list-style-type: none"> • Providing in depth understanding of child development process • Providing parents with the knowledge to meet their children's essential needs such as sleep, proper nutrition, setting limits with screen time (ipads etc.) • Better training for foster parents of children with special needs/behavioral issues • Youth Protection to work collaboratively with schools • Land based programs – Rites of passage and upbringing • Encourage parents and grandparents to take responsibility for their roles by involving them in Parenting Programs or Family Treatment Centers • Providing retreats for frontline workers • Establishment of safe homes for foster children • Establishing Cree Charter of Rights for Aboriginal Children • Providing Customary Care/Compensation for Children in Care • Joint Regional Assembly on Youth Protection and Cree Justice Department and/Summit on Child Development • Early prevention, promotion and intervention Programs • Awareness on bullying • Establishing sharing circles and support groups • Youth Protection to have their own child therapists/psychologists • Youth Mobile Treatment Centers • Create integrated plan and services by working collaboratively with daycares, schools and Youth Protection • Having School Resource Officers in the schools • Train the trainer program – sharing experiences

E1	<p>Partnership</p> <p>Session Note Taker: Lily Napash</p> <p>Transcriber: Katherine Morrow</p>	<p>Comment: The different illnesses come from separation of families. When there are issues in the family it is the children that suffer the most. They need entities to collaborate.</p> <p>Comments about partnership and the need to partner</p> <ul style="list-style-type: none"> • Partnership is part of Cree culture and values. Cree culture is based on *sharing*. In the past, there were no borders. Cree were always working together. • Do not forget values taught by elders (hard work, respect) • Colonial policy created separation. Find ways to overcome. • Collaborative work is financially more efficient. • There are organizational barriers to collaboration. Some entities do not receive partnership very well. For example, Health Canada funding approx 11 contribution agreements but funds allocated specifically for a program. Need to adapt ways of working and getting funding to enable a client-centered approach to tackle challenges faced by our people. • Collaboration takes political will; leadership's role is to set the direction of the partnership. • Top down method is not effective; partnerships should be taken to the grassroots (community members) • Often we are not short on resources, but lack collaboration • Today CHB is unsure how to deal with the various diseases/illnesses. Funding seems to be the focus. Instead, prioritize Land-Based approaches, what was used before: traditional medicine, not about money, medicine from the land (animals, rocks, trees) <p>Recommendations</p> <ul style="list-style-type: none"> • Entities need to create alliances and work together (TEAMWORK) • Cannot approach it from social development in its whole but by sections • Chief & councils need to change focus of their meetings. They always focus on administration. • Challenges with IAMP; how do we help implement each community's plan? Need to explain IAMP process clearly • Share the resources of programs that are in place in different communities; learn from each other; deliver same message to all entities • Families are seeking help; a community forum is needed • Community Organizers (CO) are not just for CHB; help other entities understand the role of the CO; create more CO positions for other areas of Miyupimaatisiun. • There is an overlap in services between the CMC and the Band. Find ways to work collaboratively and build relationships. For example, NNADAP worker from CMC and Wellness worker from the Band. • Find ways to encourage entities to take on different files
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E2	<p>Respite Homes</p> <p>Session Note Taker:: Lily Napash</p> <p>Transcriber: Katherine Morrow</p>	<p>Purpose/Role of Respite Homes</p> <ul style="list-style-type: none"> • Give families a break eg once a month • Training and support for families (of children with special needs) • For elders, special needs, mental health clients • Offer programs • Separate the children and adults, men and women • Adaptable to all needs • Have at least in one of the communities <p>Recommendations:</p> <ul style="list-style-type: none"> • Identify who is in charge of file • Renew the mandate • Conduct a needs assessment • Determine capital and operational costs • Build the facility; hire trained workers
E3	<p>Men's Shelters</p> <p>Session Note Taker:: Lily Napash</p> <p>Transcriber: Katherine Morrow</p>	<p>Is it needed in community? Reasons to be established, such as domestic violence, need for reintegration/halfway house.</p> <p>Partnership with other organizations eg. Justice, NNADAP, Police, CWEIA</p> <p>Ideas for programs:</p> <ul style="list-style-type: none"> • Work in collaboration with social services • Offering therapy, counseling services, professional help, not just shelter • Domestic violence • Placement into shelter • Reintegrate family • Support System • After care programs • Work and job, life skills programs • Talking circles • Support groups • Integrate traditional, land-based activities • Teach roles of men, women in the family • Show consequences of actions • Teach respect for women • Rites of Passage <p>Issues/challenges:</p> <ul style="list-style-type: none"> • Men come back to same environment after incarceration. Need for reintegration. • Cannot have children. Find options? • Youth, overcrowding • Easier for women to find shelter.

F1	<p>Women's Shelter</p> <p>Session Note Taker: George Diamond</p> <p>Transcriber: Iain Cook</p>	<p>Recommendations:</p> <ul style="list-style-type: none"> • Research Native Women's Shelters elsewhere • Learn lessons from past experience with the Chisasibi Women's Shelter • Have clear criteria for admission and a good security system • Collaboration between traditional and contemporary methods • Referral system to be put in place - security, police, social services, Chief and Council, Youth Protection, etc. • Set up an admission process for children and elder abuse • Establish a treatment process and after-care for victim, perpetrator, family • Equality among all community members <p>Observations:</p> <ul style="list-style-type: none"> • In times of survival Cree customs were much more strong • Take into account historical aspects of how relationships/marriages were done - and how they came to be (eg. forced marriage, planned marriages, shotgun marriages in relation to traplines and hunting territories (learning to fall in love after their marriage) • Early missionaries brainwashed our ancestors that marriage was to last forever at all costs, no matter what.
F2	<p>Marriage Counseling</p> <p>Session Note Taker: George Diamond</p> <p>Transcriber: Iain Cook</p>	<p>Observations:</p> <ul style="list-style-type: none"> • Majority of community issues arise from dysfunctional marriage/common-law difficulties • Research historical aspects of marriage counseling. what did our Elders say during marriage counseling session? • Young people have unrealistic perception of marriage (romantic fantasy) • Parenting skills need to continue after marriage (age, responsibilities) • Referrals from Social Services - where person works from • Family settings, activities, values, etc. change from bush camps to community settings • Through contracts <p>Recommendations:</p> <ul style="list-style-type: none"> • Identify individual issues, problems, etc. that cause marriage difficulties (bullying, pornography, financial, wife swapping, group sex, swingers' clubs, etc.) • Parental/grandparents' consent to young people's relationship could be questioned • Access different local resources to provide counseling to avoid being biased, prejudiced, etc. • Set up land-based program developed by Elders, and local resources (through Nishiyuyu Department) • Biblical teachings

		<ul style="list-style-type: none"> • Set up Healing Lodge • Enforce, enhance Rites of Passage
F3	<p>Human Resources</p> <p>Session Note Taker: George Diamond</p> <p>Transcriber: Iain Cook</p>	<p>Refer to: JBNQA Section 28 sections regarding employment of Cree people and on-the-job training.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> • Hiring policy to address equality, transparency and nepotism • Credentials of Cree elders who are involved in healing/advice/intervention of Cree people • Develop communications strategy to address future personnel needs • Educate communities about career opportunities with CHB - employment opportunities are immense • More collaboration with CSB and CHB on career promotion • CSB to change requirements for youth to meet our CHB personnel opportunities - doctors, dentists, nutritionists, etc. • Do an assessment of work opportunities within CHB - locally and regionally • Change mindset - we can help ourselves instead of others doing it for us • Local historical aspects of how CHB has evolved and advanced in each community • Implement Indigenous and Cree Methods and Ways in programs • Recall list, check employees' status to prevent misuse of benefits, prevent fraud using price-quotation (require tender process) • CHB Succession Plan - update goals • Inform CMC and staff about RSP and Succession Plan • Publicize website to people to access Board Meetings, updates on health issues • Ensure that CHB training is the same as the rest of the province • Develop incentive program to stay in school and pursue further education • Give internal communications training for directors, supervisors, etc. to work better with their subordinates • Develop orientation program for new employees
G1	<p>Special Needs</p> <p>Session Note Taker: Sherilyn Linklater Transcriber:</p>	<ul style="list-style-type: none"> • Adapted houses needed • Community Worker for Special Needs • Community partnerships & collaboration (working groups for each community) to work closely with the families • Understand the needs of a child • Early teachings (prenatal) • Create departments • Visitation for children that are outside of the community

	<p>Sherilyn Linklater</p>	<ul style="list-style-type: none"> • After care for adults • Create more resources • Maintain ties with the children and the home that is lodging them • Special Needs courses needed • FASD 4 generations affected by Residential School • Assessment for FASD • Issues need to be addressed now • Make it a mandate to assess all children at 3 years of age to be tested • Child's needs in the home and daycare • Different for every community • What can be done for a Special Needs child that is returning to the community • Lack of support • Respite service for weekend or a few hours • Children neglected • Community awareness on Special Needs in various community events (tournaments etc.) • Training for professionals and parents • Special Needs Conference • Communication with children and parents • Faster referral process to specialists (such as Speech Therapist) for proper testing and early assessments & interventions • Lodging, travel • Job training for older adults with special needs • No programs in the communities • Create jobs for workers who take the Special Needs training • It's okay to be diagnosed • Create local working groups • Invite all entities to support working groups • Do an inventory of resources • Create support system for families in each entity • Awareness of disabilities and mental health for Community members & entities (workshops to help empathize with children that have learning disabilities and community training) • Create working plans for child & family (ISP) • FASD assessment clinic mobile • Use of screening development tools (ASQ) • Training for healthcare providers on the use of screening tools and how to work with clients with disabilities • Surveys to assess the services offered – to see which clients are accessing the services and types of families • No programs or services in the community for Special Needs children (10 children from Cree Nation are outside of their home community)
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		<ul style="list-style-type: none"> Workers in the schools not trained to work with special needs children Look at the pros and cons of integrating them into the school system to be in regular classes not in special needs classroom isolated from other children Approach partners to look at the issues surrounding special needs Create a general protocol between CHB & CSB to start working together for the special needs children Awareness campaigns (radio, pamphlets, posters, conferences, support groups, videos, presentations, personal testimonies) Regional Coordinator of Special Needs has put in a request for Case Managers for each community
G2	Research Committee	Topic owner was not present and group continued the discussion of special needs during the time slot.
G3	Sports Leagues Session Note Taker: Sherilyn Linklater Transcriber: Sherilyn Linklater	<ul style="list-style-type: none"> Look at how we can get people moving Sports not only benefits the body, but also the mind and teamwork skills More people are involved in organized sports because it helps to gain more skills, routines and benefits school Sports should be available for all ages Funding for sports programs should be a priority Elders want to see youth and children being active because of the benefits (staying off the streets and negative stuff like alcohol & drugs) Collaboration with schools and recreation departments Variety of sports should be available (fishing, golf) More emphasis on creating leagues rather than tournaments (leagues are cheaper) Creating sports leagues would reduce the toll taken on the body caused by tournaments (playing many games in a 3 day weekend & travelling; it also affects work performance) Cree sanctioned federated leagues so everyone will have to comply with the rules; one rule book for all of the Cree Nation Resources for sports programs usually come from the outside (when these people are selected they should be required to go through a criminal record check to protect our children) Train Cree officials (we have one but need more) CHB should be a partner in sports programs (major contributor) Transportation issues should be addressed Powwow games (fox trot, portaging, canoeing) Winter games (snowshoe, tea boiling) CSB partnership with Cree Nation Bears for education component of the team

		<ul style="list-style-type: none"> • CHB partnership with Cree Nation Bears for social issues that the team faces • CHB promotion on the benefits of an active lifestyle • Off-ice programs • Various ongoing programs (four seasons) • Cree Nation Summer Games (running, track & field; can be group or individual) • Running clubs, Learn to Run • Evaluation of Sports Programs in place (hockey & broomball) to see the benefits of the tournaments but less focus on the competition • Awareness of the risks of getting involved in various sports programs • Truth and Reconciliation Commission • Build up on what is already in place ex: hockey is popular during the off season start another sports program • Cree Nation Bears – off-ice programs, workshops • Parent Support (parents sports committees) • Soccer (cost efficient for low income families) • Cheering practices not good (parents, spectators yell at the players) • Cheering workshops, booster clubs • CHB & CSB to collaborate and promote healthy lifestyle • Sports teams to be organized (managers & coaches) • Sports programs that fit the Cree communities • Sports teaches discipline and teamwork • Create partnerships with CSB, CHB, CTA, Recreation Departments • TRC to fund access to sports facilities (free access for community members to gym, fitness, swimming) • Inter-City leagues • Entities to allocate time for their employees to be physically active ex: 30 minutes or 2 hours a week employee keeps a log • Entities to create “Volunteer Leave” for their employees for those that volunteer to coach, manage or chaperone a sports team • Entity challenges in various sports (ex: CHB team, CNG team, CSB team to be role models and encourage active living) • Weight loss challenge for the whole Cree Nation • Walking challenge (locally or regionally) • Create sports scholarships
H1	Alcohol/Drug Addictions Session Note	<ul style="list-style-type: none"> • Drug and alcohol prevention; dry communities, bylaw enactments (checkpoints inefficient), prenatal teaching on addictions awareness • Implementation of solvent abuse program • Awareness on the negative effects of addictions, early prevention programs in the schools • Sharing of personal testimonies from former users and others

	<p>Taker: Laura Moses</p> <p>Transcriber: Sherilyn Linklater</p>	<ul style="list-style-type: none"> • Educate on spirituality and tobacco use • Whapmagoostui: two bars and two stores with license to sell; 18 alcohol related deaths • Treatment Centres versus Land Based Healing programs • After Care program; connect with the Elders, Family Values, Role Modeling
H2	<p>Gambling Prevention</p> <p>Session Note Taker: Laura Moses</p> <p>Transcriber: Sherilyn Linklater</p>	<p>Issues Raised:</p> <ul style="list-style-type: none"> • Underlying issues: boredom, loneliness, social bingo players, broken & dysfunctional families, unemployment, gain winning, get the rush, perception on money; gambling is substituting for other form of addictions • 50 machines in the small community of Eastmain plus 20 more (250 gamblers) • Fundraisers: hockey pool, penny socials, raffle tickets, bingo • Poker games hosted in the homes (drinking & partying leads to Youth Protection) • Role & time schedule of NNADAP Workers <p>Recommendations:</p> <ul style="list-style-type: none"> • Limit and control of machines in the communities • Awareness campaigns • Personal financial management • Pro's & Con's: self awareness • Group sessions: gamblers vs. non gamblers • Creation and promotion of gambling addiction support group • Stop promoting kids merchandise bingos in communities and more so in schools (comment from an elder)
H3	<p>Diabetes</p> <p>Session Note Taker: Laura Moses</p> <p>Transcriber: Sherilyn Linklater</p>	<p>Observations:</p> <ul style="list-style-type: none"> • Changes in food (esp. junk food/processed food) and transition from active to sedentary lifestyle led to diabetes epidemic • Children are introduced to junk food at a young age • Medications to control diabetes <p>Recommendations:</p> <ul style="list-style-type: none"> • Promote traditional food, exercise, healthy eating, self-awareness and discipline • Healthy choices and exercise to be included in school curriculum • Awareness Program • Promote and encourage regular testing • More structured activities at home • Training prior to summer jobs: diabetes, teen pregnancy • Awareness activities before tournaments • Increase accessibility to work out facilities (lunch breaks)

		<ul style="list-style-type: none"> • Nutrition facts • Food intake/exercise • Drop the pop • Promote the use of traditional medicine • Ban poutine in Eeyou Istchee
I1	<p>Mental Health</p> <p>Session Note Taker: Daisy Stephen</p> <p>Transcriber: Katherine Morrow</p>	<p>Organization of services & HR:</p> <ul style="list-style-type: none"> • Each community to have full team (psychologist, professional, especially for children) • Offer clients traditional and land based healing options • Train and hire our own people • Suicide prevention workers in each community • After care for the workers • Get more qualified workers (get seniority out) • Mental health first aid course • Basic training for employees in mental health (HCCP) <p>Promotion and awareness:</p> <ul style="list-style-type: none"> • Promote healthy role models • More promotion of available services (locally and regionally) • Create more awareness of mental health disorders (such as: depression, anxiety, panic attack, ADHD, Intergenerational trauma, bipolar, schizophrenia) through: <ul style="list-style-type: none"> ◦ Community workshops, school visits, youth clinics, brochures • Consult with elders and find out how they dealt with mental health • School awareness program: <ul style="list-style-type: none"> ◦ Professional to work with children ◦ Anti-bullying workshops • Support local community & be more proactive in creating a support system involving families, community, professionals, life coaches <p>Suicide prevention and awareness:</p> <ul style="list-style-type: none"> • Create Suicide prevention, intervention and postvention TEAMS • Set up suicide protocols for every community • Set up 24/7 regional phone help line • Address language barrier with existing helpline (info Sante) • Regional suicide prevention (dialogue for life) • Have it in a community every year and rotate (start in Waswanipi) • Develop a plan; address the root causes

I2	<p>Mental Health for Support Services</p> <p>Session Note Taker: Daisy Stephen</p> <p>Transcriber: Katherine Morrow</p>	<ul style="list-style-type: none"> • Identify what is mental health • Identify the existing services <ul style="list-style-type: none"> - Services needed for all age groups - Gaps in services, eg suicide prevention workers • Make communication a priority to access resources to be directed • Access resources within communities <ul style="list-style-type: none"> - Elders • Empower our own people • Major networking in community • Aftercare for front line workers (nurses, police, social services etc.) • CHB have a team set up for prevention mental health crisis • Regional prevention conference in Cree community • Set up crisis line 800 number • Community crisis response (ongoing) • Grief workshops • Network with organizations, split the cost • Come together as community as a WHOLE (to prevent duplication of services). • Utilize the traditional teaching in communities <ul style="list-style-type: none"> - The land base - The people - The leaders of tomorrow - The elders • Adapt programs that are in place based on community needs • Fulltime psychologists in communities • Link with entities that could offer trainings and services such as FNQLHSSC
J1	<p>Elders</p> <p>Session Note Taker: Irene Otter</p> <p>Transcriber: Jeraldine Coon Come</p>	<p>Recommendations:</p> <ul style="list-style-type: none"> • Each community to have a rep/worker specifically for elders • Professional workers for elder support services (such as designated social worker) • Greater awareness of elder abuse and its different aspects (physical, mental, financial etc.) • Long term residence to be available in the community • Palliative care services • Support groups • Special care; food, medications, oxygen • Support for children of elders • Individuals looking after elders - should be whole family supporting each other • Lack of volunteerism; bring back the family values, stories, involving youth in the process • Show love, respect, and honor • Listen & talk about Elders issues • Lack of resources for elders especially those with complex needs • Improve training of homecare workers

		<ul style="list-style-type: none"> • Encourage CHB staff to work harder to meet the needs of the elder • More home visits • House cleaning, personal care workers/health aides required • Plan the services that we want to see in the future • Mental Health services for PTSD (support, constant care) • Guide our services by Cree knowledge/traditional, past experiences • Suicide prevention intervention programs or trainings to be implemented • Provide training and ensure reliable medical escorts for elders • CPS: strengthen interpretation services; allow elders to be escorted by another elder and entitled to one additional escort; best quality of food to be provided for elders and lodging needs to be cleaned (for those sent down south) <ul style="list-style-type: none"> • Elder recognition for knowledge of wisdom
J2	<p>What is an elder?</p> <p>Session Note Taker: Irene Otter</p> <p>Transcriber: Jeraldine Coon Come</p>	<ul style="list-style-type: none"> • What is an elder? 55+ and seniors 65+ • Prefer to be on the land: following sunrise-get up early; life begins at sunrise “the creation teachings” • When you hear, see the life of God’s creation you can get guidance from Creator • There is a difference between on the land and in the community (noises, traffic, music blasting) even the environment. In community we see a lot of waste • On the land, you find peace of mind, everything is free, no need for money, creator provides everything in the “Garden of Eden” • Happiness and Joy is found on the land – Creator gives all directions • Being out in the bush is healing and teaching – connected to everything • When grieving, you find healing out in the land • Elders are shown to learn from the creator • Children don’t know elder abuse • Forms of abuse experienced by Elders: Money: borrowing money, using bank cards without authorization, rushing, verbal abuse, babysitting, locking or shutting in a room, using us as unpaid or low paid consultants while we pay a lot for outside persons • Role playing-acting like an elder • Elders residence: workers need to give proper care/attention to elders (no visits-feeling abandonment) • Trappers – who are in need of help because of sickness • Elders outreach programs – widows and elders • Woodcutting • Cultural activities • Long term care for those who want to continue living on the land • Monitor the Elders- ensure safety and healthy • Check their medications • Land-based Homecare

		<ul style="list-style-type: none"> • Bring cabins up to safety code: propane, fire detectors • Guardians needed for seniors (65+) • Youth can get training/knowledge on the land such as moosehide tanning, hunting, food preparation; roles of a man or woman
J3	<p>Elders Care and Elders Abuse</p> <p>Session Note Taker: Irene Otter</p> <p>Transcriber: Reggie Tomatuk</p>	<ul style="list-style-type: none"> • Respecting and honoring traditional way of life bush life of the land • Gather traditional food for elders • Learning from the Elder • Respecting the Elders providing food for them • They have 70 years of life experience • Learn to depend on elders for knowledge, wisdom, compassion • To recognize the knowledge, wisdom of Elders (instead of depending on consultants) for knowledge of Elders comes from the heart, from experience • Claim back the teaching of Elders <ul style="list-style-type: none"> ◦ Eg: social services (issues) and education • Elders Long Term • Utilize the knowledge of traditional medicine of Elders • The greatest teaching comes from Elders (it is a treasure) • Learn, respect put into practice the wisdom of Elders • Provide help and services for Elders who practice traditional way of life • Maintaining the off land practices • Out in the land, teachings are more accessible. (variety) (to young people by Elders) • Elders are more connected to land • Elders guide and LEAD • It is important to help Elders to pass down the tradition <ul style="list-style-type: none"> ◦ Take care of Elders ◦ Respect the knowledge ◦ Utilize the wisdom • Use the knowledge of Elders and learn from Elders • They have knowledge of the Territory • White man way is starting to govern us (we are getting brainwashed) • Imposing limits on hunting and permits to hunt • Cause us to lose our way of life • Prevent us from practicing our traditions • To fight each other (on land) • We learn from our ancestors our way of life <ul style="list-style-type: none"> ◦ To come together ◦ To help each other ◦ To survive ◦ To live healthy lives

		<ul style="list-style-type: none"> o To get along o To respect each other and the land o Spiritual • Reinforce the teaching to our young people of our ancestors teaching (The Elders knowledge) • A lot has changed since the time of our ancestors <ul style="list-style-type: none"> o Eg; land, year after year, harvesting • We should come together to talk of issues faced by all • It was respected, hunting seasons • Wisdom on respecting the land, respecting the time of growth of plants, lots to harvest, which we respect • We know about our land better than anyone • Cree values • Teachings on safety on rivers • Utilize the teaching of elders practice and pass it down • Teaching comes from <ul style="list-style-type: none"> o Water o Wood o Getting ready for the day/night o Harvest • Our way of life is slowly stolen from us • Language barriers: a lot of young people have difficulty in Cree language. • The mind was powerful, back then. With no calendar, paper, pen, computer, we were mentally and physically strong • Connecting the Elders and their knowledge • Elders teach their way of life of what they learn from parents, to set up camp, to paddle, • Elders keep of pass sown teachings of survival, knowledge learn from parents; • White man's way is we must have a licence / certificate to teach • People learn from experience. • We connect with young people to teach them.
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