

KODIAK AREA NATIVE ASSOCIATION

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KIAK / SUMMER 2019



Explore the Summer

ALSO INSIDE:

Healthy Kodiak 2019 • A History of Tribal Health • Wellness Center Summer Bingo Alutiiq Museum on Display • Employee Spotlight: Wesley Martin • Monitoring Ocean Toxins **LETTER FROM THE PRESIDENT NATIVE ARTS AND CULTURE**



Greetings,

As a Tribal health organization, one way in which KANA strives to promote positive wellbeing is through celebrating our Native values and heritage. The Alutiiq Museum curates both artifacts from our ancestors along with new, contemporary art representing today's life and culture. As their art collection grows beyond their walls, it has given us the opportunity to showcase these pieces throughout our facilities. I encourage you to take a moment on your next visit to view the art and become inspired by these prominent Alaskan artists.

KANA also promotes well-being through a variety of family-focused summer activities. The Ouzinkie Alutiiq Summer Challenge is an annual village tradition for children of all ages to win prizes by practicing their subsistence skills, learning cultural arts, and assisting their Elders with chores and yard work. Grownups can also get active and win prizes with KANA Wellness Center's Summer Bingo. A bingo board is provided on page 9. You'll also learn about Explore the Rock and Activity Afternoons at Baranof Park in this issue. If you're looking for a lower impact activity, ask the Wellness Center about one of our walking groups.

Summer is a great time to get involved with the organizations that improve life in our island communities. You can volunteer with KANA youth programs like Explore the Rock, participate in a fundraising event such as Relay for Life, or help out at a local nonprofit organization. The Alutiiq Museum and Kodiak History Museum both offer a variety of volunteer projects and events for high school students and adults, for example.

As always, we'd like to hear from you regarding which of our programs you already enjoy and what you'd like to see added. Our wellness and prevention teams work hard to provide quality programming for our Alaska Native Beneficiaries and the general community. Let us know if you or your family have participated in any of our events, or why you haven't. Your feedback shapes the future of KANA. Email your ideas for promoting healthy lifestyles for youth, adults, and families to info@kodiakhealthcare.org.

Respectfully,

Andy Teuber, President and CEO

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Alutiiq Museum Contemporary Arts on Display

In May, our friends at the Alutiiq Museum installed eleven Alaskan artworks in KANA facilities. The pieces were selected from the museum's collection of contemporary art, some of which are on public display for the first time. The Rasmuson Foundation has provided funding for the museum to purchase art directly from Alaskan artists over the past fifteen years. Much of the art is preserved in storage until an opportunity arises for inclusion in a museum exhibit or an off-site public location, such as current displays at KANA and the Kodiak Public Library.

Items on display include original works by Helen Simeonoff, Lena Amason-Berns, Sara Squartsoff, Cheryl Lacy, Bruce Nelson, and Jerry Laktonen. Their subject matter showcases Alaska Native coastal lifestyles and environments.

The collection can now be viewed at the Mill Bay Health Center and Alutiig Enwia Health Center. Additional pieces will be hung at KANA's 323 Carolyn Street facility later this summer. The artwork will be on public display through spring of 2021.





ABOVE: Two of four original paintings by Old Harbor artist Lena Amason-Berns revealed in the museum's archival boxes.

TOP RIGHT: Alutiiq Museum collections staff Amanda Lancaster and Alex Painter hang a painting by Bruce Nelson.

LOWER RIGHT: Amanda adjusts a mixed media artwork by Jerry Laktonen.



Written by Alaska Native Tribal Health Consortium. Originally published in Alaska Dispatch News.

Our Health in Our Hands

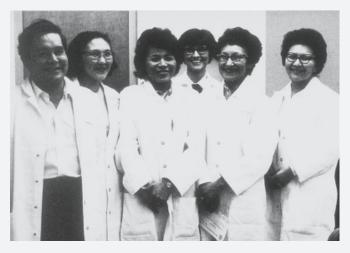
Part 1: The early days of Tribal health care, 1955-1968

The road to Tribally managed health care in Alaska began with the simple idea that Alaska Native people could provide care for Alaska Native patients.

Today, Alaska's Tribal health care system is owned and managed by the Alaska Native people, with objectives and innovations that are unique to the cultures, trends and geography of our state.

But this hasn't always been the case. Ask those who worked to put Alaska Native health care in the hands of Alaska Native people and they'll tell you there was nothing easy about getting to where the Tribal health care system is now.

The road to today's health care network was long and rough. And it resulted in a system that hasn't been duplicated anywhere else in the world.



The Indian Health Service in Alaska

Health care has long been part of Tribal relations in the U.S. The federal government had begun acknowledging "certain responsibilities" toward Native American people in the late 18th century, according to an Indian Health Service publication released to mark the agency's 50th anniversary in 2005. Early Tribal health programs began as early as the 1800s, and it was not unusual for cession treaties to list medical care as partial compensation when tribes were forced to surrender their traditional lands.

In 1955, the Indian Health Service was established as a bureau of the U.S. Public Health Service, taking over work that had previously been

managed by the Bureau of Indian Affairs. That same year, IHS built the Anchorage Medical Center of the Alaska Native Service (known as ANS) in downtown Anchorage.

Growing up, Anchorage resident Vivian Echavarria recalls, going to the doctor at ANS was a day-long affair.

"My mother would take me out of school all day," she said. "I would go to the front area of the old hospital, and she would take a number, and from there she would wait to get my chart. Then we would go to the ER and she'd drop the chart off, take another number, and we'd wait. I remember sitting long hours in that waiting room. And then if I needed to go get my lab (tests) or get an image done, we'd go to all of these ancillary areas and we'd draw a number, wait, draw a number, wait."

At the time, IHS facilities across the country were already considered "poor and outmoded," according to its own reports. Primarily located on or around reservations, IHS facilities were small and focused on critical inpatient care. ANS provided routine primary care for the Anchorage Service Unit (which covered a huge area, from the Aleutians to Glennallen) as well as serving patients from other parts of the state who required a higher level of care than was available in their regions.

The hospital was as much a social gathering spot as it was a

"I remember my mother bringing all of us kids in tow to the Native hospital because relatives were being brought in for care," Echavarria said. They'd bring food and visit with friends and family in the wards.

A one-size-fits-all approach

IHS's Alaska Area Native Health Service is just one of 12 regional "areas" that make up the IHS. Headquartered in Anchorage, the Alaska Area was divided into seven regional service units that oversaw medical care in different areas of the territory, from village clinics to hospitals.

By the time Alaska became a state in 1959, the federal government was nearly 20 years into the Indian termination policy, a succession of laws that attempted to force the assimilation of Native people. The result was the loss of indigenous languages and traditions across the country, including in Alaska.

While individual IHS officers worked to provide health care, preventive medicine and sanitation in Indian Country, the agency's



structure reflected the indigenous policies of the day. In its own 50th anniversary publication in 2005, IHS described its administration at the time as "paternalistic and highly centralized, with local service units reporting to Area Offices, which reported to Washington," with "little input" from Tribal leaders.

Echavarria, who today serves as vice president of professional and support services for Alaska Native Tribal Health Consortium, says that blanket approach didn't work, especially in Alaska. National priorities didn't always translate to every region. And the top-down approach lingered long after boarding schools and relocation initiatives had been abandoned. During her years working in the federally managed health care system, Echevarria remembers IHS pushing nationwide programs to prevent hantavirus -- a disease that has never been reported in an Alaska patient.

"I'm not trying to knock down Indian Health," Echevarria said. "It's just that Indian Health is a government entity that has its governance from people in Maryland." Under that arrangement, she said, "you are banking (on) the decisions from people that may not have a clue as to what the real health care concerns are of the (local) people."

Planting the seeds of self-governance

kodiak**health**care.org

At the time IHS was established, the leading cause of death among Alaska Native people was tuberculosis. Introduced by European explorers in the 1700s, TB had grown to epidemic proportions in the villages. In some places, as many as 75 percent of Alaska Native children tested positive for the disease, according to a 2017 State of Alaska Epidemiology Bulletin. In the 1960s, that number began to decline, thanks to advances in treatment and new hospital facilities like ANS, which was built primarily to address TB, with 291 of its 400 beds allocated for TB patients when it opened.

There was another reason for the disease's decline: a new trial program that designated "community health aides" who were trained to provide medical care in villages where there was no permanent clinic or full-time physician.

"It was in response to the TB effort that IHS created the community health aides," said Paul Sherry, a longtime Alaska health care administrator who helped form the Tribal health consortium in the 1990s. "They needed on-site providers in the communities to do medications management."

Officially authorized by Congress in 1968 — the same year President Lyndon Johnson proposed ending termination policies — the Community Health Aide Program was the first step toward putting Alaska Native health care in the hands of Alaska Native people. Soon, in addition to dispensing tuberculosis medication, community health aides were responding to emergencies and providing care for expectant mothers.

"That was the first time, essentially, that (IHS) moved outside of the model of hiring Western medical practitioners who traveled around and treated people," Sherry said. "The idea was that we'll use local Native people to help get the job done, and of course those people quickly became relied on to do other things."

The Community Health Aide Program changed the way health care was delivered to Alaska Native villages — and it would prove to be the first small step toward putting Tribal health care under Tribal management.



Exploring the Rock with KANA Prevention

Throughout the year, the KANA Prevention department provides educational information and activities to discourage tobacco and substance use in Kodiak's communities. Preventions Specialists host health fairs, speak to students in classroom settings, and host game nights in our island villages.

Summer is when the team takes local students outdoors for adventures and team-building activities with Explore the Rock and Activity Afternoons.

Explore the Rock

This popular outdoor summer program has returned for its fourth summer. Kodiak students entering Grades 6-12 are invited to join in weekly outdoor activities designed to promote physical activity while teaching valuable social and survival skills.

Local program leaders and guest presenters will help in the adventures. Lessons taught include first aid, bear safety, camp cooking and packing, geocaching, and teamwork. Hike locations and topics are listed online at kodiakhealthcare.org/explore.

Activity Afternoons

Baranof Park is where kids will want to begin and end their weeks this summer. KANA hosts Activity Afternoons' group activities on Mondays and Fridays. Spikeball, ultimate frisbee, flag football, basketball and soccer are just some of the fun options to choose from. Rainy day activities will take place under the ice rink shelter. Activity Afternoons at Baranof Park provides an inclusive environment for students First Grade and older, and for all physical abilities. Anyone under 18 years of age is welcome!

Both programs are free, drop-in events: participants may attend as many or as few days as they wish. However, we do ask that everyone arrive on time and stay the duration of each event.

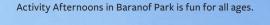
A typical Explore the Rock day lasts four hours on Tuesdays and five hours on Thursdays. Everyone will meet at the KANA Wellness Center for drop-off and pick-up. Students must wear appropriate footwear, such as gym shoes or hiking shoes — no

sandals or flip-flops. Wear warm clothes. Everyone needs to have long pants as well as a jacket or hoodie. Please mark all personal items with your name as staff are not responsible for any lost or stolen property.

Participants of either program should bring a healthy snack (such as an apple or granola bar) and a full water bottle. Please don't let kids bring soda, energy drinks, chips, or candy.

Each day is a complete adventure; kids can participate in any—or all—of the events, but they will need to register before they show up. Registration forms can be downloaded and printed from our website at kodiakhealthcare.org/explore. Completed forms should be emailed to prevention@kodiakhealthcare.org or given to Annegelica Lopez on your student's first day.







With each of this newsletter, we talk with a staff member to learn about their career at KANA.



Wesley Martin Facilities Technician

Originally from Larsen Bay, Wesley moved to Kodiak as a kindergartener, returning to the village in the summers to visit friends and family. After high school he attended University of Alaska Fairbanks to study diesel mechanics. He moved back to Kodiak, worked a handful of jobs including being the grounds keeper for the Bear Valley Golf Course when he was offered an opportunity to join Kodiak Community College as a Maintenance Technician. In November 2016, Wesley joined KANA, first as a part-time van driver, now as a full-time Facilities Technician. With opportunities for on-the-job training through KANA, Wesley is furthering his knowledge by working towards certifications in both HVAC/R and CDL. When not working, you can find him out on his skiff fishing or out the road camping.

What do you like most about your position? I like the variety of projects. Every day is different and there are new things to do and to learn. I also enjoy the people I work with. I get a chance to work with almost everyone at KANA.

Why did you apply for your position? It's a opportunity to expand my knowledge in the maintenance field.

Have you changed positions/been promoted? I started at KANA as a part-time van drive. As a Facilities Technician, I'm currently working on HVAC/R Certifications and my commercial driver's license.

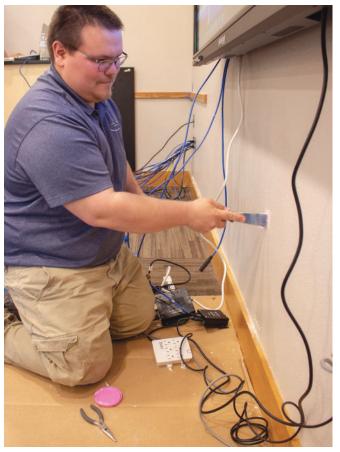
What is your most memorable work moment? Helping move the post office at the AC building. The whole Facilities crew worked together on it. It was a huge construction project with a lot of demolition and putting up of new walls—and a lot of laughs. It isn't very often we get the whole crew together to work on something.

What do you like best about your community? When something happens, everyone comes together to help others.

Hobbies and Interests? I enjoy camping and fishing, even when the weather isn't that great. Camping is great for disconnecting from the world. It's fun playing games with friends, too.

What does "To Elevate the Quality of Life of the People We Serve" mean to you? Our mission means we are helping patients when they need help, helping coworkers with what helps them, and supporting the people we serve. Anything we do at KANA as the Facilities team helps the people who directly serve our patients and our community.

The Facilities team is responsible for the operation, maintenance and improvement of KANA's clinics and offices.



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Join our team! kodiakhealthcare.org/careers

KANA offers a wide range of career opportunities for candidates wanting to develop their skills while contributing to our dedicated team. We're looking for talented individuals with the enthusiasm and dedication to join us in our mission.

KANA Wellness Center Summer Bingo!

Get fit and win prizes this summer with KANA Wellness Center's bingo challenge!

Using the bingo board on this page, perform as many activities as you can (activities are listed on the next page) between May 27–August 31. For each activity that you complete, write the date on the corresponding square. Complete five squares diagonally, vertically, or horizontally to earn one entry into the prize jar. For a blackout (completing every block), you earn fourteen entries!

Prize drawings will take place on Tuesday, September 10. To get your name in the prize jar, you must show the KANA Wellness Center staff your Bingo card on or before September 9. If you reside in a village, show your Behavioral/Community Health Aid your completed squares. Bingo boards are also available online at kodiakhealthcare.org/bingo.

If you have any questions or need to request an alternative activity, call the KANA Wellness Center: 907.486.1377.

(completing every block), yo	ou earn fourteen entries:	can the KAN	A Wellness Center: 907.486.	13//•
1	2	3	4	5
6	7	8	3 9	10
11	12	13 BONUS SQUARE!	14	15
16	17	18	19	20
21	22	23	24	25

KANA Wellness Center Summer Bingo!

SUMMER BINGO ACTIVITY LIST

(Flip page for bingo board!)

Win fun prizes by having fun with KANA Wellness Center's Summer Bingo challenge! Flip back a page for your bingo board and instructions. Be sure to follow KANA Wellness Center on Facebook for even more fitness challenges and inspiration!

- 1. Log at least 10,000 steps every day for 7 straight days.
- 2. Go fishing with a friend. Catch one living sea critter to earn your square!
- 3. Strike your favorite yoga pose with your favorite Kodiak view in the background. For an extra prize jar entry, upload your photo to social media with the tag #KANASummerBingo19
- 4. Perform one of the following tasks for an Elder: wash their car, mow their lawn, pick up their yard trash, give them a foot rub, or walk their dog.
- 5. With your beach findings, make an awesome art project!
- 6. On your outdoor adventures, take a picture of: a fish carcass, a wildflower, a salmonberry, beach glass with the ocean in the background, a heart shaped rock, and two ducks side-by-side.
- 7. Perform one of the following self-care activities for 30 minutes: banya, sauna, massage, yoga, hot bath.

- 8. Compliment two complete strangers today.
- 9. Bike a total of 15 miles at one time or over multiple sessions (indoor or outdoor).
- 10. Go tide pooling and take pictures of three different species.
- 11. Find one beach glass of every color: yellow, red, brown, dark blue, white/clear, and green.
- 12. Paint 2 rocks with an Alaska Native art design. Hide them on two different trails.
- 13. BONUS SQUARE: Upload one or all photos from squares 6, 11, and/or 23 to social media and tag #KANASummerBingo19 (If you do not have access to social media, show pictures to KANA Wellness Center staff.)
- 14. Invite a friend/family member for coffee and a walk. Tell them why you are thankful to have them in your life.
- 15. Eat three different types of vegetables every day for one week straight.
- 16. Walk the length of a beach. At the end of the beach, sit down for a few minutes and reflect on 3 things that you are thankful for in your life.

- 17. Prepare two dishes using an outdoor Alaskan resource that you harvested (berries, garden goods, wild game, fish).
- 18. Fill two grocery bags full of trash found outside. Drop off at your nearest dumpster.
- 19. Kayak, paddle board, or go surfing for a total of 60 minutes.
- 20. Hike or walk a trail/mountain of your choice. Hike the same trail a second time and log a shorter time.
- 21. Find 2 painted rocks on any of the hiking trails. If they say "KANA Summer Bingo" on them, bring them into the KANA Wellness Center for 2 extra prize jar entries.
- 22. Pick a bouquet of Alaska wild flowers and deliver it to someone who has made a positive impact in your life.
- 23. Kodiak residents, take your picture with the flagpole on Old Woman's mountain.
- 24. Challenge a friend or family member to 60 minutes of any outdoor exercise game, such as Frisbee, tennis, softball, corn hole, basketball, etc.
- 25. Plant flowers, vegetables, or any other plant in a garden, pot, or the community garden.

Measles, Mumps and Rubella (MMR) Vaccine

This spring, the national Centers for Disease Control and Prevention (CDC) confirmed hundreds of individual cases of measles across the United States. U.S. outbreaks are linked to travelers who brought measles back from other countries where large measles outbreaks are occurring. The majority of people who got measles were not vaccinated.

As of July 16, the Alaska Department of Health and Social Services (DHSS) has confirmed a single case of measles in an unvaccinated teenager from the Kenai Peninsula who recently traveled out of state to Arizona via Seattle, Washington. This makes Alaska the 29th state to have a confirmed case of measles in 2019.

The summer travel season is an important time to make sure you and your family members are up to date on vaccinations by talking with your health care provider.

Measles is prevented by the measles, mumps and rubella (MMR) vaccine. Two doses of MMR are recommended for all children starting with the first dose at 12-15 months of age and the second dose at 4-6 years of age. Teens and adults should also confirm that they are up to date on their MMR vaccination. One dose of MMR vaccine is approximately 93% effective for the prevention of measles and two doses are approximately 97% effective.

If you develop symptoms of measles, call your health care provider before coming into the clinic.

ABOUT MEASLES

Measles is a highly contagious, vaccine-preventable disease caused by a virus. It spreads in the air through coughing and sneezing. Measles starts with a fever, runny nose, cough, red eyes and sore throat. A rash breaks out three to five days after symptoms begin. It usually begins as flat red spots that appear on the face at the hairline and spread downward to the neck, trunk, arms, legs and feet. Serious complications can occur.

Keep in mind that not everyone is at risk for measles. You are considered adequately protected if:

- You are a preschool age child with one measles vaccine (MMR - measles, mumps, rubella).
- You are a school-aged child or college student who has received two doses of measles vaccine.
- You are a health care worker who has had two doses of measles vaccine.
- You are an adult who is not a health care worker and who has had one dose of measles vaccine.
- You were born before 1957.
- You have had the measles, diagnosed by a health care provider and confirmed with a lab test, or you have had a blood test that shows you are immune to measles.

September is Suicide Prevention Month

Many families and communities across Alaska experience the impacts of suicide. This is especially painful for our rural island communities where people are so closely connected. In September, KANA joins national efforts to bring awareness to suicide prevention.

KANA's Prevention Specialists are prepared to offer suicide awareness training to teach how to recognize suicidal ideation and how to react appropriately. By equipping our community members with effective tools, we can lay a foundation for the healthy future generations to come. Contact prevention@kodiakhealthcare.org for information.

WARNING SIGNS OF SUICIDE

- Talking about wanting to die
- Looking for a way to kill oneself
- Talking about feeling hopeless or having no purpose
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- · Acting anxious, agitated or recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings
- The more signs a person shows, the greater the risk. Warning signs are associated with suicide but may not be what causes suicide.

WHAT TO DO

If someone you know exhibits warning signs:

- Stay with them, do not leave the person alone
- Remove any firearms, alcohol, drugs or sharp objects that could be used in a suicide attempt
- Call the U.S. National Suicide Prevention Lifeline at 800-273-TALK
- Take the person to an emergency room or seek help from a medical or mental health professional

If you are in need of an immediate intervention or someone you know is in crisis or having thoughts of suicide, please talk to someone you trust, or call 911 or call the Alaska Careline at 1-877-266-4357, or text HELLO to the crisis text line at 741741. The Alaska Careline is available for you 24 hours a day, 365 days a year, and your calls and texts are free and completely confidential. You can also visit carelinealaska.com.



Phytoplankton (noun): Also known as microalgae, phytoplankton are similar to land plants in that they contain chlorophyll and require sunlight to live and grow. Most phytoplankton are buoyant and float in the upper part of the ocean, where sunlight penetrates the water. In a balanced ecosystem, they provide food for a wide range of sea creatures including whales, shrimp, snails, and jellyfish.

baseline data (noun): This is a set of data collected at the beginning of a study. Baseline data is useful for comparing to data acquired later on. For instance, regional baseline data for PSP monitoring in Kodiak will set a standard for determining when levels are high, low, or typical.

Monitoring Poisonous Toxins in Kodiak

In March, KANA's environmental department began monitoring four locations on the Kodiak road system: two sites at Near Island's Trident Basin and two at Mission Beach.

Monitoring consists of weekly phytoplankton samples and phytoplankton identification along with biweekly tissue samples from shellfish collected on the beaches at low tide. Samplings are sent to KANA's Tribal partners, Sitka Tribe of Alaska, where the tissue is processed and analyzed for PSP levels.

Since beginning fieldwork in March, the presence of all three harmful algal genus types has been confirmed:

Alexandirum—associated with paralytic shellfish poisoning (PSP)

Dinophysis—associated with diarrhetic shellfish poisoning (DSP) Pseudo-nitzschia—associated with amnesic shellfish poisoning (ASP)

In large quantities, each algal genus poses a threat to human health. As PSP is life-threatening, this project focuses on the abundance of Alexandrium in the water and the PSP toxin, saxitoxin, in shellfish tissue.

KANA is collaborating with local and state entities to publish community advisories when levels are above the regulatory limit, especially when they reach lethal levels.

"Please know that this monitoring project is for development of regional baseline data to discover environmental trends of these harmful species," says Andie Wall, KANA Environmental Technician. "Traditional knowledge is being challenged as we are seeing temperatures rise and ocean chemistry change. PSP levels have been detected at concerning levels—even in months containing 'r'. The only safe way of knowing if your shellfish are clean of PSP is to have them tested."

Biotoxins are not destroyed during cooking or freezing. Pressure cooking does not destroy the toxins. There is no way to prepare shellfish infected with PSP toxins that will make them safe to eat.

Crab, because they feed on shellfish, can also become toxic. Even if the crab meat is safe, toxins tend to accumulate in crab gut and "butter" (the white-yellow fat inside the back of the shell). Clean crab thoroughly and avoid eating the crab butter and guts.

If you would like to share harvesting strategies, or are interested in volunteering, please contact Stephanie Mason at 907.512.5353 or Andie Wall at 907.486.1313.

This project is supported with grant funds provided by the Environmental Protection Agency (EPA) Indian General Assistance Program and the Bureau of Indian Affairs Tribal Resilience.

What is PSP?

Paralytic shellfish poisoning (PSP) is caused by eating shellfish contaminated with saxitoxin, a toxin produced by dinoflagellates of the genus Alexandrium. Saxitoxins, also known as PSP toxins, cause symptoms related to the nervous system. PSP toxins can be found in shellfish (such as mussels, cockles, clams, scallops, oysters, crabs, and lobsters) that usually live in the colder coastal waters near the Pacific states and New England.

Symptoms usually begin within two hours of eating contaminated shellfish, but can start anywhere from 15 minutes to 10 hours after the meal. Symptoms are generally mild and can include the following:

- Numbness or tingling of the face, arms, and legs
- Headache
- Dizziness
- Nausea
- · Loss of coordination
- · A floating sensation
- Muscle paralysis and respiratory failure can occur in severe cases

In cases of severe poisoning, the Centers for Disease Control states that muscle paralysis and respiratory failure can lead to death in 2–25 hours. The risk of death from PSP is reduced if healthcare professionals have access to machines that help people breathe (ventilators) if the ill person becomes paralyzed.



Stephanie Mason of KANA, and Steve Kibler of NOAA Beaufort



World Breastfeeding Week

In celebration of World Breastfeeding Week, please help us celebrate with a fun event at Harborside Fly-By Coffee. Enjoy snacks and refreshments, play games, and win prizes with your family, friends, and the WIC team!

Tuesday, August 6 3-5 p.m. at Harborside Fly-By Coffee 1715 Mill Bay Road



Your Body Makes What Your Baby Needs

You can increase your milk supply by doing a few simple things:

- Make sure that baby is positioned correctly when nursing.
- Nurse at least eight times a day, for as long as your baby wants.
- · Offer your baby both breasts at each feeding.
- · Give your baby only breast milk.
- · Perform hand expression.
- · Avoid pacifiers and bottles when possible. Early supplementation of formula may cause a delay in onset of milk. Try to supplement only when medically necessary.

The Benefits of Breastfeeding

Breastfeeding reduces the rate of infants being diagnosed with:

- · Ear infections
- Eczema
- · Gastrointestinal infections
- Lower respiratory tract infections
- Asthma
- Type 2 diabetes
- · Sudden infant death
- · Various cancers for mom and baby

If you have questions about breast feeding, please contact WIC at 907.486.7312 or contact your primary care provider.

Women, Infants & Children

The WIC program provides eligible families with vouchers to help purchase nutritious foods such as milk, juice, eggs, cheese, dry beans and peas. Growth and development monitoring, diet assessment, and nutrition education services are also available.

High-risk nutrition counseling is available through a registered dietitian. Breastfeeding services and support are also an integral component of WIC services. Eligibility determination is based on federal poverty guidelines, residency and nutritional risk.

Find out how WIC can assist your family. Contact a specialist at 907.486.7312

Healthy Kodiak 2019: September 4

Cultivating Resiliency Across Our Generations

A community that actively works to improve the quality of life for its residents creates healthy individuals. We honor these children, adults, and Elders who frequently interact to share knowledge and learn, provide support for each other, and form strong relational bonds as they support a healthy local community.

Healthy Kodiak 2019 is an opportunity for these generations to come together and learn about local issues that threaten to destabilize the resiliency of our community and undermine its health. This all-day event features interactive discussions, educational presentations, and cultural activities that explore how each generation can leverage our interdependence to overcome these challenges.

Topics range from supporting young children through positive programs and protecting them from adverse childhood events to recognizing those who are struggling with depression and suicidal ideation and understanding how to provide the support they need to cope. Other topics share firsthand knowledge about how grandparents can succeed in raising their grandchildren as parental roles shift back to them as well as the planning challenges that families face in preparing to transition care out of the home for their aging parents. Another powerful topic looks at how we

can develop a strong community support dynamic and by so doing overcome historical trauma and build collective resiliency to rewrite our future stories.

In addition, mid-day breakout sessions will give attendees the opportunity to choose two topics they are interested in and experience how these cultural activities transfer knowledge across the generations to promote healthy relationships and support emotional healing for both individuals and communities.

We invite you to attend Healthy Kodiak 2019 with your family and friends, so that together we can improve the health of our community. It is a free event and open to the public. You may register in advance or at the event. To register in advance, view the full agenda, receive updates and learn more about the guest speakers and their topics, visit healthykodiak.org or follow @HealthyKodiak on Facebook.





Kodiak Area Native Association 3449 Rezanof Drive East Kodiak, Alaska 99615

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Healthy Kodiak 2019

Wednesday, September 4 • 10 a.m. Afognak Center, 300 Alimaq Drive, Near Island

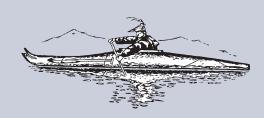
Healthy Kodiak 2019 is a forum designed to bring the community together with local and visiting experts in health and wellness. It's an opportunity to learn how to take control of your health and a place to share ideas for improving the quality of life in our island communities.

Join us for a day of:

Interactive Discussions
Educational Presentations
Group Activities
Nutrition Demonstrations
and more!

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KANA Annual Meeting

Saturday, October 12 • 9 a.m.

Afognak Center, 300 Alimaq Drive, Near Island

The Annual Meeting of the Kodiak Area Native Association will be held on Saturday, October 12, 2019 for the purposes of electing four (4) Directors to the Board and to conduct such other business as may properly come before the meeting.

Registration: 9 a.m.

Call to Order of the Meeting: 10 a.m.

Lunch will be provided following the meeting.

The following Tribal chapters will each elect one (1) Director at this year's meeting:

Native Village of Larsen Bay Native Village of Ouzinkie Tangirnaq Native Village Gwangkuta Suuget, At Large

Door prizes will be awarded. To win door prizes, you must be present. We look forward to seeing you there!