

**THE YEARLY INVOICE LETTER
IS ON pg. 3 OF THIS ISSUE FOR
OFFICES/GROUPS CONSIDERATION**



IN ANSWER TO YOUR QUESTIONS:

Dear Elders and Elders Support People,

There are **NO UPDATES** available at this time for next years' Annual Elders Gathering.

The 31st Annual Elders Gathering is being hosted by the Squamish Nation, however an information package with the place and dates for the event has not been released at this time.

As you all know, the Gathering is a huge responsibility and each new host needs to plan the event properly by taking many factors into consideration and that takes time.

Please be patient... I understand the excitement, but often times there is no information package available until sometime in the New Year.

Rest assured that as soon as the Host's information is ready it will be featured on page 24 of the Elders Voice in the *Annual BC Elders Gathering Info Corner* and on your website www.bcelders.com.

All my Relations,
Donna Stirling, BCECCS Coordinator

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Easy Bakers Corner – Oregon Apple Pie - Easy and Tasty

Arrange 4 large (sliced) apples in an even layer in a lightly greased pie plate. Sprinkle with 2 tablespoons of granulated sugar, and 2 tsp. of cinnamon.

For the topping, combine 6 oz. of cooled melted butter, 1 cup of brown sugar, 1 cup of chopped pecans, and 1 cup of all-purpose flour in a bowl. Add 2 beaten eggs to the mixture, mixing to blend well.

Spread topping evenly over sliced apples. Bake pie at 350°F for about 35 minutes or until apples are soft and the topping is lightly brown.

Sprinkle with powdered sugar and chopped pecans (or hazelnuts or walnuts), if desired.

Good served with vanilla ice cream or whipped cream or plain yogurt.

Handy Tips

Flexible Vacuum: To get something out of a heat register or under the fridge add an empty paper towel roll or empty gift wrap roll to your vacuum. It can be bent or flattened to get in narrow openings.

Goodbye Fruit Flies: To get rid of pesky fruit flies, take a small glass fill it 1/2" with Apple Cider Vinegar and 2 drops of dishwashing liquid, mix well. You will find those flies drawn to the cup and gone forever!

What Can you please share?

The following is a short list of Elders suggestions of what might be shared: Your local Newsletters/Upcoming Local Events/Prayers/Poems/Quotes/Comments/Photo's/Storytelling/Drawings/Articles of Interest/Native Songs Lyrics/Wellness Seminars/Obituaries/Birthday Wishes, etc. **Articles/Submissions are best forwarded to me via email** where possible so they can be posted on the website as is. If you are interested in providing articles, please do, I look forward to hearing from anyone who wants to contribute to the content. D. Stirling

'PRESERVING THE PAST'

New Elder's Website: www.bcelders.com

The *First Ever* Elder's Website "Preserving the Past" is now online (Sept. 2002). Registration forms, booth forms, maps of the host territory, accommodation information, etc. concerning the Annual Elders Gatherings are available each year on the BC Elders Communication Center Society's web site www.bcelders.com as soon as they are made available from each new host community.

Issues of your Elders Voice Newsletter are also posted on the website each month though all issues still continue to be mailed out to your Elder's Contact People throughout the province (to ensure that no one is left out because of a lack of access to the internet).

Comments? Please feel free to call in to the Communication Center - contact info is on the back page

Disclaimer:

Health articles, etc. are provided as a courtesy and neither the BC Elders Communication Center Society's Board/Members or anyone working on its behalf mean this information to be used to replace your doctor's and other professional's advice. You should contact your family physician or health care worker for all health care matters. Information is provided in the Elders Voice for your reference only. And opinions contained in this publication are not those of Donna Stirling, Coordinator unless her name appears below the material.



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ATTENTION: FIRST NATIONS LEADERS

Re: YEARLY INVOICE

Dear First Nations Leaders, Elders Representatives/Workers, Boards of Directors,

Please take note that the yearly invoices due Dec. 01 will be coming out this week so that offices have adequate time to process the request for help.

Some groups in very isolated areas raise the money to pay this fee from small fundraisers which they conduct in addition to their fundraising to *hopefully* be able to attend the Annual Gathering. I understand and am thankful for these and all fees as I know that times are tough and that the added burden of the \$250 support fee takes time and effort to come up with to help things out here.

For those offices that have the resources to pay this support fee without too much of a pinch, I ask that you do so, as this will help cover costs for those groups that cannot help out financially. In life, especially in our communities, I think that that is what we do on a daily basis to help out anyway. We are a generous People and I hope that everyone can help show the government that we put our elders first, as more often than not over the last 7 years they have made it quite clear that they cannot help out with this elders work.

\$250 a year might seem like a lot of money, if you look at it as a subscription to say TV Guide, but I would appreciate it if everyone could remember that this fee has been waived for any group that it has presented a problem for all these years, even when it meant that I was unable to pay myself for almost 6 of those years.

I started this Elders office at the request of Coordinator at the Gathering in 2000 because they wanted the communications gap between the elders and the rest of the world closed and I believe that that is what I have put in place with the Elders Voice, website, email and toll-free number here for the elders to reach me when they need information, etc. As most of you know I do this work here alone except for my 2 children's help each month, so if you could please look at the fee as *a support fee* (at about \$.68 cents a day) rather than a membership or subscription fee that would be great.

I did what I was asked for the elders and if this letter sounds a bit more strongly worded than I would normally use, it is for the simple fact that I believe that after **7th year** of this Provincial Elders Office/Elders Voice operating it shouldn't be fighting for the crumbs under the tables of government or under the tables of some of our own FN offices for support.

I implore everyone to please work together to help make the 'Paid Fees List' for this *ELDERS* office reach where it needs to be so that these efforts need not struggle any longer.

Your help and efforts to help this office over the years are so very much appreciated.

Gilakasla,

Donna Stirling,

Compaigni V'ni Dansi

311 – 1529 3rd Avenue East
Vancouver BC V5N 1G8
604.877.2204

Compaigni V'ni Dansi and The Norman Rothstein Theatre proudly present

The Crossing

A Métis Dance Trilogy Celebrating Louis Riel Day

at The Norman Rothstein Theatre in the Jewish Community Centre Of Greater Vancouver
950 West 41st Avenue (at Oak St.) Vancouver, BC
November 16, 2006
8 pm

Tickets \$20 & \$18 (Students, Elders, Seniors, BC Métis Nation and Jewish Community Centre members)
Tickets available in advance: 604.257.5111 and at the door

*"My people will sleep for one hundred years and
when they awaken, it will be the artists that will bring
their spirit back to the people..."*

Louis Riel

FOR IMMEDIATE RELEASE (October 23, 2006) Join Compaigni V'ni Dansi as we celebrate Louis Riel Day with the world premiere of *The Crossing*, a dance trilogy conceived by Artistic Director, Yvonne Chartrand, which depicts the years of the Métis Resistance from the hearts of the Métis people. Written and directed by noted author and inductee to the Saskatchewan Theatre Hall of Fame, Maria Campbell, *The Crossing* will be performed in one show only in Vancouver on November 16, 2006, 8 p.m.. *The Crossing* is co-presented with The Norman Rothstein Theatre.

The Crossing is a trilogy of dance works, which illustrates the spirit of the Métis people aspiring to keep their culture alive. Choreographed by Yvonne Chartrand and Ania Storoszczuk, *The Crossing* is brought to life with performances by Luis G. Canton, Yvonne Chartrand, Mario Cornejo, Jill Henis, Natasha Lutz and Ryan Richard.

The Crossing will also be co-presented with the Saskatchewan Native Theatre Company at the **Ukrainian Orthodox Auditorium in Saskatoon, Saskatchewan, on November 9 and 10, 2006**. For showtimes and more information, please call Saskatchewan Native Theatre Company at 1.306.933.2262.

Compaigni V'ni Dansi is a Métis traditional and contemporary dance company founded by Yvonne Chartrand in 2000. 'V'ni dansi' is Michif-French meaning 'come and dance'. The company is dedicated to preserve, promote, and perform the traditional Métis dances and to tell our Native stories through dance. The company also includes a traditional Métis dance group, the Louis Riel Métis Dancers.

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Generously supported by:



Canada Council
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Conseil des Arts
du Canada



1000 Saturdays ...

The older I get, the more I enjoy Saturday mornings. Perhaps it's the quiet solitude that comes with being the first to rise, or maybe it's the unbounded joy of not having to be at work. Either way, the first few hours of a Saturday morning are most enjoyable.

A few weeks ago, I was shuffling toward the kitchen with a steaming cup of coffee in one hand and the morning paper in the other. What began as a typical Saturday morning turned into one of those lessons that life seems to hand you from time to time. Let me tell you about it.

I turned the volume up on my radio in order to listen to a Saturday morning talk show. I heard an older sounding chap with a golden voice. You know the kind, he sounded like he should be in the broadcasting business himself.

He was talking about "a thousand marbles" to someone named "Tom." I was intrigued and sat down to listen to what he had to say. "Well, Tom, it sure sounds like you're busy with your job. I'm sure they pay you well but it's a shame you have to be away from home and your Family so much. Hard to believe a young fellow should have to work sixty or seventy hours a week to make ends meet. Too bad you missed your daughter's dance recital."

He continued, "Let me tell you something Tom, something that has helped me keep a good perspective on my own priorities." And that's when he began to explain his theory of a "thousand marbles." "You see, I sat down one day and did a little arithmetic. The average person lives about seventy-five years. I know, some live more and some live less, but on average, folks live about seventy-five years."

"Now then, I multiplied 75 times 52 and I came up with 3900, which is the number of Saturdays that the average person has in their entire lifetime. Now stick with me Tom, I'm getting to the important part." "It took me until I was fifty-five years old to think about all this in any detail," he went on, "and by that time I had lived through over twenty-eight hundred Saturdays. I got to thinking that if I lived to be seventy-five, I only had about a thousand of them left to enjoy."

"So I went to a toy store and bought every single marble they had. I ended up having to visit three toy stores to roundup 1000 marbles. I took them home and put them inside of a large, clear plastic container right here in my workshop next to the radio. Every Saturday since then, I have taken one marble out and thrown it away." "I found that by watching the marbles diminish, I focused more on the really important things in life. There is nothing like watching your time here on this earth run out to help get your priorities straight."

"Now let me tell you one last thing before I sign-off with you and take my lovely wife out for breakfast. This morning, I took the very last marble out of the container. I figure if I make it until next Saturday then God has blessed me with a little extra time to be with my loved ones....."

"It was nice to talk to you Tom, I hope you spend more time with your loved ones, and I hope to meet you again someday. Have a good morning!"

You could have heard a pin drop when he finished. Even the show's moderator didn't have anything to say for a few moments. I guess he gave us all a lot to think about. I had planned to do some work that morning, then go to the gym. Instead, I went upstairs and woke my wife up with a kiss. "C'mon honey, I'm taking you and the kids to breakfast."

"What brought this on?" she asked with a smile. "Oh, nothing special," I said. "It has just been a long time since we spent a Saturday together with the kids. Hey, can we stop at a toy store while we're out? I need to buy some marbles."

HAVE A GREAT WEEKEND AND MAY ALL SATURDAYS BE SPECIAL AND MAY YOU HAVE MANY HAPPY YEARS AFTER YOU LOSE ALL YOUR MARBLES.

Too much information? HPV vaccine a new challenge for parents

August 28th 2006

Provided by: Canadian Press

Written by: MARTHA IRVINE

GRIFFITH, Ind. (AP) - What they thought would be a routine physical for her volleyball team found 14-year-old Amanda Zaborowski and her mom facing a big question: Did they want Amanda to get a new vaccine that would protect her against the common and serious sexually transmitted disease HPV, or human papilloma virus?

The vaccine, Amanda's doctor told them, could prevent potentially deadly cervical cancer. He also explained that the three-dose inoculation would work best if she had it well before becoming sexually active.

This was a doctor that her mom, Linda Zaborowski, had trusted since Amanda was a child. She thought the vaccine sounded like a good idea. But she ultimately wanted her daughter to make the decision.

"If you think this is right for me, you know what's best," the high school freshman told her mom and doctor. "I'll do it."

HPV is a weighty topic that more parents are addressing with their daughters, since Canadian and American health officials recently approved the vaccine for girls as young as age nine. Some parents, particularly those with preteen girls, are wondering just how much information to share.

Do they simply say it's a vaccine against cancer and leave it at that? Or should they also explain that HPV is a sexually transmitted disease that, among other symptoms, causes genital warts?

Linda Zaborowski says it was clear that she needed to give Amanda, her eldest daughter, more information than less.

"When I was young, my mom said, 'Here's a book.' That's how we learned about sex," says Zaborowski, who is a cafeteria bookkeeper and recess aide at her children's schools in Griffith, Ind., a suburban town near Chicago. "But it's not like that now."

She started to realize that when she sat in on Amanda's fourth-grade lesson on reproductive anatomy a few years ago and discovered that some girls were already menstruating.

Government surveys also have found that about seven per cent of children have had sexual intercourse before age 13, while about a quarter have done so by age 15. And while teen pregnancy rates have steadily dropped since the early 1990s, millions of teens and young adults are contracting sexually transmitted diseases - HPV among the most common.

Researchers at the U.S. Centers for Disease Control estimate that more than six million Americans - many of them teens and young adults - get a new infection of HPV each year.

Theresa Rohr-Kirchgraber, an adolescent and internal medicine specialist at the Emory University School of Medicine in Atlanta, says parents need to take those statistics seriously when deciding how to address the HPV vaccine.

"Cervical cancer is real. Sex is real - and even though we believe our kid is different and will never have sex until they are married, it is not reality," Rohr-Kirchgraber says.

During medical visits with girls and their parents, she discusses HPV along with routine vaccines for meningitis, as well as the DTaP shot for diphtheria, tetanus and pertussis (also known as whooping cough).

"When you just put it on the list and make it one of the many they need, it becomes less of an obstacle," she says.

Dr. Kenneth Alexander, an associate professor of pediatrics and an infectious diseases expert at the University of Chicago's Comer Children's Hospital, also is a proponent of fully explaining the HPV vaccine to teens.

"Parents only want to talk about cancer prevention. When they talk about STDs, they get pretty uptight," he says. "Teenagers are often more savvy. They're willing to talk about the two issues together."

Alexander has had frank discussions with his own daughters, ages 14 and 17, about the consequences of HPV.

"You can get three doses of the vaccine," he tells them. Or, he says, they might eventually have to deal with a colposcopy - close examination of abnormal cells in the cervix that can be caused by HPV and that often require a biopsy. He also explains various treatments for cervical cancer.

"It's your body," he tells his daughters. "The decision is yours." Alexander and others concede, however, that deciding how much to tell preteens is trickier, even for parents who feel like they have good communication with their children.

Karen Hales, mother of an 11-year-old girl in Slidell, La., is one of those.

"She's a pretty aware child and asks a lot of questions," Hales says of discussions she and her daughter have had about sex. "It's never been that sit-down talk that you dread. It's kind of been natural."

Even so, while she plans to have her daughter vaccinated for HPV this fall as she enters Grade 7, she's still wondering how to broach the subject. Most likely, she says, she'll handle the part about cancer prevention. "And our pediatrician will manage the rest with me in room," she says.

Doctors say parents often think their daughters don't need the vaccine because they're not sexually active. While he wholeheartedly encourages abstinence, Alexander reminds parents that the vaccine is a preventive measure that should be given early - so even if teens aren't sexually active now, the inoculations guard against future problems.

"It's a little bit like putting money in the college fund. You don't put money in the bank when they're already in college," says Alexander, who also believes the HPV series of shots is "the most important vaccine to come along since the measles vaccine, in terms of the misery it will prevent."

Susan Rosenthal, a pediatric psychologist at the University of Texas Medical Branch at Galveston, says several surveys have found that parents' most frequent concerns are with the seriousness of the illness and whether the vaccine works. "They're much less concerned how the infection is transmitted," she says.

But, Rosenthal believes, parents should still explain how genital HPV is contracted. To that end, she favours the so-called "apprenticeship model," encouraging parents to let teens make increasingly independent decisions about their health as they get older.

"You meet the kid where they are in terms of what information they're ready for," Rosenthal says. Deciding whether to fully explain the HPV vaccine to an 11-or 12-year-old girl, for instance, may depend on whether she is menstruating or showing other signs of puberty.

Rosenthal says a parent might begin by saying, "This is a vaccine for a disease that you can get in your vagina or your cervix. If you get it, it can cause warts and sometimes it can cause cancer."

"If they ask, 'How does it get to your vagina?' then you explain that," Rosenthal adds. "It's a great time to talk about sexuality - to demystify the Pap smear and talk about reproductive health."

Back in Indiana, Amanda Zaborowski is getting set for the second of three shots this fall and has been telling her friends about HPV and the vaccine.

"Most of them have never heard of it," she says. She and her mom hope parents and teachers will help them learn more. "If you inform them," her mom says, "they understand the consequences."

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The human papilloma virus, or HPV, is a common infection - with dozens of different types that cause everything from harmless warts on the skin to genital warts and cervical cancer. With federal estimates that more than six million Americans get a new infection of HPV each year, many medical professionals consider the new vaccine a significant breakthrough.

Made by Merck & Co. and marketed under the name Gardasil, the vaccine is given in three shots over a six-month period. The shots specifically protect against four types of sexually transmitted HPV, known as numbers 6, 11, 16 and 18.

Types 16 and 18 cause about 70 per cent of the cases of cervical cancer. There are vaccines in the works that would guard against the HPV types that cause the remaining cervical cancer cases.

HPV types 6 and 11 are considered lower risk and cause genital warts and lower-grade cervical abnormalities.

Earlier this year, health officials in Canada and the United States approved the vaccine for use in girls and women aged nine to 26. To facilitate its distribution, the Advisory Committee on Immunization Practices, an influential U.S. government advisory board, has further recommended that the vaccine be given to 11- and 12-year-old girls when they also receive vaccines for such illnesses as meningitis and whooping cough.

Experts emphasize that the vaccine is purely preventive. In other words, it does not cure an existing HPV infection, but can prevent future infections. That's one reason it is recommended that girls get the vaccine before they are sexually active.

Researchers are still determining whether it would be beneficial and cost-effective to give the vaccine to boys.

Schools need to give teens a chance to talk about AIDS, activists say

Sept. 2, 2006

Provided by: Canadian Press

Written by: MICHAEL HAMMOND

OTTAWA (CP) - Canadian teens still have some shocking misconceptions about AIDS, but activists say schools can help students teach themselves in the classroom with a little guidance.

Some teens still think the disease is only a concern for gay men, says 17-year-old Toronto resident Emily Cordeaux. Others, she notes, think there will be a cure in their lifetime, which lulls them into a false sense of security.

Cordeaux, a member of a Foster Parents Plan youth council, says schools teach the basics about AIDS in Grade 9 sex education classes, but teens learn much more by talking among themselves.

When schools organize group discussions, many of the misconceptions are cleared up, she says.

"Given the opportunity, Canadian youth do care," she says.

Cordeaux was one of 1,000 youth delegates who took part in the International AIDS Conference in Toronto in August. As a member of the foster plan's Canada Youth Advisory Council, she has also travelled to schools giving speeches and moderating discussions.

The classroom opportunities are much more helpful in drawing attention to the AIDS crisis than the sex education offered by schools, she says. It is through these discussions that teens can learn how much of a threat AIDS poses to them.

"It makes sense that people still think it's something affecting the developing world," she says.

Cordeaux is quick to point out that 58,000 Canadians live with HIV-AIDS.

Experts say teens are often more likely to take the problem more seriously if they have some sort of personal connection to the epidemic.

Teens also tend to take a keen interest in the AIDS issue when people speak to them in their own language.

That's what motivates Jason Rochester, a.k.a. Juice. The 23-year-old Toronto rapper says the constant negativity of young people in the tough downtown neighbourhood where he grew up inspired him to send out a positive message through his music.

Juice has toured schools and First Nations reserves across Canada as part of the 411 Initiative for Change, a group that uses musicians and the arts to educate youth on social issues.

He says he's amazed that teens have responded so well to his presentations. They're eager to ask questions and become informed about AIDS.

"When I think of the topics they were talking about and fact that they were listening, it felt like we're making a difference," he says.

Juice has taken this type of approach to his music, filling his songs with a positive vibe instead of rapping about superficial topics.

His song Priceless, which he says is a response to misogynistic attitudes in rap, takes aim at immature sexual attitudes with lyrics like, "You gotta take they hand. Show 'em the blueprints like they a part of your plan. Listen man, that undercover brother never lied. For every strong brother, there's a woman by his side."

He says he's happy to use his celebrity to help the AIDS awareness cause. The frank discussions his appearances have spawned have helped to clear up misconceptions teens have - as well as a few he had.

"Some of them still talk about (getting AIDS via) shaking hands and saliva," he says. "They still don't know about how to contract the disease. I'm learning too. We're all learning."

Kids in B.C. government care have higher death rates than other kids: report

Sept. 20, 2006

Provided by: Canadian Press

Written by: DIRK MEISSNER

VICTORIA (CP) - Children in B.C. government care have the same hopes, dreams and aspirations as other kids, but they have much greater hurdles to reaching them, says a report prepared for the province's children watchdog.

They have higher death rates, higher physical and mental illness rates and higher teen pregnancy rates, says the report by Jane Morley, B.C.'s child and youth officer, and Dr. Perry Kendall, the provincial officer of health.

"Many children in care have the resilience to overcome the obstacles they face," says the report released Wednesday. "However, children in care are known to have generally poorer outcomes than children in the general population."

The Morley-Kendall report examined health data for children in government care between 1986 and 2005 and found the results concerning.

It found that kids who end up in government care are more likely than kids in general to have come from socially or economically challenging backgrounds that may have included abuse, neglect or a serious medical condition.

Mental disorders aren't common for kids in the general population, but they are experienced by about 65 per cent of children in ongoing government care - four times the rate for children who have never been in care.

Children in care were prescribed more medication more often and for longer periods of time. For example, they were prescribed Ritalin-type medications up to 12 times more often than children who had never been in care.

If kids in government care ended up in hospital, they were there more than twice as often and usually for longer.

Young women in care were more than four times as likely to become pregnant than those in the general population, the report found.

The report says the gap between death rates for children in care and those in the general population is narrowing, but there are still pronounced differences.

Children in government care died of natural causes at a rate more than four times the rate for the general population and they died of external causes at more than three times the rate of other kids.

"While death rates are not ideal indicators of children's health, they are traditionally and internationally accepted measures," the report said.

"They also represent the most extreme adverse outcome."

In October 2005, there were 9,080 children in care in British Columbia. Sixty per cent were in continuing care, while 40 per cent were in temporary care.

The report contains 13 recommendations, including a ban on smoking in foster homes, something Kendall called a "no brainer."

Children's Minister Tom Christensen said some government programs for children in care show promising drops in death and injury rates.

But he said the report indicates more can be done.

"The trends tend to be pretty positive in terms of the numbers getting better over time. That suggests to me that the services being provided are making a difference over the last number of years," Christensen said.

"But it also emphasizes to me that we still have a long way to go to ensure we're best meeting the needs of these children."

The Opposition's children's critic said the report indicates the government isn't doing enough to continue helping children in care once they reach 19 years and are legally considered adults.

"There seems to be a huge gap here in how services are provided into adulthood," said New Democrat Maureen Karagianis. "Suddenly at 19 they are seen as no need for further support."

Other recommendations for government include:

- Boosting efforts to connect aboriginal kids in care with their cultural and community roots. Forty-nine per cent of kids in care were aboriginal, although aboriginal children make up only seven per cent of the population.
- Educate children and youth in care and their foster parents and social workers about anxiety and depression and how to manage those conditions.
- Consult with the College of Physicians and Surgeons about determining whether the prescribing practices of doctors treating children in care are appropriate.
- Collaborate with academics to conduct research into whether kids in care are being appropriately medicated with cerebral stimulants.
- Develop a plan for youth leaving care who require adult services.

Child deaths have become a hotbutton issue for Premier Gordon Campbell's government.

Campbell admitted earlier his government failed to properly review the deaths of more than 700 children, some of whom were in government care. Many of the children's files were found in a Victoria warehouse.

The discovery of the files and the intense political fallout saw the government appoint former judge Ted Hughes to review the mishandling of child-death reviews.

Hughes called for the appointment of an independent children's representative to oversee children's issues in British Columbia. The B.C. legislature is expected to appoint a children's representative this year.

Article from FamilyandChildHealth@Medbroadcast.com

First Nations Leadership Council Information Bulletin

VOLUME 1, ISSUE 9
OCTOBER 2006

[PDF VERSION](#)



Feedback and inquiries on these monthly bulletins are welcome; contact information is provided in the column to the left.

First Nations Fisheries Forum

On October 4-6, 2006, the First Nations Leadership Council hosted a First Nations Fisheries Forum with the goal of developing a BC First Nations Fisheries Action Plan.

The first day of the Forum was spent setting the context and included presentations from the Northwest Indian Fisheries Commission, the Pacific Salmon Foundation and Fraser Basin Council, the national Assembly of First Nations, and the First Nation Panel on Fisheries.

Delegates then spent the following two days in breakout and plenary sessions, developing a vision, statements of unity, principles, and action items for the Pacific fishery (specifically in the areas of: Relationships and Reconciliation; Aquatic Resource Sharing (Allocation); Safeguarding Habitat and Responding to Threats; Aquatic Resource Management; Building Solid Economic Opportunities; and Negotiations and Litigation).

A draft Action Plan has been developed based on this discussion, and was distributed to all First Nations on October 12, 2006. The FNLC will convene a follow-up session on November 30, and a joint session with DFO in mid-December, to continue this discussion. Please review this Action Plan carefully and provide feedback via the contact information to the left.

Prime Minister's Comments on the Aboriginal Economic Fishery

The First Nations Leadership Council unanimously rejected and denounced Prime Minister Stephen Harper's comments made in Vancouver affirming his position that

the Aboriginal economic fisheries are "race-based".

"To come into our traditional territories and to openly state his racist assertions is an affront to First Nations in BC and a direct challenge to the courts" declared Chief Judith Sayers.

Chief Stewart Phillip stated "Let us be clear, there are no 'race-based' fisheries – there are Aboriginal rights-based fisheries which are judicially recognized and enshrined in the

Constitution. Harper is fishing for votes by once again playing the provocative race card.”

“The Harper government should honour court decisions such as Kapp, Sparrow, Gladstone, Delgamuukw, and Marshall,” urged Regional Chief Shawn Atleo. “The Leadership Council challenges the Prime Minister to meet with the First Nations leaders to discuss his perspective on the state of the Aboriginal fisheries.”

In the most recent decision (June 2006) the BC Court of Appeal decided in R v. Kapp that allocations for commercial purposes is not discriminatory and represents a legitimate policy decision well within the authorities in the fisheries legislation. Based on these rulings, First Nation communities have been proactively working with industry and federal government officials to develop solutions for the fishery.

Regional Chief Atleo observed “There is little support from First Nations, industry, sports, and environmental groups for yet another inquiry of the Fraser River fishery. If the Harper government is truly financially accountable, rather than spend millions of dollars on another inquiry, use those funds to sustain the fishery by enhancing fisheries management, scientific research and recovery efforts of endangered runs such as the Cultus, Early Stuart and Sakinaw Lake sockeye.”

New Relationship

The priority action item under the New Relationship is consultation and accommodation. The FNLC will be working with BC on the full and meaningful implementation of “recognition” as to the basis of consultation and accommodation between BC First Nations and governments.

Another New Relationship priority is revisiting the provincial government’s litigation strategy to be more respectful of, and consistent with, the New Relationship, and in particular to change its traditional “denial” approach. A joint Side Table has been established to make recommendations to improve approaches to the resolution of disputes between First Nations and the province. As part of this exercise, the FNLC is also organizing a forum for senior provincial officials, to describe how historical colonial doctrines of denial (i.e. doctrine of discovery) were the genesis of existing government policy and describe why the New Relationship necessitates changes to current Crown policies and practices.

Transformative Change Accord

Work is ongoing to develop the Transformative Change Accord implementation strategy, focusing on the sections: Relationships; Education; Health; Housing and Infrastructure; and Economic Opportunities. A draft strategy for review and feedback by First Nations should be available shortly. The FNLC and provincial government have committed to collaborative efforts to secure the active participation of the federal government in the implementation of this historic agreement.

Health

British Columbia will be hosting a national Aboriginal health summit on November 28, 2006. The FNLC is working with the provincial government on the planning and preparation for this event. This summit fulfills Premier Campbell’s commitments to Aboriginal health made at the First Ministers Meeting in November 2005.

FNLC members will also be attending the upcoming Health Directors Forum in November. This event provides the opportunity to receive feedback from First Nations health experts on the

draft health section of the Transformative Change Accord implementation strategy.

The provincial government recently announced that it is holding a Conversation on Health until the fall of 2007 – a discussion among British Columbians on how to make British Columbia healthier, and how to improve and renew the provincial health system while strengthening the Canada Health Act. The inaugural event of this conversation was a Congress on Health hosted by Premier Campbell on October 10, and attended by the FNLC. Regional forums, toll-free telephone line, email and online discussions are available to provide feedback, and the FNLC encourages all First Nations to provide input. Please see their website at www.bcconversationonhealth.ca, phone 1-866-884-2055 or email ConversationOnHealth@victoria1.gov.bc.ca

New Relationship Trust

The term of the first New Relationship Trust Board of Directors expires in November and a process to replace several of the Directors has begun. The Board is composed of seven individuals: one each appointed by the three FNLC organizations, two appointed by the FNLC as a whole, and two appointed by BC. Upon recommendation of the New Relationship Trust Board and the FNLC, the Ministry of Aboriginal Relations and Reconciliation will be seeking government approval for the reappointment of Dawn Farrell as a director. The other provincial appointment will be made through the BC Board Resourcing and Development Office. The Notice of

Position is available at www.fin.gov.bc.ca/oop/brdo/adverts.htm and the deadline for applications is October 27, 2006.

UN Declaration on the Rights of Indigenous Peoples

Following more than two decades of discussion and development, the United Nations Declaration on the Rights of Indigenous Peoples will finally be considered for adoption during the current session of the UN General Assembly in New York.

Grand Chief Ed John traveled to New York on behalf of the Assembly of First Nations to work with the Indigenous Peoples' Caucus. He stated "This is an historic document for all Indigenous People and there is tremendous support for the adoption of the Declaration. However there is a real sense of betrayal with Canada's complete reversal of their historic leadership position of proponent to their current position of opposition. It is fully expected the Declaration will be supported by the majority of States at the United Nations."

"Canada's position is not substantiated or supported by international or domestic law. Canada is going against the grain as many States are providing solid support for the Declaration. It will be a momentous moment when the Human Rights of Indigenous People is recognized at the international level," commented Regional Chief Shawn Atleo. "We strongly urge Canada to join other States and adopt the Declaration without delay."

Chief Stewart Phillip observed, "Since the federal election, Canada's discriminatory actions against Indigenous People at both the national and international levels have been utterly shameful and disgraceful. As a Council member of the Human Rights Council, Canada accepted the responsibility to uphold the highest standards in the promotion and protection of Human Rights. Canada, a true defender of Human Rights? We think not!"

The Declaration was adopted by the UN Human Rights Council this past June and was recommended for adoption by the General Assembly. Canada was one of few countries to vote against the Declaration in June and is currently lobbying against the Declaration.

Bill C-292: *An Act to Implement the Kelowna Accord*

Following second-reading, Paul Martin's private member's bill, C-292 – *An Act to Implement the Kelowna Accord*, passed 159 -129 in the House of Commons with support from all parties except the governing Conservatives. The Bill sets out to ensure the agreements made at the First Ministers Meeting on Aboriginal issues, held in Kelowna last November, will be honoured and implemented.

Grand Chief Edward John stated, "This is an important step taken by the House to implement the \$5.1-billion commitment to the Kelowna agreement that was reached after 18 months of negotiations. The bill provides the opportunity for implementing an achievable and affordable plan aimed at bridging the socio-economic gap between First Nations and other Canadians."

"This recent vote is extremely encouraging in our efforts to find practical and sustainable solutions to eliminate the poverty and desperation of our people," commented Regional Chief Shawn Atleo. "It is imperative that we continue this momentum and encourage all parties to support this bill when it proceeds to final reading."

Chief Stewart Phillip noted, "Final approval is fundamental for demonstrating and upholding the integrity of the Crown. Implementation of the agreement recognizes that First Nations people will no longer be relegated to the margins of society."

Bill C-292 will now be presented to the all-party Aboriginal Affairs committee before returning to the House of Commons for a final vote.

National Women's Month

October is National Women's Month, with Aboriginal women as this year's focus. To commemorate this occasion, the FNLC and BC held an event on October 17, 2006 to honour exceptional achievements of Aboriginal women. The recipients of these awards, and the honourable mentions, in each category are as follows:

Language, Culture and the Arts

- Recipient: Sophie Thomas
- Honourable Mention: Jessie Hamilton

Family and Community

- Recipient: Gertrude Guerin
- Honourable Mention: Jackie Finnie

Health, Sports and Science

- Recipient: Rose Johnston
- Honourable Mention: Rose Bartolon

Education

- Recipient: Christa Williams
- Honourable Mention: Kim Hodgson

Public Service, Business and Entrepreneurship

- Recipient: Jean Peerless
- Honourable Mention: Geri Collins

FNLC Meeting Notes

At the recommendation of First Nations, this section of the information bulletin is to describe discussion and decisions of FNLC.

- FNLC priority is new approaches for recognition, consultation and accommodation
- FNLC to lobby for federal engagement
- FNLC to continue discussions on land use planning with the provincial government
- FNLC to provide input regarding the Wildlife Act review and Integrated Pest Management Guidelines
- FNLC met with Geoff Plant, Special Advisor to the Campus 2020 initiative to provide input into the needs for First Nations post-secondary education in BC
- As follow up to a resolution passed at last year's BCAFN Assembly, the FNLC is working to convene a Justice Forum in the spring of 2007
- FNLC to make a presentation to the BC Supreme Court in October on the Residential Schools Agreement in Principle
- FNLC to provide input regarding opportunities for First Nations through the new provincial Training Tax Credit Program
- Two video projects to be produced to improve public awareness about First Nations and the New Relationship
- FNLC to meet with provincial officials to discuss improved opportunities for First Nations economic development
- FNLC to work with BC to develop an internship program for First Nations youth
- FNLC met with Mountain Pine Beetle Working Group to discuss federal funding for the epidemic
- FNLC met with the First Nations Forestry Council to discuss workplanning and an update on progress
- FNLC met with FNEESC to discuss efforts on enabling legislation for the Education Jurisdiction Agreements

Calendar of Events

November 23-24: UBCIC Chiefs' Council Meeting (Vancouver)

November 27-28: BCAFN Meeting (Vancouver Marriott Pinnacle Downtown)

November 29-30, December 1: FNS Meeting (Squamish Nation Recreation Centre)

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The First Nations Leadership Council is comprised of the political executives of the BC Assembly of First Nations, First Nations Summit, and the Union of BC Indian Chiefs:

- *BC Assembly of First Nations Regional Chief A-in-chut, Shawn Atleo;*
- *First Nations Summit Task Group members Grand Chief Edward John, Chief Judith Sayers, Dave Porter;*
- *Union of BC Indian Chiefs President Stewart Phillip, Vice-President Robert Shintah*

The Council works together to politically represent the interests of First Nations in British Columbia and develop strategies and actions to bring about significant and substantive changes to government policy that will benefit all First Nations in British Columbia.

IGOV 383 INDIGENOUS STATE RELATIONSHIPS

Indigenous people are all moving forward in defining the terms and policies that govern their lives and the lives of those in their communities. The Indigenous Governance Program gives students a strong foundation in the leadership, governance and administration issues that they face on a daily basis.

Who should attend?

➔ *Anyone interested in Aboriginal leadership or policy-making roles, careers in health, justice, social work, law or economic development.*

What will the program do for me?

➔ *The program will give you a grounded body of knowledge that respects both western and Indigenous traditions. It is an interdisciplinary program that provides students with a strong foundation of basic and applied skills and a path to understanding government and politics amongst Indigenous peoples.*

What will the program do for my organization?

➔ *The program will empower you in your leadership and policy making skills, thereby improving your organization's success through efficiency and productivity. An in depth education in Aboriginal politics and philosophy will give you, and your organization, broader insight into contemporary aboriginal politics and business.*

“ Indigenous State Relationships”

This course will consider the traditional nature and contemporary evolution of the relationship between indigenous people and the state in a global context, with a special emphasis on local dynamics and the situation of indigenous governments in relation to the Canadian federal system. A focus will be placed on contrasting indigenous perspectives with an understanding of the current status of the relationship in legal, political and economic terms. The various processes and concepts used in the discussion of self-government and self-determination will be examined and compared to indigenous notions of nationhood, power and justice.

Highlights:

- Raise discussion of the social, political, and economic legal issues affecting nation to nation relationships
- Understanding of constitutional frameworks
- Overview of the Federal, Provincial and State Acts
- Analysis of your own nations position with respect to Federal and Provincial relationships



For more information please visit our website at: www.uvic.ca/igov

Critics are suspicious as B.C. government launches health-care "conversation"

Sept. 28, 2006

Provided by: Canadian Press

Written by: TERRI THEODORE

VANCOUVER (CP) - Depending on whose story you believe, B.C.'s health system will soon be swamped in a tidal wave of growing expenses or it's in a crisis of the provincial government's own making.

The debate will be an integral part of the B.C. Liberals' so-called "conversation on health," announced Thursday, in which the provincial government will ask for input from the public on how to shape the future of the health system.

Premier Gordon Campbell told a news conference packed with media, politicians, health-care providers and union leaders that the conversation will take place under the five principles of the Canada Health Act and a sixth principle will be added:

"The principle of sustainability. To guarantee that our public health-care system does not implode for lack of innovation and action," Campbell said.

The government will spend the next year getting public opinion on the future of health care at 16 regional forums, through email, on the phone and by contacting their MLA.

New Democrat health critic Adrian Dix said he already knows the answer to the problem.

Dix said Liberal government mismanagement and lack of support has weakened the health-care system.

"And its (the government) now saying 'Gosh, public health care is in crisis' as if they're a witness to an accident and not the managers of the system," Dix told the media.

Campbell said health-care spending is now over 40 per cent of the provincial budget, and if that isn't reined in, spending could reach more than 70 per cent by 2017.

"You can stand on the shore and see the tidal wave coming and say lets pretend it's not there," the premier said. "There is nothing good about these tidal waves that are coming towards us."

While health-care unions and advocacy groups say this conversation may be another way for government to bring in more privatization, Bob Evans, a health economist at the University of British Columbia, believes the premier is setting up to fight the health-care industry.

"(Cutting health care) is a very nasty, brutal job, because pretty much everybody's against you," he laughed.

"I suspect the real reason for coming out with scare stories about chewing up the entire provincial budget is to place the provincial government in a stronger negotiating position for the endless battles over health budgets."

Evans said predicting a health budget more than a decade from now isn't scientific.

"It's like trying to predict the outcome of the Stanley Cup," he said.

"But, having said that, I would never have believed the Americans could have gotten in the mess they're in."

The U.S. is spending about 16 per cent of its national income on health care.

The president of the B.C. Nurses Union, Debra McPherson, supports the idea of "balanced" dialogue, but said she is concerned the conversation may open the door to more privatized health care.

McPherson said funding for the two-year project could be a waste of money.

"This \$10 million could easily go into funding more primary health-care initiatives, more community health centres."

B.C. Health Coalition spokesperson Joyce Jones said she doesn't believe the premier when he said he doesn't want to challenge the Canada Health Act.

"Our province is the leading provider of privatized medicine. We have more private clinics in B.C. than we have anywhere else in Canada," she said.

Evans, who has been studying health economics for most of his career, said he doesn't believe the prediction that health care could soon take over almost two-thirds of the budget.

The information gathered from the health-care conversation will lay the groundwork for changes presented in the 2007 fall legislative session.

This article was found at Medbroadcast.com

4569 Aboriginal Children in Care Aboriginal Foster Parents Needed

In this article,

A [letter](#) from Simone Harty about the large number of Aboriginal Children in Care
Information about the [Child Care Advocacy Forum Group](#)

Tansi All,

I thought I would share this information with you all to demonstrate the amount of children that are in care in British Columbia. As of **May 2006 we have 4569 Aboriginal** children that are currently in care.

We need Aboriginal Foster homes for Aboriginal Children. There was an information session held on **September 27, 2006** at the IIG – All Nations Institute #200 4355 Mathissi Place. Burnaby, BC. Please contact **Simone Harty at 604 660 9528** for follow-up from that session and to learn more about Aboriginal Foster homes.

Table 8: Children in Care by Region

| Region | March 2006 | April 2006 | May 2006 |
|---------------------|-------------------|-------------------|-----------------|
| Interior | 1746 | 1729 | 1747 |
| Fraser | 2433 | 2444 | 2459 |
| Vancouver Coastal | 1013 | 1017 | 998 |
| Vancouver Island | 1596 | 1602 | 1605 |
| North | 966 | 964 | 962 |
| Headquarters | 11 | 12 | 11 |
| Aboriginal Agencies | 1392 | 1392 | 1384 |
| Province | 9157 | 9160 | 9166 |

Table 9: Children in Care by Aboriginal/Non-Aboriginal

| Region | March 2006 | April 2006 | May 2006 |
|-----------------------|-------------------|-------------------|-----------------|
| Aboriginal | 4542 | 4548 | 4569 |
| Non Aboriginal | 4615 | 4612 | 4597 |
| Province Total | 9157 | 9160 | 9166 |

The Application Process of being a foster parent

1. Attend information Session
2. Attend pre service (orientation training)
3. Complete application form
4. Provide personal reference
5. Pass a medical exam with your family doctor
6. Be interviewed, along with all family members by a social worker
7. Provide written consent for a criminal record check.

Who can be a foster parent?

Anyone 19 or older.

Not necessary to own your own home.

Financial situation will not be a barrier.

Having a criminal history is not a barrier, unless it includes having harmed a child.

Simone Harty at 604 660 9528 for more information on how you can help.

From RedWAY BC News Issue #41

September 29, 2006

Crystal Meth Awareness for Cowichan Valley Youth

'Constructive Alternative Youth Initiative' 12-week program

by Jonathon Couchman and partners

HG PRODUCTIONS

3047 Allenby Road

Duncan BC

V9L 6V8

(250) 715-1149

(250) 701- 8492

jonathancouchman@yahoo.ca

PRESS RELEASE- [AMENDED]

Good Afternoon Friend!

Here are the current developments for the project - '**Light Of Grace**' that has been awarded funding by our Local Government Program Services, Union of British Columbia Municipalities – **Community Responses to Methamphetamine Funding Program 2006** with **Cowichan Tribes' Lalum'utul'Smuneem-Child & Family Services** and **Hiiye'yu Lelum – House of Friendship** who have contracted **HG PRODUCTIONS** in a **12 week project** that will display the success of this '*Constructive Alternative Youth Initiative*' for our Cowichan Valley Youth.

This new initiative will follow up with a production that will be showcasing a live performance on **Friday December 15th 2006 / 7:30pm at the Cowichan Theatre, 2687 James St. Duncan BC**, based on our Cowichan Valley Youth's participation of the 12 week project and share in their knowledge of **Crystal Meth Awareness and Prevention**.

This project will also be recorded and developed into a **DVD** that will be distributed to all Indigenous Tribes/Bands, Friendship Centres, and Schools across CANADA. This **DVD** will be used as a teaching tool on *Awareness & Prevention of Crystal Meth Use*.

I hope you find this information useful and I'm happy to be working with you. I would like to give thanks to our current Sponsors **Cowichan Valley Citizen, 89.7 SUNFM, The Cowichan Theatre, and Ken Evans FORD** and a very special thank you to our continued supporters **FILM COWICHAN, The City of Duncan, North Cowichan District and the Saanich Police Department**.

If you have any comments, questions or concerns please feel free to contact me with the information provided.

All My Relations,

Mr. J K Couchman

Playwright & Director

HG Productions

From RedWAY BC NEWS Issue #41

Study says lung scans may find cancer earlier in smokers, and save lives

Oct. 26, 2006

Provided by: Canadian Press

Written by: ALICIA CHANG

(AP) - A controversial new study offers the strongest evidence yet that screening smokers for lung cancer with computerized chest scans can save lives, much as mammograms do for women with breast cancer.

Doctors have long had doubts that early detection of tumours could improve survival, and also feared that screening would lead to too many false alarms and unnecessary biopsies. Scans are not now recommended, but many smokers have been paying for them on their own for their peace of mind.

The new study strongly suggests there is a survival benefit. But it does not prove the point, because it lacked a comparison group, many scientists say.

In the study, people whose early lung tumours were detected by CT scans and promptly removed had an estimated 10-year survival rate of 92 per cent - much better than the roughly 70 per cent who typically survive, and far better than the dismal five per cent who make it that long after the disease has spread beyond the lungs.

"It gives us greater confidence that screening may really offer advantages in saving lives from lung cancer," said Dr. Robert Smith, director of screening at the American Cancer Society, which was among more than two dozen groups that funded the study.

Even though the study lacked a comparison group, he said, "it's highly unlikely that this completely invalidates the observation of a favourable benefit from early diagnosis."

Lung cancer is the world's top cancer killer. About 174,470 Americans, 22,700 Canadians and one million people worldwide will be diagnosed with it this year. The vast majority will die, largely because the disease is found too late for treatment to do much good. Only 16 per cent of cases in the United States are detected in Stage 1, when tumours are still confined to the lung.

Studies in the 1970s found that screening smokers with regular X-rays did not improve lung cancer survival, and such efforts were largely abandoned until the 1990s, when CT scans were developed. These sophisticated X-rays produce images of the lungs from many angles and can reveal pea-size growths long before they produce symptoms. Interest in the scans rose in 1999, when Dr. Claudia Henschke of New York-Presbyterian Hospital/Weill Cornell Medical Center published a landmark study showing that they found far more tumours than conventional X-rays did.

Her new study, reported in Thursday's New England Journal of Medicine, extends these results to a larger group of people and reports on survival. Dozens of researchers around the world screened 31,567 people at high risk of lung cancer because they were current or former smokers or had been exposed to a lot of secondhand smoke.

Participants were initially screened between 1993 and 2005, and the vast majority came back for repeated screenings about a year later. Thirteen per cent of those who were initially screened and five per cent who had repeated screenings had suspicious spots that required further testing. Biopsies were performed on 535 patients; 484 were diagnosed with lung cancer, including 412 in the early stage.

Most had surgery or chemotherapy, and eight were untreated.

Researchers then calculated survival probability using a common statistical tool. The estimated 10-year survival rate, regardless of when the cancer was diagnosed or the type of treatment, was 80 per cent.

That increased to 88 per cent if the cancer was detected in an early stage, and to 92 per cent if such patients had surgery within a month of diagnosis. The eight untreated patients all died within five years of diagnosis.

"When you find it when it's small, you can essentially cure most of them," Henschke said.

The scans cost between US\$200 and US\$300, roughly double the price of a mammogram. Insurers in the U.S. are not covering lung scans because the government does not recommend them.

The biggest weakness in the study is that it lacked a comparison group, making it impossible to tell how people would have fared if they didn't receive a CT scan.

Henschke said the general population can be the comparison group, because lung cancer is so common and its survival odds are so well known. But many scientists disagreed, and said her study falls short for this reason.

"It raises great hope for CT screening," but it doesn't prove a benefit, said Dr. Denise Aberle of the University of California, Los Angeles, who is helping conduct a government-funded study that should give more definitive answers. It is screening 53,000 current and former smokers with CT scans or regular chest X-rays to see whether either can cut lung cancer deaths. The Mayo Clinic also is leading a screening study, and others are under way in Europe.

Until there is proof, patients considering screening should ask their doctors about the pros and cons, said Dr. Joan Schiller, a cancer specialist at the University of Texas Southwestern Medical School.

"They need to know that the chances are good that something abnormal will be found," which could lead to false alarms, she said.

In light of the latest results, at least one patient advocacy group - the Lung Cancer Alliance - is urging doctors to regularly screen patients for lung cancer.

"This is the most important breakthrough for the lung cancer community that has ever happened," president Laurie Fenton said in a statement.

Research on lung cancer detection may have been delayed because of the stigma associated with the disease - the notion that smokers brought this on themselves and that little could be done once they developed it, many doctors say. The problem grew worse when X-ray screening studies in the 1970s failed to find a benefit, Dr. Michael Unger of the Fox Chase Cancer Center in Philadelphia wrote in an accompanying editorial.

Henschke's latest study is a "provocative welcome salvo in the long struggle to reduce the tremendous burden of lung cancer on society," Unger wrote.

This article is from Medbroadcast.com

**BC ELDERS
COMMUNICATION
CENTER SOCIETY**

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Coordinator: Donna Stirling
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PROVERBS:

A little knowledge is a dangerous thing.
A volunteer is worth 20 pressed men.
All good things come to he who waits.
As you sow so shall you reap.
Barking dogs rarely bite.

BIBLE QUOTES:

Eternal Life

"I heard a great voice out of heaven saying, Behold, the dwelling place of God is with men, and he will dwell with them, and they shall be his people, and God himself shall be with them, and be their God. And God shall wipe away all tears from their eyes; and there shall be no more death, neither sorrow, nor crying, neither shall there be any more pain: for the former things are passed away. And he that sat upon the throne said, Behold, I make all things new. And he said unto me, Write: for these words are true and faithful. Revelation 21:3-5

Mail, fax, email, or call in your Special Wishes/Community Events !!

Happy! Happy! Birthday To All Elders Born In November!!

Scorpio* *October 24th - November 22

Scorpio the scorpion possesses deep wells of powerful passions. Ruled by Mars and Pluto, Scorpions have unswerving loyalty and tremendous energy. Their intensity and staying power are legendary. With a psychic turn of mind, this Water sign has an understanding of the heart and an awareness of life's secrets, able to confront the mysteries of the universe. Scorpions are fierce competitors. Control of all situations is essential for them.

National Survivors Support Line

24 Hours a day - 7 days a week - 1-866-925-4419

The Indian Residential School Survivors Society provides free, immediate, confidential, non-judgmental, support for residential school survivors across Canada.

ANNUAL BC ELDERS GATHERING INFORMATION CORNER

Dear Elders and Elders Support People,

There are NO UPDATES available at this time for next years' Annual Elders Gathering.

The 31st Annual Elders Gathering is being hosted by the Squamish Nation, however an information package with the place and dates for the event have not been released at this time.

Please be patient... often times there is no info package available until sometime in the New Year.

Rest assured that as soon as the Host's information is available it will be featured here and on our web-site www.bcelders.com

PLEASE WATCH YOUR UPCOMING ISSUES OF THE E.V. FOR GATHERING NEWS