



Neyâskweyâhk Acimowin ᓂᓴᓐᓴᓐ ᐱᓴᓴᓐᓴᓐ

Ermineskin Newsletter April 5, 2024

Neyâskweyâhk Acimowin Ayikîpîsim Niyânan

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Ermineskin Easter Festivities 2024



On Sunday March 31st, 2024 Ermineskin Community Wellness hosted their annual Easter Celebrations. The day started with the Easter Walk and Run, where many participants had the opportunity to join one another in a beautiful Sunday venture. Participants were gifted with their choice of sweater or t-shirts and winners of their categories also received a gift card!

The afternoon portion of the celebrations took place at the Jim Rattlesnake Building. The mini carnival started with approximately 250+ attendees. They offered activities such as face

painting, balloon artistry, and many games where children could win prizes! Can't forget the wagon rides that provided by Allan Weinhandl. *"It was so much fun, even though we were a little late we had a great time! It was also such a beautiful day to be spending with my cicims"* - Roxanne Morin

We would like to thank Community Wellness, Recreation, ECN Events and the Nation Members for supporting this event, giving families an amazing opportunity to practice wâhkôhtowin. We hope that everyone enjoyed their time and had a happy Easter Sunday!

A HISTORY OF FORCED AND COERCED STERILIZATION AMONG INDIGENOUS PEOPLES

Trigger warning: Forced & Coerced Sterilization

The Native Women's Association of Canada's Forced & Coerced Sterilization Timeline is out now. This practice has been inflicted upon Indigenous women since colonization began. It represents a grave violation of human rights, rooted in historical injustices, and perpetuated by contemporary healthcare inequities.

The egregious practice of legalized and non-legalized Forced and Coerced Sterilization (FCS) has been perpetrated against Indigenous Peoples in Canada in both historical and modern times. FCS refers to any form of sexual sterilization without free, informed, or voluntary consent. The practice of FCS has roots in racism, colonialism, and eugenics. (Stote 2012; Leason 2021; Clarke 2021)

Colonial ideologies, policies, and structures reflected deeply engrained racism by targeting Indigenous Peoples and considering them culturally and racially inferior (Grekul, Krahn, and Odynak 2004; Stote 2012; McLaren 1990). The emergence of eugenics was informed by racism and perpetuated by colonial governmental bodies (Grekul, Krahn, and Odynak 2004; Stote 2012; McLaren 1990). Eugenics, a term coined by Sir Francis Galton in 1883, refers to beliefs or practices which aim to "improve" the genetic quality of human populations through selective breeding (Grekul, Krahn, and Odynak 2004; Stote 2012; McLaren 1990). This ideology assumes that undesirable characteristics such as disabilities, mental illness, alcoholism, poverty, and poor moral behaviour are hereditary, and therefore could be reduced by limiting the reproductive power of populations who exhibit these traits (Stote 2012; Clarke 2021). There were two dominant forms of eugenics: positive and negative. Positive eugenics encouraged the procreation of populations viewed as having desirable characteristics through financial incentives, whereas negative eugenics discouraged the procreation of populations viewed as having undesirable characteristics through sterilization (Grekul, Krahn, and Odynak 2004).

The effects of FCS are devastating and cannot be overstated. However, there is little evidence detailing the profound impact of this practice on Indigenous people in Canada (Government of Canada 2013). The repercussions of FCS extend to every facet of life, including physical, emotional, social, and cultural traumas. Survivors recount not only enduring the physical trauma of FCS but also grappling with profound bodily changes such as early menopause as a result

(Government of Canada 2013). They also report experiencing overwhelming pain, fear, shame, anxiety, depression, and suicidal thoughts. The aftermath of trauma stemming from FCS is a deep-seated distrust

of the healthcare system among Indigenous people, which can further contribute to pervasive health inequities (Government of Canada 2013; Stote 2012). Beyond the individual, FCS can hinder relationships within families, communities, and cultures. The inability to conceive has impacted current and future intimate relationships between survivors and their partners (Government of Canada 2013). It also affects bonding between parent and child (Government of Canada 2013). Moreover, FCS strikes at the vital links between an individual, their community and culture. Indigenous communities are based on a matriarchal structure and represent crucial pillars of support (Government of Canada 2013). However, the inability to conceive not only diminishes the available community support systems such as connections with revered Elders, but also symbolizes the deliberate erasure of Indigenous lineages through forced genocide (Government of Canada 2013). As such, the consequences of FCS extend throughout generations and perpetuate a legacy of unimaginable pain and cultural loss.

The practice of FCS among Indigenous Peoples in Canada represents a grave violation of human rights, rooted in historical injustices, and perpetuated by contemporary healthcare inequities. To address this important issue, urgent and comprehensive reforms are required. These reforms can include imposing criminal penalties on perpetrators, mandating training on Indigenous rights for healthcare professionals, and empowering Indigenous people.

To read through the timeline and learn about each of the major events contributing to the forced and coerced sterilization of Indigenous people throughout Canada's history: <https://forcedsterilization.nwac.ca>





GREE CORNER

nisakihison: I love myself

kisakihitin: I love you

kisakihitinawaw: I love you all

nisakihaw: I love her/him

nisakihawak: I love them

nisakihtan: I love it

kamâmakos



bILLdⁿ

You Are Invited!

Join the Ponoka Doctors Recruitment and Retention Committee in welcoming new medical staff to the Ponoka community.

Healthcare is fundamental to the well-being of our community and we are overjoyed that these doctors have chosen Ponoka as their home!

Please mark your calendar for:

MAY 1ST, 2024

5:30 PM - 7:30 PM

Reception at the Calnash Ag Event Centre
(3611 Highway 2A, Ponoka) in the lobby.

We look forward to seeing you there!



AUTISM (ASD)

The month of April is Autism Awareness Month. It is an annual observance to increase awareness, understanding, acceptance, and support for individuals with autism spectrum disorder (ASD). Autism spectrum disorder (ASD) is a lifelong neurodevelopmental condition that affects sensory processing, communication and behaviour. About 2% (two per cent) of the Canadian population has ASD, according to the Canadian Health Survey on Children and Youth from 2019, although families on First Nations reserves were not included. The report's authors concluded that while each of the hundreds of First Nations, Métis and Inuit communities in Canada is different, there are "unique inequities" experienced by most Indigenous people, including difficulty accessing culturally responsive, evidence-informed diagnosis and services, especially in rural or remote communities. On-reserve health care is the responsibility of the federal government, but most autism services are delivered by provincial health authorities.

Autism is known as a "spectrum" disorder because there is wide variation in the type and severity of symptoms people experience. People of all genders, races, ethnici-

ties, and economic backgrounds can be diagnosed with ASD. Although ASD can be a lifelong disorder, treatments and services can improve a person's symptoms and daily functioning.

Signs and or Symptoms of ACD:

The first signs and symptoms of autism (also known as autism spectrum disorder or ASD) can vary widely and appear at different times. Some people on the autism spectrum show signs within the first few months of life. Others don't show signs until much later.

Up to 12 months of age, signs of autism can include:

- little or no babbling
- little or no eye contact
- showing more interest in objects than people
- appearing not to hear when spoken to directly
- playing with toys in an unusual or limited manner
- repetitive movements with their fingers, hands, arms or head
- starting to develop language skills but then stopping or losing those skills

Up to 2 years of age, signs may also include:

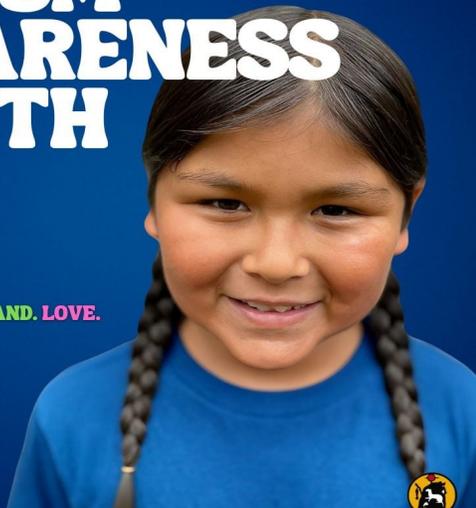
- very specific area of interest
- limited or no interest in other children
- behavioural issues like self-injury or self-isolation
- repeating words or phrases without appearing to understand them
- difficulty with reciprocal social interactions (like playing peek-a-boo)
- liking to have things a certain way, such as always eating the same food



AWARENESS

AUTISM AWARENESS MONTH

ACCEPT. UNDERSTAND. LOVE.



Possible signs of autism at any age can include:

- little eye contact
- distinct reactions to lights, tastes, smells, colours or textures
- very specific interests
- repeating words or phrases (echolalia)
- repetitive behaviors, such as spinning
- nonverbal communication or delayed language development
- Intense reactions to minor changes in routine or surroundings

Autism is a born trait, not a disorder that develops over time. The earlier that one gets assessed and diagnosed, you will find more immediate supports and services that will help assist and provide knowledge on what part of the spectrum you are on. Autism Awareness Month is about creating a safe environment for those that are on the spectrum, whether it be in schools, the workplace, public settings or even at home. It's to create and promote a more inclusive and supportive society. In addition, we promote inclusion, accessibility, and support services for individuals with autism.

Overall, Autism Awareness Month plays a crucial role in fostering greater understanding, acceptance, and support for individuals with autism and their families. It is an opportunity to unite efforts to create a more inclusive and supportive world for individuals with autism to thrive and reach their full potential.

FACTS ON AUTISM

- ◇ Autism currently affects 1 in 36 children
- ◇ Boys are four times more likely to have autism than girls
- ◇ About 40% of children with autism do not speak. About 25%–30% of children with autism have some words at 12 to 18 months of age and then lose them. Others might speak, but not until later in childhood
- ◇ Autism greatly varies from person to person (no two people with autism are alike)
- ◇ The rate of autism has steadily grown over the last twenty years
- ◇ Comorbid conditions often associated with autism include Fragile X, allergies, asthma, epilepsy, bowel disease, gastrointestinal/digestive disorders, persistent viral infections, PANDAS, feeding disorders, anxiety disorder, bipolar disorder, ADHD, Tourette Syndrome, OCD, sensory integration dysfunction, sleeping disorders, immune disorders, autoimmune disorders, and neuroinflammation.
- ◇ Autism is the fastest growing developmental disorder, yet most underfunded
- ◇ A 2008 Danish Study found that the mortality risk among those with autism was nearly twice that of the general population
- ◇ Children with autism do progress - early intervention is key
- ◇ Autism is treatable, not a hopeless condition



DRINKING WATER COMPENSATION UPDATE

ELIGIBILITY

Tansi Neyaskweyahk;

I have been requested to prepare this update on the issue of drinking water compensation.

Over the past few months, many Ermineskin members have communicated concerns and questions regarding the issue of compensation from the class action settlement on drinking water issues. The information below is intended to address the most common concerns and questions that have arisen.

Why are Ermineskin members not eligible for compensation from the class action settlement?

Ermineskin started its own legal action against Canada over drinking water in 2014. The class action was filed in 2019 and settled in 2021. Ermineskin was exempted from the class action because class actions cannot interfere with pre-existing lawsuits. Kainai, Sucker Creek, Tsuut'ina and Okanagan Indian Band also started drinking water lawsuits prior to the class action and so were exempted from the class action as well.

However, it is important to understand that even if Ermineskin had not started our own legal action, no Ermineskin members would have been eligible for compensation under the criteria of the class action settlement. This is explained in more detail below.

What if Ermineskin had been part of the class action settlement? The class action does not provide compensation to all First Nation members that ever experienced a drinking water advisory, it is very restrictive:

- Compensation under the class action is only for drinking water advisories longer than a year on water treatment plants from June 20, 2021 to November 20, 1995. There were no drinking water advisories longer than a year on Ermineskin's water treatment plant during that time period, which means Ermineskin members would not have been eligible for compensation from the class action settlement.
- All drinking water advisories at Ermineskin have been on individual wells. Under the class action settlement, there is no compensation available for drinking water advisories on individual wells. This is another reason why Ermineskin members would not have been eligible for compensation from the class action settlement

External Affairs
ERMINESKIN
CREE NATION
Box 219
Maskwacis, Alberta
T0C 1N0
P. 780-585-3741



Compensation under the class action settlement is only up to \$1300 per person for each year of long-term drinking water advisory. The total available compensation nationally for all individuals under the class action settlement is also capped at \$1.8 billion. Canada received many more applications for compensation than anticipated. If the total compensation for individuals exceeds the available \$1.8 billion, Canada can and will decrease compensation lower than \$1300 per person to keep the total compensation below the \$1.8 billion cap. As a result, it is very likely that many people across the country will receive lower compensation than expected under the class action settlement.

Why did Ermineskin start its own drinking water action and what are the potential benefits?

Ermineskin's drinking water lawsuit was filed in response to two problems:

- To force Canada to provide badly needed investment in Ermineskin's water systems; and
- To address the persistent long-term drinking water advisories impacted Ermineskin wells over the past few decades.

The needed investment in our water systems was our first focus in the negotiations and is almost resolved and will result in tens of millions of dollars in new improvements to our water systems over the next few years. For this reason, Ermineskin's focus in settlement negotiations with Canada has recently shifted to compensation for the long-term drinking water advisories on household wells at Ermineskin.

Ermineskin's leadership in 2014 responded to Canada's shameful underfunding of our water systems with Ermineskin's own legal action. Leadership's attention to this issue in 2014 and since then means that Ermineskin is now in a much better position to negotiate compensation for our members than if we had been exposed to the class action settlement. If Ermineskin had not filed its own drinking water action, no compensation would be possible.

What is the status of Ermineskin's negotiations with Canada?

Ermineskin has recently made significant progress in negotiations with Canada. We expect that in the coming months it may be possible to reach a settlement that addresses compensation for impacted members. As soon as details of a potential settlement are confirmed and clear, Ermineskin will take immediate steps to inform members about the terms of a possible settlement. If the negotiation process is not successful we will continue to pursue Canada on this issue through litigation.

If anyone has any comments or concerns, please contact the External Affairs offices at the Ermineskin Administration building.

Respectfully Yours,

**S. Collin Wildcat, Ec.D, Director - External Affairs and Law
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IMPORTANT NOTICE FROM FAS GAS

UNFINISHED PREPAYS AT MASKWACIS FAS GAS

TO ENSURE INTEGRITY AND PROVIDE A TRANSPARENCY TO OUR VALUED CUSTOMERS, MASKWACIS FAS GAS WOULD LIKE TO INFORM THE PUBLIC ABOUT OUR PREPAY SYSTEM.

CUSTOMERS ARE RESPONSIBLE FOR DOUBLE CHECKING THEIR FUEL PURCHASE, AND COLLECTING THEIR CHANGE WHEN THEY ARE FINISHED PUMPING THEIR FUEL: ESPECIALLY, IF THEY PREPAID BY DEBIT OR CREDIT CARD. IF THERE IS CHANGE IT WILL BE ISSUED BY THE CASHIER WHO SERVED THE CUSTOMER.

CHARGES TO CUSTOMER CARD PAYMENTS ARE NOT PRE-AUTHORIZED, AND THEIR CHANGE WILL NOT AUTOMATICALLY BE PUT BACK ON THEIR METHOD OF PAYMENT: INSTEAD CASH WILL BE ISSUED FROM THE CASHIER.

THANK YOU FROM MASKWACIS FAS GAS STAFF AND MANAGEMENT.

MASKWACIS FAS GAS STRIVES TOWARDS SUCCESS AND TO SERVING OUR COMMUNITY BETTER.

UPCOMING EVENTS/CLASSIFIEDS



Ermineskin Cree Nation

WE ARE HIRING!

April 2nd, 2024

OPEN POSITIONS:

- Two (2) Outreach Crisis Prevention Workers
- One (1) Female/One (1) Male with the Ermineskin Brighter Futures Department
- Closing date: April 17th, 2024
- Funding Agreement Officer with the Ermineskin Finance Department
- Closing date: April 17th, 2024

APPLY NOW

Please submit applications, resume and criminal record check to:

faith@ermineskin.ca



NEYASKWEYAHK HUMAN SERVICES

Mid-Month: UPDATE

Neyaskweyahk Human Services will be distributing

Mid-Month Cheques:

April 10th 2024

10AM - 3PM

Remember to bring in MONTHLY UTILITIES and 30 Day Bank Statements. You can also email: crystal@ermineskin.ca

(780) 585-3835



Reminder that COVID-19 precautions are to be followed (social distancing wearing a mask and sanitizing)

STEP INTO SPRING WEARING GOOD MEDICINE

APRIL

ROCK YOUR RIBBONS MONTH

TRY TO WEAR YOUR RIBBONS EVERYDAY

Insta: [Reconnecting.our.ribbons](https://www.instagram.com/Reconnecting.our.ribbons)
Facebook: [Reconnecting Our Ribbons](https://www.facebook.com/ReconnectingOurRibbons)



MHS SATURDAY IMMUNIZATION CLINIC

9:30 AM - 3:00 PM

Saturday April 6th
Saturday April 13th
Saturday April 27th

Measles
Mumps
Rubella

Diphtheria
Pertussis
Tetanus

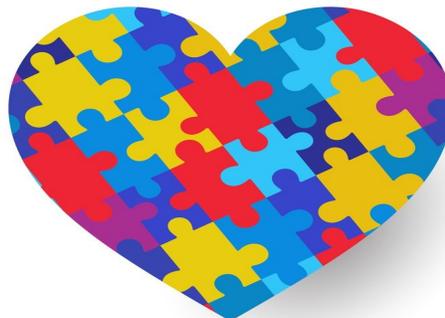
Come and get caught up on you or your children's immunizations without taking time off work!

Hepatitis B

Call 780-585-2266 to schedule an appointment

Human Papillomavirus

APRIL AUTISM AWARENESS MONTH





YOUNG SPIRIT WINDS
Youth Treatment Program

Kisewatisowin

~Kindness~

APRIL 8 - JUNE 14, 2024



CO-ED
MALE / FEMALE
AGES 12 - 17
MONDAY - FRIDAY
9:00 AM - 3:00 PM
TRANSPORTATION
& MEALS PROVIDED
INCENTIVE & CERTIFICATE

The Youth Day Treatment Program helps with the following:

- Addictions
- Anger Management
- Relapse Prevention
- Grief & Loss
- Cultural Awareness
- Mental Health Awareness
- Low Self-esteem
- Suicide Awareness

FOR INFORMATION / INTAKE CONTACT:
MYSWS: 780-585-2219

Karen Longmuir, Program Supervisor Email: klongmuir@youngspiritwinds.com
Susan Lenzin, Outreach Worker Email: slenzin@youngspiritwinds.com



Ermineskin Brighter Futures
COHI & PCAP/FASD Program Collaboration

Come celebrate Dental Health Month with us!



Ages 0-4

April 24th, 2024
@ The Jim Rattlesnake Building
Begins at 10AM. Ends at 3PM
Hot lunch will be provided for participants
Noon-1PM

Fun Crafts! Bouncy Castle Movie Goodies! Prize Draw!

For more information, please contact:
780-585-4088
or the Brighter Futures office @ 780-585-2000



ERMINESKIN BRIGHTER FUTURES
PRESENTS:

MENTAL HEALTH FIRST AID

DATE: APRIL 8TH - 9TH
2024
TIMES: 9AM - 3PM
LOCATION: WAYSIDE INN,
WETASKIWIN, AB

- Increased awareness of signs and symptoms of the most common mental health problems
- Decreased stigma related to mental health
- Increased confidence interacting with individuals experiencing a mental health problem or crisis



TO REGISTER:
Email futuresbrighter@yahoo.com

IMPORTANT NOTICE NHS CLIENTS

NHS clientele:

It is the client's responsibility to ensure their file is up to date with their case worker. Failure to do so may result in either your income assistance pro-rated or file closure.

Please book an appointment with your case worker to ensure your file is up to date.



Thank you for your cooperation
Neyaskweyâhk Human Services
780-585-3835

SOHKITEHEW (STRONG HEART) RESEARCH GROUP

Presents

AGING WELL BOOKLET COMMUNITY LAUNCH CELEBRATION

In 2018, The Sohkitehew (Strong Heart) Group held Aging Wellness sharing circles in the communities of Pigeon Lake and Maskwacis. The wisdom, knowledge and strategies in this booklet came from the women who attended those events.

DATE

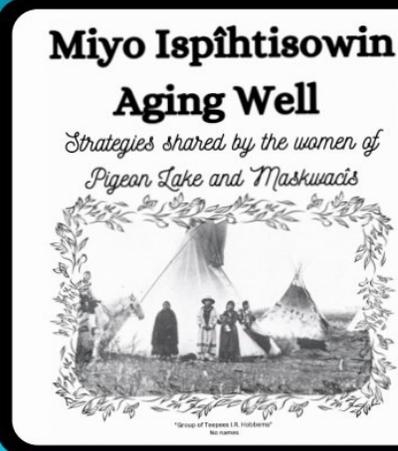
THURSDAY
APRIL 25, 2024

LOCATION: JIM RATTLESNAKE BUILDING (ERMINESKIN)



10.00 AM - 1.00 PM

Lunch and refreshments provided



This community-led booklet is a part of a research study, Increasing Mature Women's Wellness in an Indigenous Community. The Sohkitehew (Strong Heart Group) in collaboration with the University of Alberta and the University of Calgary. In partnership with:



YOU ARE INVITED!



WELLBRIETY



RECOVERY/ SOBRIETY SUPPORT TALKING CIRCLE

EVERY FRIDAY

TIME: 12:00PM - 1:00PM
LOCATION: MOBILE MENTAL HEALTH BUILDING

REFRESHMENTS WILL BE PROVIDED

PHONE: 780-585-0048

Early Years

OPEN FOR ENROLLMENT IN ALL 4 NATIONS!

GET READY FOR PRESCHOOL PROGRAM 8 WEEK PROGRAM!

- ✓ ERMINESKIN
- ✓ SAMSON
- ✓ LOUIS BULL
- ✓ PIGEON LAKE
- ✓ MONTANA

OPEN FOR CHILDREN ages 2 - 4 yrs old

Starting 3rd week of April

CALL FOR MORE INFO CONTACT CHRISTY CRANE
(780) 335-1817

Neyaskweyahk Human Services

Walk-In Appointment

Neyaskweyahk Human Services will have walk-in appointments to submit bills, update their files, and RE-SIGN for May Issuance

April 23rd,
April 24th,
& April 25th

9:00am - 4:00pm

For more information:
(780) 585-3835

Ermineskin Fiscal 2024-25 Budget Presentation



April 9th, 2024

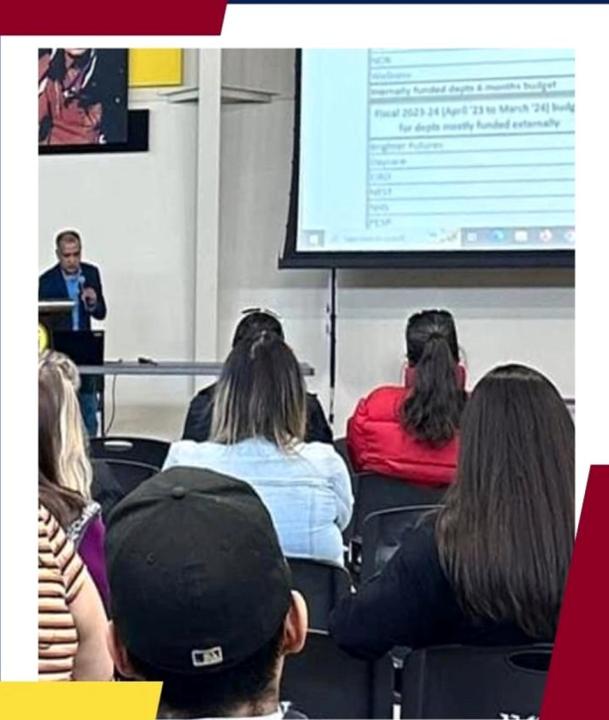


10 am - 2 pm



N. O.K Building

Lunch will be served
light refreshments will be
available.



New Date!



RISE TOGETHER OR FALL ALONE

MOVIE FIELD TRIP

**VAN LEAVES AT 6:30PM
FROM JIMRS SPORTS BUILDING**

TUESDAY, APRIL 9TH, 2024

SUBJECT TO CHANGE

**LIMITED
SPOTS**

AGES 10 - 17

***DRINKS AND POPCORN
WILL BE INCLUDED**

**TO REGISTER:
(780) 585-3088**