



The Story of

**Rose** of  
**Swallow** Chisasibi

Told Rose Swallow  
Written Ruth DyckFehderau

<sup>1</sup> When Rose was a young girl, not yet in school, she and her grandfather swaddled against the cold bay wind and took the dogsled over Hudson Bay and up the La Grande River to check the fishnets. Rose perched up on the sled, the sun glinted off snowdrifts around her, the frenzied huskies kicked up snow in front of her, and her grandfather ran alongside the sled. Sometimes he jumped on for a minute or two of rest.

“Look,” he said then, “you can see how smart the dogs are. They know where the ice is thin and they avoid it. We can go to my river nets, where the water runs faster and the ice is more dangerous, only because of them.”

He didn’t want to tire the huskies with his extra weight, though, and soon hopped off the sled again to lope along beside.

When they reached a fishnet, Rose climbed down from the sled and the dogs rested while her grandfather, after all that running, heaved up the catch. The net was so heavy with ice and water and fish that his body leaned back on an angle and his arms and legs strained with the weight of it. He untangled the fish from the net, bashed them on the ice to kill them quickly, bundled them and lashed the bundle to the sled. Rose climbed back on top of the load, and they were off again, on to the next net, grandfather running beside.

Back at the cabin at the end of the day, her grandfather cooked up a big meal with bones and meat and rice for the dogs.

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<sup>1</sup> We are very grateful to the Cree Board of Health and Social Services of James Bay for the permission to reproduce this story here.

“You must feed dogs well,” he said. “Every day, twice a day, and not only on the days they pull the sled. Never be cruel to a dog; you have to respect each one.”

Only after the dogs were fed did he sit down himself and rest.

In the summers, when fish were more plentiful, Rose helped her grandmother build a drying rack from saplings and sinew. They straddled it across a damp-wood fire and together they draped fish over the rack to smoke until they were well-preserved. They wrapped the fish up in a cloth from a flour sack and loaded the bundles into sacks. Then they carted the sacks on their backs to her grandmother’s cache, a storage area 15 minutes away that she had dug out underground and lined with moss for insulation. They placed the fish bundles inside the moss where they would stay cool and piled on top the heaviest rocks they could find so the wolves couldn’t get at them.

The big and small game – moose and caribou and grouse and rabbit – was all hunted on foot, or caught in snares and traps that her grandparents would walk to every week. Over long afternoons, Rose’s grandmother would slow-cook the game into stews and float soft dumplings in the dark gravies. The flour had been purchased in town and sometimes, when there was enough of it, she made bannock to sop up the juices.

Berry-picking time came around August, when the blueberries were a deep navy and had sweetened in the sun. Rose and her grandparents walked out in the afternoons and picked all they could find. Her grandmother boiled some berries into jams or folded them into cakes, and the rest she dried and preserved in a cotton bag where they wouldn’t mould. And with the fish and the berries and other hunted meats, they had food in the long winter months. Some years, the years of starving, were bad. Even with the fishing and the

hunting and the berry-picking, there wasn't enough food. Then Rose's grandfather would go out to the islands in the bay. There was a plant that grew there; it was something like a black moss and something like lettuce. You could boil it, if you had to, and eat it. It would get you through the bad times.

It was an athletic life, living on the land. You were always moving, just to be able to eat. Always doing something. No one in the area had heard of diabetes then.

The year after the dogsled rides to the fishnets, Rose sat in the residential school dining room contemplating something on her plate. The teachers called it "broccoli" and Rose was supposed to eat it – but it didn't look like food. She was being watched, though: if she didn't clean her plate she would be punished and either starved or beaten until she couldn't get out of bed. And so she closed her eyes, tried to think about the parts of her school day that she enjoyed – like French class and baking class and handicrafts – and she stabbed her fork into that vile broccoli stem and willed her mouth to open. When she closed it, bitter juices squirted across her tongue and in seconds the broccoli became a revolting mush. All around her in the dining room, Cree kids were gagging and vomiting at the strange food. This had to be worse than that black mossy plant her grandparents had eaten in the starving times. But Rose forced it down and avoided a beating. *When I grow up*, she thought, *I will have kids. And I will never force them to eat broccoli.* In those years, there was still no talk of diabetes.

In the late '60s, Rose walked into the bathroom of her high school in Rouyn-Noranda. Another student was there: a girl who had hiked up her skirt, propped her leg up on the big round water fountain – and was sliding a needle into the flesh of her thigh. *A heroin addict*, thought Rose, *right here, in my high school!* Rose washed her hands at the fountain and returned to class without saying anything to the girl. A few years later, though, in Biology class, the girl

came to mind again. The teacher talked about the pancreas and a disease called diabetes which was treated with injections of insulin. That needle girl had been injecting not heroin but insulin, Rose realized, and without it she would have died. She was the first person with diabetes that Rose ever saw.

Rose finished her schooling and found work at the Chisasibi Hudson's Bay Store. It was the '70s, a time of big changes. Hunters and fishermen used snowmobiles for their work and no longer ran alongside dog-pulled sleds. Many of the dogs were neither respected nor looked after. Locals didn't walk to the grocery store anymore; they drove for even the smallest errand and trucks and cars crowded the narrow streets. For the first time, the store began to stock televisions. People bought them up so quickly the store couldn't keep them stocked. CBC was the only channel in those days, and it was on for just an hour a day – but when that hour came, people all around town stopped whatever they were doing to go to their living room or the living room of someone who had a TV. And they sat immobile for an entire hour looking at the screen and watching the news.

A Métis lady, about 50 years old, worked with Rose at the store in those days, and she was thirsty. She stuck some price tickets on a stack of boxes, then hustled over to the water fountain, gulped a whole cup of water, and came back to work. One minute later, she needed to drink again. She drank and drank, all day long, but couldn't quench her thirst. Rose could see the desperation on her face, as if she would die of thirst even after having so much water, and it was something terrible. Another lady working there saw all this, and noticed too that the thirsty lady's vision had gotten much worse in a few weeks. She gently told the thirsty lady to go to the doctor – she had heard about an illness that made people thirsty and affected their eyesight. Maybe there was some medicine. A few days later, the thirsty lady was back at work with an enormous glass-and-metal syringe. She stabbed the needle into a bottle

of insulin, pulled back to fill the syringe, and injected it into her flesh every single day. She would have to do this, she said, for the rest of her life. Sometimes the insulin wouldn't be enough; she would feel shaky and would run to the coffee tray and pop a sugar cube into her mouth. She was the second person with diabetes that Rose ever met.

Then, suddenly, talk of diabetes was everywhere in the community. Rose's friends and neighbours, several elders, even her family had diabetes. One by one, Rose's seven sisters were diagnosed, and one of them even had two miscarriages as a result of the disease. In 1991, Rose began working as a Community Health Representative (CHR) for the Cree Board of Health and Social Services of James Bay. Twenty years had passed since she had met the thirsty lady and thirty years since she had seen the girl with the needle in high school, and now Rose worked every day with people with diabetes. More people were being newly diagnosed every month – and almost every one of them was surprised.

“That can't be right,” they would say to her. “I never eat sweets. It can't be diabetes.”

Rose would explain to each person, in the Cree language that the doctors and nurses couldn't speak, that the flour in dumplings and bannock might not taste sweet, but it was a kind of sugar nevertheless.

“But,” they would say, “our grandparents ate bannock and dumplings and they didn't have diabetes.”

“Yes,” Rose would answer, “they ate bannock and dumplings. But think of all the exercise they did that we don't do. Think of all the ways our lives are different from theirs.”

She began talking about diabetes on the radio and in schools, teaching people not to have both rice and potatoes in the same meal because both are a kind of sugar, teaching that a long walk would lower blood sugar for up to two days, teaching that alcohol could be dense with sugar even if it didn't taste sweet, teaching that stress aggravated the disease. And still, there were so many new diagnoses of diabetes and other chronic illnesses that Rose couldn't do all the work herself and the Cree Board of Health had to hire another CHR for Chisasibi just to meet the demand.

And then another.

And then another.

From time to time, Rose used the glucose-testing kits to screen herself. She didn't have diabetes symptoms, but it ran in her family and there was quite a bit of stress in her home in those days, before her husband stopped drinking. So many people in the community were getting sick. For years her test results were fine but Rose continued self-screening. For years, she brought test kits home from work and tested her husband and all her kids. She even did what she had vowed never to do: she made her children eat broccoli – but without even once using the extreme residential school methods.

One day, in '97, her self-screening showed a new result: pre-diabetes, a warning sign that diabetes was not far away. Rose began to take medication and became still more diligent about exercise and careful eating. Then, on a sunny day in spring 2002, she went to the bathroom at work and remembered, as she zipped up her pants, that she had been to the bathroom just ten minutes earlier – and ten minutes before that. She could already feel she would need the toilet in a few minutes again. She crossed the office to the cupboard with the test kits. She pricked her finger with the lancet, wiped the blood on the

strip, and inserted it into the reader. The number in the glucose reader was too high. Rose Swallow, like the needle girl in high school and the thirsty lady from the Hudson's Bay Store, like every one of her sisters, had diabetes.

She sucked in a deep breath and let it out. And then she ran back to the bathroom.

Rose is still a CHR in Chisasibi, along with four other CHRs. She's in charge of the diabetes portfolio and spends most of her work time teaching people, in their own language, how to manage the disease. By now, every Chisasibi family is directly affected by diabetes and the newly diagnosed are getting younger and younger. Rose organizes healthy-food tastings. Vegetables and fruits are so expensive in the North that people don't want to spend money on new ones they might not like, so Rose finds ways to let them taste new foods without having to pay all that money. She also organizes Leave-Your-Vehicle-At-Home days for people to try exercising as a way of getting to work, as their grandparents once did. And she encourages people to try the fitness centre, even if it is a little intimidating at first. Chisasibi is seeing big changes again: people are exercising more, walking outside along the highway or the river in the long summer evenings, or snowshoeing across the open spaces in winter. So far, though, Rose hasn't seen anyone running alongside a dog team.

Like all the people she teaches, Rose has to work at her own diabetes every day. She takes her pills and tests her blood sugar. She experiments with vegetables and cooks with whole grains and high fibre. She has to be especially careful about stress – it's the one thing drives up her blood sugar levels very quickly. Sometimes calming down is as easy as taking a few deep breaths or reading a good book. Years ago, her husband's drinking was what drove up her anxiety, but he hasn't had a drink in years. These days, Rose worries for her kids and grandkids and also looks after some of her grandkids on the days

they're neglected. It gets to be a lot of work and anxiety for someone no longer young enough to sit on her grandfather's dogsled.

Then her husband says, "Oh Rosie. I can see on your face – it's time to go for a walk."

And they tie on their boots and swaddle the grandkids against the cold and head out for a long walk by the highway where the sun glints off the snowdrifts and the grandkids kick up snow around them.

**If you would like to be tested for diabetes, contact the clinic  
in your community:**

Chisasibi (819) 855-9011

Wemindji (819) 978-0225

Oujé-Bougoumou (418) 745-3901

Mistissini (418) 923-3376

Eastmain (819) 977-0241

Waskaganish (819) 895-8833

Nemaska (819) 673-2511

Waswanipi (819) 753-2511



This story is taken from the book *The Sweet Bloods of Eeyou Istchee: Stories of Diabetes and the James Bay Cree*. The book is free to Indigenous people living on Canadian reserves and traditional territories. (Postage fees may apply.)  
Contact: Paul Linton (418) 923-3355      [www.sweetbloods.org](http://www.sweetbloods.org)

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