

HESKW'EN'SCUTXE

August 2024

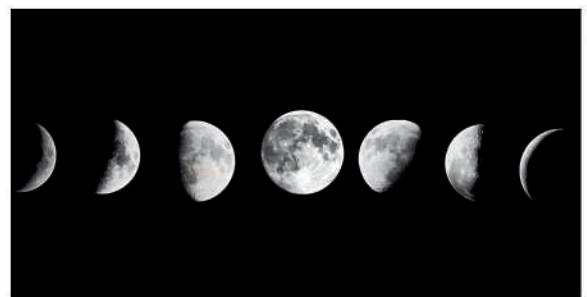
Monthly Newsletter

Volume 2 Issue 7



CULTURAL TEACHINGS

*Stories from
OUR TELLINGS
Interior Salish Stories
of the
Nlkapamux People*



“Trip to the Moon”

pg 37-41

OFFICE HOURS

Monday to Friday
8:30am To 4:30pm
Closed 12:00pm to 1:00pm

Cooks Ferry (250) 458.2212
Toll Free: 1.866.458.2212

Siska: (250)455.6601
Toll Free:1.844.255.6601



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HESKW'EN'SCUTXE MISSION

Serving the Cook's Ferry and Siska members living within these communities, Heskwen'scutxe Society pronounced wéx we? λú? which means "take care of yourself" is focused on the well-being of its clients, offers various health services while honoring Nlaka'pamux traditions.

In line with the funding received from First Nation Health Authority, the mission and vision of the Society are to support community-based health programs and for people to maintain their independence and self-sufficiency.

Access to External Health Care
Communicable Disease Control
Home Care
Maternal Child Health Care
Medical Travel
Mental Health and Wellness



"We embrace Nlaka'pamux traditions, culture and values. Our health services integrate modern medicines and methods to provide holistic wellness for our community members."

STAFF DIRECTORY

BOARD OF DIRECTORS



Lorette Edzerza
Cook's Ferry



Angela Phillips
Siska



Samantha Gush
Siska



Florine Walkem
Cook's Ferry



Tina Draney
Finance &
Acting Health Manager



Scarleth Zwez-Ruiz R.N.
Community Health Nurse &
Home Community Care Nurse



Angie Pigeon R.N.
Community Health Nurse



Lisa Colwell R.N.
Home Community Care Nurse
Coming soon back to community



Cooks Ferry

Nadine Methot B.A.
Administrative Assistant
Medical Travel Clerk



Corynn Reveley
MOA/Receptionist
Medical Travel Clerk

Siska



Christy Whittaker
Newsletter Writer

Home Care Aides



Clarissa Frederick
Nursing Assistant / HCA



Jessie Munro
HCA



Danielle Munro
HCA

Medical Drivers



Jean Mckay
Medical Driver



Martha Van Dyke
Medical Driver



THEMES OF THE MONTH

Preservation resources

Youth Day

Overdose Prevention

World Breastfeeding Week



By Christy Whittaker

Knowledge is power, following are reputable health links to Overdose awareness, and links to breastfeeding

Links for Overdose Awareness

healthandsafetyhelp.ca

Naloxone-Canada.ca

Links for Breastfeeding

www.healthlinkbc.ca

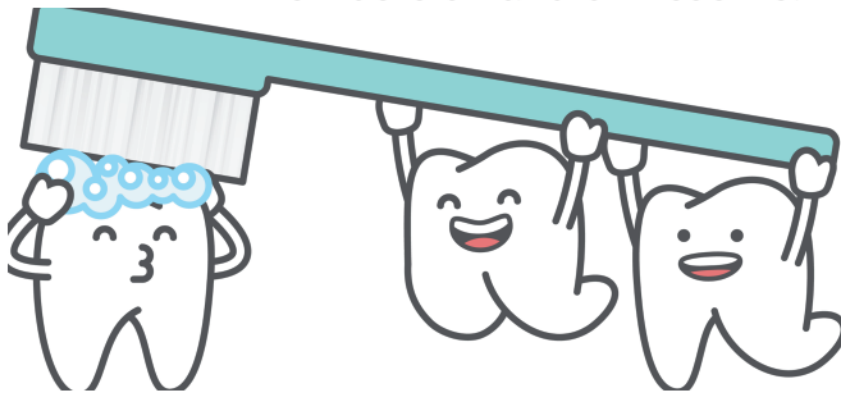
www.tinyhood.com



NEW DATES FOR DENTAL CLEANINGS IN COOKS FERRY Michelle Beattie will be in Cooks Ferry

August 19 from 1:00 pm to 5:00 pm
August 20: 8:30 am to 4:30 pm

We still have openings, if you need a cleaning, xrays, want to know if you are eligible for partials, dentures, braces or you have any concerns or questions about your teeth, please call us to book an appointment with Michelle. This is a free service open to all community members on and off reserve.



FREE DENTAL CARE FOR EVERYONE

Open to all children and Adults living in Community.
Free cleaning and healthy teeth services offered in
Siska & Cook's Ferry locations.

CALL TODAY TO INQUIRE OR
BOOK AN APPOINTMENT SISKA:
250-455-6601
COOK'S FERRY: 250-458-2212

- Services include:
 - Dental x-rays
 - Dental cleanings
 - Stain removal
 - Tartar buildup
 - Tooth polishing and fluoride application.
- Sealants for children to prevent tooth decay if needed

- Oral hygiene instruction.
- Tooth brushing.
- Flossing
- Denture cleaning

Date :

M T **W** T F S S

PROGRAMS



Services



Dental Clinic Cooks Ferry
August 19/20



Massages with John Tai



Cooks Ferry: August 14 & 28



Massages with John Tai



Siska: August 13 & 27



Suzanne /Footcare:
Cooks Ferry August 6



SUZanne Footcare
Siska August 8

Important!

Office Closures on
Monday August 5
and Friday August 9

Reminder!

Contest Deadline is August
19th



Notes :



First Nations Health Authority
Health through wellness

Mental Health Supports

Hope for Wellness Help Line

offers immediate mental health counselling and crisis intervention by phone or online chat.
Phone (toll-free): 1-855-242-3310
Website: hopeforwellness.ca.

KUU-US Crisis Line Society

provides crisis services for Indigenous people across BC.
Phone (adults and Elders): 250-723-4050
Phone (Youth): 250-723-2040
Phone (toll-free): 1-800-588-8717
Website: www.kuu-uscrisisline.com.

Métis Crisis Line is a service of Métis Nation British Columbia.
Phone: 1-833-MétisBC
(1-833-638-4722)

VictimLink BC Immediate 24 hours, 7 days a week, crisis support or victims of family or sexual violence. This service also provides [information and referrals](#) for all victims of crime. Phone: 1-800-563-0808
Email: VictimLinkBC@bc211.ca

9-8-8 National Suicide Crisis

Helpline offers immediate support anytime for support in English or French.

1-800-SUICIDE offers support for those experiencing feelings of distress including thoughts of suicide. This phone line is available in over 140 languages.
Phone: 1-800-784-2433

Indian Residential School (IRS) survivors and impacted family members can access supports directly from the IRS service providers listed below.

Adah Dene Healing Society

provides health and cultural supports. Phone: 250-996-5024
Email: nakazdli.elders@outlook.com.

Carrier Sekani Family Services

provides health and cultural supports.
Phone: 250-567-2900
Email: slarocque@csfs.org.

Gitanmaax Health Gitxsan Health Society

provides health and cultural supports. Phone: 250-842-6320 or
Email: healthdirector@gitanmaax-health.ca.

Gitanyow Human Services

provides health and cultural supports.
Phone: 250-849-5288
Email: director@gitanyowhealth.ca.

Indian Residential School Survivors Society (IRSSS)

is a partner with the FNHA in providing access to counselling, cultural and emotional support services to former students of residential and day schools, and their families, regardless of status.
Phone (toll-free): 1-800-721-0066
Website: www.irsss.ca.

Indian Residential School Crisis Line

is a national service for anyone experiencing pain or distress as a result of their residential school experience.
Phone (toll-free): 1-866-925-4419.

Kispiox Health provides health and cultural supports.

Phone: 250-842-6236 Email: tbaskin@anspayaxwhealth.ca.

Nuu Chah Nulth Tribal Council

provides health and cultural supports.
Phone: 250-724-3939 or Email: sanne.vanvlerken@nuuchahnulth.org.

Okanagan Nation Alliance

provides health and cultural supports.
Phone: 250-826-7844
Email: Wellness.Manager@syilx.org.

Sik-E-Dakh Health Society

provides health and cultural supports.
Phone: 250-842-6876
Email: andrew@sikedakh.org.

Tsow-Tun Le Lum Society

provides confidential outreach services such as counselling, cultural supports and personal wellness programs.
Phone (toll-free): 1-888-403-3123
Website: www.tsowtunlelum.org.

BC Alcohol & Drug Information Referral Service provides information about substance use treatments or supports in your area.
Phone: 1-800-663-1441
Phone (Lower Mainland): 604-660-9382

BC Seniors' Distress Line offers support for Seniors or anyone who is concerned about an older adult.
Phone: 604-872-1234

Foundry virtual access [province-wide virtual services](#) for youth under 24 and their caregivers. All services are free and confidential, and may be accessed through the Foundry BC app or chat. Phone: (1 833 308-6379) or video calls.

310 Mental Health Support offers emotional support, information and resources specific to mental health. This phone line is available in over 140 languages.
Phone (no area code): 310-6789.

Child and Youth Mental Health (CYMH) Community-based teams offer mental health counselling for children and youth and their families across BC from the Ministry of Children and Family Development. Virtual care is available by phone and online. Call your [closest Child and Youth Mental Health clinic](#).

Kids Help Phone Get 24/7, immediate counselling, support, information and referrals. Phone: 1 800 668-6868 or
Text: TALK to [686868](#)
Texting support for adults available by texting TALK to [741741](#)

Youth in BC offers crisis support available for youth 25 and under.
Website: [youthinbc.com](#)

The following regional health authority supports are available to all BC residents.

Fraser Health

Phone: 1-866-766-6960
Website: <https://www.fraserhealth.ca/health-topics-a-to-z/indigenous-health/indigenous-mental-health-and-wellness>

Interior Health

Phone: 310-MHSU (6478)
Website: <https://www.interior-health.ca/health-and-wellness/mental-health-and-substance-use/mental-health/adult-mental-health-services-and-resources>

Island Health

Phone: 1-888-885-8824
Website: <https://www.islandhealth.ca/our-services/mental-health-substance-use-services>

Northern Health

Phone: 310-6789
Website: <https://www.northern-health.ca/services/mental-health-substance-use/get-help-now>

Vancouver Coastal

Phone: 8-1-1
Website: <https://www.vch.ca/en/health-topics/mental-health-substance-use>



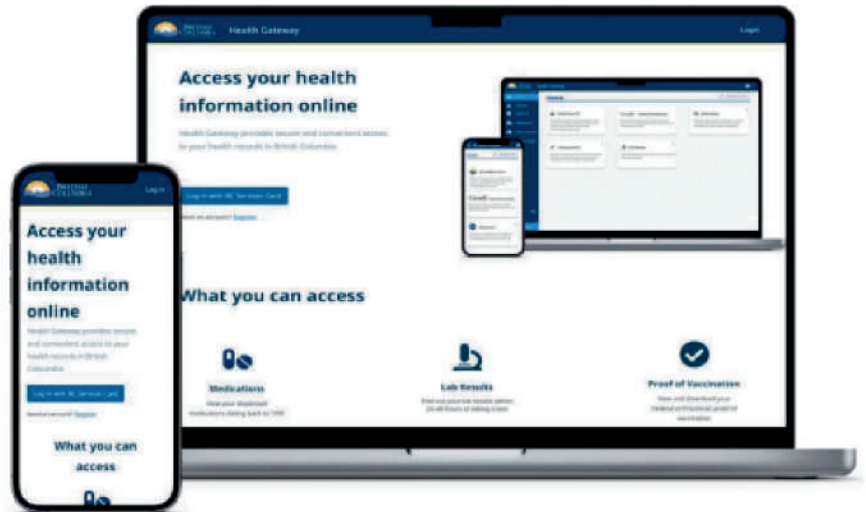


Get your health information online

Health Gateway provides secure and convenient access to your health records.

You can find:

- Lab results
 - Medication history
 - Immunization records
 - Hospital visits
 - Community health visits
 - Organ Donor Registration
 - Diagnostic Imaging Reports
- ... and more!



New features are regularly added. Learn more at gov.bc.ca/healthgateway

Go to the website at healthgateway.gov.bc.ca



Or try the mobile app

You can download it for free to your phone, tablet or iPad.





Create a Health Gateway account

1: Choose web or mobile

Go to the Health Gateway website at healthgateway.gov.bc.ca, or you can download the Health Gateway mobile app.

2: Log in

Use your BC Services Card account to securely log in to Health Gateway. Find out how at id.gov.bc.ca/account

3: Choose your communication preferences

If you like, Health Gateway can let you know when you have new health records.

4: Accept the terms of service

After you accept the terms of service, you can access your Health Gateway account.

Who can use Health Gateway

- Anyone 12 years and older can use Health Gateway.
- Parents and guardians can use their own account to get health records for their children 11 years and younger.

Get help or share feedback

Visit gov.bc.ca/healthgatewayguide or email us at healthgateway@gov.bc.ca

Are You Registered In

ImmsBC ?



First Nations Health Authority
Health through wellness

Why you should register:



ImmsBC will send you notifications when you are eligible to book vaccines, such as COVID-19, flu or HPV.

Registering allows you to manage your immunizations. You can book online or by phone at local pharmacies or public health units. You can also start a conversation about upcoming immunization clinics with your local health centre.

Already registered with ImmsBC? Did you know you can also review your immunization history, lab and X-ray results in Health Gateway?

www.healthgateway.gov.bc.ca

HOW TO REGISTER

Online: www.getvaccinated.gov.bc.ca

Call: 1-833-838-2323 (toll-free)

SAIL HOME ACTIVITY PROGRAM

INFORMATION FOR CLIENTS AND THEIR FAMILY



WHAT is it?

The SAIL Home Activity Program is a set of 7 activities developed for adults receiving home support services. The initial idea came from a program developed by the Canadian Center for Activity and Aging. Their Home Support Exercise Program is in use in many parts of Ontario and Alberta. The activities in the SAIL Home Activity Program have been carefully selected by experienced community rehab physiotherapists and occupational therapists throughout the province of BC.

WHY was it developed?

- 1. People receiving home support services are at risk for increasing weakness and loss of function.** Muscle weakness and poor balance are major risk factors for falling. The SAIL home activity program will help you improve your muscle strength and balance and endurance and reduce your risk of falling. Often people who are the weakest can have the biggest percentage gains in strength. You are never too old. Some studies of people in their 80s and 90s have shown a dramatic increase in muscle strength with regular strengthening activities.
- 2. Physical activity and exercise are key to maintaining or improving health:** Physical inactivity significantly increases the risk of getting many chronic diseases including diabetes, heart disease, high blood pressure, osteoporosis, dementia and cancer. You may already have a chronic disease. People who already have chronic diseases can show considerable improvement in their overall health with increased physical activity.
 - **Diabetes:** Various studies have shown that changes in diet and increasing physical activity can decrease the risk of getting diabetes by up to 40 to 70%. People who already have diabetes who increase their physical activity usually have better blood sugar levels and less complications such as wounds that don't heal well.
 - **Heart disease and hypertension:** Regular physical activity can improve the elasticity of the walls of the arteries in the body by about 35%.
 - Physical activity increases the ability of the heart muscle to pump more effectively and efficiently.
 - **Osteoporosis:** Physical activity (weight bearing, resistance exercises, and exercises which put unusual stresses on the bones) improves bone health and bone strength
 - **Dementia:** Regular physical activity decreases the risk of getting a dementia like Alzheimers Disease by up to 20 to 30%. A study in the Journal of the American Medical Association in 2004 found women who walked 1 ½ hr per week did better on mental function tests than less active women. What is good for the heart is also good for the brain.

- Exercise programs for people with Alzheimers disease have been shown to improve formal test scores, improve sleep, decrease agitation, decrease aggression and decrease falls.
- **Cancer:** Overall up to 30 to 35% of all cancers can be prevented by eating well, being active, staying at a healthy weight and not smoking. Regular physical activity results in up to a 50% decrease in the risk of breast, colon and prostate cancer

“The greatest health risk for older adults is sedentary living.” World Health Organization 1997

3. **It is simple and adaptable** for your individual needs and abilities, and has built in progression. It does not require an individualized assessment by a physiotherapist or occupational therapist. If you want, you can start by doing just one of the activities each day. Additional exercises can be added as you feel able, until hopefully you will soon be able to do all seven activities. As the TV commercial says “JUST DO IT!!”

HOW does it happen?

Your long term care case manager will usually be the one to recommend the program to you, and ask if you are willing to try it.

He or she will then ask the community health workers who come regularly to help you, to teach you the activities that are a part of the SAIL Home Activity Program. You will be given a written copy of the seven activities with pictures and directions.

The community health workers will provide ongoing support and encouragement and reminders, because let’s face it, we all often find it hard to increase our physical activity.

Each activity has clear directions about when and how to make the activity more difficult as you get stronger.

Keeping Track:

It is very helpful to write down how many of each activity you do each day so that there is a record of your progress. You can see how much you have accomplished when it is written down. The SAIL Home Activity Program Tracking Record is provided for this purpose.

Client Stories:

“I look forward to my “exercise girl” coming each day. I can do more for myself now, and she gives me lots of encouragement.”

“I didn’t realize how much weaker one of my legs was until I tried doing the exercises. Now I am working hard to get that leg stronger.”

“I have been doing the exercises for 8 weeks, and now I am not as depressed, my knees don’t hurt so much, my blood sugars are better, and I have lost 6 pounds without even trying.”



Job Posting: Casual Part Time Medical Transportation

Heskw'en'scutxe Health Services Society is looking for a compassionate, responsible, and reliable person to join our team to fill the Casual Part Time Medical Transportation position.

Term: Casual Part Time Monday – Friday, Hours vary, some overnight stays Hourly wage: \$19.00

Location: We serve 2 locations, the communities of Siska Band and Cook's Ferry Band

Most travel is to Kamloops, Lytton, Lillooet, Merritt, Ashcroft, Kelowna, and Vancouver

It is critical drivers provide safe transportation, assist the passenger as needed and have compassion and understanding for the client. We are looking for someone who has the following qualities:

- Calm, mature and confidential
- Easygoing and personable
- Flexible, conscious of time constraints
- Empathetic

Responsibilities:

- Maintain strict Confidentiality
- Ensure safe and timely transportation of clients to their scheduled appointments or special events
- Pick up clients at designated locations, transport to their medical location and return
- Maintain secure handling of all documentation
- Assist passengers with special needs through provisions of physical escort or other needs
- Obey all BC highway traffic laws
- Encourage and assist client's doctors to sign Confirmation of Attendance Forms
- Report any needed maintenance of the medical transportation vehicles
- Clean medical transportation vehicles after each use as per BCCDC standards
- Other related duties as assigned by the Health Manager or designate

Credentials:

- Valid Class 5 Driver License and clean drivers abstract
- Clear Criminal Record Check
- First Aid/CPR certificate or be willing to take this training
-

We thank all applicants however only those selected for an interview will be contacted.

Please submit a cover letter and resume with work related references

to: Tina Draney: tina.draney@hssbc.ca

Heskw'en'scutxe Health Services Society
3691 Deer Lane, Box 188 Spences Bridge, BC V0K 2L0
Fax 250.458.2213
www.hssbc.ca

Closing Date: until filled

MEDICAL TRANSPORTATION GUIDELINES



At Heskwen'scutxe we work hard to provide services to the communities. Our Medical Transportation program continues to be an important service we offer to members. As of May 28, 2024, please see the updated guidelines below.

- Please book any appointment where you require our service five (5) days in advance.
- Please book appointments no later than 1:30-2:00pm if travelling to Kamloops or Merritt.
- As COVID-19 restrictions have been lifted, shared medical travel may be required.
- Always be kind and courteous to all the staff.

Thank you from the Health Manager and Heskwen'scutxe staff.

To book:

Cooks Ferry 250-458-2212

Siska 250-455-6601

MEDICAL TRANSPORTATION UPDATE



JUNE 2024 MEDICAL DRIVER UPDATE

Unfortunately, due to staff shortages for June, medical driving may be limited unless medical driving requests are received 5 days in advance.

We greatly apologize for this inconvenience. We are working hard on hiring medical drivers to accommodate staff shortages. We encourage clients to ask their health care providers to book telehealth appointments and our health center will assist you with those appointments.

Thank you from the Health Manager and Heskw'en'scutxe staff.

To book:

Cooks Ferry 250-458-2212

Siska 250-455-6601

History

Yellowhead Community Services Society (YCS), in partnership with Salvation Army and the Anglican Parish are pleased to announce the new Lytton Connection bus service.

With a generous donation of a bus and funding from Salvation Army and donation from the Anglican Parish and YCS we are able to launch this initiative to support Lytton and area residents access services in nearby communities.

This needed service was identified and supported by the Lytton Unmet Needs Committee. The service will operate on Wednesdays to Lillooet and Fridays to Ashcroft.

Please read the important information on the back of this brochure.



Lytton

Connector - Transit



2023/2024 Schedule Wednesdays & Fridays

For More Information Call:
Tel: 1.855.359.3935

Extreme Weather Conditions

Office & Route Closure

In the case of extreme weather conditions: If the school buses are not running, the local transit bus will not run either.

Closed All Stat Holidays



Operated by
Yellowhead Community
Services Society

Wednesdays To Lillooet

9:30 am Lv Lytton (Esso)
9:45 Lv Siska (Band Office)
9:55 Lv Skuppah (Band Office)
10:05 Lv Lytton (Esso)
10:20 Lv LFN (Band Office)
2 Stops: LFN & 2 Mile
11:10 Arrive Lillooet
Lillooet: Hospital, Medical Clinic, Buy Low
1:30 Lv Lillooet
2:20 Arrive LFN (Band Office)
2:40 Arrive Lytton (Esso)
2:45 Arrive Skuppah (Band Office)
2:55 Arrive Siska (Band Office)
3:05 Arrive Lytton (Esso)

Important Information

**One Way Fare is \$2.00
Or \$4.00 for round trip
(Please Have Exact Change)**

We would ask riders and residents to please be patient as we work through the development of this system to more accurately reflect community needs.

We also ask that you please limit your cargo to only what you may fit on your lap safely during transit.

Flag Stop: The bus will stop for passengers at a safe location where the bus can pull off of the main road safely. If you reside near a designated flag stop please phone to advise that you require pickup.

In the event that ridership exceeds capacity we may adopt a booking system for riders.

Fridays To Ashcroft

9:30 am Lv Lytton (Esso)
9:45 Lv Siska (Band Office)
9:55 Lv Skuppah (Band Office)
10:05 Lv Lytton (Esso)
10:20 Lv LFN (Band Office)
2 Stops: LFN & 2 Mile
NicoAmen: Flag Stop Only
Spences Bridge: Flag Stop Only
11:20 Arrive Ashcroft
Ashcroft: Hospital, Hub, Safety Mart
1:30 Lv Ashcroft
Spences Bridge: Flag Stop Only
NicoAmen: Flag Stop Only
2:30 Arrive LFN (Band Office)
2:50 Arrive Lytton (Esso)
2:55 Arrive Skuppah (Band Office)
3:05 Arrive Siska (Band Office)
3:15 Arrive Lytton (Esso)



IMPORTANT NOTICE

Medication can only be picked up if they are in blister packs.
Sorry for the inconvenience

This reminder follows our policy





IMPORTANT NOTICE

Please be advised that
Heskw'en'scutxe Health
Services is unable to
transport minors under the
age of 16 without a parent or
guardian

This reminder follows our policy



GREENSLEEVE PROJECT FOR INDIVIDUALS AND FAMILIES



What is a green sleeve?

A Greensleeve is a plastic folder that holds important documents regarding your health care wishes. It may contain your Advance Care Plan, MOST (medical orders), medication list, representation agreement and Advance directives and other health related forms.

Who should have a green sleeve?

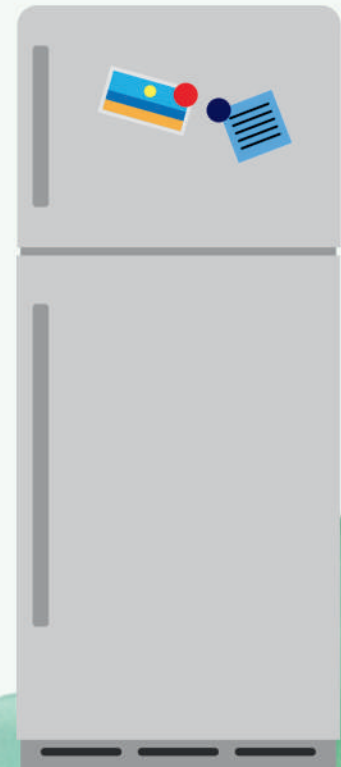
A Greensleeve can be made available to anyone who requests it. We are reaching out to all Community Elders and people with chronic diseases who may need medical care. However anyone living in community can have a sleeve if they like. You can reach out to us to book an appointment with Nurse Angie.

Angie will be in
Cooks Ferry on
Thursdays and Siska
on Fridays

The Greensleeve is best to keep on your fridge. Paramedics are trained to first look there for any advance care documents.



The Greensleeve should be taken with you to all clinics, hospital visits, and or emergency evacuations. Remember to bring it back home with you.



FNHA IS LOOKING FOR YOUR INPUT

Everyone is invited to join this group and provide input. Honoraria provided

Simply click on the link below to register

[https://interceptum.com/s/en/WICC_Advisory?](https://interceptum.com/s/en/WICC_Advisory?fbclid=IwZXh0bgNhZW0CMTEAAAR0TBM8fJdr6ak0Vis_Q2TwW4H9oz4e7vPpYzQxnFhh_pZn7xMFfE3ZxMyw_aem_ZmFrZWR1bW15MTZieXRlcw)

[fbclid=IwZXh0bgNhZW0CMTEAAAR0TBM8fJdr6ak0Vis_Q2TwW4H9oz4e7vPpYzQxnFhh_pZn7x](https://interceptum.com/s/en/WICC_Advisory?fbclid=IwZXh0bgNhZW0CMTEAAAR0TBM8fJdr6ak0Vis_Q2TwW4H9oz4e7vPpYzQxnFhh_pZn7xMFfE3ZxMyw_aem_ZmFrZWR1bW15MTZieXRlcw)

[MFfE3ZxMyw_aem_ZmFrZWR1bW15MTZieXRlcw](https://interceptum.com/s/en/WICC_Advisory?fbclid=IwZXh0bgNhZW0CMTEAAAR0TBM8fJdr6ak0Vis_Q2TwW4H9oz4e7vPpYzQxnFhh_pZn7xMFfE3ZxMyw_aem_ZmFrZWR1bW15MTZieXRlcw)

The Wholistic Integrated Continuum of Care (WICC) project team is looking for your support.

Are you passionate about community well-being and wholistic care?

Join the Indigenous Wellness Advisory Group!

This group will guide and lead transformation in Indigenous health services across BC focused on:



Transitions in /out of health care

What pathways will advance seamless transitions in care so people spend more time at home?



Family Caregiver Support

What does emotional, spiritual, mental, physical and financial support look like for caregivers?



Wholistic Wellness Services

What does wholistic wellness services closer to home mean to your community?

Starting Summer 2024

Monthly Virtual Meetings



Indigenous people of all ages



First Nations Health Authority

To join the Indigenous Wellness Advisory group or learn more about WICC, scan the QR code or email us at:



You can take advantage of our prescriptions by mail online service, which allows you to fill your new and refill prescriptions online from the convenience of your own home, 24 hours a day. Your prescriptions are then delivered right to your door, through free shipping, so that you get your medications in a timely, convenient and affordable manner.

If you have a new prescription, have your doctor fax or phone it in to the online mail order pharmacy. If your prescriptions are at another pharmacy, simply provide us with the pharmacy name and contact information and the prescription details and we will transfer them to our mail order pharmacy (even if it's another Costco Pharmacy) for processing and delivery.

Once your prescriptions are at our prescriptions by mail pharmacy location, refilling them is easy. Just login to your account and request to re-order your prescriptions. Once you've confirmed your order, we will ship your prescriptions from our pharmacy to the address you had chosen within 3-5 business days. We also make tracking your order easy! With every online order, you will receive a tracking number that will allow you to track your delivery.



World Breastfeeding Week August 1st-7th



Breast/chestfeeding is one of the most important health decisions a parent can make to support the nutrition, immunity, growth and development of their infants and toddlers.

Usually celebrated internationally each year in August, in Canada we celebrate World Breast/Chestfeeding Week from Oct. 1-7. October is the tenth month of the year and symbolizes the first week of a baby's life after nine months of pregnancy, when a baby would begin to breast/chestfeed.

Not only is breastmilk important for wellness, it is also the first traditional food and the first traditional food comes from parents who are the first teachers in life. Page 27 of the Parents as First Teachers resource booklet sums up why breast/chestfeeding is so important for bonding:

Newborns should be breastfed as soon as possible after birth. Your baby is born with the instinct to breastfeed. Holding your baby skin-to-skin helps with breastfeeding. Babies can smell their mother's breast milk and if left in skin-to-skin contact, will begin looking for your breast usually within an hour following birth. Holding your baby skin-to-skin also helps trigger the release of hormones (Oxytocin) which helps increase your milk supply and helps you bond with your baby.

Exclusive breast/chestfeeding is recommended for infants up to six months of age and to continue in conjunction with foods up to and beyond two years of age.

Here are some ways you can bond with your baby during breast/chestfeeding:

Skin-to-skin contact immediately after birth and as much as you like in the days and weeks following birth

Gaze into your baby's eyes

Talk and sing to your baby as they will be comforted by your voice

Remember the Breast/Chestfeeding Wellness Teachings:

W is for Wellness. Breastmilk is the first traditional food.

E is for Empowerment. Breast/chest feeding can be empowering.

L is for Learning to parent is a team effort. It takes a community to raise a child.

L is for Listening to the mother's needs and questions.

N is for No mother and baby left behind.

E is for Excellence, keeping both mother and baby strong.

S is for Support, both encouragement and practical support in breast/chest feeding.

S is for Sustainability. "Breastmilk flows through our ancestors and to our future generations."

Although we encourage and honour breast/chestfeeding, it's important to recognize that a parent may choose to—or be unable to—breast/chestfeed for a variety of reasons. Ultimately, it is the choice of the parent.

In community, there are community health nurses and community / family support / maternal child health staff who can support a family to have the respectful and relevant information they need in order to make an informed decision on how they would like to feed their baby. They can also support you if you need assistance with breast/chestfeeding. It is OK to ask for help.

Celebrate Breast/Chestfeeding Week!

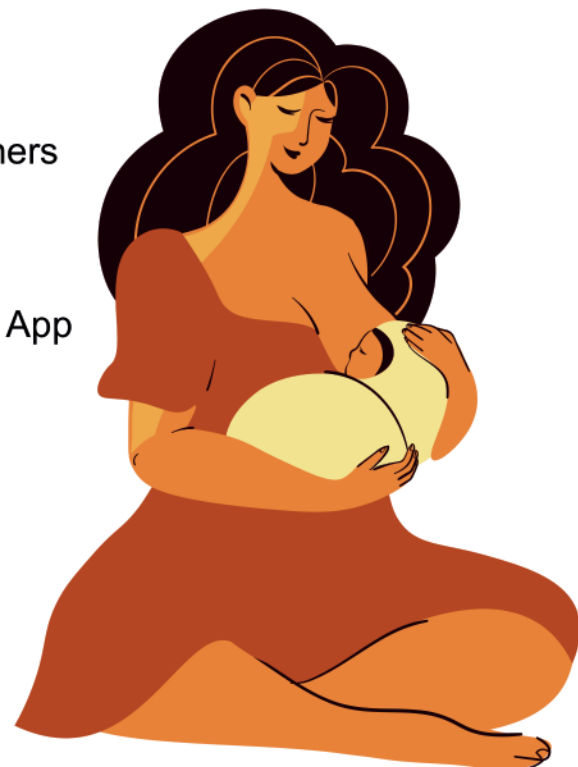
In honour of Canada's National Breastfeeding Week, the Provincial Health Services Authority, Perinatal Services BC and Providence Health Care are holding a webinar on Oct. 6 from noon to 1 p.m. The webinar is titled, From the first hour of life: Improving infant and young child feeding practices. You can register for the Zoom link [here](#).

Resources and Support

Do you have questions about breast/chestfeeding? The Maternity and Babies Advice Line provides services to expectant mothers and new parents, guardians or caregivers of babies in rural and remote First Nations communities in BC. Family members and healthcare providers can also receive support.

Shibogama First Nations Council: The Creator's Gift to Mothers
Breastfeeding Information for Parents: Indigenous Families
Perinatal Services BC: Breastfeeding My Baby one-pager
HealthLinkBC: Breastfeeding and the Breastfeeding Buddy App

World Breastfeeding Week
August 1st-7th

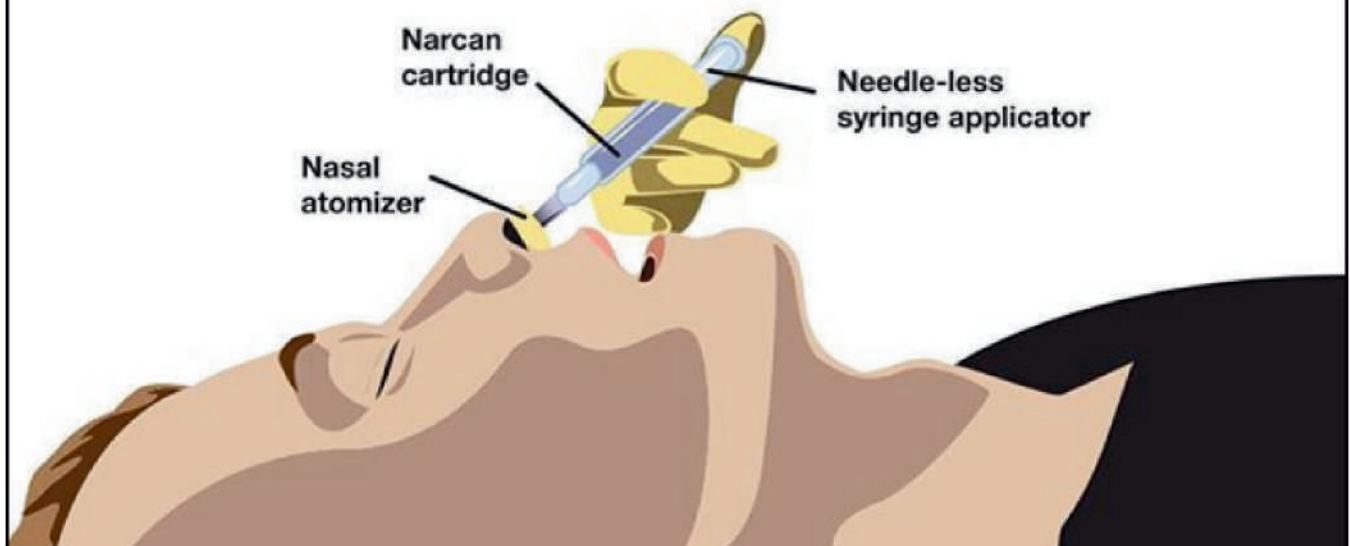


Naloxone (Narcan)

What Is It? Naloxone is a medication that can reverse an overdose that is caused by an opioid drug such as prescription pain medication or heroin.

How Does It Work?

When administered during an overdose, naloxone blocks the effects of opioids on the brain and restores breathing within two to eight minutes to prevent death.



Know How to Recognize an Opioid Overdose

Anyone using opioids, even in small amounts, can overdose.

Fentanyl and other dangerous substances are being mixed with or disguised as other drugs like heroin, oxycodone, cocaine and ecstasy/MDMA.

SIGNS OF AN OPIOID OVERDOSE



Blue or grey lips or nails



Dizziness and confusion



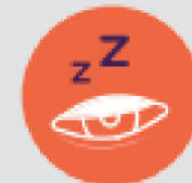
Can't be woken up



Choking, gurgling or snoring sounds



Slow, weak or no breathing



Drowsiness or difficulty staying awake

SUSPECT AN OVERDOSE?

CALL 911
or your local emergency number

Administer **NALOXONE** if you have it

STAY with the person until help arrives

Even if you have taken drugs or have drugs on you, the *Good Samaritan Drug Overdose Act* provides you some legal protection.

KNOW MORE

DRUGS: GET THE FACTS.
KNOW THE RISKS.

Together we can **#StopOverdoses**

Learn more at Canada.ca/Opioids



Health
Canada

Santé
Canada

Naloxone: Save a Life

What is naloxone?

Naloxone (pronounced na-LOX-own) is a fast-acting drug used to **temporarily reverse the effects of an opioid overdose**. Naloxone can restore breathing within **2 to 5 minutes**.

Why does naloxone work only temporarily?

Naloxone is active in the body for only **20 to 90 minutes**, but the effects of most opioids can last longer. This means that the **effects of naloxone are likely to wear off before the opioids are gone from the body**, which could cause breathing to stop again. Naloxone may need to be used again, depending on the amount, type or method of consumption of the opioids (e.g., oral, injection).

An **overdose is always an emergency**. Even if naloxone has been administered, **always call for help**.

TIP: If you or someone you know is using opioids, make sure to carry naloxone with you. It's available without a prescription and can be picked up at most pharmacies or local health authorities.

Is naloxone safe for everyone?

Yes, naloxone is **safe for all ages**. It works only if you have opioids in your system. It is safe to keep on-hand because it cannot be improperly used and does not create dependence.

How is naloxone helping to address Canada's opioid crisis?

Naloxone has been used to successfully reverse thousands of opioid overdoses across Canada. It is used by first-responders such as paramedics and firefighters. Take-home naloxone kits are also available to anyone who may be at risk of an overdose or who is likely to encounter one. Take-home naloxone kits are **available without a prescription** and can be picked up at **most pharmacies or local health authorities**.

In Canada, two types of take-home naloxone kits are available:



Naloxone Nasal Spray is sprayed directly into the nose where it is absorbed. It starts to take effect in 2 to 3 minutes.



Injectable Naloxone is injected into a muscle in your body: the upper arm, thigh or buttocks are best. It starts to take effect in 3 to 5 minutes.

Naloxone Saves Lives. Get a Kit.

- ✓ Naloxone temporarily reverses the effects of an opioid overdose to help restore breathing
- ✓ If you think someone is experiencing an opioid overdose, call 9-1-1 or your local emergency help line, then give naloxone by following the directions on the kit
- ✓ Take-home kits are available at most pharmacies or local health authorities; no prescription is needed
- ✓ Kits expire and should be replaced after 18 to 24 months

**KNOW
MORE**

DRUGS: GET THE FACTS.
KNOW THE RISKS.

ISBN 978-0-660-28934-2



Government
of Canada

Gouvernement
du Canada

Canada

Get the facts at Canada.ca/Opioids



First Nations Health Authority
Health through wellness

Safer Supply

Frequently Asked Questions

What is safer supply?

Safer supply is a harm reduction approach that refers to a regulated supply of substances and/or medications that do not have toxic and poisonous ingredients that are known to cause death and serious harms.

Harm reduction is an evidence-based approach that helps people stay safe while using substances. Without safer supply, substances are only accessible through the unregulated drug “street” market which is increasingly toxic and unpredictable¹.

Accessing safer supply can be challenging due to lack of availability, however, there are specific services to assist First Nations people to access it such as FNHA’s **First Nations Virtual Substance Use and Psychiatry Service** (FNvSUPS).

“I was surprised how the doctor that I talked to now to get my prescription, like, the amount of respect and everything I feel [from accessing prescribed safer supply via FNvSUPS]... He pretty much asked me what I wanted and why. And I told him I’d been having trouble with my family doctor... This [FNvSUPS] doctor, I actually feel heard and I haven’t felt that in a long time².”

- Indigenous Safer Supply Participant accessing prescribed safer supply through FNvSUPS

What is the difference between a regulated and unregulated supply?

Regulated supply: Doctor or nurse prescribed medications that reduce the risk of drug toxicity death due to accessing the unregulated (street) drug supply. A harm reduction approach is meant to reduce the risk of drug toxicity deaths and is not meant as treatment of substance use disorders¹.

Unregulated supply: Drugs of unknown quality and ingredients that are dangerous and potentially deadly for individuals using them due to the unknown nature of the substance.



Why is safer supply necessary?

In BC, seven people die every day because of the toxic drug supply⁴. First Nations people died at nearly six times the rate than other BC residents in 2022, and this gap has continually widened since the emergency was declared in 2016.

First Nations women are especially impacted dying at a rate of 11 times that of other female residents in BC, while First Nations men are dying at almost five times the rate of other male BC residents⁵. Individuals who use substances – whether daily, recreationally, or for the first time – are at risk of death and other harms when getting substances from the unregulated drug market with a toxic, unpredictable supply.

Providing safer, regulated substances may greatly reduce these harms. This is one approach to address the toxic drug public health emergency declared in 2016.

“The numbers do not tell the full story of the lives lost or the resulting impacts to the families, friends, communities and nations.”

- Dr. Nel Wieman, FNHA Acting Chief Medical Officer

What makes the unregulated “street” drug supply so toxic?

The unregulated drug supply is unpredictable because it has not undergone rigorous safety testing. Drugs sold on the streets are designed to make money, and street manufacturers may ‘cut corners’ or add fillers.

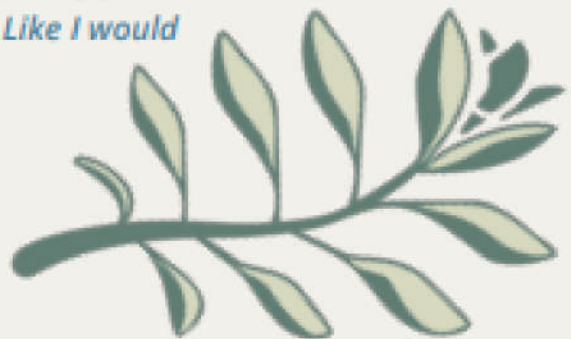
Over the past 10 years, drugs have increasingly had various substances and additives added to them (e.g., fentanyl, benzodiazepines, caffeine, ammonia) in order to maximize profits at the expense of thousands of lives in BC. Through testing and monitoring the unregulated drug market, we know that some of the people are being poisoned by various opioids, benzodiazepines “benzo dope” or “downers”, and Xylazine “Tranq dope” (see Glossary of Terms).

The impact of the drug toxicity over the last several years has had serious implications on the mental health and wellness of people who use substances – which can lead to increased substance use.

In addition to causing more harm, substances such as benzodiazepines makes reversing an overdose with Naloxone more difficult (Naloxone: a fast-acting antagonist used to temporarily reverse the effect of opioid overdoses⁶).

“I hardly overdose cause I’m on safe supply. M-Eslon helps me immensely – Like way, way a lot. Like I would probably be dead by now if I wasn’t on it.”

- Indigenous Safer Supply Participant



What safer supply is available in British Columbia?

Since March 2020, a form of “prescribed safer supply” has been implemented throughout the province. At the discretion of their doctor or nurse practitioner, individuals at risk of withdrawal and drug poisonings can be prescribed medications including, hydromorphone (Dilaudid aka dillies), sustained-release oral morphine (M-Eslon), stimulants (Ritalin, Dexedrine aka dexies), fentanyl-based medications (Fentora, fentanyl patch), and other medications on a restricted basis.

These prescriptions are usually covered by insurance and dispensed at a frequency determined through conversation with doctor and patient from a pharmacy or clinic.

As well as specific services, such as FNVSUPS that help First Nations people across British Columbia (BC) access prescribed safer supply, there are also community groups and co-ops, led by people with lived and living experience (PWLLE) that are organizing and navigating how to test drugs and get them to individuals safely.

Additionally, PWLLE are holding space for conversations and initiatives to support one another and educate communities.

“I have spent a lot of time on reserve when I’ve been on safe supply... and I’d like to see the doctors actually prescribe it on reserve as well. Because people are OD’ing on the reserves... and they don’t have that safer supply option there.”

- Indigenous Safer Supply Participant

“I noticed myself a lot happier when I was on safe supply. Because when a person uses street drugs, they’re using it obviously for a clear reason. And mine is all the grieving and loss and pretty much everything that made me upset in life. I used the street drugs just to numb that. [On safe supply] I started talking out more, I started reaching out more to people to talk to them. I noticed that I was somewhat able to laugh at some of the situations I was in.”

- Indigenous Safer Supply Participant



What can prescribed safer supply do?

- Reduce the number of toxic drug deaths by providing safer pharmaceutical alternatives of substances with known composition and strength
- Provide more options for people who use substances, including people who use substances occasionally or recreationally
- Bring stability to people who use substances by reducing stigma and fear through conversation and education
- Move away from criminalizing people who use substances by providing a safer, regulated, legal substances
- Potentially improve parenting/family relationships, participation in culture and ceremony, returning to home communities
- Improves wellness and quality of life by providing consistent access to regulated, non-toxic supply
- Allows people who use substances to continue improving their lives and seek opportunities to reconnect with their gifts

"It helps a lot being on this [prescribed safer supply] cause it got me from working on the street and putting myself in harm and being, you know? The way I don't wanna be."

- Indigenous Safer Supply Participant

Will safer supply stop the toxic drug crisis?

Safer supply is just one form of harm reduction and works with other harm reduction methods, such as decriminalization and destigmatizing substance use to tackle the toxic drug emergency in BC. Safer supply can be combined with other supports and wraparound care for people who use substances, including access to medications, treatment and wellness programs, by meeting people where they are at.

Is safer supply available without a prescription?

Non-prescribed safer supply is available at locations often referred to as "compassion clubs" and include the sale or provision of psychoactive substances such as injectable morphine, heroin/diacetylmorphine, cocaine, and others but these are only currently available to a very small number of clients in major urban centres like Vancouver and Victoria, are not covered by health benefits, and do not have open enrolment at this time.

What is diversion?

There has been a lot of attention focused on "diversion" of safer supply in the media. Some people have expressed fear that safer supply will be sold once an individual receives their dose so they can make money, and that concerns that youth and/or children will be able to access these diverted substances. There is no evidence that this is true. People who use substances are interested in safer supply because they know regulated substances are safer and more likely to keep them alive. Ideally, safer supply will be effective when individuals using substances are able to get the regulated drug that works best for them. This is achieved when prescribing doctors and people who use substances work together to find and truly implement solutions that are safe.

“There is no evidence that a prescribed safe supply of opioids is being diverted and causing increased harm and death – specifically among youth. We are focused on saving lives. We are focused on reducing harms.”

- Lisa Lapointe, British Columbia's Chief Coroner

“We aren't seeing any indication in our data in the stories we track that youth are using from diverted safe supply. The injuries and deaths reported to our office are coming as a result of youth accessing the illicit supply, and these youth are typically using a range of substances. Young people are struggling and the illicit supply is so poisoned that the risks of youth use, whether through experimentation, occasional or regular use, are extraordinarily high.”

- Dr. Jennifer Charlesworth, British Columbia's Representative for Children and Youth

Drug Checking Sites

Services by Health Authority: wellbeing.gov.bc.ca/substance-use/harm-reduction/drug-checking
Provincial Dashboard: drugcheckingbc.ca

Toxic Drug Terms Explained

Fentanyl: A synthetic (human-made) opioid that is much stronger than most other opioids, and can be prescribed by a physician doctor to help control severe pain. Fentanyl, along with even stronger versions like carfentanil and other version of fentanyl, is also being produced in unregulated labs and sold on the streets, often mixed with other drugs. This is very different than the fentanyl prescribed by a doctor. Increasingly, fentanyl is being detected in toxic drug supply deaths in BC⁷.

Benzodiazepines: Central nervous system depressants that are prescribed for anxiety and surgical procedures, and can also be manufactured in unregulated labs. They add to the effects of opioids, increasing the risk of related harms (including robbery and assault) and complicating reversal of an overdose⁸.

Xylazine: Approved for vet use in Canada, xylazine is used for large animals as an anesthetic and muscle relaxant. Xylazine sickness can feel and look the same as an opioid poisoning. Blood pressure, pulse, and breathing can go dangerously low. People can feel dizzy, they can “black out” for hours, and their breathing can slow down or stop. This can sometimes lead to a coma and death. People who have been taking xylazine for a while can also develop abscesses and skin infections⁹.

¹ Canadian Association of People who Use Drugs, #SAFESUPPLY Concept Document, CAPUD.CA

² All participant quotes are from the study findings from the provincial evaluation of safer supply, under peer-review. Contact brittany.barker@fnha.ca for more information

³ BCCSU, Prescribed Safer Supply, 2023

⁴ BC Coroners Service, March 2023

⁵ First Nations Health Authority, First Nations and the Toxic Drug Poisoning Crisis in BC, April 2023

⁶ Government of Canada, [canada.ca>services>opioids>naloxone](https://canada.ca/services/opioids/naloxone)

⁷ BCCDC Harm Reduction Services, towardtheheart.com, 2023

⁸ BCCDC Harm Reduction Services, towardtheheart.com, 2023

⁹ BCCDC Harm Reduction Services, towardtheheart.com, 2023



Emergency Care: CALL 911

Lillooet Hospital ER, 951 Murray Street
Open 24 hours

Lytton Primary Care Non Urgent

New Building across from TI'Kemtsin Health Centre
1540 Silo Road, Lytton
(250) 455-2221 | Fax (250) 455-6621
Monday to Friday: 9 a.m. to 4 p.m.

Ashcroft Urgent and Primary Care Centre

700 Ash-Cache Creek Hwy
(250) 453-2211 | Fax (250) 453-1921
Monday to Sunday: 8 a.m. - 8 p.m.

Provincial Resources

YOUTH [Foundry.ca](https://www.foundry.ca)
[Kelty Mental Health](https://www.keltymentalhealth.ca)

KIDS CRISIS LINE 1-800-668-6868

ADULT [BouncebackBC.ca](https://www.bouncebackbc.ca)

CRISIS LINE 1-833-456-4566 / text 45645

Hope for Wellness 1-855-242-3310
Domestic Violence 1-800-563-0808



First Nations Supports

TI'Kemtsin Health Centre (778) 254-2545

Lytton FNHA Health Centre (250) 455-2715
Monday to Friday 8 a.m. to 4 p.m.

First Nations Health Benefits 1-855-550-5454 or
www.fnha.ca for prescription refilling, medical supplies and equipment

Mental Health & Substance Use

Adult MHSU (250) 455-2221 ext 4
Child & Youth CYMH (250) 256-2710
Friendship Centre (250) 256-4146
Nlaka'pamux Health Services (250) 378-9772

811 Nurse

[FNHA Virtual Doctor of the Day: How it works](#)
1-855-344-3800

Mental Health Supports

[FNHA COVID-19 Mental Health and Cultural Supports](#) Opioid Agonist Treatment (250) 256-1585
FNHA Mental Wellness Inquiries 1-833-751-2525

Travel/Flood/Wildfire Info

[BCRFC Warnings](#) [Drive BC](#)
[FNHA Flood Safety](#) [Wildfire Status](#)
[Air Quality Advisory](#)

Lillooet Pharmacies & Services

PHARMASAVE (250) 256-4262
IDA (250) 256-7538
*Daily delivery now available to Lytton via Dynacare

Lab Services

Book lab appointments
1-844-870-4756
<https://www.labonlinebooking.ca>



Home & Community Care

Central Intake 1-800-707-8550
Lillooet (250) 256-1326
Ashcroft (250) 453-1939
Merritt (250) 378-3238

Interior Health

[MyHealthPortal](#)



Public Health

Lytton FNHA (250) 455-2715
Lillooet (250) 256-1314
Ashcroft (250) 453-1940
Merritt (250) 378-3400

COVID Testing & Vaccination Information

[IH COVID Vaccine](#)
1-800-833-2323



[FNHA COVID-19 Testing](#)
(250) 455-2715



[BC Centre for Disease Control](#)
(604) 707-2400



The booklet is available to read on our website or a paper copy can be picked up at the office.

A CELEBRATION WILL TAKE PLACE IN THE FALL 2024

HESKW'EN'SCUTXE HEALTH SERVICES SOCIETY

10 YEAR HEALTH PLAN



**Cook's Ferry
Indian Band**
Niaka'pamux Nation

RECIPE



STWEN SOUP

From the beginning, more than 50 kinds of fish from the ocean, lakes, ponds and rivers have nourished us, providing us with the strength and ability to survive and prosper in our traditional territories. Eating fish has always been an important part of our culture and nutrition.

Here is a recipe for making some delicious and nutritious Salmon Soup.

- 4 cups (1L) of water
- 1/4 lb. (125g) salmon roe
- 1 lb. (500g) fresh salmon, cubed
- 1/2 lb. (250g) potato, diced
- 1 stalk celery, diced
- 1 medium onion, diced
- salt and pepper to taste
- pinch of curry powder
- 1 bay leaf
- 1 tbs vegetable oil
- dry seaweed to garnish

In a large soup pot, saute onion, celery and potato in oil. Add water and bring to a simmer. Heat salmon roe in a small saucepan and add to soup stock. Add salmon, salt, pepper, curry powder and bay leaf. Bring to a boil. Simmer over low heat until potatoes are just tender. Discard bay leaf. Ladle into soup bowls and sprinkle with dry seaweed.

How to Field-dress a deer

Taken from "*All of our Food and Water is our Medicine*"

STEP 1: BE PREPARED

Before you leave to go hunting, make sure you have the following materials with you :

- Flashlights,
- Knives
- Whestone
- Game saw or axe
- Rope
- Tarp
- Disposable gloves
- Seal able bags
- Gun and bullets

STEP 2: GET ORGANIZED

A: Approaching a downed deer. The deer may not be dead, it may get up and run away. Cautiously approach a downed deer from the side away from its legs. Be ready to discharge a finishing shot with your firearm. However, some muscle contractions can be involuntary. Cut the throat of the deer to drain the blood. Also, cut the scent glands from the legs of the deer using a separate knife and disposable gloves to avoid contaminating the meat.

B: Unload. When you are sure the downed deer is dead, unload your firearm.

C: Move the deer to a nearby spot where you will be able to field dress the animal.

D: Hang something blaze orange on one of the nearby trees or above your head to avoid from getting shot by another hunter.

Step 3: MAKE AN INCISION FROM THE BREASTBONE DOWN TO (BUT THROUGH) THE ANUS OR VAGINA. DO NOT CUT SO DEEP THAT YOU SLICE THE INTERNAL ORGANS

A: Locate the sternum (breastbone). Insert your knife at the bottom of the sternum. Keep the blade edge pointing upward when making the first cut. (Although there are other methods to begin field-dressing, the initial incision is made at the breastbone to reduce the possibility of cutting the internal organs.)

B: Cut through the abdominal wall (not just the skin and hide).

keep the edge of the knife blade positioned upwards toward the hide (from the inside), not down towards the organs. Cutting upwards through the hide helps to prevent cutting the internal organs and aids in maintaining blade sharpness. Cutting downwards through the deer's hair quickly dulls a knife's edge. Insert your index (second) and middle fingers of your non-cutting hand into your original incision. Forming the shape of a "V" with these two fingers, gently pull up on the hide. Insert the blade into the incision between the two fingers, using simultaneously as a guide for your knife and a way to keep your knife blade away from internal organs while cutting. Continue cutting to the penis of a buck or to the udder of a doe.

C: Cut around both sides of the reproductive organs.

Be careful not to cut the bladder, which will be removed in a later step. For bucks, reach inside the body cavity and cut the base of the penis and testicles so they can be removed. For does, cut around both sides of the udder and remove it from the carcass.

D: Cut deeply in a circular motion around the anus of a buck and the anus and vagina of a doe.

The circle should be about two inches in diameter and your knife should be inserted about four inches deep, between the rectum and pelvis bone. DO NOT cut the rectum. Instead, pull it sideways in a circular motion, so you are cutting around the outside of it. If there are pellets or other fecal material present, you may want to tie the intestine in a knot above the rectum or use a piece of string to tie the rectum shut.

E: We do not recommend splitting the pelvis in the field.

Instead, push the tied-off rectal and reproductive tracts through the hole in the pelvis and toward the abdomen. Be careful that you DO NOT puncture or burst the bladder.

STEP 4: REMOVE THE BLADDER AND TRACT

The bladder is a pear-shaped translucent sac in the lower abdomen that may not be filled with urine. Be especially careful in handling the bladder so that urine does not spill and taint the meat. Pinch off the bladder with one hand then slowly cut it free and remove it with the other hand. Another method is to use a piece of string to tie and then cut the urinary duct about an inch beyond the base of the bladder. Once the bladder and urinary tract are free, place them some distance away from the carcass so that urine will not get on the meat.

STEP 5: ROLL THE INTERNAL ORGANS OUT OF THE ABDOMINAL CAVITY OF THE DEER.

The carcass can now be rolled onto its side so the entrails will roll out onto the ground. Some cutting will be necessary to free the organs from the back of the deer and to cut the esophagus and blood vessels near the diaphragm. The esophagus should be pinched or tied prior to cutting to prevent spilling stomach contents in the abdominal cavity.

STEP 6: RETURN TO THE UPPER PART OF THE DEER AND CUT THROUGH THE EDGE OF THE DIAPHRAGM, WHERE IT MEETS THE RIBS.

A: Cut the diaphragm away from the ribs on both sides of the deer.

B: Reach into the chest with your hands. With your fingers forward, follow the esophagus as far as you can. Cut through the windpipe and esophagus as far up as you can reach.

C: Pull the windpipe downward, while cutting any attachments from the back of the carcass. Roll the deer on its side to empty the heart and lungs from the chest cavity.

STEP 7: CLEAN THE BODY CAVITY

Roll the deer carcass all the way over so that the opening to the body cavity can drain. However, don't contaminate the meat with dirt and debris. After a few minutes, roll the deer over on its back and remove any debris. The use of snow or water for cleaning the inside of the cavity is not recommended in most cases. Rinse out the body with water or snow **ONLY** if the carcass has been tainted by contents of the digestive or urinary tracts. If this is done, dry the excess water in the cavity as quickly as possible.

STEP 8: REMOVE THE DEER FROM THE FIELD

A: Dragging a buck by pulling the antlers or a doe by pulling the front legs is acceptable only short drags. For moderate drags a rope may be used to tie the forelegs together and through the base of both antlers. For long drags, deer should be placed on plastic sled or taken out of the field on stretchers, poles. Some hunters have suffered heart attacks while dragging deer.

B: Don't forget the heart and liver. These are excellent cuts of meat that many hunters leave in the field. If you do not have a plastic bag to carry these organs, place them inside the chest cavity for transport while the carcass is being removed from the field.

C: Hang the deer in a shady area to help cool down the meat until you are ready to up the meat.



The Trip to the Moon

Told by Annie York

Translated by Manie Henry

At one time, many people lived at Nweyts [Nooaitch/Canford], where they would hunt mountain sheep. One day a man shot a mountain sheep, skinned it, and spread it out on wood to dry. He then built a fire, tied the skin together, and began to blow it up. He blew and blew. Suddenly, the skin exploded! It made such an explosion that the rocks were blown to pieces. That is why Nweyts is covered in shale today.

In the spring, the man decided to move to Nk'awmn [Nicomen]. He packed all his belongings and took his family to Nk'awmn, as there were lots of salmon at that place. The man had not forgotten what he had intended to do. So he tried to blow up another sheepskin. As he blew, he looked up at the sky and thought about the moon. 'Oh, there must be good land up there,' he thought to himself. The place where he was blowing up the sheepskin had a large, flat rock. Finally, he was able to blow up a sheepskin into a large basket. He made a lid for it. He wanted very much to be able to go to the moon and see what type of people were living there, so he packed some food, a pair of moccasins', and his rifle. 'I'm going out for a walk,' he told his wife. He then put his belongings in the air basket.

To get the air basket moving, he had to run alongside it and then jump into the it once it was airborne. Through the air he flew. Eventually, the air basket landed, and the man lifted the lid and peeked out. There were pit houses all around him and smoke was coming out of the top of each. He entered one, but he couldn't see anyone; all he could see were basket reeds moving, and he could hear women talking. Baskets lined the walls of the house. As he reached

over to pick one up, he was unable to stand up, and an old woman's voice said. 'Do not try to take one of those baskets or you will never be able to leave this place.' Quickly, the man left that pit-house and entered another.

He couldn't see anyone in this pit house either, although he could hear voices. Beautiful mats and blankets were around the walls of the pit house. He saw one mat that he was very fond of, so he began to take it down from the wall. Instantly, he was covered with mats, and again the voice said to him, 'Do not steal from us, as stealing is a bad thing to do. If you take that mat, you will never see your home again.' He hung the mats back on the wall.

The man entered another pithouse, where he saw lots of arrows, knives, stone hammers, and ammunition. There was also a packsack in this house, so he began to fill it with the various implements. All at once, everything fell on top of him and he received a black eye. 'Oh, these people are so mean to me!' he thought to himself as he lay on the floor.

'Never, never steal!' said the voice once again.

'Okay, I won't steal from you!' he replied.

Another person said to him, 'Now, you must do only what is right.'

He began to pick up the arrows and put them back in their place-but instantly, everything was back in its place.

The man left and travelled to where there was a little pit house with a small pile of wood outside. He looked down the smoke-hole and saw a small fire and an old couple huddled around it trying to keep warm. 'Come in,' they called to him. 'I suppose you are just travelling around?'

'Yes.' answered the man, 'I have always wondered about this place. Where I live, it shines down on us.'

The old woman then told the young man a story. 'This is a very large land,' she explained, 'In the center of the land there is a large mountain. A ship-shaped object stands on top of that peak. One day, a man just like you came to this land, and the people put a spell on him and changed him into a rock.' The old woman told the man to bring belongings into the house and stay with them. 'There is nothing else you to do, as you can no longer go home.'

The days went by and the young man provided for the old couple. He hunted and chopped wood for them. The old woman warned him to never visit the other people and, most important, never to steal from them. She explained that the people were invisible. The young did exactly as he was told. For two years, he hunted and cared of the old people while they busied themselves making twine. They made balls and balls of twine-he wondered what they needed it for.

One night, the old woman said to the young man, 'You are very lonesome for your family. Every night I hear you weeping.'

'Yes,' replied the man, 'I miss my children.'

'We are almost finished our task and then you can go home.' the old woman told him. After she said this, the man felt better and went about his chores.

'Early in the morning, you will have to leave! sobbed the old woman. 'When you are gone, we will be facing hard times again!' The old woman prepared a large meal and gave the man a sack of roots, berries, and meat to take back to his home. She also gave him a large pile of skins. In a sack, she gave him instructions for making baskets, tanning hides, and steaming roots. 'Give those the woman,' she told him. Then she gave him some instructions for teaching the men how to make arrowheads, how to dry salmon, and how to make snowshoes. 'We want you to teach the people everything that we have taught you.'

Suddenly the man felt sad about leaving the old people behind. They gave him a new, fancy air basket and packed up all his gifts. Once he climbed inside, the old woman gave the young man a stone hammer and told him to keep tapping the bottom of the basket. 'When you hear a solid noise, you will know that you have reached your world. First, will hit the sky and them some other things, but, eventually, you will reach the ground.' Just as she closed its lid, one of the old woman's tears rolled from her cheek and dropped into the basket.

The old people ran with the basket until it started to go. One end of the rope was tied to the man's waist and the other end was tied to the basket. 'Lower, lower, lower, lower,' he sung. The basket glided through the air.

The young man tapped the bottom of the basket when he reached the sky, but because it wasn't solid, he realized that he was not home on earth yet. He threw off the lid of the basket and looked around to discover that he was in Nk'awmn. He unloaded all the gifts that the old woman had given him. As he had to return the basket to the moon. He closed the lid and, as he did so, a tear dropped from his cheek into the basket. Then he ran with it and let it fly into the air. A voice spoke to him and said, 'You are crying too, just as we did when you left our land. From this day on, people will cry. And the world will cry, and the people will call it "rain".

It was springtime on earth. As he climbed up the path towards the houses, the people called to each other and asked who the stranger was. At first they thought it was an enemy, but his face wasn't painted. Then they recognized who it was, and the woman told her children to greet their father. It had been a long time since they had seen him, and the children didn't know the man until their mother told them who he was. The woman prepared a large meal and everyone ate. Then the man took out his gifts and showed them to his wife. 'We eat our food raw, but in the land where I was visiting, they cook their food. Here is some dried meat, and these roots are steamed.' Because the people had never used fire. When the fire was hot, he had to gather some jack-pine wood and some cottonwood and show them how to make a fire by rubbing two sticks together. A spark fell on the dry grass and he made a fire. When the fire was hot, he took out the birch bark basket that he had been given, filled it with water, and dropped a hot rock into it. Suddenly the water began to boil and the man cooked some meat. His wife stood over him and watched in amazement. He then rolled out a mat and put the cooked meat on top of it. After he had spread out the rest of the food, he told his wife to call together all the people. They were surprised with the gifts that the old people had given the man and listened eagerly as he explained to them how they were to be used. All the people learned what the man had been taught while he was on the moon.

One day, the young man gazed up at the moon and someone spoke to him. 'There is no one up there now,' said the voice, 'but some day, people will again go up there. They won't find it the same, for everything is gone.'

International Youth Day 2024
From Clicks to Progress: Youth Digital Pathways for Sustainable Development

Concept Note

In 1999, the United Nations General Assembly endorsed the recommendation by the World Conference of Ministers of Youth (Lisbon, 8-12 August 1998) that 12 August be declared International Youth Day (A/RES/54/120). Over the last two decades, the annual International Youth Day celebrations have covered a wide array of themes relevant to young people, from food security and mental health to intergenerational solidarity and green skills, highlighting critical connections between youth and sustainable development.

International Youth Day 2024 is themed “From Clicks to Progress: Youth Digital Pathways for Sustainable Development”.

1. Digital Transition and Sustainable Development Goals (SDGs)

The global landscape today is characterized by digital transition, with rapid changes reshaping our societies and daily lives. Acknowledging its crucial importance to sustainable development efforts, the UN Secretary-General in the Our Common Agenda report¹ emphasized the need to support individuals to navigate technological transitions, alongside demographic and climate changes.

Digital transformation stands as one of the six key transitions that have “catalytic and multiplier effects across the SDGs and an outsized determinant impact for achieving the Goals”, demonstrating its far-reaching and multidimensional impact on addressing pressing global challenges². Technologies such as mobile devices, digital platforms and services, and emerging innovations including artificial intelligence are instrumental in advancing the SDGs. Data, generated from every digital interaction, serves as an essential pillar for digital transformation, facilitating evidence-based decision-making. It is estimated that digital technologies and data contribute to at least 70% of the 169 SDG targets, bringing about a profound impact across their economic, social, and environmental dimensions³. Furthermore, research also shows that technology can significantly lower the cost of achieving the SDGs by up to USD 55 trillion⁴.

2. Youth as Digital Generations and Visionaries

Since the adoption of SDGs in 2015, global internet connectivity has seen remarkable growth, with over two-thirds of the global population using the internet in 2023, and mobile phone subscriptions reaching 8.63 billion in 2022⁵. Notably, internet access in the least developed countries increased from 7% of the population in 2015 to 36% in 2023, while connectivity in high-income and upper-middle-income countries reached 92% and 79%, respectively⁶.

¹ United Nations (2021) “[Our Common Agenda](#)”.

² United Nations Sustainable Development Groups (2023) “[Six Transitions: Investment Pathways to Deliver the SDGs](#)”.

³ International Telecommunication Union (ITU) & United Nations Development Programme (UNDP) (2023) “[SDG Digital Acceleration Agenda](#)”.

⁴ International Institute for Sustainable Development (2023) “[Force for Good Report Explores Role of Technology in Helping Reach SDGs](#)”.

⁵ United Nations Development Coordination Office (2023) “[Game-Changers: Wired for Good, Digital Connectivity for a Sustainable Future](#)”.

⁶ *ibid* (2023).

Amid this digitalization, young people have higher access to digital technologies compared to other demographic groups. Comparative analysis shows that worldwide, 75 percent, or three-quarters, of young people aged 15 to 24 used the internet in 2022, a rate 10 percent higher than the rest of the age groups⁷. On the other hand, the digital divide and inequalities persist especially in low-income countries, and in terms of gender; women have less access to the internet than men, globally (63 percent of women compared to 69 percent of men)⁸. Similarly, there is also a gap in digital skills acquisition; adolescent girls and young women tend to have limited digital skills compared to their male counterparts⁹.

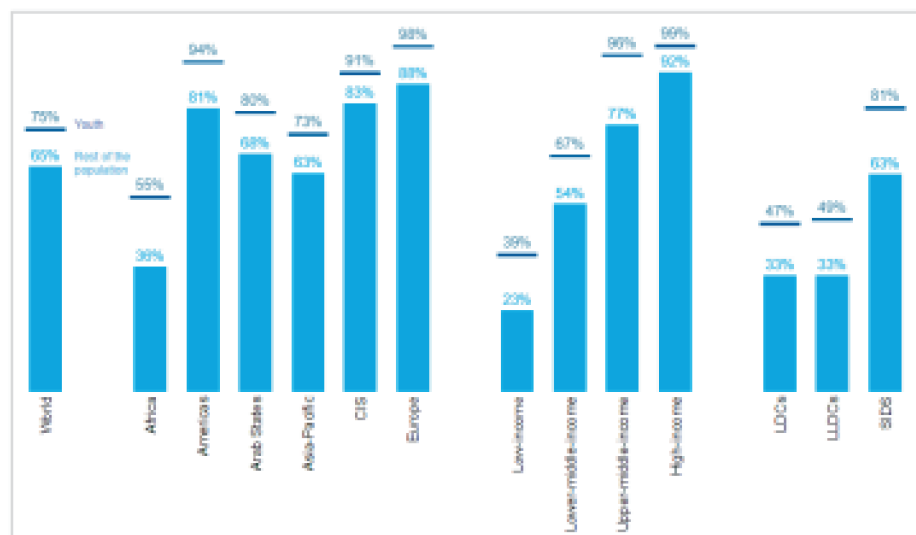


Figure 1 Percentage of individuals using the Internet by age group in 2022, data and graph from ITU (2024) "Facts and Figures 2022".

While these challenges draw attention to the urgent need to accelerate digital inclusion, young people are largely considered "digital natives" because of their age and early technology exposure¹⁰. Young people are at the forefront of adopting new technologies, forming the largest demographic of users and developers that shape digital trends globally¹¹. This positions them as the driving force behind digitalization and innovation, leading digital processes and data-driven future¹². As the 2030 deadline for the SDG approaches, youth remain an essential demographic group in leveraging the transformative power of technologies to address global challenges.

3. Objectives of International Youth Day 2024

The theme of International Youth Day 2024, "From Clicks to Progress: Youth Digital Pathways for Sustainable Development", highlights the key connection between digitalization and accelerating SDG progress, emphasizing the pivotal role of young people in this transformative process. Specifically, it aims to:

1. Explore the instrumental role of technologies and data in accelerating efforts towards achieving SDGs, including the role of young people in advancing digital transition.
2. Showcase diverse youth-led and focused digital solutions and innovations at the global and national levels that contribute to sustainable development.
3. Provide a knowledge base for stakeholders, such as youth, civil society, and national governments as well as relevant UN agencies, to access data and insights on the topic.

⁷ ITU (2024) "Facts and Figures 2022".

⁸ United Nations Development Coordination Office (2023) Ibid.

⁹ UNICEF (2023) "Bridging the Gender Digital Divide".

¹⁰ United Nations Department of Economic and Social Affairs (DESA) (2020) "World Youth Report 2020".

¹¹ ITU (2021) "Digital Youth: Empower, Engage and Participate", ITU News Magazine, No. 6.

¹² UN DESA (2020) "E-Government Survey 2020: Digital Government in the Decade of Action for Sustainable Development".

4. Synergies with Relevant Efforts

Beyond the mid-point of SDGs, global efforts are geared towards leveraging solutions. For example, the ECOSOC Youth Forum 2024 is themed “Youth Shaping Sustainable and Innovative Solutions: Reinforcing the 2030 Agenda and Eradicating Poverty in Times of Crises”. Similarly, the High-Level Political Forum (HLPF) 2024 focuses on “Reinforcing the 2030 Agenda and Eradicating Poverty in Times of Multiple Crises: The Effective Delivery of Sustainable, Resilient, and Innovative Solutions”. Echoing these efforts, International Youth Day 2024 amplifies the digital dimension of solutions to accelerate SDG progress while highlighting the role of youth in these processes.

5. Key Components of International Youth Day 2024

- **Case Study Infographics:** A collection of digital solutions and innovative initiatives aimed at accelerating SDG implementation will be showcased through engaging infographics, launching on International Youth Day, 12 August 2024.
- **Interactive Online Quizzes:** Learning tools designed to enhance understanding of how digital technologies contribute to advancing the SDGs.
- **Short Videos:** These will highlight examples of digital solutions, particularly those led by or focusing on youth.
- **Social Media Toolkit:** Created to amplify the message of International Youth Day and its 2024 theme, this toolkit will include key messages, data, and insights. It will provide visual assets for download, encouraging individuals to celebrate the day within their communities and roles.
- **Outcome Document:** To capture and synthesize the key insights explored during International Youth Day. To be developed after International Youth Day.

What is positioned at the core of International Youth Day 2024 is to encourage digital engagement among individuals and stakeholders, reinforcing this year’s theme. The abovementioned components are outlined to achieve the overall objectives of International Youth Day while highlighting the relevance of digital tools and processes in itself.

DESA will work on the planning and production of these components in collaboration with partners. The infographics, serving as key knowledge products, will be designed based on data collected with the partners and launched on International Youth Day to officially mark and commemorate the Day. All components will be developed and disseminated through DESA/UN communication channels and those of partners, as appropriate, in a phased approach to build digital momentum and awareness towards the Day, except for the Outcome Document which will be designed following International Youth Day. A communication plan will be developed to coordinate effective outreach strategies.

6. Partnership

For International Youth Day 2024, DESA partners with the International Telecommunication Union (ITU), UN-Habitat, and UN Internet Governance Forum (IGF). ITU led the SDG Digital Acceleration Agenda¹³, an initiative launched in 2023 aimed at exploring how digital technologies can accelerate progress towards the SDGs. DESA also collaborates with the UN-Habitat, the rotating Co-Chair of the UN Inter-Agency Network on Youth Development (IANYD), and the IGF to leverage the expertise and knowledge of IANYD members, relevant networks, and key stakeholders.

¹³ ITU & UNDP (2023) “[SDG Digital Acceleration Agenda](#)”.



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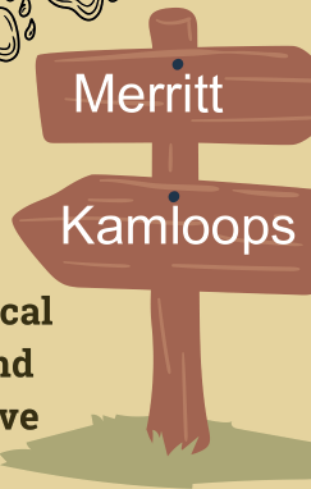
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Deadline for contest entries will be August 19 at 4:00 p.m.

Send to: admin@hhssbc.ca
or christy.whittaker@hhssbc.ca



**Good luck everyone and we
cannot wait to see your entries!**





Culture Camp 2024

July 15-19

Pasulko Lake



A couple of pictures with youth enjoying the activities at the gathering



HIKING

PICNIC AREA

BONFIRE

TRAILS

SHOWERS

Thank you Corynn Reveley

