

Enniskó:wa 2025 Newsletter

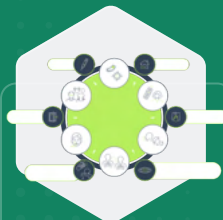


Community Health Services Sector

Our Vision: Tsie Nen:we Wa'kwarihwaintah
"Our Future, Our Responsibility"

OUR MISSION

With a Good Mind, it is our responsibility to protect and exercise our inherent rights while creating sustainable partnerships and building a strong community for future generations.



Infection Control



Colorectal Cancer Awareness



Stages of Change



Monthly Calendar

In this Issue:



Healthy on a Budget



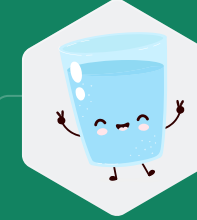
Recipes



Food Safety



Green Food Bag



Safe Drinking Water



Vaccinations



Kanonhkwa'tsheri:io Health Facility



Contact Us:



613.575.2341 ext. 3220

A top-down view of a variety of fresh ingredients arranged on a grey surface. At the top are several slices of dark brown bread and a whole loaf of white bread. To the left is a piece of raw red meat. Below the bread are two heads of garlic, a bowl of mixed grains, and some loose grains. In the center are two large pieces of salmon. To the right of the salmon are green peas, a red bell pepper, a whole carrot, and a purple eggplant. At the bottom are hazelnuts, cashews, a bowl of lentils, a bowl of butter, a white eggplant, a head of green cabbage, and two red tomatoes.

Happy **NUTRITION MONTH!**

Nutrition Month is celebrated each March to remind us all of how essential good nutrition is to our health and well-being.

Health Canada



Meal planning from start to finish in 4 steps



Estimated reading time: 1 minutes

1



Decide what to eat

Write down your meal and snack ideas:

- Get [recipe ideas](#)
- Plan to use the foods you have before they go to waste

2



Make your grocery list

Write down the foods you need for your meal plan:

- Scan grocery flyers for healthy foods on sale
- Keep a grocery list handy and write down items as you run out of them

3



Go shopping

Stick to your grocery list to help:

- Reduce food waste
- Save money and time

4



Start cooking

Refer to your plan:

- Post your meal plan where everyone can refer to it
- Give everyone a job to help with the meal plan

How to Eat Healthily on a Budget

Healthy eating on a budget can be made easier with these ideas:

→ **Stick to your list**

- Buying only what is on your grocery list will help you cut down on impulse buys.

→ **Shop for sales**

- Check out flyers, coupons, mobile apps and websites for deals on foods that are on your list.
- Look for reduced prices. Products getting close to their “best before dates” and oddly shaped, or slightly bruised produce, may be offered at a lower price or discount. These products are just as healthy as “perfect” varieties and buying them also helps reduce food waste.

→ **Compare prices**

- Compare the unit price on the label to know which product is less expensive.
- In grocery stores where price-matching is offered, use flyers to price match products on sale.
- Scan different shelves. Companies pay more to place their products at eye level. You may find other versions of the same foods on higher or lower shelves.
- Compare prices on generic and brand name products to see if there is a difference before choosing.
- Foods sold in single-serve packaging can cost more. Buy the full size or family size version and divide it up yourself

How to Eat Healthily on a Budget

Healthy eating on a budget can be made easier with these ideas:

→ Stock up

Stock up on canned goods and staples when they are on sale. Extend the shelf life of sale products. Freeze:

- fish
- fruit
- vegetables
- whole grain bread
- lean meats or poultry

Buying foods in bulk can help you save money. Be careful not to buy more than you need, because this can lead to waste.

→ Shop for sales

- Check out flyers, coupons, mobile apps and websites for deals on foods that are on your list.
- Look for reduced prices. Products getting close to their best before dates and oddly shaped or slightly bruised produce may be offered at a lower price or discount. These products are just as healthy as “perfect” varieties and buying them also helps reduce food waste.

→ Consider the season

- Fresh vegetables and fruit are usually less expensive when they are in season.
- Frozen and canned vegetables and fruits are also healthy options. They can be less expensive than fresh produce when it is out of season.

How to Eat Healthily on a Budget

Healthy eating on a budget can be made easier with these ideas:

→ Choose plant-based protein foods more often

- Beans, lentils and other legumes are inexpensive protein foods. Use them in your meals several times a week.

→ Limit highly processed foods

- Limit highly processed foods. These are usually low in vitamins and minerals and can cost more.
- Prepare foods at home. Although they can save time, prepackaged foods such as grated cheese and pre-seasoned meat cost more.

→ Set a budget

- Decide how much you will spend on groceries each week or month.

→ Explore grocery stores

- Shop at discount grocery stores, which offer lower prices.
- Avoid grocery shopping at convenience stores, which are more expensive.
- Check with your grocery store to see if it offers any discounts. Some stores feature a “seniors’ day” or a student discount day with special discounts.

Nutritional information

Per serving (1 of 8)

Calories 210

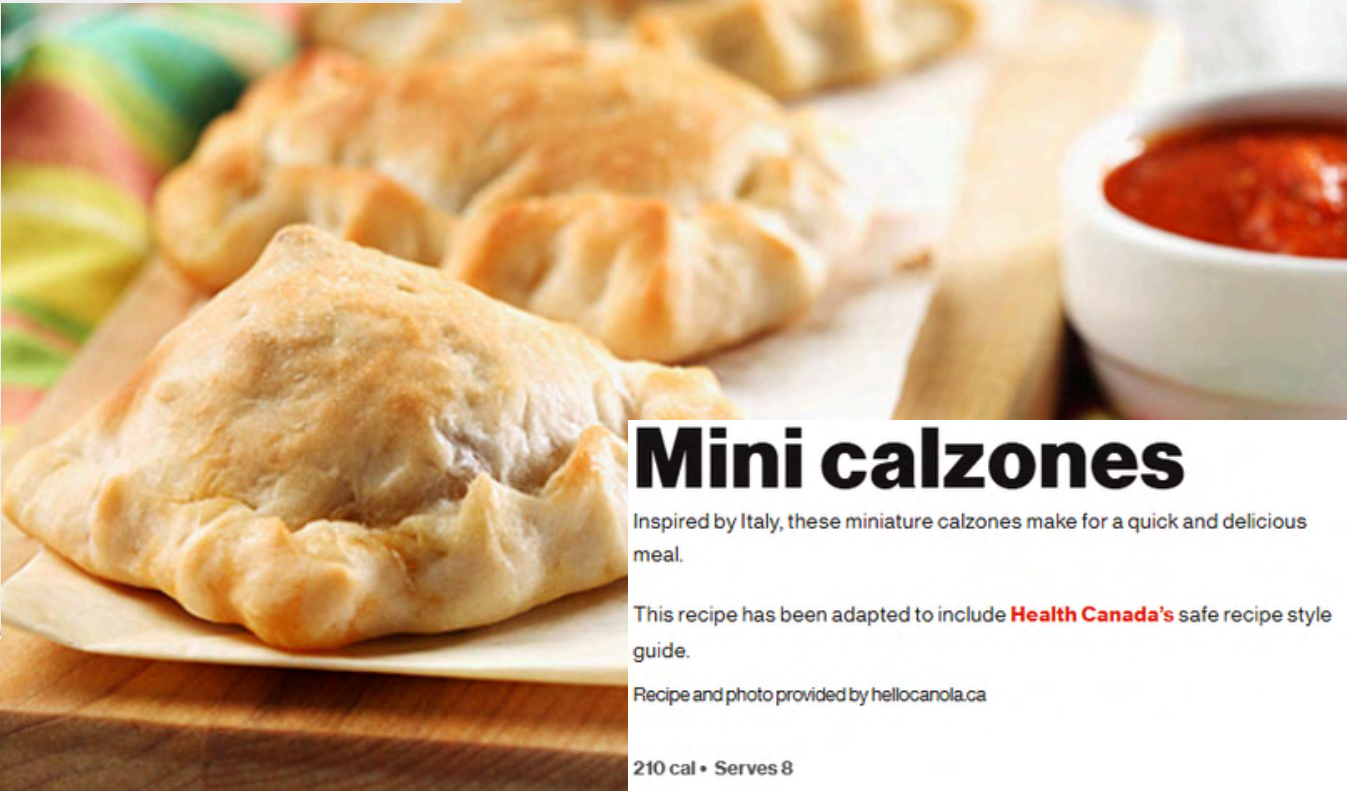
Protein 12 g

Sodium 450 mg

Potassium 36 mg

Total fat 6 g
Saturated fat 1.5 g
Cholesterol 20 mg

Carbohydrates 27 g
Fibre 1 g
Sugars 5 g
Added sugars 0 g



Mini calzones

Inspired by Italy, these miniature calzones make for a quick and delicious meal.

This recipe has been adapted to include **Health Canada's** safe recipe style guide.

Recipe and photo provided by hellocanola.ca

210 cal • Serves 8

Directions

Step 1

Wash hands with soap and warm water for at least 20 seconds. Wash and dry all surfaces and equipment used for recipe preparation. Gently rinse onion, mushrooms and garlic under cool running water before preparing these ingredients.

Step 2

In large non-stick skillet, brown beef over medium heat until beef crumbles and is cooked; drain and set aside. Use separate equipment when handling raw food and cooked food. In a separate large skillet, heat 1 tbsp (15 mL) and 1 tsp (5 mL) of canola oil over medium heat. Sauté onion, mushrooms and garlic for 3 minutes or until tender. Stir in Italian seasoning and pepper. Stir in ground beef and set aside.

Step 3

Preheat oven to 450 °F (230 °C).

Step 4

Using clean hands, divide pizza dough into eight pieces. Roll each dough piece into 3 inch (7.5 cm) rounds. Spoon beef mixture equally over half of each piece, leaving ½ inch (1 cm) border. Top equally with cheese.

Step 5

Fold dough over filling until edges almost meet. Bring bottom edges over top edges and crimp dough with fingers to form rim. Prick tops of calzones with fork to allow steam to escape. Place on large baking sheet that has been lightly greased and floured. Brush each calzone with canola oil, if desired.

Step 6

Bake for 10 to 12 minutes until the calzones reach a minimum internal temperature of 160°F (71°C) when checked with a digital food thermometer and lightly browned. Serve with warm marinara sauce. Put away any leftovers into the fridge within 2 hours or sooner if they are in a warm location.

Prep time
0h 15m

Cook time
0h 15m

Total time
0h 30m

Ingredients

- ☐ 1/2 small yellow onion, diced
- ☐ 1 cup (250 mL) sliced mushrooms
- ☐ 1 clove garlic, minced
- ☐ 8 oz (250 g) lean ground beef
- ☐ 4 tsp (20 mL) canola oil, divided
- ☐ 1/4 tsp (1 mL) dried Italian seasoning
- ☐ 1/4 tsp (1 mL) freshly ground black pepper
- ☐ 14 oz (400 g) prepared pizza dough
- ☐ ½ cup (125 mL) shredded reduced-fat mozzarella cheese
- ☐ Canola oil for brushing, optional
- ☐ 1 cup (250 mL) reduced-sodium marinara sauce, warmed

*Recipe retrieved
from Heart and
Stroke*

Ingredients

- ☐ 4 lb (2 kg) round eye or boneless blade pot roast
- ☐ 4 cloves garlic, minced
- ☐ 2 tbsp (25 mL) low sodium steak spice
- ☐ 3 tbsp (45 mL) canola oil
- ☐ 2 onions, sliced
- ☐ 2 1/2 cups (625 mL) sodium reduced beef stock
- ☐ 1/3 cup (75 mL) all-purpose flour
- ☐ 1/4 cup (50 mL) minced fresh parsley



Nutritional information

Per serving (1 of 4)

Calories 240

Protein 36 g

Sodium 160 mg

Potassium 615 mg

Total fat 8 g

Saturated fat 2 g

Cholesterol 90 mg

Carbohydrates 6 g

Fibre 0 g

Sugars 1 g

Added sugars 0 g

Joan's crock pot beef

Slow cooking brings out the flavours in this easy pot roast – perfect for a busy weekday

Recipe and photo provided by hellocanola.ca

240 cal • Serves 12

Prep time
0h 5m

Cook time
7h 30m

Total time
7h 35m

Directions

Step 1

Pat roast dry. In large, shallow dish, combine garlic and steak spice; rub all over roast. In large Dutch oven, heat 2 tbsp (25 mL) of canola oil over medium-high heat and brown roast all over, turning with wooden spoon, about 8 minutes. Transfer to plate; set aside. Drain off fat in pan.

Step 2

Reduce heat to medium and heat remaining oil. Fry onions, stirring occasionally, until golden, about 4 minutes. Transfer onions to 24 cup (6 L) slow cooker. Top with browned roast. Add beef stock to Dutch oven; bring to boil, stirring and scraping up brown bits. Pour over roast. Cover and cook on low until fork-tender, about 7 hours.

Step 3

Remove pot roast; cover and keep warm. Skim fat from pan juices. Whisk flour with 1/2 cup (125 mL) water, then whisk into slow cooker. Cover and cook on high until thickened, about 15 minutes. Sprinkle with parsley and serve with roast.

*Recipe retrieved
from Heart and
Stroke*

Ingredients

- ☐ ½ cup (125 mL) wild rice
- ☐ 2 cups (500 mL) water
- ☐ ½ cup (125 mL) celery, diced
- ☐ ½ cup (125 mL) cucumber, diced
- ☐ ¼ cup (50 mL) green onion, chopped
- ☐ ½ cup (125 mL) fresh or frozen blackberries, divided
- ☐ 3 tbsp (45 mL) red wine vinegar
- ☐ 1½ tbsp (22 mL) canola oil
- ☐ 2 tsp (10 mL) granulated sugar
- ☐ ¼ tsp (1 mL) freshly ground pepper
- ☐ ¼ cup (50 mL) toasted pecans, chopped



Nutritional information

Per serving (1 cup / 250 ml)

Calories 130

Protein 3 g

Sodium 10 mg

Potassium 135 mg

Total fat 7 g

Saturated fat 0,5 g

Cholesterol 0 mg

Carbohydrates 16 g

Fibre 2 g

Sugars 3 g

Added sugars 1 g

Crunchy wild rice salad with blackberry dressing

Prepare the wild rice up to 2 days in advance to make quick work of this gorgeous salad. A perfect accompaniment to any grilled or roasted meat, also a lovely side in a packed lunch. Serve warm or cold.

130 cal • Serves 6

Prep time
0h 15m

Cook time
1h 0m

Total time
1h 15m

Directions

Step 1

In a large saucepan, combine rice and water. Bring to a boil, cover, reduce heat and simmer for 45-60 minutes, until grains have started to pop. Remove from heat with lid still on and allow to stand for 30-60 minutes until desired texture is achieved. Drain and cool.

Step 2

In a large bowl, combine rice, celery, cucumber and green onion.

Step 3

Prepare dressing: Whisk well or use blender to combine ¼ cup (50 mL) of the blackberries, red wine vinegar, canola oil, sugar and pepper.

Step 4

When ready to serve, in a large bowl or individual plates, place rice mixture on bottom, sprinkle with remaining ¼ cup (50 mL) blackberries, pecans and drizzle attractively with dressing.

*Recipe retrieved
from Heart and
Stroke*

Food Safety in the Kitchen - Self Checklist for the Community

	Food Safety Step
Category Cold Storage/Cooling of Hazardous Food	1- Food is held at 4o C (40o F) or less 2- Food is frozen at -18o C (0o F) or less 3- Food is cooled from 60o C to 20o C within 2 hours 4- Food is cooled from 20o C to 4o C within 4 hours
Cooking/Hot Holding/Reheating of Hazardous Food	5- Thermometers used to verify food preparation and storage temperatures. 6- Thorough cooking to minimum internal food temperature. 7- Hot holding; minimum of 60o C after cooking, rapid re-heating 8- Re-heating: to original cooking temperature in 2 hours
Protection from Food Handler Contamination	9- Washing hands thoroughly before and after handling food 10- Separate hand washing basin provided for food handlers 11- Hand washing basin with supplies of soap and paper towels in dispensers 12- Food handler hygiene
Protection from Adulteration, Contamination	13- Separate raw foods from ready-to-eat foods during storage and handling 14- Food protected from potential contamination and adulteration 15- Constant supply of potable hot and cold running water under pressure 16- Toxic/poisonous substances (chemicals/pesticides) to be stored separately from food
Equipment Utensil Sanitation	17- Manual dishwashing: Wash/rinse water clean, sanitizer- Chlorine bleach ½ teaspoon/ 1 liter water 18- Mechanical dishwashing: Wash, rinse, sanitize technique with hot water or sanitizers 19- Food contact surfaces washed/rinsed/sanitized after each use and following any operations when contamination may have occurred



Please contact Community Health Program if you are interested in Food Handler Course at [613-575-2341](tel:613-575-2341) ext. 3220



Tetewatska:hon




GREEN FOOD BAG

ORDER NOW
FOR APRIL

DEADLINE TO ORDER:
FRIDAY, APRIL 4TH
PICKUP:
WEDNESDAY, APRIL 16TH

Contact:

Community Health Services
613-575-2341
Extension 3220



Drinking Water Safety During Natural Disasters

During natural disasters such as flooding, water may not be available or safe for drinking, bathing, or washing clothes. Floods and other disasters can contaminate and damage drinking water wells and well contamination.

Do not use water you suspect is contaminated. Contaminated water can lead to illness.

Do not use suspected or contaminated water to wash dishes, brush your teeth, wash and prepare food, make ice, or make baby formula.

Do not use water from the following:

- Radiators
- Hot water boilers (part of your home heating system)
- Do not try to boil or disinfect water contaminated with fuel or toxic chemicals. If you suspect your water has fuel or chemical contamination, contact your local health department for specific advice.

How to make water safe:

- **Boil:** Bring water to a full rolling boil for one minute to kill germs. If the water is cloudy, let it settle and skim the clean water.
- **Disinfect:** Add ¼ teaspoon of unscented household chlorine bleach to one gallon of water and let it sit for 30 minutes. The water should have a faint chlorine smell.
- **Filter:** Use a water filter.
- **Store:** Use clean, sanitized containers to store safe water.

What to do if your water is unsafe:

- Use bottled water.
- Use boiled or treated water for drinking, cooking, and personal hygiene.
- Wash your hands with soap and safe water.
- Throw out ice cubes made with unsafe water.
- Avoid using water from radiators or boilers.

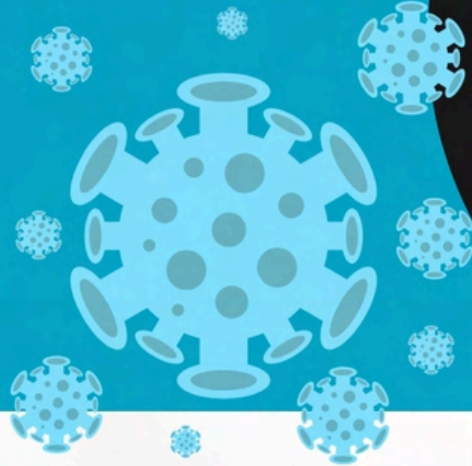
Other tips:

Don't drink water from streams, rivers, or creeks.

Don't store water in containers that previously held laundry detergent or other unsafe chemicals.

MCA COMMUNITY HEALTH SERVICES

COVID-19 VACCINE RECOMMENDATIONS



The new COVID-19 vaccine formulation is recommended for the following populations:

- All adults 65 years of age or older

Those 6 months of age and older who are:

- Residents of long-term care homes and other congregate living settings
- Individuals with underlying medical conditions that place them at higher risk of severe COVID-19, including children with complex health needs
- Individuals who are pregnant
- Individuals in, or from, First Nations, Métis and Inuit communities
- Members of racialized and other equity-deserving communities
- People who provide essential community services

All other previously vaccinated and unvaccinated individuals (6 months of age and older), may receive the most recently updated vaccine in the fall of 2024.



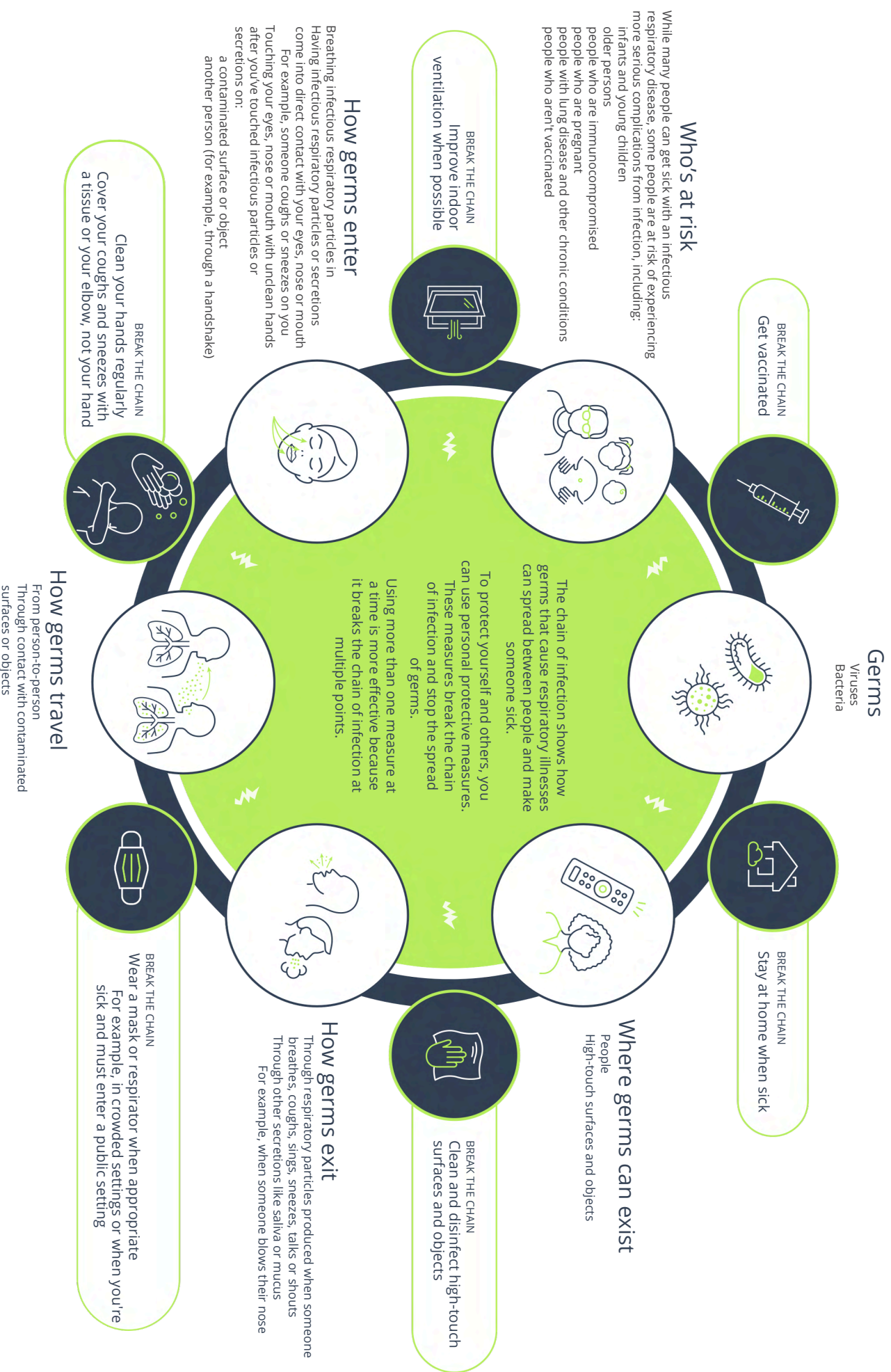
QUESTIONS?



(613) 575-2341 EXT. 3220



Respiratory infectious diseases: Break the chain of infection



MYTHS AND FACTS ABOUT COLORECTAL CANCER

MYTH 1: COLORECTAL CANCER IS A MAN'S DISEASE.

FACT: Colorectal cancer affects both men and women almost equally.

MYTH 2: I DON'T HAVE ANY SYMPTOMS SO I MUST NOT HAVE COLORECTAL CANCER.

FACT: One of the most widely held misconception is that symptoms will be evident. More than half of people diagnosed have no symptoms. Symptoms such as a change in bowel movements, rectal bleeding, abdominal pain, unexplained weight loss, anemia or constant tiredness may all signal colorectal cancer. Once the symptoms start to develop it may be a sign of more advanced disease. It is important you contact your health care provider if you have any of these symptoms.

MYTH 3: ONCE DIAGNOSED, IT IS TOO LATE TO DO ANYTHING.

FACT: Colorectal cancer is preventable and highly treatable when caught at an early stage. People diagnosed in the early stages have a very good chance of a cure and surviving. Therefore, screening for colorectal cancer, which means looking for the presence of the disease when no symptoms are present, is very important to help catch the disease in its early stages.

MYTH 4: YOU DON'T NEED TO GET SCREENED IF THERE IS NO FAMILY HISTORY OF THE DISEASE.

FACT: If you have a family history of colorectal cancer, you may need to start screening before age 50. Consult your physician about screening options best for you. About 1 in 3 people who develop colorectal cancer have other family members who have had it. Most colorectal cancers are found in people without any family history of the disease, which means that it is very important to get screened even if you have no family history of colorectal cancer.

MYTH 5: COLONOSCOPY IS THE ONLY WAY TO SCREEN FOR COLORECTAL CANCER.

FACT: There are several screening options for colorectal cancer, including fecal immunochemical test (FIT), sigmoidoscopy, the double-contrast barium enema, the digital rectal exam and of course, the colonoscopy.

MYTH 6: COLONOSCOPY IS UNPLEASANT, UNCOMFORTABLE AND DIFFICULT TO PREPARE FOR.

FACT: Preparing for colonoscopy involves cleaning the colon with the help of prescription and over the counter medicine. Typically, they must be consumed a day or two before the procedure. During the actual procedure you may be sedated to eliminate discomfort. The procedure itself takes between 15-20 minutes.

MYTH 7: MY FRIEND HAD A COLONOSCOPY, SHOULD I GET ONE TOO?

FACT: Your healthcare provider may recommend that you get a colonoscopy if you are experiencing colorectal cancer symptoms or are considered high risk for developing the disease. You are considered high risk if you: have a personal or family history of the disease, have a hereditary syndrome, or if you have an inflammatory bowel disease such as ulcerative colitis or Crohn's disease.

MYTH 8: A POLYP MEANS I HAVE CANCER.

FACT: Polyps are benign growths that if left unchecked have the potential to develop into cancer. Polyps can be easily removed during a colonoscopy with the colonoscope. By removing the polyp at an early stage, it is prevented from becoming cancerous.

MYTH 9: IF I HAVE COLORECTAL CANCER, IT MEANS I WILL DIE FROM IT.

FACT: When colorectal cancer is caught early there is over 90% chance of curing it. That's why screening is so important. Once colorectal cancer spreads to a distant organ (metastasized), it becomes more difficult to treat. Recent advances in treatments, however, have improved outcomes for patients with metastatic disease.

MYTH 10: AFTER I HAVE COLORECTAL SURGERY I WILL NEED A COLOSTOMY.

FACT: Surgical techniques have improved so that the cancer can be effectively removed without the need, in many cases, for a colostomy. A colostomy is where surgeons create an artificial external method to collect excrement.

MYTH 11: PHYSICAL ACTIVITY IS ONLY GOOD ONLY FOR THE HEART.

FACT: Physical activity is associated with reduced risk of colorectal cancer. Even moderate physical activity, such as 20-30 minutes of walking per day, can be beneficial and can even help prevent a recurrence.

MYTH 12: WHAT I INGEST WON'T AFFECT MY CHANCES OF GETTING COLORECTAL CANCER.

FACT: The World Cancer Research Fund Expert Panel reviewed all the available evidence on diet, weight and physical activity and the risk of colorectal cancer. They found that: consuming foods such as fruits, vegetables, and whole grains containing dietary fibre is associated with a lower risk of colorectal cancer; consuming dairy products is associated with a lower risk of colorectal cancer; consuming red meat and processed meats increases the risk of colorectal cancer; consuming alcoholic drinks increases the risk of colorectal cancer.



COLORECTAL CANCER IS 90% CURABLE IF DETECTED IN ITS EARLY STAGES.

WHAT IS THE FIT?

The fecal immunochemical test (FIT) is a screening test for colorectal cancer. It detects small amounts of blood in your stool that is not visible to the naked eye. You can do it at home in a few minutes. It is: easy, painless, private, and free.

WHO SHOULD DO A FIT?

- Individuals between the age of 50 and 74
- Individuals without personal or family history of colorectal cancer



SCAN
HERE TO
LEARN
MORE
ABOUT
THE FIT:



UNDERSTANDING YOUR FIT RESULTS:

A normal result means that blood was not found in your stool. The test should be repeated every two (2) years. An abnormal test means that blood was found in your stool. This may be due to several causes and does not necessarily mean that you have cancer. It does mean further testing is required.

WHERE DO I GET A FIT?

Talk to your family physician or nurse practitioner about obtaining a test. If you do not have a family doctor, you can get more information about the FIT including how to order a test by contacting your provincial health services navigator:

BC: dial 8-1-1	Alberta: 1-866-727-3926
Saskatchewan: 1-855-292-2202	Manitoba: 1-855-95-CHECK (4325)
Ontario: 1-866-828-9213	Quebec: Info-Santé 8-1-1
New Brunswick: 1-844-777-3443	Nova Scotia: 1-866-599-2267
PEI: 1-888-561-2233	Northwest Territories: 1-866-313-7989
Yukon Territory: 867-667-549 or 1-844-347-9856	Newfoundland & Labrador: 1-855-614-0144
	Nunavut: contact your local health clinic

Still have questions? Contact us at support@colorectalcanccanada.com

STAGES OF CHANGE

Preparation

The individual is planning to begin exercising soon, has taken steps toward it, and may be sporadically exercising.

Contemplation

The individual does not currently exercise but is planning to start within 6 months.

Pre-contemplation

The individual does not exercise and is not planning to start within the next 6 months.

Action

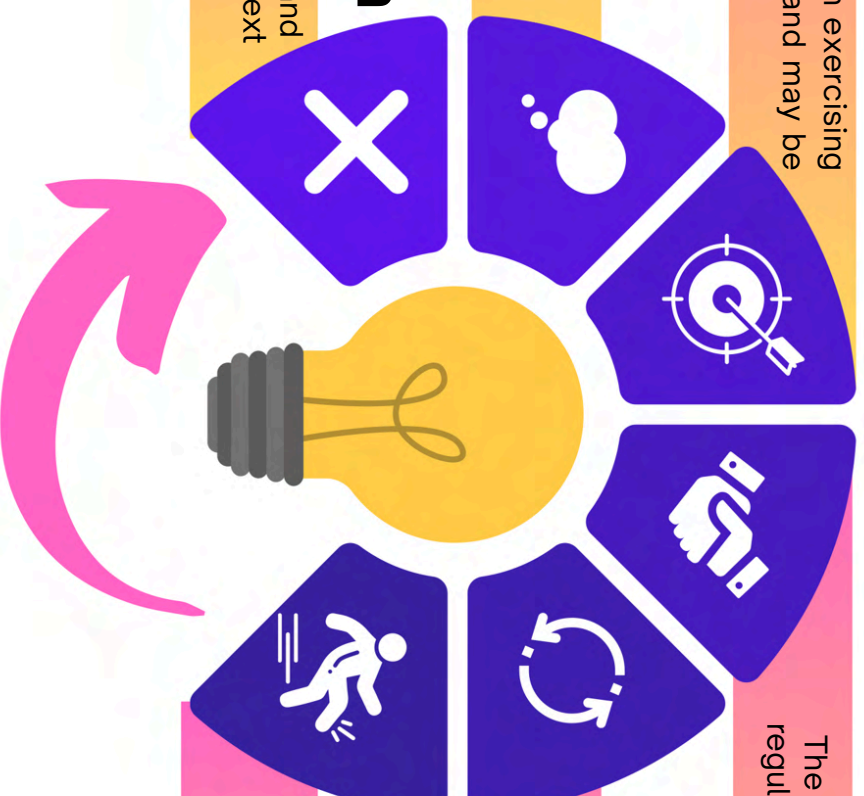
The individual has been exercising regularly but for less than 6 months.

Maintenance

The individual has been exercising consistently for 6 months or more.

Relapse

The individual reverts back to old patterns of behaviour.





S

SPECIFIC

Plan effectively with specific targets in mind.

G



M

MEASURABLE

Track your progress and reevaluate along the way.

O



A

ATTAINABLE

Set realistic goals that are challenging but achievable.

A



R

RELEVANT

Ensure the goal serves a relevant purpose.

L



T

TIMELY


Specify a deadline, monitor progress and reevaluate.

S



Ernistshō.wa / March 2025



Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
3 11am-1pm Walk & Learn @ A'nowara'ko:wa Arena Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center 5pm Circuit Training @ A'nowara'ko:wa Arena	4 9am-4pm Immunization Clinic	5 11am-1pm Walking & Learn @ A'nowara'ko:wa Arena Apron Making Class with Elders 10am-3pm @Traveling College 5pm Circuit Training @ A'nowara'ko:wa Arena	6 9am-4pm Immunization Clinic Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center	7 Green Food Bag order deadline	8 12pm-1:30pm Ice Skating @ A'nowara'ko:wa Arena 
10 11am-1pm Walk & Learn @ A'nowara'ko:wa Arena 5pm Circuit Training @ A'nowara'ko:wa Arena	11 9am-4pm Immunization Clinic Swin Class for Elders 10am-10:55am @Cornwall Aquatic Center	12 11am-1pm Walking & Learn @ A'nowara'ko:wa Arena 5pm Circuit Training @ A'nowara'ko:wa Arena	13 9am-4pm Immunization Clinic	14 Open Gym @Iakwa'shatste	15
17 11am-1pm Walk & Learn @ A'nowara'ko:wa Arena Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center 5pm Circuit Training @ A'nowara'ko:wa Arena	18 9am-4pm Immunization Clinic	19 11am-1pm Walking & Learn @ A'nowara'ko:wa Arena Green Food Bag 11am-1pm Food Tasting Demo @ Kanonhkwa'isherio Health Facility Atrium 5pm Circuit Training @ A'nowara'ko:wa Arena	20 9am-4pm Immunization Clinic Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center Painting Class @Snye Recreation	21 Open Gym @Iakwa'shatste	22
24 11am-1pm Walk & Learn @ A'nowara'ko:wa Arena Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center 5pm Circuit Training @ A'nowara'ko:wa Arena	25 9am-4pm Immunization Clinic	26 11am-1pm Walking & Learn @ A'nowara'ko:wa Arena 5pm Circuit Training @ A'nowara'ko:wa Arena	27 9am-4pm Immunization Clinic Swin Class for Elders 1pm-1:55pm @Cornwall Aquatic Center Painting Class @Snye Recreation	28	29
31 11am-1pm Walk & Learn @ A'nowara'ko:wa Arena 5pm Circuit Training @ A'nowara'ko:wa Arena					



**Mohawk Council of Akwesasne
Department of Health**

