

Reader's digest

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TRUST ♦
MARCH 2018

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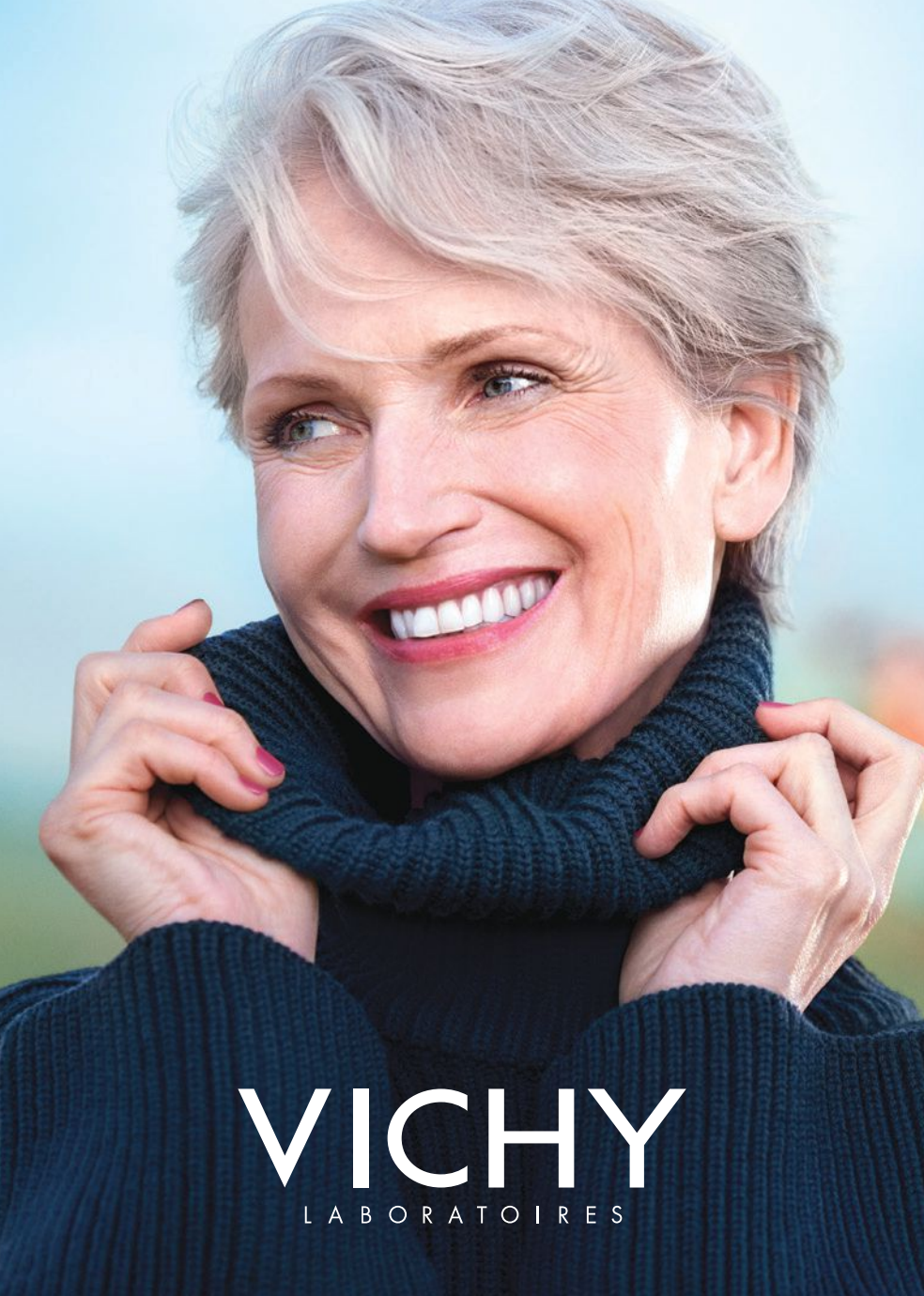
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LABORATOIRES

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Editor's Letter

Decoding Delirium



A COUPLE OF YEARS AGO, my mother spent close to two weeks in a Montreal hospital following an operation. Despite some initial complications, her condition improved over the first few days. She was characteristically sweet and wholly determined to return home as soon as possible. She did everything the doctors and nurses asked of her, with patience and humour. My mother was well on the road to recovery—then something changed. What followed was as confusing to me as it was to her: she became disoriented and forgot what day it was or who had just visited her. She lost her appetite and her motivation to do the exercises that were helping her heal. The most difficult part was that she just wasn't herself.

I hounded the medical staff in search of answers, but no one could explain these changes. It wasn't until I read Sydney Loney's "State of Confusion" (page 56) that I finally found a diagnosis that seemed to fit: hospital-acquired delirium. I hope this story provides reassurance for readers who have experienced similar situations, and that its insights help protect patients during their hospital stays.

This issue, our cover story ("How to Avoid Identity Theft," page 44) is also focused on keeping Canadians safe. Do check out our smart strategies for protecting your personal information from conniving thieves. 



Dominique

Send an email to
dominique@rd.ca



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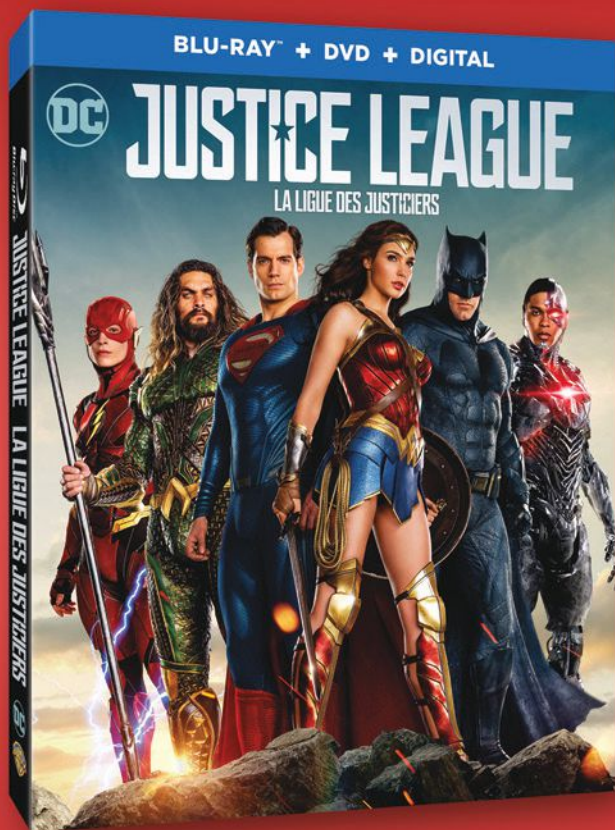
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Contributors



**ANNA-KAISA
WALKER**

(Writer, “How to Avoid Identity Theft,” page 44)

Home base: Toronto. **Previously published in** *The Globe and Mail* and *House & Home*. **I was shocked to learn how widespread identity fraud is,** and how much work is required to clear your name after you’ve been victimized. I’ll be guarding my social insurance number now that I know how easily thieves can use it to steal money in my name.



MARIE BERGERON
(Illustrator, “On Fragile Ground,” page 64)

Home base: Montreal. **Previously published in** *GQ France* and *Orange Coast*. **Reading this story, I was struck by how,** even though humans have become dependent on technology, we can still make it through life-threatening events in nature. I’m not sure I would have fared as well as Natalia Martinez in the same situation, but maybe my survival instincts would have kicked in.



C.J. BURTON

(Photographer-Illustrator, “How to Avoid Identity Theft,” page 44)

Home base: Los Angeles. **Previously published in** *Newsweek* and *ESPN The Magazine*. **I always want there to be a twist to my work.** A great photograph is never enough; there should be a surprising, unexpected element to the work. With this particular set of images, I tried to snag the viewer’s attention—without scaring them too much!



SARAH HAGI
(Writer, “Legal Action,” page 16)

Home base: Toronto. **Previously published in** *GQ* and *The Guardian*. **I hope readers understand the unique challenges that marginalized and racialized people face** in different industries, and how much efforts like Denise Dwyer’s are needed. Strong mentorship can allow first- and second-generation Canadians to connect with those who have already broken through and found career success.



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Letters

READERS COMMENT ON OUR RECENT ISSUES

PRIZED POSSESSION

I always take copies of *Reader's Digest* to my local hospital after finishing them, but I can't bring myself to let go of your November 2017 issue. I love "The Buffy Effect" too much. Buffy Sainte-Marie is amazing, talented, intelligent and determined. The issue with her beautiful smile on the cover will have a place on my coffee table forever. It's a reminder to never give up.

DIANA POLLARD, Saint-Lazare, Que.

NOT TO BLAME

I have an objection to “A Plan for Preventing Breast Cancer” (October 2017). While healthy lifestyle choices can help us avoid the disease, the biggest risk factor—over which we have no control—is our genetic makeup. As an oncology nurse, it breaks my heart when women come in crying in shame, wondering what they could have done to prevent breast cancer. Women should be able to enjoy their lives and make healthy choices without undue guilt from the media.

ELEANOR HOLWERDA, *Victoria, B.C.*

TRUE REFLECTION

I was born in a small town in Brazil. When I was about 10 years old, our pastor brought my family a stack of *Reader's Digest* magazines. There were a couple of stories in them that took place in Canada that I found fascinating.

After we married in 1968, my wife and I decided to take a leap and travel to Canada to find work. By that time, I had forgotten all about those *Reader's Digest* stories I'd read as a child, but when I arrived in my

new country, those memories came flooding back. Thank you for sharing distinctly Canadian stories, capturing the heart of the best country in the world!

VANDER RAMOS, *Trenton, Ont.*

A TRUSTY TOME

In July 1947, at age 17, I bought my first copy of *Reader's Digest* in French. I still own that magazine as well as many other *RD* products I've purchased over the years. My house is filled with them! When my late-husband was still alive, he used to tease me for the frequency with which I'd reference stories I'd read in the magazine. His mockery quickly became a family joke. These days, whenever a discussion has no obvious resolution, my kids and I eventually conclude the conversation by accepting the solution must be reside somewhere in the pages of *Reader's Digest*. Thank you so very much for 70 years of entertainment, advice and good reading.

MONIQUE MARINIER, *Roxboro, Que.* **R**

Published letters are edited for length and clarity.

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Whenever I need a confidence boost, I...



...share my acrylic
paintings

with loved ones.

**ANN SIMMONS,
PETERBOROUGH, ONT.**



...go for a walk
in nature

to feel energized.

BEENA KHAN, TORONTO

...read the Psalms.

LESLIE CARDWELL, CALGARY

...remind myself of all the hardship my parents went through in their lifetimes. They succeeded, and so can I. **MANOYAK JOANNE OGINA, ULUKHAKTOK, N.W.T.**

...reflect

on everything I've accomplished.

I was born with a visual impairment and was told I wouldn't graduate kindergarten.


Now I have two degrees!

LIZ SEGER, PORT COLBORNE, ONT.

...help
others

by volunteering, or by supporting a friend.

**KELLY ANN,
NEWCASTLE, ONT.**

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ART of LIVING

Toronto attorney Denise Dwyer is transforming her industry by mentoring young Black women

Legal Action

BY SARAH HAGI

PHOTOGRAPH BY TANJA TIZIANA

 **THE FIRST WOMAN** in the British Empire to become a lawyer was a Canadian named Clara Brett Martin. She was called to the bar in 1897, after years of hostility from her male teachers and peers. Her achievement had little impact, however, on the access women of colour had to the profession: it took nearly six more decades before a Canadian Black woman—Violet King Henry—became a lawyer. For one of Henry’s successors, Denise Dwyer, the gap between Black women and their white counterparts remains a major concern.

Dwyer—who was called to the bar in 1991 and is now an assistant

deputy minister at the Ontario Ministry of Education—thinks that bringing Black female lawyers together is an integral part of their pathway to success. That belief stems from the early days of her career. While working for the Ministry of the Attorney General as a young lawyer, Dwyer noticed something: “The presence of Black people was far more predominant in the role of the accused than it was in the Crown,” she says. “It was kind of lonely.”

On November 11, 2006, Dwyer took action by inviting several Black female lawyers to meet at her Toronto-area home. The date was significant: it reflected her peers’

Denise Dwyer, founder of the Black Female Lawyers Network, is a force.

"Through her action and guidance, she has impacted many young women, myself included," says civil litigator Shaneka Shaw Taylor.



standing in the legal world. “Statistically, Black lawyers are often either sole practitioners or employed in government,” she says, meaning most attendees weren’t hired by private practices (and so wouldn’t be working on Remembrance Day).

“What began as a gathering at my home turned into a safe place to have discussions and celebrate our victories,” says Dwyer. Together, the women addressed the unique challenges they face in white-dominated spaces—everything from people touching their hair to walking into court and being mistaken for the stenographer.

That day’s meeting left Dwyer and her peers craving more. “Soon, women were contacting me and asking when we could do it again,” she says. In response, she founded the Black Female Lawyers Network that same year and turned the informal meet-up into an annual retreat and fundraiser for Black and Indigenous law students.

Currently in its 11th year, the gathering, now called Sistahs-in-Law, hosts more than 100 attendees who are committed to the advancement of Black women. “We want to amplify the voices of Black female lawyers,” says Dwyer. “We want to advocate for an inclusive profession.” To that end, at each edition, 10 Ontario high-school students (“Little Sistahs”) from underprivileged backgrounds

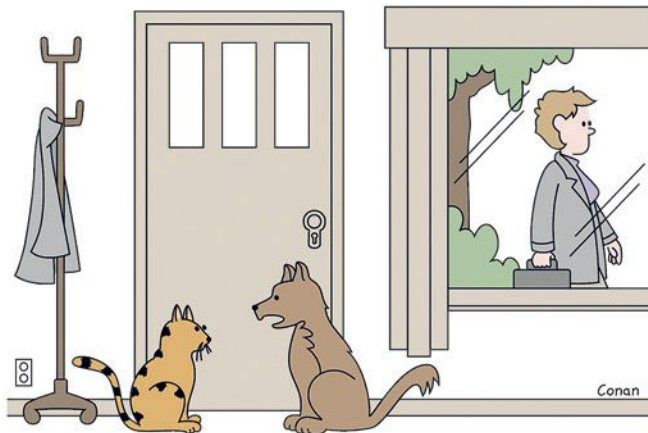
are paired with “Big Sistahs” to receive mentorship.

According to Shaneka Shaw Taylor, a 34-year-old civil litigator and the vice-president and treasurer of the Black Female Lawyers Network, Dwyer’s efforts have helped change lives. “When I started out in the profession, before I even got a job, I reached out to her,” says Taylor. “Ever since, Denise has been the first person I call when I have an issue.”

Taylor maintains that Dwyer’s impact stretches beyond the legal field: “She empowers young girls and women to excel in all their endeavours, providing connections and opportunities for her mentees to become involved in community initiatives,” she says.

Reflecting not only on the future of Sistahs-in-Law but of Canada at large, Dwyer believes further change is imperative. “We have census data that tells us we are a highly diverse society,” she says, pointing to cities such as Markham, Ont., where more than 70 per cent of residents are people of colour. But she notes that professional fields, such as law and medicine, aren’t mirroring those statistics. The Black Female Lawyers Network is about fostering progress within an industry that has remained static, despite a changing demographic. Each year the organization grows, it moves a few steps closer to that goal. **R**

Life's Like That



"I never heard her say she was leaving you in charge."

WHILE CAMPING THIS YEAR, my family frequently visited a small chain store in a nearby town to buy groceries. One evening I realized we'd failed to note what time the store opened, so when I saw a teenage staffer on her way out, I stopped her and asked quickly, "What are your hours?"

Her reply: "Right now, six to nine because I'm in school. But next month it will be full time."

DARLENE QUERY, *Edmonton*

AN UNTIMELY SITUATION

The future, the present and the past walked into a bar. Things got a little tense.

onelinefun.com

DOG: All right, here's the deal. I support and love you till the end of time, and you kindly give me that cheese stick.

🐦 @DOG_FEELINGS

NAIVE HOPES

Does running late count as exercise?

kickasshumor.com

SHIPWRECKED DIARY

DAY 1: Alone, doing well. Mentally sound. Met a crab.

DAY 2: I have married the crab.

DAY 3: I have eaten my wife.

🐦 @MURRMANS

Send us your funny stories! They could be worth \$50. See page 13 or visit rd.ca/joke for more details.

Nonagenarian author Harry Leslie Smith on his second career as a political activist, protecting universal health care and caring for refugees

Senior Advisor

BY MICAH TOUB

ILLUSTRATION BY AIMÉE VAN DRIMMELEN

After decades of selling imported carpets, you've found a second vocation in your 90s as a political commentator—mostly looking back on times of great wealth disparity to warn us of the consequences of austerity and inadequate social supports. What inspired you to start writing?

In 2008, the world's economies crashed. And the following year my middle son, Peter, died at the age of 50. By 2010, my grief was uncontrollable and I knew the only way I could expiate it was through writing about my early life—in a book and also on social media. I needed to let people know that the economic and political storms coming our way, I'd seen them before.



In your new book, Don't Let My Past Be Your Future, you express concern that in Britain, national health care is in danger. But as someone who has been based mainly in Canada since 1953, what's your perspective on our coverage?

I am convinced it will not exist in 20 years. Not because it's too costly but because the entitled, and the politicians who serve them, are too greedy. In Canada, universal health care does not cover prescription drugs or dental care. Only 30 per cent of Canadians can either afford or have the luxury of working for a company that provides health insurance. When I go into stores here staffed by workers earning minimum wage, their teeth remind me of those of the poor in 1930s England.

You're prolific on Twitter, yet you caution against taking what appears on social media at face value.

Democracy has always been threatened by people interested in preserving their wealth or political influence at the expense of others. Now, social media allows them to spread false information with the speed of the plague. Quite frankly, unless we are willing to invest time in learning about the history of the 20th century and the many trials its people had to undergo, our democracies will not survive. Most of my generation left school at 14, but because our lives

had been hard, we knew when someone was selling us a pile of garbage. Now people are willing to suspend their disbelief—and that must stop.

You're currently crowd-funding to be able to tour refugee camps across Europe. What's spurring you on?

I am a veteran of the Second World War, and at its end, I encountered long streams of refugees in Belgium, Holland and Germany—thousands of them moving away from their homes. It really hit me that these people, through no fault of their own, had found themselves suddenly destitute. But one thing pleased me, which was that British people built proper accommodations for them. I want to write a book inspired by that period.

You've already visited a number of present-day refugee camps.

What insights have you gathered?

When I was in Calais [in northern France], I met two Sudanese men in their 20s who told me about life in their war-ravaged country. They had seen horrors and lived in sub-human conditions. Yet they weren't jaded—and they believed the West would one day rescue them from the hell of refugee life. It made me remember that as long as there is life, there must be hope. **R**

Don't Let My Past Be Your Future is available now.



Reading a pup's body language requires experience and expert guidance.

Zazie Todd, a dog trainer and founder of the blog Companion Animal Psychology, weighs in on how to decode Fido's behaviour.

What Your Dog Is Really Thinking

1 IF YOUR DOG LOOKS REMORSEFUL WHEN YOU WALK IN THE DOOR AND SEE A MESS...

They're expecting punishment but don't necessarily know that what they've done is wrong. Alexandra Horowitz, a professor at Barnard College in New York City whose research focuses on canine cognition, put that

"guilty" look to the test in 2009. In the end, it wasn't linked to whether the dog had transgressed but rather to being scolded by the owner. Subsequent research out of the University of Cambridge found no evidence that dogs can even feel guilt, which is a secondary emotion and more complex than a primary emotion, such as fear.



2 IF YOUR DOG LICKS THEIR MOUTH...

They're stressed. (Note that the tongue motion is less "You're about to give me a treat" and more a flicking out, right up to the nose.)

Recently, two European studies have highlighted the meaning of this licking. One found that it was a canine response to seeing an angry or aggressive human face on a computer screen; the other determined that dogs lick their mouths—and also look away—in response to a mild threat. If you spot this sign, try reducing your dog's stress levels. It could be as simple as giving them more physical space.

3 IF THERE ARE FIREWORKS AND YOUR DOG IS SHAKING...

The noises are frightening. This is a common reaction, but a surprising number of people don't realize that shaking and trembling (and hiding or seeking out people) are signs of fear. Whereas only a quarter of owners say their dog is afraid of loud noises, half report these behavioural signs, according to research published in *Applied Animal Behaviour Science*. If you think your pup would be comforted, pet them and remain nearby.

Over the long term, work out a plan: desensitization (gradual exposure) and counter-conditioning (changing the emotional experience to a positive one) are effective; you could also discuss medication with your vet.

4 IF YOU'RE AT THE VET AND YOUR DOG'S TAIL IS DOWN...

They're anxious. Obvious signs of an unhappy dog include hiding or trying to leave the exam room, but com-

monly missed triggers range from a tucked tail and lowered ears to trembling. If your dog gets stressed at appointments, ask what can be done. Many vets now use food to make the experience more fun.

“
If you're unsure that a dog is enjoying being petted, stop, then gauge their reaction. This is a consent test.

5 IF YOUR DOG LEANS INTO YOU DURING A PETTING SESSION...

They like it! If you're unsure that a dog is enjoying being petted, stop, then gauge their reaction. This is called a consent test. If they choose to wander off, the session is over. Other signs of discomfort include sniffing the floor, looking away and panting. However, if they lean on you or paw at you to get more cuddles, continue! Preferred spots on their bodies are to either side of the chest and under the chin. **R**

Our top picks in books, movies and TV

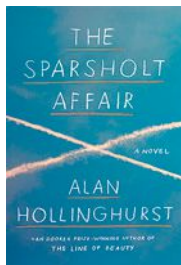
RD Recommends

BY DANIELLE GROEN

1  **A WRINKLE IN TIME**
 What's a stubborn 13-year-old girl to do when her astrophysicist dad is being held captive in another dimension? Bend time and space to find him, of course—and in director Ava DuVernay's adaptation, she brings Oprah Winfrey, Reese Witherspoon and Mindy Kaling (playing Mrs. Which, Mrs. Whatsit and Mrs. Who, respectively) along for help. That's a lot of star power, but young Storm Reid, playing Meg Murry, has more than enough charisma to take the lead. *March 9.*



DID YOU KNOW? Twenty-six publishers rejected Madeleine L'Engle's *A Wrinkle in Time* before an editor at Farrar, Straus & Giroux snapped it up. The young-adult classic has sold over 14 million copies since coming out in 1962.



2  **THE SPARSHOLT AFFAIR**
 Alan Hollinghurst

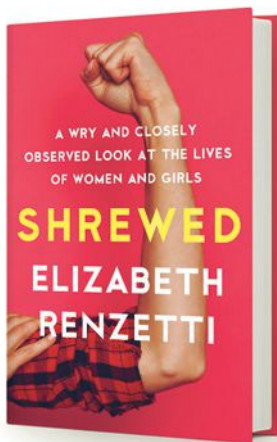
"Money, power...gay shenanigans! It had everything," one character remarks of the 1966 affair that disgraced war-hero-slash-industrialist David Sparsholt. This luminous novel, Hollinghurst's sixth, has a bit of everything, too, crossing decades and perspectives to show how secrets and social upheaval transform a single family. *March 13.*

(CAUGHT) TAKE THE SHOT PRODUCTIONS/CBC;
(BATEMAN) CC ABC/GREG GAYNE; (MCADAMS) CC ABC/IMAGE GROUP LA



3 CAUGHT Republic of

Doyle's Allan Hawke lands on the other side of the law in this CBC adaptation of Lisa Moore's novel, playing a convicted drug dealer who busts out of jail and books it across Canada for a second attempt at importing over \$1 million in weed. Double crosses, booby traps and a dogged detective played by everyone's favourite Mountie, Paul Gross, conspire to sabotage his redo. *February 26.*



4

SHREWED Elizabeth Renzetti

In this collection of essays, the quick-witted *Globe and Mail* columnist artfully examines the considerable achievements of women such as Hillary Clinton, P.D. James and Germaine

Greer. But the book soars when Renzetti shares the complicated ways that ambition, motherhood, misogyny and feminism have collided in her own life—and her hope that young girls like her daughter grow up to speak confidently, laugh loudly and take up plenty of space. *March 3.*



5 GAME NIGHT

A group of pals trade their weekly game night for an elaborate murder-mystery, complete with fake hooligans and cops, in this comedy-action flick. It's all fun and, well, you know, until one friend goes missing, real guns are fired and the festivities take a dangerous turn.

Arrested Development's Jason Bateman is his reliably dry, funny self here, while Rachel McAdams reminds us, 13 years after *Mean Girls*, just how deftly she delivers a punchline. *March 2.*



Points to Ponder

BY CHRISTINA PALASSIO

In the future, the line between entertainment and everything else will be a lot blurrier.



Novelist **ELAN MASTAI**, in an essay in *Fashion Magazine*

We need more people going into politics [out of] a sense of civic duty, not [as] a career path, so they do what they think is right, as opposed to what they think will win them votes.

British Columbia Green Party
MLA ANDREW WEAVER on CBC Radio's
The Sunday Edition

There is a part of you that feels a confidence in what you do, a strength in your own voice. Another part is always learning and feels as open to newness as a student.

Designer **ERDEM MORALIOGLU**,
in *Flare*

There have been so many times in my life when an invitation has come from somewhere ... the cosmos ... the divine ... to step out of the familiar into something new. I've found it's best to listen for and follow these promptings.

BRUCE COCKBURN, in *Exclaim!*

Who's behind the camera affects what happens on the camera. It will only change when there are more women in the studios as studio heads.

Film director, writer and producer
PATRICIA ROZEMA, to CBC News, following the Harvey Weinstein scandal



PHOTOS: (MASTAI) DAVID LEYES/PENGUIN RANDOM HOUSE CANADA; (ROZEMA) CC SAM SANTOS/CANADIAN FILM CENTRE. QUOTES: (MASTAI) NOV. 2017; (WEAVER) SEPT. 24, 2017; (ROZEMA) OCT. 13, 2017; (MORALIOGLU) JAN. 8, 2016; (COCKBURN) JULY 13, 2017.



No matter where I am, folks always tell me, “You put the words to this feeling that I’ve always had, that I didn’t really know how to define.”

Bestselling poet **RUPI KAUR**, in *The Globe and Mail*

It is simply unacceptable that Canadians should die of tuberculosis and that we should have rates that are some of the highest in the world.

Minister of Indigenous Services
JANE PHILPOTT, in *Chatelaine*

So, at the core of every decision made about concussions is a singular understanding: no hits to the head—no excuses. And at the core of the obligation to make those decisions and act is another understanding: the risk to the game’s players is not fair, not right and not necessary.

Former NHLer **KEN DRYDEN**

I’ve never been one to crave attention, which I know means that this is probably the worst career to pick.

Singer **ALESSIA CARA**,
in *Rolling Stone*

The immigration agents employed under Macdonald, under Laurier, under Borden, under Mackenzie King were all instructed that if people were urban or they had educations or they had trades or they had ambitions to start businesses, they should be rejected. They should be encouraged to go to the United States instead. We only wanted farmers.

Journalist **DOUG SAUNDERS**,
author of *Maximum Canada: Why 35 million Canadians are not enough*

What boosts your confidence is hard work and achievement. If you take a helicopter to the top of the mountain or you climb the mountain, which one is going to bring you more satisfaction?



KARL SUBBAN,
father of professional hockey players P.K., Jordan and Malcolm Subban,
in *The Globe and Mail* **R**

Breakouts can come as a surprise. Here's how to treat them.

Adult Acne? Really?

BY SAMANTHA RIDEOUT



THE BATTLE WITH ACNE isn't necessarily over just because you've exited your teen years. While adolescents are famously the most affected age group, some people deal with acne for decades. It's even possible to face the condition—the plugging of pores with oil, dead skin and bacteria—for the first time as an adult.

Adult acne is often caused by multiple factors working in tandem. For women, these can include hormone fluctuations related to menstrual periods, pregnancy or menopause. For both sexes, genetic predisposition plays a role: two thirds of adult acne sufferers have at least one close biological relative with the same problem.

Certain hair or skin products can clog the pores, so if you're prone, look for labels such as “non-comedogenic”

or “non-acnegenic.” Despite popular claims, the link between diet and acne isn't well established. There are plenty of reasons to eat well, but avoiding pimples isn't proven to be one of them. However, outbreaks can be triggered by certain drugs (e.g., corticosteroids, lithium) or by stress-related inflammation.

“There's more acne among adults than there used to be,” says Dr. Françoise Poot, a member of the European Academy of Dermatology and Venereology. “We aren't certain why, but we attribute the increase mainly to more stress and fatigue.”

Compared to teen acne, the adult form tends to be milder yet more stubborn, especially if previous bouts of acne have left the skin's microbes more resistant to treatment. Dermatologists might give sufferers prescriptions containing

In partnership with an alliance of two of Canada's leading research-based pharmaceutical companies

Your Heart Matters

Diabetes can be a real heartbreaker. Many Canadians don't know about the strong connection between heart disease and type 2 diabetes. The information below may surprise you and it could be life-saving.



HEART DISEASE IS THE #1 CAUSE OF DEATH FOR THOSE WITH DIABETES

Approximately one in two people with type 2 diabetes will die of heart disease—which includes heart attack, heart failure, and stroke. Studies show that people with diabetes may develop the disease 10 to 15 years earlier than people without diabetes. Yet unfortunately, almost half of Canadians with type 2 diabetes are unaware that their diabetes alone significantly increases their risk of heart disease.



CONTROLLING BLOOD SUGAR LEVELS IS IMPORTANT, BUT IT DOESN'T NECESSARILY MEAN YOUR HEART IS PROTECTED

Keeping blood sugar levels in the target range set by you and your doctor can help delay or prevent some complications of diabetes (such as problems with your eyes or kidneys). This means eating a healthy diet, getting regular exercise, testing and monitoring your blood sugar, maintaining a healthy weight, managing stress, and taking diabetes medications as prescribed by your doctor. While controlling blood sugar is important in managing diabetes, it alone may not be enough to protect your heart.

You may need to do more to lower your risk of heart-related diseases, which is why it's important to talk to your doctor at your next appointment.



THERE'S MORE YOU CAN DO TO HELP CONTROL DIABETES AND HEART DISEASE

The good news is that recent advances have been made in managing the risk of death from heart disease in people with diabetes. According to updated Diabetes Canada guidelines, there are recommended diabetes treatments that can reduce the risk of dying from heart disease.



DON'T SKIP A BEAT

Think about what matters the most to you. Maybe it's improving your health and lifestyle, exploring the world, or spending more time with family. No matter what motivates you, remember that your heart matters. Take care of your heart so you can enjoy life to the fullest.



DISCUSS YOUR OPTIONS WITH YOUR DOCTOR

If you have type 2 diabetes, speak to your doctor about steps you can take to help manage your risk of heart disease and protect your heart health for the long term.

Use the Risk Assessment Tool at myheartmatters.ca to find out your risk of type 2 diabetes-related heart disease.

Learn more about managing your risk of heart disease at myheartmatters.ca.

benzoyl peroxide (an antiseptic and anti-inflammatory agent), retinoids (vitamin A derivatives that help prevent pore plugging) or antibiotics to eradicate excess bacteria.

Many common acne creams and pills initially cause dryness, flaking, redness or flare-ups, and it can take up to eight weeks to see any improvement. Some patients stop treatment before it has the chance to start working, so make sure you understand how to use your prescription and what to expect from it.

While you're waiting, don't pick or scrub aggressively at your acne—it could cause scarring. Instead, wash

it gently, no more than twice per day. If first-line treatments don't work, your doctor can help you explore other options. For instance, oral contraceptives (suitable for women only) can be used to dial back the hormones that are causing the skin to produce excessive oil.

Adult acne requires patience, but with professional help, virtually every case can be controlled. **R**

Due to hormones,

3/4

of adult acne occurs in women.




TEST YOUR MEDICAL IQ

Lactase is...

- A.** a micronutrient found in dairy products that helps build muscle mass.
- B.** when a mother stops producing milk after weaning her child.
- C.** an enzyme that breaks down lactose, a sugar found in milk.
- D.** a disorder affecting infants who lack the instinct to breastfeed.

Answer: C. Lactase is a digestive enzyme that helps break down milk sugars. Virtually all humans produce plenty of lactase as babies, but many decrease production in adulthood. In fact, only about a third of the world's adults can fully digest dairy. Genes play a large role in lactase persistence: for instance, roughly 25 per cent of Greek adults can consume lactose without effects such as gas or bloating, compared to upward of 90 per cent of Irish men and women.



 Pharmacists Answering Your Health Questions

A Dose of Advice

A Dose of Advice is a regular Q&A series that features trusted Guardian® and I.D.A.® pharmacists from communities all across Canada. This edition features Michael Gleiser, pharmacist-owner at Bossons Guardian® Pharmacy in Strathroy, Ontario.



Dear Michael:

I was recently diagnosed with heart disease, so I'm really reflecting on my health choices. I know I need to stop smoking, but it's really hard and I need some advice. Besides quitting, what else should I do to effectively manage this new condition?

— HEART MATTERS

Dear Heart Matters:

Heart disease is a number of different conditions affecting the heart, which can be managed through a mix of medications and lifestyle changes. Early detection and management of high blood pressure, diabetes and high cholesterol can help you reduce your risk.



As you already know, quitting smoking is really important. Realizing you need to change your smoking habit is the first step, so that's a great place to start! When my patients come to me to help them quit smoking, we discuss several approaches, such as one-on-one counselling sessions, nicotine replacement

therapy and prescription medication therapy. Your local Guardian® or I.D.A.® pharmacist will be able to walk you through everything.



Regardless of your smoking habits, it's important to make sure you get enough exercise, such as walking 30 minutes each day. Diet changes are also key—you can start by lowering your salt intake and talking to your pharmacist about how you can keep your cholesterol in check.



On the medication front, be sure to take your medications as prescribed. They can make you feel better, help your heart work better and ultimately help you live a healthier life. To ensure your treatment is as effective as possible, make your medication routine simple: synchronize your prescription renewals and don't hesitate to ask your pharmacist for a pill organizer or dispenser.



Remember: If you have concerns about the side effects from one of your medications, be sure to raise them with your pharmacist. If they decide it's necessary to adjust your treatment, they'll contact your doctor. Never adjust or stop your treatment without discussing it with your pharmacist or physician. We're here for you.

Get a dose of our pharmacists' advice at guardian-ida-pharmacies.ca

Guardian

I.D.A.



NEWS FROM THE

World of Medicine



BY SAMANTHA RIDEOUT

Important Diabetes Type Frequently Misdiagnosed

About five to 10 per cent of all diabetes in Western countries is type 3c, which develops when the body has trouble producing insulin because of pancreas damage due to conditions such as cystic fibrosis or pancreatic cancer. By contrast, in the common type 2 diabetes, the body is unable to use insulin properly. A British study showed that the majority of type-3c diabetes patients are diagnosed with type 2 instead. This matters because type 3c generally means worse glycaemic control and a more urgent need for insulin in order to avoid complications (e.g., damage to the kidneys).

Veggie Nutrients Better Absorbed With Oil

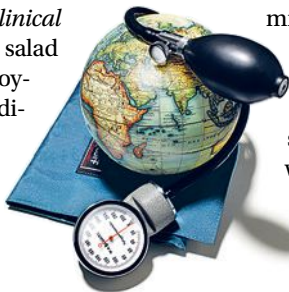
In an experiment published in the *American Journal of Clinical Nutrition*, participants ate salad with varying amounts of soy-bean oil, a common ingredient in commercial salad dressings. More oil resulted in higher blood levels of several essential nutrients, including

vitamin A and lutein. These nutrients came from the vegetables, but the fat in the oil helped the body absorb them better. There's no need to drown salad in dressing, the lead author said, but a couple of tablespoons' worth of oil per day could help you get the most out of a healthy diet.

Rheumatoid Arthritis Raises Risk of COPD

By comparing more than 24,000 rheumatoid arthritis (RA) patients with controls, a team from Arthritis Research Canada and the University of British Columbia discovered that RA increases the likelihood of getting chronic obstructive pulmonary disease (COPD) by 47 per cent. That's because inflammation plays a role in COPD development. The scientists recommended that RA patients

minimize their inflammation with treatment (e.g., NSAIDs, biologics) and watch for lung symptoms, such as wheezing, so that COPD can be caught in the early stages if it does arise.





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To ensure this product is right for you, always read and follow the label.

* By relieving irregularity.

Six surprising ways
to boost your heart health

In Tick-Tock Shape

BY LISA BENDALL

As much as 80 per cent of premature heart disease is preventable by making specific lifestyle choices. Some strategies, such as exercising and managing weight, are well known. But others may not have crossed your mind. “A small change in your everyday routine can potentially have a big impact in the long run,” says preventive cardiologist Dr. Beth Abramson, a spokesperson for the Heart and Stroke Foundation of Canada.

Get eight hours of sleep

“When you’re not rested, everything that happens in your life is a lot more stressful,” says Dr. Arya Sharma, founder of the Canadian Obesity Network and a professor of medicine at the University of Alberta. If we’re sleep deprived, our bodies also have more difficulty controlling blood

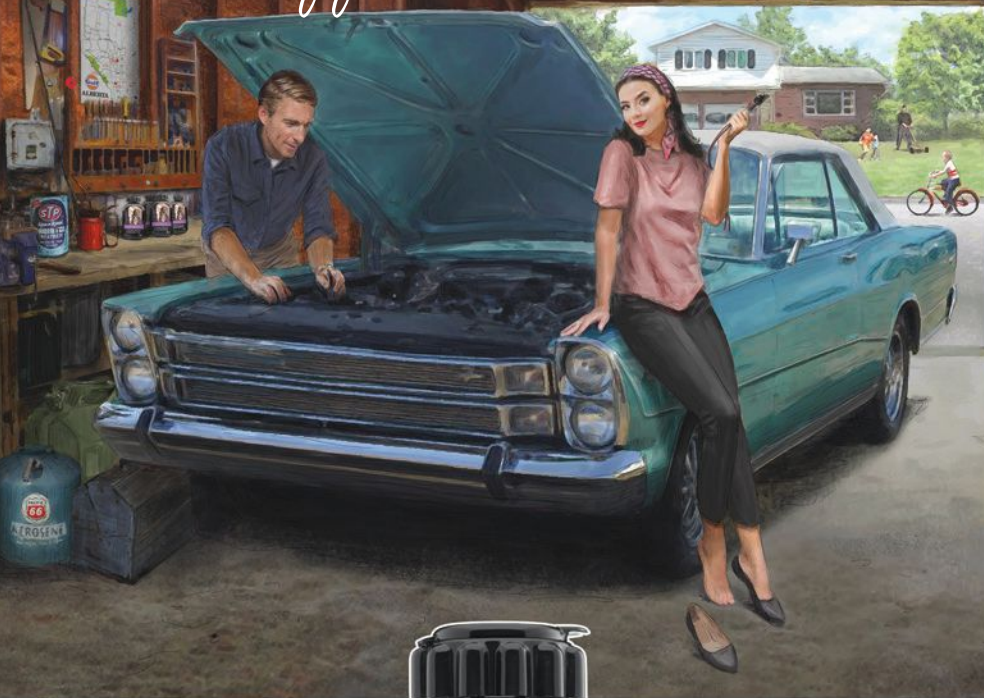
pressure, inflammation and glucose levels. These factors can all have an impact on cardiovascular health.

Engage in volunteer work

Doing good for others helps your self-esteem and relieves stress. Research published in *Psychosomatic*



Pain Relief for Men with Know-How



You were the top guy. No one could figure stuff out better than you. Guys marvelled at your skills. You don't call the repairman.

But lately, pain and stiffness are getting in the way. Untwist your joints. Try **Lakota Joint Care** for pain relief. The choice for men with know how.

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Lakota Joint Care provides miraculous pain relief the traditional way, with natural pain relievers. Try it for 30 days to see if it works for you. Money back guarantee.

Medicine in 2016 showed that a feeling of purpose in life is linked to a lower likelihood of heart attack and stroke. “We know that loneliness is a risk factor for heart health,” adds Sharma. “Volunteering gets you out of the house and creates a social network.” Depending on the type of work you do, volunteering might even increase your physical activity.

Avoid polluted air

Exposure to this kind of pollution over time raises your risk of heart disease. Inhaling contaminants formed from chemicals like sulphur dioxide, carbon and nitrogen oxides may irritate arteries and increase inflammation. Even short periods of exposure are unhealthy for people who already have other cardiovascular risks, such as high blood pressure. Try to get your outdoor exercise far away from highways and industrial districts, and spend more time indoors when the air quality index is poor.

Treat depression

“Depression can affect the way we behave,” says Abramson. Not only are we more likely to drink too much alcohol and to avoid exercise, there are also physiological effects of this

condition on the body, such as higher levels of stress hormones and blood sugar, that can be associated with poor heart health.

Eat breakfast

A recent study in the *Journal of the American College of Cardiology* found that healthy people who skipped breakfast were almost three times more likely to have heart disease six years later than those who

partook in a substantial morning meal. One possible reason: “If you’re eating a proper breakfast, you’re less likely to be hungry later and make poor food choices,” says Abramson. “We need to eat a balanced diet as part of a healthy lifestyle.” Choose whole-grain, low-fat breakfast foods and include fruit.

Laugh

A 2016 study in the *Journal of Epidemiology* of more than 20,000 people over the age of 65 found a lower incidence of cardiovascular disease in those who reported laughing every day. Laughter reduces stress and depression, and it may also serve as a mini-workout, helping your circulation and protecting the health of your arteries. **R**

“
**A 2016 study
 found a lower
 incidence of
 heart disease in
 people who
 laughed daily.**”

3 COMMON *beauty* challenges, SOLVED

Stylist and *Cityline* contributor Lynn Spence offers simple solutions so you can wear your age with confidence.



Photo by: Andreas Trauttmansdorff Pictures

The challenge: THINNING HAIR

"Thinning hair is something most of us deal with as we age," says Spence. "It lacks life and volume and can make even the brightest outfits fall flat."

The solution: PULL OUT ALL THE TRICKS

When it comes to healthy hair, choosing the right shampoo and conditioner is crucial. "I've been wowed by the **Pantene Colour Preserve Volume** collection," Spence says. "I love that it helps protect my colour and keeps it radiant — and that it doesn't weigh down my hair. It's great to have a product with dual benefits!"



The challenge: DRY SKIN

"You may have noticed that as you age, your skin becomes drier and less firm. Staying hydrated is a great first step, but the real game changer is what you put on your skin.

The solution: MOISTURIZE

After cleansing, use a gel moisturizer like **Olay Age Defying Advanced Hydrating Gel**. Formulated with hyaluronic acid, this moisturizer penetrates the skin's surface and provides 24 hours of sheer and breathable hydration.



The challenge: AGING TEETH

When you're confident in how you look, you can't help but smile. Spence adds, "Your smile is what draws people to you, and stained or aging teeth shouldn't stand in your way. Put your best look forward with a healthy-looking smile."

The solution: USE THE RIGHT TOOLS FOR A BETTER CLEAN

Forty-eight percent of Canadians who haven't seen a dentist in the past year have gum disease, though this can almost always be prevented or reversed if caught early! Investing in the right tools can help. Using an electric toothbrush such as the **Oral-B Pro1000 Black Cross Action** gives you a dentist-clean feeling and it removes 300 percent more plaque along the gumline than a manual brush. Spence suggests pairing your brush with **Crest Pro-Health** toothpaste to promote healthier gums & stronger teeth. "Nothing completes a look quite like a healthy, beautiful smile!"

¹Canadian Dental Association http://www.cda-adc.ca/en/oral_health/cfyf/good_for_life/



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What's Wrong With Me?

BY SYDNEY LONEY

ILLUSTRATION BY VICTOR WONG



THE PATIENT: Jiang, a 30-year-old kindergarten teacher in Toronto

THE SYMPTOMS: Back pain and low-grade fever

THE DOCTOR: Dr. Khalil Sivjee, medical director for the Cleveland Clinic Canada

🌀 IN OCTOBER 2015, Jiang started to develop a sore back, which she at first attributed to long days sitting on the carpet with her small pupils. However, when the unusual pain persisted for two weeks, she went to her family doctor.

Jiang's physician prescribed over-the-counter pain medication and muscle relaxants. Although her back didn't improve, it didn't get worse, either, so Jiang endured the discomfort. But by December, she became concerned again when she came down with a low-grade fever, lost her appetite and was losing weight.

This time, her doctor sent her to Sunnybrook Health Sciences Centre for a CT scan, which showed lesions on her spine and small nodules on the bottom of her lungs.

The physicians suspected she had either contracted tuberculosis (TB)—Jiang had recently visited extended family in China—or had a metastatic cancer of unknown origin. “Whenever you see stuff all over the body, you tend to wonder if the primary cause is cancer,” says Dr. Khalil Sivjee, who, as the hospital's head of respiratory at the time, was asked to consult on the case.

Sivjee ordered a full CT scan of Jiang's lungs, which revealed that the nodules were present throughout. It also showed enlarged mediastinal lymph nodes—glands located between the sternum and spinal column. Since all these symptoms were consistent with TB, Jiang was placed



in isolation and put on several drugs that target that disease.

Meanwhile, in order to determine which TB bacteria Jiang had been infected with, Sivjee performed a bronchoscopy and lung biopsy to remove fluid samples for testing. Jiang was allowed to go home while she awaited the results but couldn't return to work, as she might infect others. After almost four weeks, the lab tests came back negative for TB, but the biopsy revealed granulomas (small collections of inflammatory cells) in her tissue samples.

As granulomas can be a sign of TB, Jiang remained on the medication, but Sivjee wasn't convinced this was the answer—not only due to the test results but because his patient wasn't responding to the treatment. He took a biopsy of her spine and discovered that the cells at the centre of her granulomas were alive, which is inconsistent with TB.

Sivjee suspected sarcoidosis, an immune system disorder that often manifests in the lungs and affects about 10 to 20 people out of every 100,000. He checked Jiang's angiotensin-converting enzymes, which control blood pressure, and found that they were elevated, a nearly definitive sign of the condition.

"What happened next required a leap of faith," Sivjee says. The only treatment for sarcoidosis is steroids, but if Jiang was actually suffering

from TB or another immune disorder, steroids could be fatal. Both doctor and patient agreed that the risk was worth taking.

Thankfully, Sivjee's conclusion was correct, and Jiang showed immediate improvement. Her fever disappeared and within two weeks her appetite was back to normal. Four weeks after the treatment, the nodules were gone; within three months, she was pain-free and back in her classroom.



A biopsy showed that the cells at the centre of Jiang's granulomas were alive.

Although she felt normal again, Jiang remained on steroids for a year. "The problem with sarcoidosis is that it's a systemic disease and we don't know what causes it," Sivjee says. "It can be very aggressive and can invade several organs, including the heart, which can be fatal. And it can come back."

He says there are no known lifestyle changes or long-term medications to prevent a relapse. "Sarcoidosis is an interesting, although little understood, condition, and there aren't many new therapies being studied for treating it," Sivjee says. "Fortunately this patient has done very well." **R**

SPECIAL SECTION



MEET THE WINNERS

We are proud to announce the results of our ninth annual Trusted Brand™ Survey, confirming that trust is an important driver in Canadian consumers' purchase decisions. We asked Canadians to vote for the brands they trust most across 30 categories of products, services, and retailers—the brands that deliver quality, value, and reliability. On the following pages you will see who has come out on top.

Congratulations to the 2018 winners that have earned our country's trust. Especially to our Platinum—10 or more consecutive years, and Gold—5 or more consecutive years, who have continually earned the trust of Canadians.

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PLATINUM WINNER



**Passenger Car
Manufacturer**
TOYOTA
2009-2018



Hybrid Car Manufacturer
TOYOTA
2011-2018



Pharmacy/Drug Store
SHOPPERS DRUG MART
2013-2018



Cough Syrup
BUCKLEY'S
2013-2018



Vitamin
JAMIESON
2011-2018

GOLD WINNERS



**Arthritis Pain
Reliever**
TYLENOL
2014-2018



**Headache Pain
Reliever**
TYLENOL
2013-2018



**Bank/Trust
Company**
TD CANADA TRUST
2012-2018



**Disinfectant
Cleaning Spray**
LYSOL
2014-2018



Non-Dairy Beverage
SILK
2014-2018



Interior Paint
BEHR
2014-2018



Cereal
KELLOGG'S
2010-2018



**Life Insurance
Company**
SUNLIFE FINANCIAL
2010-2018



Sunscreen
COPPERTONE
2010-2018



**Weight Loss
Program**
WEIGHT WATCHERS



Bottled Water
NESTLÉ



**Sensitive/Dry
Skin Lotion**
AVEENO



Tea
TETLEY



**Travel
Insurance
Company**
BLUE CROSS



**Automotive
Parts Retailer**
CANADIAN TIRE



Lawn Care
SCOTTS



Nutrition Bar
CLIF



Natural Lip Balm
BURT'S BEES



**Laser Vision
Correction**
LASIK MD



Pet Food
PURINA*



**Quick Service
Restaurant**
MCDONALD'S



Beauty Retailer
SEPHORA



**Home
Improvement
Retailer**
THE HOME DEPOT



Running Shoes
NIKE



Grill/Barbecue
WEBER

*Tied with another brand in a previous year

WEBER

Weber-Stephen Products LLC is the world's premier manufacturer of charcoal, gas and electric grills, grilling accessories, and award-winning cookbooks and mobile applications. In September 2014, the company opened its Canadian subsidiary—Weber-Stephen Canada Co.—and Weber Grill Academy in Vaughan, Ontario. Weber grills are sold worldwide at select national home centres, specialty hardware stores, patio stores and other retail outlets. Weber has the strongest customer support program in the industry with its Weber Grill-LineSM (1-800-GRILL-OUTSM). Weber can be followed on Facebook ([facebook.com/webergrillsca](https://www.facebook.com/webergrillsca)), Twitter (twitter.com/webergrillsca), Instagram ([instagram.com/webergrillsca](https://www.instagram.com/webergrillsca)) and YouTube ([youtube.com/webergrillsca](https://www.youtube.com/webergrillsca)). Visit weber.com for product information, grilling tips and tricks, recipes and more.

SUN LIFE FINANCIAL

Sun Life Financial's roots run deep in Canada, where our company was founded more than 150 years ago. Our business began with the sale of insurance and has expanded to offer life, health and wealth solutions to our clients. Today we are an industry leader with a client base of millions of individuals and thousands of companies across the country—and many million more clients around the world.

ABOUT THE SURVEY

Commissioned by Reader's Digest in an independent opinion poll, Ipsos Canada conducted a nationwide online survey of over 4,000 Canadian adults 18+ from August 22-31, 2017. Quota sampling was used and the sample was stratified by language (English n = 3,076 and French n = 925). The results were weighted according to census data to ensure that the overall sample reflects the demographic profile of Canada across age, gender, region, and language. The precision of online polls is measured using a credibility interval. In this case, the overall results are considered accurate to within +/-1.8 percentage points, 19 times out of 20, of what the results would be had the entire population of adults in Canada been polled.

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How to Avoid Identity Theft



With cybersecurity breaches at big companies and a range of scams targeting unknowing consumers, your personal information is more vulnerable than ever



BY ANNA-KAISA WALKER

PHOTO-ILLUSTRATION BY C.J. BURTON



The alarming call came one wintry February day last year while Melissa*, an IT analyst, was at work. She didn't recognize the number, and when she answered, a sales associate at a jewellery retailer in Mississauga thanked her for joining the store's credit card program. Confused, Melissa explained that she hadn't applied for it. "So you weren't just here in the store?" the associate probed.

The 34-year-old wasn't experiencing short-term memory loss. As it turned out, a much younger woman in possession of Melissa's social insurance number, address and birthdate was impersonating her. Over five days, armed also with fake photo identification, this mysterious fraudster used Melissa's name to sign up for two cellphone accounts, apply for credit cards and take out a payday loan from Money Mart. She'd planned to walk out of the jewellery store with

several expensive baubles, but a shrewd employee, sensing something was off about the nervous young customer, refused to initiate the account and, after the woman left, obtained Melissa's phone number from a credit bureau.

The thief disappeared without a trace, getting away with about \$1,000 in merchandise and loans. It could have been worse had she not been discovered before the credit cards were mailed to her, but it was still a huge headache for Melissa. Though she wasn't on the hook for any money, she had to call every retailer the fraudster visited, supplying proof of identity in order to cancel the accounts. "I've spent over 100 hours clearing my name, and my credit is still terrible," she says. "Why is this my fault?"

STORIES LIKE MELISSA'S are becoming more common. In 2016, approximately 36,000 Canadians were victims of identity theft or identity fraud—up over 20 per cent from the previous year. According to statistics from the Canadian Anti-Fraud Centre (CAFC)—our national agency that collects and analyzes data from these crimes—losses in 2016 totalled almost \$14 million.

Meanwhile, with security breaches regularly making headlines, it can seem as if our personal information is in constant danger of being stolen by thieves. Last September, Equifax

disclosed that 8,000 Canadian victims were included in the high-profile hack that compromised the personal information of more than 145 million Americans. In May, Bell Canada announced that hackers had threatened to expose 1.9 million customer records, and the company refused to pay to stop them (a portion of the data was subsequently leaked online). Breaches have also affected WestJet, Uber, Loblaws and Canadian Tire—all in the past year.

While those large-scale thefts are out of your control, and it's impossible to track which individual frauds come from them, there are ways to make your personal information difficult for thieves to get their hands on.

#1: Protect Your Digits

Your social insurance number (SIN) is the key to a kingdom of personal records, from your credit report to your tax return, so you're wise to keep it secure. The nine-digit SIN was created in 1964 as a unique client identifier for the Canada Pension Plan and various employment insurance programs, but its use has expanded to virtually all transactions between you and the government. However, with no legal restrictions on who employs it, your SIN may also be requested by private-sector organizations—and that's where the problems start.

Even if you're asked for it, you don't have to give your SIN to your landlord, your doctor's office, your cell-phone provider or when filling out a credit card or employment application. The more it's floating around, the more likely it'll be stolen and sold on the so-called "dark web." (This sinister underbelly of the Internet, which can only be accessed with special software, hosts marketplaces and eBay-like auction sites where identities are bought and sold.) So if you're not sure whether it's really necessary to provide your SIN, ask why it's being requested and if you can provide an alternate form of identification.

Melissa still doesn't know how her SIN got leaked, but the thief who targeted her used it to request a credit report in her name and then pieced together all the information they needed in order to impersonate her on credit applications.

If you think your SIN has been stolen, file a complaint with police and make sure you get a case reference number and the officer's name and telephone number. Contact the CAFC for further advice. Every few months, you'll need to request a copy of your credit report from one of Canada's two national credit bureaus, Equifax and TransUnion, and review it for any suspicious activity. Credit alerts can be placed on your file, requiring that you be contacted if anyone tries to open a new account in your name.

#2: Strengthen Your Log-ins

Canadians, like most of the world's Internet users, are abysmally poor at keeping their online profiles secure. Three researchers from the University of Ontario Institute of Technology—Dr. Christopher Collins, Rafael Veras and Dr. Julie Thorpe—analyzed 32 million passwords leaked from a social gaming company, using them as a large representative sample of North American social media users. Hilariously—or perhaps depressingly—they found the most commonly used passwords involved strings of sequential numbers (“123456”) and painfully obvious word choices (“password”).

They also parsed semantic patterns and found common themes, such as “I love” followed by a person's name (male names were four times more common than female names). References to food, money, sex, profanity and royalty also cropped up most frequently, says Thorpe, an associate professor of IT security. As for digits, people tend to favour dates, such as holidays and notorious events (like 4/15/12, the day the *Titanic* sank).

You might feel like the above options are fairly airtight, but using any recognizable words or strings of numbers instantly makes your accounts vulnerable to hackers, who employ guessing software that can

run through millions of possible passwords per second. The most secure and memorable password is one that uses a string of letters, numbers and characters derived from a phrase that's been altered to include something personal. For example, you might log into an airline site with “11oajpwK&S,dkwibba”—which stands for “I'm leavin' on a jet plane with Kristof and Sven, don't know when I'll be back again.”

In theory, you'll need to come up with dozens of these. “As soon as you use the same one for multiple sites, hacks can happen,” Thorpe warns. But since remembering them all isn't realistic, she suggests using free password managers like iCloud Keychain, LastPass, Dashlane, KeePass and 1Password. Although these tools can themselves be hacked, Thorpe says you're ultimately far more secure using them than being a lazy person with only one password for everything.

#3: Beware of Common Scams

Every day, the CAFC gets calls from consumers who've been targeted by scammers, and about half of these swindles involve trawling for personal information rather than simply demanding cash, says acting team leader Allan Boomhour. “The data itself is valuable,” he says, explaining that criminals not only use it to open

financial accounts in your name, but can sell it on that dark web.

Leah*, 36, was shopping at No Frills in Toronto's east end one day when a well-dressed man with a clipboard approached her, offering to sign her up for a new PC Financial MasterCard. She filled out the application form, including her birthdate and SIN, but the card never arrived. After a while, she became curious, so she called the bank and was told that they had no record of her at all. "They said that they didn't have anybody signing people up in No Frills grocery stores anywhere in the GTA," she says.

Leah called her regular bank and discovered that someone had managed to get access to her account, most likely by having a duplicate copy of her current credit card sent to a different address, and was using it to make a slew of small purchases.

Another common scheme, email phishing, has grown more sophisticated than cordial entreaties from Nigerian princes seeking your help to transfer vast sums of money. Typically, you'll get an email from what

WHERE TO TURN

After reporting a fraud to the police, get further info and advice from:

Canadian Anti-Fraud Centre (CAFC)
antifraudcentre-centreantifraude.ca

To learn more about common scams and frauds, go to:

Royal Canadian Mounted Police (RCMP)
rcmp-grc.gc.ca/scams-fraudes

To order a copy of your credit report or place a fraud alert on your file, contact:

Equifax Canada
equifax.ca
or
TransUnion
transunion.ca

appears to be your bank or the Canada Revenue Agency (CRA) asking you to "authenticate" your account or receive a tax refund by clicking on a link. You'll be asked to enter your information in a fake website that often looks very convincing. "It's almost a mirror copy of the original, but when you try some of the links on the page, like the 'Contact Us,' they don't work," Boomhour says.

Remember that reputable institutions will never ask for personal information of any kind via email. For its part, the CRA doesn't send tax refunds by e-transfer—

only by cheque or direct deposit.

#4: Secure Your Mail

In May 2017, Toronto Police announced that they'd arrested the leader of a \$10-million identity theft ring in a massive investigation dubbed Project Royal. The enigmatic Torontonians, who called himself Johnson Chrome, flaunted his lavish lifestyle at nightclubs, displaying a predilection for glitter-encrusted

How Many Times Could I Be So Unlucky?

BY MEGHANN JOHNSTON (AS TOLD TO ANNA-KAISA WALKER)

I've had my bank account raided by identity thieves three times. The first time, in 2012, I was a busy, stressed-out law student at Queen's University in Kingston, Ont., when I got a phone call from the local branch of my bank asking me to visit them in person immediately. They told me that a young woman had impersonated me using fake I.D. and had withdrawn over \$26,000 from my student line of credit.

The bank refunded my money, but a year later, it happened again. This time, police caught the thief, a different woman than the first. Claiming to be me, the 18-year-old had obtained a new debit card and PIN in order to withdraw several thousand dollars from my account. The branch manager became suspicious and phoned my father, asking him for my physical description. As it happened, she looked nothing like me. The cops recognized her from the security footage and arrested her.

I insisted that the bank put a physical description or a password requirement on my file, but they told me their computer system didn't have that capacity. Unbelievably, I was targeted

again in 2014, in a nearly identical manner. This time, the thief, yet another young woman, stole almost \$7,000.

I was furious with my bank and switched to a new one that agreed to require a verbal password and specific pieces of identification for anyone trying to access my account. I still have no idea why I've been victimized over and over again. I'd never had any indication that my SIN was compromised, and I've only ever lost my wallet once, when I was 14.

If you want my advice, never do business with a bank that won't take your identity theft concerns seriously. Also, I shred all my personal documents and I'm careful about what information I give out—for example, when I return something to a store, I'll fill in fake address information on the refund slip.

What happened over the past few years has really left a mark. I've had my car broken into, and

it's a similar sense of personal invasion, especially when there's been someone walking around pretending to be you. It's not a good feeling, and I am still reluctant to give out any personal details to anyone. I wish I could know that it won't happen again.



If you want my advice, never do business with a bank that won't take your identity theft concerns seriously.

designer shoes and fine wines. But his modus operandi was surprisingly simple—he and his associates would steal mail from condo buildings, painstakingly piecing together their victims' identities until they had enough information to apply for credit. For 10 years, Chrome had evaded detection by only stealing small amounts at a time—mostly between \$100 and \$5,000.

Indeed, intercepting snail mail is a fairly easy way to steal an identity, especially if your victim receives paper financial statements. Tactics can include Dumpster diving, but also the slightly more sophisticated mail-forwarding fraud—for this, all a thief has to do is input your address, a new one and a credit card number at Canada Post's website in order to reroute your mail to a vacant, abandoned or for-sale property.

Switching to e-billing and online payments can eliminate this risk, as can renting a PO box where you can retrieve letters and packages at your convenience.

#5: Watch Your Accounts

Too many Canadians don't check their bank and credit card statements thoroughly every month, says personal finance educator Kelley Keehn, author of *Protecting You and Your Money: A Canadian's Guide to Avoiding Identity*

Theft and Fraud. This is especially true of seniors, who tend to slow down their consumer spending as they age and aren't as likely to need loans. "If you don't care what your credit score is, you're not going to be checking your credit file for fraudulent activity," she says.

Keehn recommends a little-known trick for spotting suspicious transactions: through your online banking profile, you can opt to receive an e-mail or text message every time your debit or credit card is used. If you see a purchase you don't recognize, you'll be able to report it right away and won't be on the hook for any stolen money. (Most banks have a 30- to 60-day limit for reporting fraudulent transactions.) There are also a range of phone apps, such as Credit Karma and LifeLock, that can help you monitor your accounts for suspicious activity.

Of course, even if you put this safety measure in place and follow all of the other advice above, you're still not immune to identity theft. "The reality is, you can take every precautionary step possible and still become a victim. It's just that big of a problem," warns Boomhour, before adding one welcome note of reassurance: "At the end of the day, though, you're not responsible for anything the criminals do in your name." **R**

*Names have been changed



*Steven Richards
photographed in his
Brampton home on
November 24, 2017*

During my jail sentence, I signed up for anything I could to make the hours go faster, including a literacy program for inmates. **What I learned there changed my life.**

The Write Way

BY STEVEN RICHARDS FROM *TORONTO LIFE*

PHOTOGRAPH BY KC ARMSTRONG

As a kid, I had a hard time reading and writing. Letters and numbers looked backwards to me, and I was always falling behind my classmates. I was officially diagnosed as dyslexic when I was eight. It was humiliating. In elementary school the other students made cracks and only stopped when I roughed up a kid who was mocking me. The summer after Grade 9, I took a part-time job working for my dad as a tire technician. I was making \$150 a day—a fortune for a teenager. When I was offered a full-time position, I didn't think twice about accepting it. At 16, I dropped out of school.

Life was pretty good for the next few years. I started my own company, MS Tires, and became a father in 2011. But then an evening out changed the course of my life completely. I was at a club in downtown Toronto with a buddy. As we were leaving, my friend decided to relieve himself on a staircase that led to an underground parking garage. A security guard intervened, and the situation escalated. The next thing I knew, my friend was at the bottom of the stairs and I was on top of the guard, punching him in the jaw.

My life continued to move forward at first. In 2013, while I was out on bail, my wife Chantel and I purchased our first house, in Brampton, Ont., and in 2015, she got pregnant.

Then, one night at around 11 p.m., I accidentally hit a woman with my car. It was dark and rainy. I had tried to make a left-hand turn and didn't see her crossing the street. I panicked and fled, then turned myself in a few hours later. That night, I found out she had died. I raised \$11,000 toward the funeral costs using a GoFundMe page, but I was consumed with guilt. Two months after the accident, I was sentenced to 12 months at Toronto East Detention Centre for the assault, plus another five for leaving the scene of the car accident. My family came to my sentencing, including my pregnant wife and my five-year-old son. I wasn't allowed to hug either of them goodbye.

FOR THE FIRST two months of my sentence, my unit was constantly on lockdown, and I was stuck in my cell for 23 hours a day, seven days a week. I was only allowed out to shower and to jockey for the phone with my fellow inmates. Eventually, I was assigned a job in the prison's kitchen, where I worked every day from 7 a.m. to 3 p.m. cooking for the other inmates. The rest of the time, I enrolled in anything I could—Bible studies, a harm-reduction course—to make the hours go faster. One day, a corrections officer told me about Literal Change, a non-profit literacy program for inmates. She had seen some of the letters I had written to friends and

family, and thought I would benefit from it. I decided to give it a try. For me, it was just another way to pass the time.

I met with Robyn, a program co-founder, one-on-one twice a week. At first, the lessons were challenging. For so long I had relied on my phone and computers to correct my spelling. Suddenly I had to think for myself. Every session, Robyn would teach me 10 new vocabulary words, which I would learn to spell and use in sentences. We went over everything, from long and short vowel sounds to parts of speech. She always gave me homework—reading assignments, short stories to write, vocabulary words to use in poems—and I would start on it as soon as I was back in my cell. Within weeks, I was looking forward to my lessons. The program was an opportunity to work with someone who believed in me—someone who wanted to help.

Not long into the program, I could spot mistakes other inmates were making in their letters home. When I received notes from my family, I could pick out which words had been spelled incorrectly or where punctuation had been used in the wrong places. Sometimes I thought about sending them back with corrections, and that's when I realized I was learning something. When I had free time, I used my new skills to

write letters to my son and poems to my wife. She saved them all, putting each one in a protective plastic cover. Looking at them now, from the first one I wrote to the last, I can track the visible improvement in my writing. It's unbelievable.

I continued working with Robyn right up to the end of my sentence—I served 12 months, having had my sentence reduced for good behaviour. Robyn and I are still in touch; I'd like to get my GED, and she's pushing me to earn my last six high-school credits. Before I went to prison, my wife used to do all of my paperwork for my company; now I manage it myself. And if it weren't for Literal Change, I'd still be reading just to get by—not to better myself and definitely not for fun. These days, when I pick up a book, I find it hard to put it down. I love Tony Robbins, and I'm currently reading *Confessions of an Economic Hit Man* by John Perkins.

My daughter is still a toddler, but my son is seven, so he's learning how to read. And just like his dad, he's having a hard time. A year ago, I would have been frustrated that I couldn't give him the help he needs—who wants to admit to his own child that he can barely read? But it's so much easier now. I've been doing the same exercises with him that I learned while I was in prison. Now, it's my turn to be the teacher. **R**

Every year, hundreds of thousands of patients leave Canadian hospitals with delirium. So why don't we know more about it?

STATE *of* CONFUSION

BY SYDNEY LONEY FROM *THE WALRUS*

ILLUSTRATION BY KATIE CAREY

AT 83 YEARS OLD, Kenneth Marsden, a retired carpenter, had the mind of a *Jeopardy!* champion. He could finish a crossword puzzle in half an hour and recite, from memory, the names of obscure towns from his childhood in England.

"I swear he'd win that show if he were a contestant," says his daughter Dawn Clarke. That's why it worried her

when, after a short hospital stay, her father took all day to complete the crossword in *The Hamilton Spectator*.

One Monday morning in February 2017, Marsden was watching television in his bedroom when his nose began to bleed. "It was gushing," Clarke says. "There was blood all over." Hours later, Marsden sat with his family in a small beige room at St. Joseph's Healthcare



Hamilton, a stained cloth pressed to his face, waiting to see a doctor.

Clarke and her mother, Rose, went searching for coffee. When they returned, Marsden was sitting on the bed, crying. A doctor had come in and wedged what looked like a giant tampon up his nostril. "My dad was in so much pain. He was terrified," Clarke says. Another doctor later cauterized a ruptured vessel in her father's nose.

Marsden was connected to an IV and didn't get much sleep at the hospital over the next few days—nurses had to wake him every three hours to check his vital signs. He was disturbed by the noise, the lights, the constant comings and goings, and he worried incessantly that the bleeding would return.

He was sent home on a Thursday night, but barely 48 hours later, Rose called Clarke, distraught. Marsden had been up since 4 a.m. He was confused and restless, pacing around in his underwear. Clarke rushed to her parents' home, which is three doors from her own, and called 911. As the family waited for an ambulance to arrive, Marsden began to hallucinate that he saw writing on the blank television screen.

Back in the ER, Marsden became combative. He swore at attendants and

spat out his blood-pressure pills. Doctors determined that Marsden had a magnesium deficiency, possibly the cause of the initial nosebleed, and they prescribed supplements. Clarke asked to have her father discharged a few days later—she could tell he wasn't fully recovering at the hospital. At a follow-up appointment weeks later, the family learned that Marsden's confusion and mood swings were unrelated

to the reason for his nosebleed. He was diagnosed with hospital-acquired delirium.

EVERY YEAR, hundreds of thousands of patients leave Canadian hospitals with delirium. The causes of the condition aren't fully understood but are believed to be due, in part, to overstretched medical

resources. Patients' broken bones and infections are treated, but they develop shorter attention spans, slurred speech, confusion and hallucinations. It can happen to anyone, anywhere: there's the 87-year-old woman from rural Ontario who broke her hip and then forgot why she was in the hospital; another elderly woman who started seeing waterfalls coming from the ceiling after being admitted; a 78-year-old stroke victim who kept losing all sense of who and where she was.



IT'S A
DEVASTATING
CYCLE: OUR
HEALTH CARE
SYSTEM IS
WORKING
AGAINST
ITSELF.

In 2016, Dr. Kumar Dharmarajan, a former professor at the Yale School of Medicine, analyzed data from a clinical trial involving 469 elderly patients in Connecticut. Fifteen per cent developed delirium during their hospital stays. Those patients also had a significantly increased risk of dying within 90 days of their admission—in part because of poor nutrition, disturbed sleep and the use of restraining devices, which can cause injury (“A catheter isn’t meant to be a restraint, but it accomplishes the same purpose,” Dharmarajan says).

Despite its prevalence, hospital-acquired delirium (HAD) remains underrecognized and underdiagnosed. “Health care providers are trained to focus on the condition that resulted in hospitalization, not on the experience of the person while they’re there,” says Dharmarajan.

HAD was first identified in the 1960s, when it was referred to as ICU psychosis. But symptoms in today’s patients are still mistaken for everyday signs of aging. And since most of those affected are seniors, their complaints are often dismissed—up to 40 per cent of older hospital patients suffer from the syndrome, as opposed to less than five per cent of people under 50. HAD may *look* like dementia, but delirium is an acute confused state, whereas dementia is a chronic condition characterized by memory loss. Most significant, delirium usually has an

external trigger—which means it could, in theory, be prevented.

Dr. Gordon Boyd, a neurologist and critical care clinician at Queen’s University in Kingston, Ont., says hospitals are faced with a public-health crisis featuring a condition that can lead to many long-term mental health problems. Then there are the associated costs, estimated to be in the billions, since patients with HAD require more medical services and follow-up care—a situation that will only worsen as lifespans lengthen and seniors account for an increasingly large part of the population (20 per cent by 2024).

The health care system in Canada is hospital-centric: it revolves around the emergency room. Not only are seniors admitted more often than any other age group, they also stay longer and use more resources. Their time in hospital increases their susceptibility to delirium, due to exposure to risk factors such as inattentive care, falls or infection. That, in turn, makes it more likely that they’ll need to come back. It’s a devastating cycle: in effect, our health care system is working against itself.

AFTER MARSDEN returned home, his appetite deteriorated; on some days he refused to eat altogether. He eventually stopped wanting to get dressed in the morning and stopped getting out of bed. Four months after his diagnosis, he was back in the hospital with shortness of breath.

Once a patient has experienced delirium, they're vulnerable for the rest of their lives, says Dr. Joye St. Onge, the head of geriatrics at St. Joseph's. "I've seen people get a cold and become delirious again." HAD can cause cognitive impairment and permanently change the brain, though the exact reasons why are not understood. Current research shows that having experienced the condition once is a significant risk factor for encountering it again. According to St. Onge, the brain is more vulnerable after delirium.

A study in 2013 found that 74 per cent of adults admitted to the medical or surgical intensive care unit of a medical centre and hospital in Nashville developed delirium during their stay. One year later, one-quarter to one-third of the patients showed symptoms of long-term cognitive impairment similar to those of a traumatic brain injury or mild Alzheimer's.

Many Canadian hospitals have introduced delirium-screening procedures, but there are no universal guidelines for prevention yet. Dharmarajan thinks that institutions should model themselves after patient-centric children's hospitals, where positive and less disruptive environments shelter patients from the stresses of illness. Boyd recently helped set up an ICU follow-up program at Kingston General that invites people back to talk

about their experiences and visit their former hospital rooms to dispel negative associations and create new, positive experiences. Dr. Roger Wong, executive associate dean of education at the University of British Columbia's faculty of medicine, would like to use technology to help reorient patients by connecting them with familiar photos on social media.

Wong has made HAD part of the curriculum at UBC and advocates for standardizing the training for all students in the field. But Canada's 17 medical schools, he says, are subject to the same inconsistencies as the health care system as a whole. For now, one of the most reliable prevention strategies is the Hospital Elder Life Program, developed in 1993 by Dr. Sharon Inouye, now a professor of medicine at Harvard Medical School. The program, which is designed to keep patients mobile, oriented, hydrated and well rested, is slowly being adopted worldwide.

The strategies it recommends—putting calendars in patients' rooms to avoid confusion about the date, minimizing the use of sedatives, coordinating nursing staff so that people aren't woken up several times a night—reduce the chances of acquiring delirium by 40 per cent. St. Joseph's has implemented some prevention tactics, including having volunteers conduct orienting conversations (discussing

newspaper headlines, for example) with patients, but there's limited coordination between wards. "It's about priorities and resources," St. Onge says. "Hospitals are struggling to deal with acute issues, so preventative programs have a hard time."

Today, Marsden doesn't remember much about his ordeal, and his daughter is thankful for that. Clarke believes

that if there had been more information available, family members could have better prepared themselves for what happened. Marsden is home again and taking antidepressants, but his family is terrified that his delirium will return. Clarke says this time she's ready to take action at the first sign of the condition. "I don't care if I make people mad—my dad will get the care he deserves." **R**

*
* *

SINGLE MINDED

Hedgehogs. Why can't they just share the hedge?

DAN ANTOPOLSKI, comic

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THE SAD TRUTH

It's bleak how job hunting is a job in itself and the only reward is an actual job.

🐦 @WINNINGPROTOCOL

EMAIL ERROR

My husband is a semi-retired electrical contractor. Over the years, applying for jobs has changed from requiring hard-copy resumé to electronic applications. I help him out with his submissions. So imagine my horror when recently, after forwarding what I thought was his correct application, I received an email that read, "Thank you, Robert, for your onion salad recipe. It sounds delicious, however we still need your application."

INGRID STORCH, *Cranbrook, B.C.*

HORRIBLE MISTAKE

Please quit telling me to keep up the good work. The good work was an accident and impossible to replicate.

🐦 @HOUSE_FEMINIST

JUST WAIT

Well, sir, I doubt everyone will be so upset that my desk is "infested" with caterpillars once the office is "infested" with beautiful butterflies.

🐦 @PJTLYNCH

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BURDEN *of* TRUTH

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OR STREAM ANYTIME





Natalia Martinez's ambition to stake a claim for female climbers took her to Canada's highest peak. That same determination would save her life.

ON FRAGILE GROUND

BY BRETT POPPLEWELL

ILLUSTRATION BY MARIE BERGERON



IT WAS 5 A.M. ON MAY 1, 2017, and Natalia Martinez sat in her tent in the Yukon, boiling water from snow she'd chipped from the side of Canada's highest mountain. She was 3,901 metres above the sea, perched on a hanging glacier two-thirds of the way up the east ridge of Mount Logan. The Argentinian climber was still three days from the peak. The night had been cold, -10 C. But now the Arctic sun was rising slowly, a drawn-out dawn soon to glow through the frost-covered canvas of her tent.

Once the water had heated up, Martinez turned off her camp stove, poured a cup of tea and began mixing oatmeal, just as she'd done every morning for the past 10 days.

The 37-year-old ate a spoonful of oats and reflected on the dangers ahead. Another 600 metres of pushing and pulling both body and gear up the frozen ridge and she'd reach the summit plateau. From there it would be a six-kilometre trek, sidestepping the deadly crevasses and fragile cornices of a cracking glacier on her way to the top of the mountain. Only then would she become the first woman to reach Logan's peak solo. She was so close.

Martinez was nearing the end of her meal when the ice and snow beneath her tent began to shake. Then Logan began to roar, and in that moment it felt to the climber as if both she and her tent were going to be wiped clear from the ridge.

IT WAS 5 A.M. some 2,500 kilometres southeast in Whistler, B.C., too. Camilo Rada, Martinez's partner, was in their apartment, sleeping lightly, when his phone rang. He'd been with Martinez for 10 years, long enough to know that she'd only call at this hour if there was an emergency.

Rada shot up as Martinez shouted into her satellite phone that something was terribly wrong—but then she paused in confusion. Logan had gone quiet. Martinez was certain her tent had been unmoored from the ridge by an avalanche. She sat still, terrified that any sudden movement meant her death.

Rada listened, fearful, as Martinez worked up the courage to survey the damage. She promised to call her partner back, then hung up and unzipped her cocoon.

Fifteen minutes later, Martinez phoned Rada again, still perturbed but calmer. She was standing outside

her tent and as far as she could tell, it hadn't moved. But many of the narrow snow bridges that had straddled the mountain's crevasses had collapsed, replaced by loosely packed snow that had been pushed over the crevasses and now concealed their hazards.

And yet Logan seemed tranquil. The only sound Martinez could hear was that of a westerly wind funnelling around the mountain as an arctic storm rolled in off the Pacific.



**THERE WERE
RISKS: IN 1987,
TWO ACCOMPLISHED
CLIMBERS DIED ON
LOGAN WHEN A
CORNICER BROKE OFF.**

"I'm going to pack up and go higher," she told Rada. "I don't feel safe here."

She hung up and crawled back into her tent. As she began rolling up her sleeping bag, the mountain rumbled to life once more.

MARTINEZ HAD DREAMED of scaling Logan since she'd first glimpsed its massive ice walls and protruding ridges from the neighbouring Mount Malaspina. Until August 15, 2015, the day Martinez and Rada reached its summit, Malaspina had been the highest unclimbed named mountain in North

America. But even it was dwarfed by Logan, which stood supreme over the horizon.

Logan's colossal beauty wasn't the only thing that attracted Martinez, nor was it the technical difficulties. It was that no woman, or team of women, had ever scaled the mountain.

In 2007, Martinez, who had been climbing since the age of 15, met Rada during a wilderness first-aid course on the Argentinian border with Chile. They fell in love and were soon belaying each other up and down walls in the Andes and the Himalayas.

When Rada enrolled at the University of British Columbia in 2011 to study geophysics, the couple moved to the Canadian Rockies, settling near Whistler so they could use the surrounding mountains and cliffs as a training ground.

It was four years later, on Malaspina, that Martinez told her partner of her intention to climb Mount Logan with a female friend—and without him.

FOR THE NEXT TWO YEARS, while working as a mountain guide and ski instructor, Martinez studied Logan, immersing herself in its geography and history. She knew there were risks: in 1987, accomplished climbers Catherine Freer and David Cheesmond died when a cornice broke off. Annually, an average of 25 climbers try to scale the mountain, and not all of them succeed. In the last five years,

four had required evacuation. Martinez formalized her plans. The friend she had hoped to climb with could no longer make the journey, so she would traverse Logan's 38.6-kilometre length from east to west alone, exposed to the winds and storms that make the mountain one of the coldest places on earth. While gaining 3,819 metres in elevation, she would need to choose her every step carefully and successfully navigate the treacherous ridge-line known as the "knife's edge." From there, she would reach the summit and begin the long descent via the mountain's western face.



**NATALIA MARTINEZ
KNEW THIS
CLIMB MEANT
A GREAT DEAL
MORE TO HER THAN
TO ANYONE ELSE.**

At 11 a.m. on April 20, 2017, Martinez kissed Rada goodbye at the Vancouver Airport. Flying first to Whitehorse, she then travelled by car to the entrance of Kluane National Park and Reserve. There she hired Tom Bradley, a bush pilot with a single-engine propeller plane on skis, to take her the rest of the way to Logan. They touched down on the glacier at the eastern base of the Logan massif on April 22.

The sky was clear as she clipped into her skis and began dragging her 80 kilograms of gear by sleigh. It took two days to reach the base of the east ridge. She pitched her camp and lay alone with her thoughts. She knew this climb meant more to her than to anyone else. There wasn't much attention on her, just Rada and a few friends monitoring her progress through the coordinates she was posting online via the satellites circling overhead.

On the third day, she strapped her crampons to her boots, took out her ropes, fixed her ice axe in her hand and began scaling a 60 degree incline lined with concealed crevasses. On the sixth night, she reached the knife's edge, a near vertical stretch of the ridge that requires climbers to cling precariously to the side of a cornice, reliant on the mountain's frozen crust not breaking away beneath their weight.

By the eighth night, she was above the knife's edge. She pulled out her shovel, built a wall out of snow and ice to shield her tent from the wind, then set up camp. The sun was hovering low in the sky on the other side of the mountain by the time she closed her eyes.

IT IS LOGAN'S LOCATION near the confluence of two tectonic plates and a smaller microplate—a fragment of the earth's crust, broken off from the Pacific floor—that accounts for its impressive mass and size, the result of millions of years' worth of tectonic shifts.

At 5 a.m. on May 1, while Martinez ate her breakfast, a magnitude 6.2 earthquake was detected near Logan. It had been strong enough to shake the mountain's crust, triggering avalanches and rendering it impossible to climb.

In the moments after the first earthquake, Martinez had thought it safest to continue her ascent toward the summit plateau. After the second earthquake, and with 130-kilometre arctic winds coming in from the Pacific, she believed it wiser to go back down to a more shielded section of the ridge. She moved cautiously into a thickening cloud. Trying as best she could to retrace her footsteps over the knife's edge, Martinez battled self-doubt and growing terror as she lost the trail in the snow and fog.

Martinez had descended roughly 300 metres when she was forced to set up camp. She pitched her tent near a crevasse, figuring that if the storm blew her shelter apart, she could lower herself into the fissure to dangle in darkness and wait for the weather to break. After zipping herself inside the tent, Martinez set a rolling alarm: every two hours, she'd go outside in the battering wind to clear the snow from the canvas to prevent a collapse.

"My tent is my castle," she told herself aloud, an encouragement and a reminder.

Her diligence kept her safe into the next day. Periodically, she could hear her satellite phone ringing beneath the

sound of the storm. It was always Rada or the Kluane Park officials waiting for a window to mount a rescue. The nature of Martinez's location made a retrieval operation difficult. The only way to get her off the mountain was to send a chopper, but the weather was far too dangerous to navigate by air. Martinez had no choice but to hang on.



**IF THE TENT
COLLAPSED, SHE
WOULD BE FORCED TO
ABANDON IT AND TAKE
HER CHANCES IN THE
NEARBY CREVASSE.**

The pressure of the storm was bending the tent's poles, threatening to collapse the shelter. Martinez raised her hands above her head and transferred the strain from the poles onto herself. When her arms were too tired, she switched position and used her head. When she couldn't do that any longer, the climber got on her hands and knees and arched her back into the canvas.

Throughout the night, Martinez grew weaker. She couldn't eat or drink for fear her tent would collapse, and she would be forced to abandon it to take her chances in the nearby crevasse.

Back at their apartment in Whistler, Rada prepared himself for an emotional flight to Whitehorse. He had

planned to greet Martinez in Kluane Park on May 6 after she completed the traverse and let her know how much her accomplishment meant. Instead he was fielding calls from local and international media, none of whom had cared about the first female solo expedition on Logan until disaster loomed.



**THE SOUND OF
BLADES CUT THROUGH
THE AIR, ECHOING
OFF THE PEAKS AND
THROUGH THE
VALLEY BELOW.**

ON THE AFTERNOON of May 3, the tempest finally subsided. After 24 hours of holding up her shelter, an exhausted Martinez was at last able to lie down. Visibility was still poor. She knew from talking to Rada that another storm was approaching and wondered how much more of a beating her tent and body could take.

That same afternoon, Tom Bradley, the pilot who'd dropped Martinez at the base of the mountain, flew back toward Logan in service of two clients who wanted a panoramic view of the mountains. It was Bradley who first noticed a break between the storms battering the east ridge and notified the park rangers.

Around 7 p.m., as Martinez was about to shut her phone off for the night to preserve its dwindling battery, she got a text from Rada telling her to call the park's headquarters. Scott Stewart, the visitor safety and fire operations coordinator, wanted her to be ready within the hour. Stewart had been monitoring Martinez's situation since the initial earthquake woke him in Whitehorse, nearly 300 kilometres from Logan. But he'd been unable to orchestrate a rescue while the winds pounded the mountain-side. Now he was airborne, alongside Ian Pitchforth, a Whitehorse-based helicopter pilot, and two other parks officials. For an hour they flew toward Logan, watching it grow until it was all that they could see through the cockpit window.

Meanwhile, on the east ridge, Martinez packed up her tent and tried to dig out a flat landing pad for her rescuers' arrival. Looking around, she got her first proper glimpse of her surroundings in days—the cracks in the ice and snow told her of the avalanches that had surrounded her.

Then came the sound of blades cutting through the air, echoing off the peaks and through the valley below. The chopper hovered low, circling Martinez as she crouched in the snow. Twice Pitchforth tried to land next to the climber only to be blinded by a powder cloud of snow caused by the propellers. On the third attempt,



Inside the rescue team's helicopter, a few minutes after leaving the east ridge of Mount Logan. From left to right: Pilot Ian Pitchforth, climber Natalia Martinez and Parks Canada staff members Sarah Chisholm and Scott Stewart.

he touched the front of the aircraft's landing skids on the mountainside. Stewart unbuckled and stepped out and onto Logan to help Martinez. In less than a minute her gear was on board, and so was she.

FOLLOWING HER ORDEAL, Martinez was shocked by the amount of news coverage she'd received from the Canadian and Argentinian press. She was humbled by the attention and yet dismayed it had taken a near-death experience to attract notice. "If the earthquake hadn't happened, nobody would have known that I was even

climbing the mountain," she says. That fact strengthened her resolve even more.

Since the rescue, she and Rada have already made it to the summit of an unclimbed peak in Patagonia. They named it Enroque, the Spanish word for "castling" in chess, a fortification move and the only one where two pieces can proceed at once.

Watching the sun set on the Pacific Ocean while achieving a historic first was magical, but it wasn't enough.

Logan still calls out to Martinez.

One day, she says, she'll finish the climb. **R**

My daughters' obsession with world records was the perfect prep for our family's own entries into the annals of history

We Are the Champions

BY THOMAS BOLTON

FROM *READER'S DIGEST*, OCTOBER 1975



“KNOW WHO ATE the most hamburgers in one sitting?” asked my 11-year-old daughter, Cathy. “It was Robert Matern, at the University of Rhode Island in 1973. He ate 83.”

She continued: “And the world record for holding your breath—that’s 13 minutes, 42 and a half seconds. Robert L. Foster did it while submerged in a swimming pool in California in 1959.

“Now try this one: do you know what was the oldest domestic rabbit ever?”

“No,” I said, hunching lower over my breakfast cereal. Cathy had gotten a hold of the *Guinness Book of World Records* and had been grilling me for the past 10 minutes while I tried to read the paper.

“Eighteen years old,” said Cathy. “It was a girl rabbit. Daddy, you don’t know anything.”

Eight-year-old Betsy, tilting back her chair, chimed in, “I wish we could do a world record and get in a book. We’re so ordinary.”

“You’ve already got a world record,” Cathy told her. “You hold the world record for ugly.” She and five-year-old Marcie laughed.

“How about you?” Betsy shot back, banging her chair down for

emphasis. “You’ve got the world record for dumb.”

“Hold it,” I said. “Ceasefire. We’re each of us remarkable in our own way. Why, this family probably sets records every day without knowing it.”

“Name one.”

“Well,” I said, “I haven’t been *looking* for world records. But starting now, I’ll keep my eyes open.”

“The biggest eye in the world,” said Cathy, “belongs to the giant squid. Thirty-eight centimetres in diameter.”

THE THREE YOUNGSTERS promptly forgot the conversation. But the notion still had a lingering appeal for me, so I put a small spiral notebook on my bureau, and each night I recorded exactly what I’d observed throughout that day in the way of unusual household performances.

Eighteen months later, when the notebook was clogged with facts, figures and dates, I winnowed out those accomplishments that might possibly have been duplicated elsewhere. It is conceivable, for example, that some other child once lost, over a 10-month span, the right shoe of three successive pairs of sneakers. But until evidence arises to the contrary, I remain confident that the rest

of these meticulously verified feats represent world marks.

Consecutive Days Juice Spilled at Breakfast: **17**

(February 2 to 18, 1975)

As was the case when Joe DiMaggio set his record of hitting in 56 straight baseball games, there were days when this streak was kept alive only on the last time at bat, so to speak. I remember how Betsy, on the 14th, late for school, snatched up a book and sent a flash flood of orange juice the length of the table. Another time, it was the dog, Superstar, erupting onto my lap after a fancied biscuit, who tipped a glass. The day the streak ended, my wife, Liz, looked at me and whispered, "We made it!" and her eyes filled with tears. I suppose Mrs. DiMaggio cried, too, when it was all over.

Most Frequent Use of the Word "Gross" in a 12-Minute Telephone Conversation: **48**

(April 29, 1975)

This record was established while Cathy was talking with her friend Jody. (She also said "grossingest" twice and "grosso" once, but these variants were not counted.)

Though somewhat winded after her extravagant performance, Cathy was willing to answer a few questions.

What on earth had she been talking about? Somebody in their class. Who? Bruce. Well, what was there about Bruce that caused such overwhelming revulsion? Nothing much, really. Matter of fact, Cathy admitted, he had kind of a, you know, cute smile. Then she actually *liked* Bruce? Oh, Daddy, don't be gross.

Greatest Number of Consecutive Days Television Set On and Not Watched by Anybody: **15**

(July 12 to 26, 1975)

Before we all left for our seashore vacation, I said to Cathy, "You shut off the TV." Two weeks later, when we came home, we found it going full blast. Cathy appeared mildly surprised. "I guess I forgot to shut it off," she explained helpfully.

"Look at it this way, dear," said Liz. "A lot of houseflies who might have been bored to distraction at least got the chance to watch Walter Cronkite." And that's the way it was, Saturday, July 26, 1975.

Shortest Lifespan for a Christmas Present: **14 seconds**

(December 25, 1974)

It was a helicopter. Betsy shredded off the wrapping paper and yanked the

bright red craft from its box. “Does it fly?” she cried.

“You bet, sweetheart,” I said. “You just have to give that string there a sharp pull.”

She did, and the helicopter shot straight up, hit the ceiling and disintegrated into 47 tiny pieces of red plastic.

Liz plucked a rotor blade from her hair. “At least it worked,” she pointed out. “So many toys these days don’t.”

“Right,” I agreed. “And hardly any trouble at all to re-plaster that hole if we can find the stepladder.”

Greatest Number of Consecutive 25-Cent Allowances Lost: **17**

(February 23 to June 15, 1975)

Every Sunday I shell out a quarter, and every Monday she is destitute. “Where does it go?” I shout. “What happens to it?”

“It’s around someplace.”

And she’s right: in my family’s house—under the rugs, behind radiators, deep in crannies of sofas—there’s a fortune in quarters awaiting

anyone with the imagination to go after it.

The string was broken with the June 22 quarter: *we know* where that one is. You can see a bit of it, glinting deep in the machinery of the lawn mower, down there where the sparks and the strange smoke come from.

Most Times Sanity Saved by a Wife in an 18-Month Period: **2,043**

(April 1, 1974, to September 30, 1975)

Take the other night when Cathy and Betsy, in an argument upstairs, were trying to outlast each other in saying alternately, “*Your* fault!”

“Relax, dear,” Liz whispered, touching her hand to my cheek. “Remember, they are setting marks that may last for decades.”

“True. By the way, do you realize that’s the third time you’ve kissed me in two minutes?”

“Well,” she smiled, “records are made to be broken.”

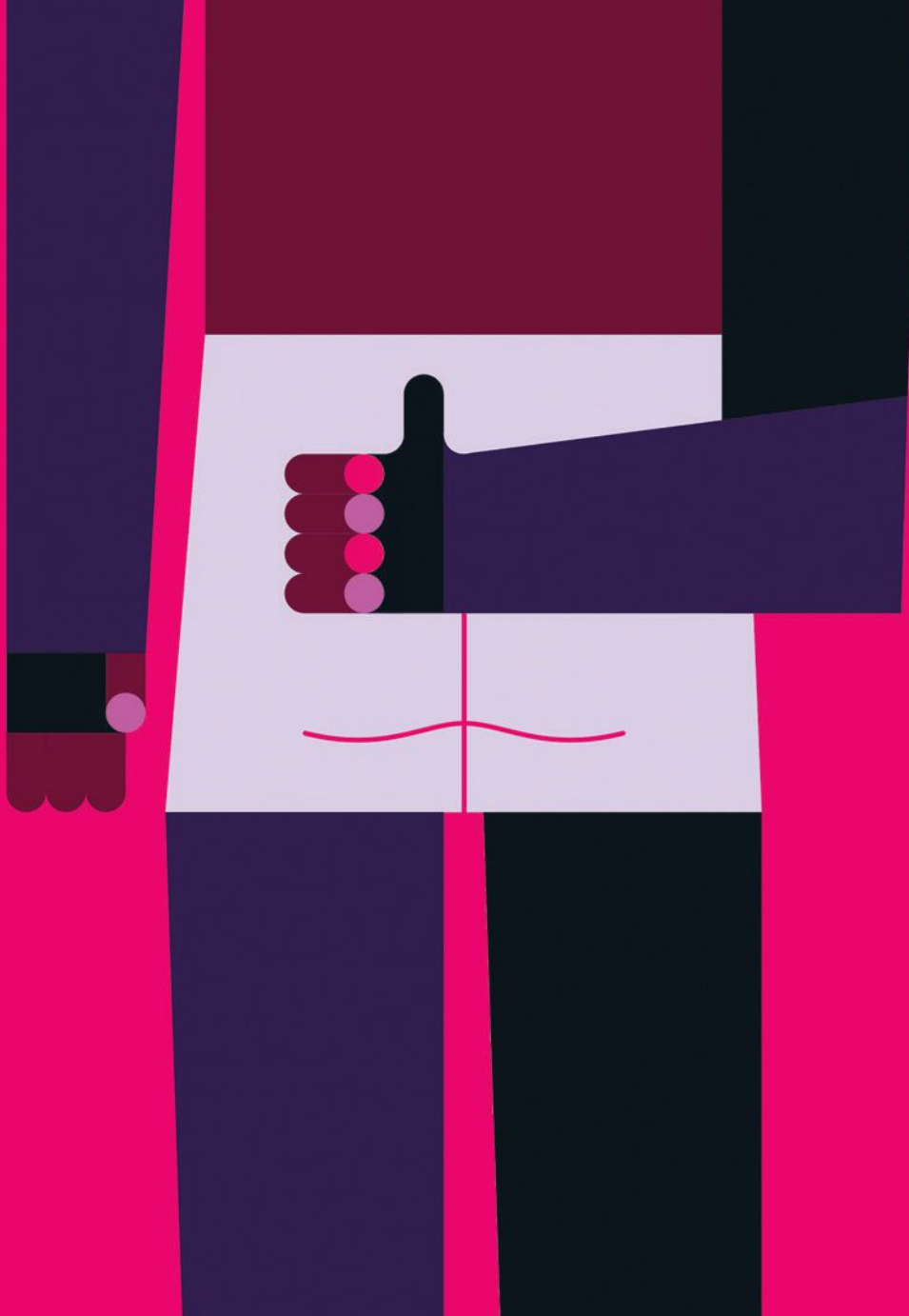
It’s no wonder she’s the mother of champions. **R**

*
* *

MISSED CONNECTION

You cut in front of me at a Starbucks
in May 2009. I finally thought
of a witty response.

 @BADBANANA



Mind Your Behind

Screening for colorectal cancer—
one of the most commonly diagnosed
forms of cancer in Canada—can save
your life. Here's what you need to know.

BY ANITA BARTHOLOMEW AND SAMANTHA RIDEOUT

ILLUSTRATION BY GREG MABLY

It's preventable if caught at a pre-cancerous stage, highly treatable if caught at an early stage, and testing for it is easy. Nevertheless, an estimated 26,800 Canadians were diagnosed with colorectal cancer (CRC) in 2017, and about 9,400 died of the disease.

In this country, it is the most common cancer among men (tied with lung cancer) and the third most common among women (after breast and lung cancers). While the disease accounts for 12 per cent of all cancer deaths, it needn't be fatal. In fact, the five-year survival rate for CRC is 90 per cent when it's caught before spreading out of the colon or rectum. "What's more, if you survive for five years past diagnosis, your chance of dying is barely higher than that of the rest of the population your age," says Dr. Heather Bryant, chief scientific officer for the Canadian Partnership Against Cancer.

WHAT PUTS US at risk of getting colorectal cancer—a malignancy in the large intestine, the last 15 centimetres of which is called the rectum—in the first place? The chances increase with age (those older than 50 make up nearly 95 per cent of all new cases), but it can strike younger people, as well. The Canadian Cancer Society reports that while the incidence of CRC is falling in seniors, it's on the rise in people under 50. Increasing numbers of older people are availing themselves of

colorectal cancer screening, which can catch colon polyps (easily removable clumps of cells that form on the organ's lining) before they turn into cancer.

Meanwhile, younger Canadians, most of whom aren't getting screened at this point, have a higher rate of obesity (an important CRC risk factor) compared to previous generations. In absolute terms, however, the CRC risk for people under 50 is still low: according to the Canadian Cancer Society, only 1,610 new Canadian cases in that age group are expected to be detected this year.

Known risk factors can't account for all cases of CRC, but there can be genetic factors, environmental factors or both working together. Among those we can control are physical inactivity, smoking and eating habits. "There's some debate about various types of diets, but those that are high in animal fat, red meat or processed meat seem to increase the risk," says Bryant. People who are obese or who have type 2 diabetes have a heightened risk, as well.

A study published in *JAMA Oncology* in January 2017 offers one reason why diet might affect your CRC risk. When we eat, we are feeding the trillions of micro-organisms living in our intestines. According to the lead author, Dr. Shuji Ogino, professor of pathology at Harvard University, some of those well-fed micro-organisms might pay you back by making you

sick. Specifically, CRC tumour tissue often hosts bacteria called *fusobacterium nucleatum*. These microbes may help cancerous cells grow by suppressing the immune system's response to tumours. The study found that people who ate a fibre-rich, healthful diet tended to have lower levels of these bacteria, as well as a lower risk of CRC influenced by them.

EARLY DETECTION is key to beating colon cancer. "Previous studies have suggested that screening causes a 30 per cent reduction in CRC mortality, plus a 20 per cent reduction in the number of cases that progress to cancer at all," says Bryant. "But now, in part because of improvements to the screening tests, the impact could be even greater than that."

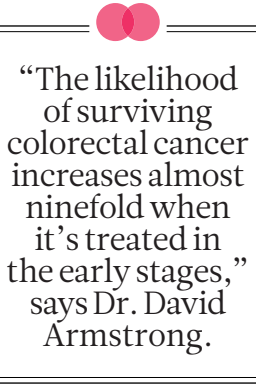
The most common and readily accessible type of screening is a fecal test, which is both simple and inexpensive. Users can get a kit from their doctor or have one sent directly to them through a provincial screening program, follow the at-home directions for collecting a stool sample and take or mail everything to the specified hospital or medical lab. These tests look for blood in the sample that isn't apparent

to the naked eye. A positive result may be evidence of precancerous polyps or of cancer, or it may point to other conditions, such as hemorrhoids, inflammatory bowel disease or ulcers. Your doctor will order more tests before making a diagnosis.

The Canadian Cancer Society recommends that people aged 50 to 74 get a stool test every two years. After 75, any new growths are less likely to have

enough time to develop into something that could affect the length or quality of your life.

But that's not always the case. "It's actually based on how good your health is generally," says Dr. David Armstrong, chair of the National Colorectal Cancer Screening Network. "There are 75-year-olds who are perfectly healthy and who have a life



"The likelihood of surviving colorectal cancer increases almost ninefold when it's treated in the early stages," says Dr. David Armstrong.

expectancy of more than 10 years, so continuing screening past that age is definitely something an individual could discuss with their physician."

If a fecal test finds anything suspicious, you'll normally go on to get a colonoscopy. In this procedure, the colon is examined with an endoscope, a thin tube with a light and a small video camera on the end. While the endoscope is inside your colon, your doctor can use it to take biopsies and

cell samples that can be tested for cancer in the lab, and to remove any precancerous growths or early-stage tumours it finds.

Colonoscopies aren't typically used for primary screening because of minuscule but real risks, such as bowel perforation, and also because of the hassle: you generally need to fast and then take laxatives to empty out your colon, as well as sedative pills to relax enough to let the endoscope pass through. On the plus side, colonoscopies provide such a good look at your colon that if the results come back clean, you're considered up to date for CRC screening for the next 10 years.

THERE IS ROOM for improvement, but screening for colorectal cancer is on the rise. "I think what we're seeing is an increased awareness that it makes a difference to our mortality, and the 'ick factor' isn't enough to turn people away," says Bryant. At the time of the latest available estimates, in 2012, around 55 per cent of Canadians

Colorectal Cancer Symptoms

The signs are often subtle and easily ignored. If any of the following symptoms last for two or more weeks, it's imperative that you talk to your physician about getting tested.

- Blood in stool or rectal bleeding
- Changes in your bowel habits
- Stool that is narrower than typical for you
- Unusual weakness or fatigue
- Weight loss for no apparent reason
- Sensation that your bowel isn't emptying completely after a bowel movement
- Digestive pains (bloating, gas, cramps)
- Vomiting
- Diarrhea or constipation

aged 50 to 74 had completed a fecal test during the preceding two years, a colonoscopy or similar test during the preceding five years, or both.

All the provinces have an organized screening program, but not all the territories. Screening rates vary, with Manitoba leading the way at 68 per cent and the Northwest Territories trailing with 48 per cent. The former's program is long-standing and convenient: it mails out invitations to everyone aged 50 to 74 who is registered for public health insurance. Residents can order a fecal test directly to their homes, without having to visit a hospital.

Putting off testing once you notice symp-

ptoms of CRC (see sidebar) can be a bad decision. Even if you've been screened recently, tell your doctor about your symptoms, Armstrong says—fecal tests aren't infallible.

"The likelihood of surviving colorectal cancer increases almost ninefold when it's treated in the early stages," says Armstrong. By stage 3, when the cancer has spread to nearby lymph nodes, the

five-year survival rate has fallen from 90 per cent to 71 per cent. At stage 4, when the cancer has made its way to other organs, it's down to 13 per cent.

EVEN IF YOU'VE had colorectal cancer, there are steps you can take to mitigate the risk of recurrence. Try to live a healthier lifestyle, of course, and maintain a healthy weight.

When it comes to pharmaceuticals, Bryant says that there is evidence that daily Aspirin is useful for colorectal cancer prevention. In the long term, Aspirin does have potential side effects, including gastrointestinal bleeding, so it shouldn't be taken solely to reduce cancer risk. However, if you're also at risk of heart attack or stroke, that may tilt the balance in the drug's favour. Don't start an Aspirin regime without talking to your doctor first.

The evidence so far is mixed, but high amounts of vitamin D and calcium,


from food and/or supplements, might also play a role in CRC prevention.

THE MOST EFFECTIVE way to lower your risk, however, remains vigilance. If you are over age 50, you should talk to your doctor about screening. Up to

a third of colorectal cancers have a genetic component, so if you have at least one first-degree relative (a parent, sibling or child) or two second-degree relatives (uncles, aunts, grandparents) who've had CRC, then you'll probably need to get a colonoscopy every five to 10 years, rather than relying on fecal tests. People with Crohn's

disease or ulcerative colitis also run a higher-than-average risk and should see a specialist to determine their screening requirements.

As always, if you experience any of the symptoms associated with the disease, tell your doctor. Your life could depend on it. **R**

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The most effective way to lower your risk remains vigilance. If you are over the age of 50, talk to your doctor about screening.

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ACCORDING TO SCIENCE

Did you ever observe to whom accidents happen?

Chance favours only the prepared mind.

LOUIS PASTEUR

As Kids See It



“I love that you have an entrepreneurial spirit and want to help Mommy rebrand her company, but ‘I’m the boss and you’re not’ isn’t quite what I had in mind for a slogan.”

WHOEVER COINED THE PHRASE “the pitter-patter of little feet” clearly never heard a four-year-old walk.

🐦 @MYMOMOLOGUE

BRYNN, SEVEN YEARS OLD:

Granny, how old are you?

GRANNY: I’ll be 66 next month.

BRYNN: We’re not paying for that many candles!

JUDY NOWISKI, Orleans, Ont.

NOTHING PREPARES YOU for the discovery that the hardcover copy of *Anne of Green Gables* you lovingly moved from your childhood home to your college dorm to your first apartment to your first house—without picking up so much as a nick or a scrape—has been cannibalized by a pair of safety scissors and double-sided tape to make you a Mother’s Day card.

happyyouhappyfamily.com

MY THREE-YEAR-OLD granddaughter, Olivia, was playing with her two-year-old cousin, Nathan, on the gravel patio when I spotted them throwing stones. I called them both over and told them to stop.

“Okay, Grandma,” they responded before scampering off.

About an hour later, I caught them throwing stones again. I took my granddaughter aside and asked, “How many times do I have to ask you to stop?”

She thought about that for a moment, then responded, “Three, Grandma.”

JEAN DOBSON, *London, Ont.*

NOTHING WILL MAKE YOU both age faster and strangely cause time to stand still quite like watching a seven-year-old do their homework.

🐦 @OUTSMARTEDMOMMY

LISTENING TO MY KIDS try to harmonize “Livin’ on a Prayer” while brushing their teeth is why I had them in the first place.

🐦 @ELLENHIMELFARB

I WAS OUT WALKING with my daughters one evening, when, suddenly, my two-year-old looked up and asked, “Who folded the moon?”

JULIANNA WALDNER,
Riding Mountain, Man.



AND ONE FOR THE KIDS

Q: What gets wetter the more it dries?

A: A towel.

reddit.com

YOU DON'T KNOW FEAR until you hear your two-year-old flush the toilet and yell “bye-bye” from the hall bathroom.

🐦 @LILWESTMAN

FRIEND: “I can’t wait to have kids!”

ME: “Yeah, you’ll love it!” I yell over my one-year-old, who’s screaming in my face because I’m chewing gum.

🐦 @THEBABYLADY7

MY FAVOURITE THING about watching a new movie with my five-year-old is probably watching it 17 times a day for the next three months.

🐦 @NOT_THAT_MOM

MY KIDS TRIED TO SURPRISE me for my birthday this morning. I totally heard them coming and snuck out to start a new life somewhere else.

Actor **RYAN REYNOLDS**

Are the children you know surprisingly funny? Tell us about them! A story could earn you \$50. For details on how to submit an anecdote, see page 13 or visit rd.ca/joke.



*Hélène Le Scelleur's
strategies for dealing with
PTSD triggers include
this mantra: "Fear does
not equal danger."*

BRAVE NEW WORLD

If you want to become a more courageous person,
you first need to let yourself feel scared

BY SARAH TRELEAVEN

PHOTOGRAPH BY JOHN KEALEY

WHEN HÉLÈNE LE SCELLEUR, a former captain in the Canadian Armed Forces, returned from Afghanistan in 2008, panic struck her almost daily. Too much quiet made her feel like something terrible was about to happen, while loud noises would send her heart racing. Banging sounds were the worst, and would immediately bring her back to the night when she witnessed an improvised

explosive device kill two of her men. “I really thought I was going to die,” she says.

Rattled by this involuntary hyper-vigilance, the 45-year-old turned to alcohol to numb her fears and received a diagnosis of post-traumatic stress disorder (PTSD) in 2009.

While Le Scelleur’s experience is an extreme one, most of us have at least one fear just waiting to be triggered.

Whether it's a common phobia of flying or public speaking, or an anticipatory dread of contracting a serious illness, these trepidations can have a negative impact on our physical and mental health.

But even though learning how to escape the grip of our anxieties and become a braver person is challenging, it's not impossible.

GET TO KNOW IT

Many fears are useful, says Donna Ferguson, a clinical psychologist who works with the Centre for Addiction and Mental Health. "It's what gets us out of the way of a moving vehicle," she explains, but says there's less utility when a recurring fear results in loss of sleep or appetite, or a diminished ability to engage with others.

When a terror goes so far as to interrupt one's daily functioning, it's important to begin the process of learning about it, ideally with others who can relate. For Carol Pasternak, a 63-year-old lesbian who was previously married to a man, the inability to come to terms with her new identity brought on severe depression and anxiety. The revelation that she was gay came when she was 39, after 14 years with her husband, when she fell in love with a female colleague. "I realized that I had only had this feeling once before—and I married him," she says.

Pasternak's affection for her husband and commitment to their three

young children complicated her situation—she worried about the disruption that coming out would cause. Desperate to vent these feelings, she joined a support group of mostly closeted women that she discovered in the classifieds and secretly attended the out-of-town meetings.

"I lived in dread, all the time, of being discovered," she says, but the group became a safe space to explore both her fears and her authentic self. "The burden lifted when I was able to tell my story out loud, and there's a tremendous reduction of fear when you meet others who are going through the same thing."

CONFRONT AND OBSERVE

Relief from fear often starts with the unpleasant work of exposing oneself to it. For this, Ferguson often recommends cognitive behavioural therapy (CBT), a treatment that involves moving through a hierarchy of triggers, starting with those that cause the least discomfort. For a person who struggles with social anxiety, CBT might also involve inducing symptoms such as bodily shaking or a head rush in order to then walk a patient through their response and help them learn coping mechanisms.

Le Scelleur sees a psychotherapist regularly, but one of her greatest breakthroughs came when a friend invited her to a gun range. "The first

time I went, I did freak out,” she admits. “But when I realized that nothing bad was actually happening, I started to feel less afraid.”

Inspired by this experience, Le Scelleur has put into place a series of actions that can be an inspiration to anyone who experiences recurring fears: acknowledge the anxiety; scan the landscape to confirm there is no present danger; and cycle through breathing exercises. She has a mantra she can repeat to herself until she’s at ease: “Fear does not equal danger.”

TURN YOUR FEAR INTO YOUR PURPOSE

The angst that one will acquire a serious illness is common to almost everyone, and a Canadian Cancer Society survey from 2012 found that 70 per cent of Ontarians actively worry about being diagnosed with the disease. But even if that worst case comes true, other anxieties can follow.

When Michelle Prince, a 46-year-old mother of two in Windsor, Ont., was diagnosed with advanced colon cancer in 2014, she was consumed by dread of the unknown—particularly of what chemotherapy would be like. “I didn’t know if it would hurt, if I would lose my hair, if I would spend all my time vomiting,” she says.

But Prince quickly realized there were ways to make the unpleasant experience manageable. Although the treatments were lengthy, and

left her sick for days afterwards, her nurses were gentle and deeply compassionate, and she found comfort by socializing with family members and other patients. Now, after 65 chemotherapy sessions and counting, Prince is using her knowledge of the experience to help others.

Through a Facebook page, Prince posts educational and inspirational stories to help other patients, and regularly fields messages and questions. In May, she even live-streamed one of her chemo appointments at Windsor Regional Hospital, demystifying the process and offering simple tips—such as bringing mints to help mask the metallic taste patients often get during treatment.

Prince is now entering her fifth year with cancer; only 10 per cent of patients with her prognosis make it to the five-year mark. “When I was first diagnosed, it was all doom and gloom,” she says, but her newfound purpose to inform others has helped her cope with the uncertain future.

When it comes down to it, fear is often simply the anticipation of an unknown event that rarely comes to be. Pasternak learned that when her husband discovered her secret before she’d had a chance to tell him. She had worried that he would be so distraught that he’d be unable to function and would fall apart. “Instead, he was deeply supportive—he was the strongest of all of us,” she said. **R**

What happens when a playful haiku triggers a debate about gender roles—and stray banana peels



Domestic Unrest

BY DAVID EDDIE

ILLUSTRATION BY JOREN CULL

THE PHRASE “controversial haiku” has likely never occurred to you, but a friend of mine, who has a husband and a 12-year-old boy, recently posted one on Facebook that unleashed a tsunami of response: “Empty bowl in fridge / Boys and men are useless at housework / Tears are wet.”

The unapologetic sexism of the poem drew howls of outrage—mostly from men, it’s true. One guy pointed

out that her syllabic structure was all wrong for a haiku, adding, “I vacuum like a boss.”

To which one waggish woman wondered aloud, “What is it with men and their penchant for vacuums?” She speculated that it was because a machine is involved: “It’s like indoor mowing.”

The debate raged on. One woman argued that even when men do things

around the house, it's women who make the to-do list and who are the "project managers."

In general, I'm uncomfortable with generalizations—especially gender-based ones. And I was about to post a comment to that effect when I realized, man, is what these women are saying ever true of me.

Even during the years I was a stay-at-home dad—when I changed a lot of stinking, steaming diapers—my wife, Pam, was always the one who noticed when we needed more, decided what type to buy and put them on my list.

I was lucky if I remembered to bring an extra diaper to the park. I'd forget snacks and juice boxes, too, and send one of my kids to waddle off with his brick-heavy shorts practically around his ankles to cadge crackers off one of the ultra-organized mothers.

By the way, in case you've been wondering why there would be an empty bowl in my friend's fridge, I asked her and she said, "I think there used to be hard-boiled eggs in it."

And also, for anyone who is offended by my lack of effort, don't worry: I'm being well punished for my sins. I have three boys—two teenagers and one who's 21.

Banana peel on the coffee table? Check. Shoes in the hallway, right where you will trip over them? Daily. Even, more often than I'd care to think—hmm, how shall I put this for

a family magazine—unflushed "offerings" in the toilet bowl when I come in to brush my teeth.

Neither my wife nor I even think about it anymore as we patrol the house on a near-constant basis, picking things up, putting them back. But from time to time we will attempt to muster the energy to "make some changes around here."

Take the other day, for example, when a sweatshirt was casually, negligently, tossed over a chair—my favourite to sit in.

I said to my second-eldest: "What do you plan to do with that?"

Him: "I dunno, Dad. I thought I'd take it out for dinner and a movie."


Me: "The point is, you can't leave it there. You're a funny guy, though."

We both shared a laugh over my son's scintillating wit. It was less a laugh, however, than a heavy sigh, when I came across the same sweatshirt flung across the same chair two days later.

Back to Facebook. As my friend's thread went on, many mothers weighed in on their own domestic disappointments, in haiku form, including this one:

"All Mom wants is coffee / Empty milk carton in fridge / She drinks it black."

Finally, I added one of my own as well: "Stuff strewn everywhere / When will my boys realize / There's no chambermaid?" **R**



A deadly disease is closing in on British Columbia's bats. Scientists are scrambling to minimize the impact on Western wildlife—and, by extension, the human population.

OUTBREAK!

BY ELENA GRITZAN FROM *THE UNITED CHURCH OBSERVER*



Martin Davis turns onto a logging road, his Pathfinder jostling, and heads up toward the cave. It's an overcast day in June 2017, and the mountaintops surrounding his home of Tahsis, B.C., are hidden among misty rain clouds. He has to ascend 650 metres above sea level, plus another 200 on foot. As the truck jerks, a little rubber bat—black wings extended, mouth open in a shout—falls off the dashboard.

British Columbia is home to Canada's most diverse collection of bats, but surprisingly little is known about its 16 species, including exactly where many of them spend their time. Most hibernate for the winter, tucking away inside mines or caves like the one we're visiting today. Seven months earlier, Davis left equipment there to check for the presence of bats.

A mangled sign, chewed by black bears, announces Weymer Creek Provincial Park. Davis helped create the park in 1996 to protect a rare species of bat from commercial logging. Cavers maintain the trails, purposely keeping some of the way hidden to stop visitors from doing damage to sensitive grottoes.

Davis trudges over mounds of late-spring snow and, more than an hour later, arrives at the cave. When he first started exploring it over two decades ago, he thought the entrance, tucked at the base of an old-growth tree and

ringed by unstable-looking boulders, would quickly collapse and disappear. But it's still here, exactly the same.

The bats of Western Canada might not have that kind of longevity. A disease called white-nose syndrome, named for the white fungal spores that grow on the snouts and wings of infected individuals as they sleep through the winter, has decimated populations in the eastern parts of Canada and the United States. And it's closing in.

Bats are incredibly important to the ecosystem because they feed on insects. A little brown bat, of which there were several million in Canada before the disease arrived, can eat between four and eight grams of bugs each night. Collectively, a million little browns consume up to 1,300 metric tons each year. Many of those insects are pests that would otherwise destroy farmers' crops—losing all of North America's bats would cost the agriculture industry more than \$3.7 billion each year. Others are mosquitoes that could pass diseases to humans.

Researchers estimate that the north-eastern American little browns, which make up the majority of the U.S. population, will be extirpated—extinct within the region—in less than 10 years. In Canada, white-nose syndrome has already infected multiple species in Ontario, Quebec and the Maritimes, killing more than 90 per cent of known little brown populations.



Caver Martin Davis collaborates with scientists to try to save B.C. bats from disease.

As the disease spreads, observers in Western Canada are rushing to gather what data they can about their bat populations. They're facing mountainous odds, and sometimes great physical challenges, to give the bats a sliver of a chance at survival.

In March 2005, biologists in New York surveyed the population of mouse-eared *Myotis sodalis* bats in Hailes Cave, near Albany. The species has been officially endangered since 1967, and the most recent survey had counted 685 of them hibernating among the more than 15,000 bats that wintered in the cave. Almost immediately, it was clear that a dramatic change had occurred.

The cave floor was covered in bones, bits of wings, entire bat bodies. Fewer than 7,000 living bats remained, none of them *Myotis sodalis*. About half had a fuzzy white substance on their

faces, the only clue to what had happened. Three other caves in the state also had signs of the mysterious sickness, which scientists called white-nose syndrome.

That August, Cori Lausen, a recent PhD graduate from the University of Calgary, attended a bat research conference in Mexico where American biologists shared their alarm. "Everybody was just shocked," she says. Lausen had first studied bats for an undergraduate research project and later left a job teaching high school to dedicate her life to learning more about them. A game-changing new threat gave her another reason to continue that work. She moved to British Columbia and dug in.

By the next year, it was clear that white-nose syndrome was not going away. The situation at Hailes Cave had worsened: an additional 5,300 bats were dead, a 91 per cent decline. Other

sites emptied out completely. Almost every cave checked within 130 kilometres of the original four was infected.

Here's what we know now: a European bat, carrying the spores of a white fungus called *Pseudogymnascus destructans*, likely hitched a ride on a container ship bound for New York. (Another common theory is that the fungus arrived in the United States on the clothes of a caver.) In Europe and Asia, hibernating bats developed resistance to the fungus after evolving alongside it for generations. But the North American bats had no built-in defence. The fungus invaded their skin tissue, disrupting their water balance as they hibernated for the winter. The thirsty bats roused to search for water, forced to draw on the fat stores they needed to survive until spring. Once their fat depleted, they needed food—fast. Since there weren't any insects for them to eat during the cold winter, the bats starved.

The fungus reached Central Canada by 2010. The federal government declared three of the hardest-hit species "endangered" in 2014. At least 5.7 million bats died between 2006 and 2012 in Canada and the U.S. The disease was expected to spread to the West Coast as early as 2025.

Lausen, who now works for Wildlife Conservation Society Canada, wanted to make the most of that time. First, she had to know where the bats were. In the East, bats congregated in groups

of hundreds or thousands in giant hibernation sites. No such locations were documented in B.C. or Alberta, and Lausen knew she didn't have the skill set to scour deep, dangerous cave systems in search of them. Martin Davis, however, did.



BAT CONSERVATIONISTS THOUGHT THEY HAD ABOUT 10 YEARS BEFORE THE DISEASE ARRIVED ON THE WEST COAST.

When he was eight years old, Davis toured a cave in Virginia with his parents. "I was hooked immediately," he says. At 13, he convinced the McMaster University caving club in Hamilton, where he grew up, to let him join their expeditions. Caving brought him into contact with bats, and he did some work protecting and researching them in the 1990s. Now 61, he has the skills to get into hard-to-reach places, decades of experience and an extensive network in the caving community.

Lausen approached him with an idea that eventually turned into a program called BatCaver: Davis and a team of volunteers across B.C. and Alberta placed data collectors inside caves over the winter and started to map the West's bat populations.

The rain is still holding off as Davis reaches the mouth of Fracture Cave. The entrance slopes down and bends to the left before a two-and-a-half-metre drop. He turns on his helmet light, slips on his harness and gets ready to descend. If he's not back within an hour, I'm to retrace our steps, drive back to the village and call for help. A minor injury can be fatal for cavers, who rely on their strength to bring themselves safely back to the surface.

He backs into the cave, holding on to the rope as he drops into the large underground passage. About 50 metres away, he finds an acoustic data collector, which records the echolocation shouting of bats flying by. He continues down the passage to grab the second collector, a small white cylinder at the end of a metal coil that's tracking temperature and humidity.

Getting back out is a little trickier. Metal ascenders attach to the rope to support his feet and hands. He climbs inchworm-style up the rope until he emerges from the hole.

Bat conservationists in Washington state thought they had about 10 years to prepare for the arrival of the disease. Then, in March 2016, a little brown bat found near Seattle tested positive for white-nose syndrome.

At first, Lausen wondered if the news was a false alarm but it wasn't.

White-nose syndrome had jumped to the West Coast. "I was feeling pretty desperate," she says. "We thought we had so much more time." She called an emergency meeting of the BC Bat Action Team, a group dedicated to the creature's conservation. It had never met in person before.

Twenty-two biologists gathered at a hostel near Chase, B.C., in September 2016 and spent two days discussing potential strategies. "It definitely galvanized us as a group," says Leigh Anne Isaac, the team's coordinator. They released a plan, stuffed with 83 actions grouped into categories and prioritized into three levels. Lausen says that a few things rose to the top.

Step one: find the bats. Along with BatCaver, the action team decided it was important to strengthen the 2016 North American Bat Monitoring Program, which uses sound detectors to track population numbers in the summer. The hope is to build a database of different bat species over time.

Meanwhile, the province's community bat programs began recruiting local volunteers to add to that data set. Observers sit outside known colonies in the summer, counting each bat as it flies by. They've become vital agents on the front line of white-nose syndrome, taking calls from the public about dead bats that are then tested for the disease.

Step two: figure out some way to help the bats survive. There's promising research into compounds that could be

sprayed on a bat to slow the progression of the disease. But the timeline for getting the remedy field tested and approved is long, to ensure it isn't harmful for other parts of the ecosystem.

Lausen is exploring other options. With a cave microbiologist, she's identified some bacteria and fungi that naturally occur on bats' wings and slow the growth of the white-nose fungus. These could be added in high concentrations to summer colony entrances, which bats would rub against on the way in and out, picking up the helpful microorganisms. The pair has received funding to test the idea.

In New York, 10 years after the disease first appeared, a few colonies have survived, persisting at five to 30 per cent of their original size. They seem to have found some way to fight the fungus. If so, it's possible a small number of bats could survive across the continent. But they breed slowly, one pup a year. It would take generations to get back to their original levels, at a time when they're facing other threats from climate change, industry and wind power. Even the most hopeful admit that it's going to be rough.

The day after Davis returns from the cave, he pops open the acoustic data logger, puts its memory card into his laptop and checks the graph. The frequencies plotted on his screen, brief bursts of sound repeating every second, look like bat calls. But as he flips through the rest of the data, he starts to second-guess himself. The data points aren't linear enough, the shapes not cohesive. "I wonder if it's a drip or something," he says.

A couple of minutes later, he's decided they probably aren't bat calls at all. The local bat populations don't use Fracture Cave every year, and it seems like they went elsewhere this time.

Data sets like this, empty of bat voices, could become all too common in a year or two if the white-nose fungus hits the West. Until then, all Davis can do is soldier forward. Soon, he'll embark on another hike, descend into another cave, retrieve another bat logger and share the data with Lausen and her team. Maybe this time they'll find some bats. "I just have to have hope," Lausen says, "that we're going to be able to do something." **R**

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LETTUCE COMPARE

Caesar—did he ever think he would end up a salad?

EDDIE IZZARD, comedian



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ISTOCKPHOTO



Yes, I'm married
to a minister.
No, I'm not judging
you for your sins.

A Messy Blessing

BY KAREN STILLER FROM *THE WALRUS*

ILLUSTRATION BY TALLULAH FONTAINE

WHILE ON VACATION in Cuba in 2002, my husband, Brent, and I met two other couples and we all became fast friends—as you do if you’re the least bit friendly at an all-inclusive resort. For a few fun days, we sat on the beach and rented crappy bicycles, laughing as we forced them up the rutted roads. We even shared a table at the restaurant.

One night I left to go to the buffet, and when I returned, my plate piled high, I found that the table had become quiet, subdued. I knew what had happened. “They finally asked what I do for a living,” my husband said.

He’s a minister—a man of the cloth and the Word. My heart sank. We had been having such a good time.

Brent’s calling crept up on us 25 years ago—up the stairs and into our student apartment at Dalhousie University in Halifax. It stuck around until he felt he had to follow it to the seminary, then into the Anglican Church. The religious calling, like writing, is often described as a decision that makes itself for you: no other choice seems right. And so Brent became a minister, a vocation that requires your entire being—it seeps through all of your life, for better or for worse. And I became a minister’s wife, for better or for worse.

IF YOU ARE a minister or are married to one, people make assumptions

about you. They think an evening with you will be as exciting as watching paint dry or reading a hymnal out loud. They expect you to be self-righteous and judgmental—just landed on a mission from Planet No Fun for Anyone. They assume you have reached a level of spiritual awareness and contentment that means you have no questions, doubts or problems. They think your kids are pious little people who don’t routinely tear out your heart and smash it to pieces on the dining-room table.



My favourite minister-wrecking-everything story comes from a funeral.

None of that is the case with us. But we have discovered an ability to make people awfully uncomfortable; even my own family stiffens up around us. My cousins’ husbands apologize and turn red when they swear in front of us. Poor guys—I wish they could just relax. But because of the role, people think they have to act better, nicer, less swear-y around you.

My favourite minister-wrecking-everything story comes from a funeral. A friend of ours spent about a week comforting the family, visiting, planning the funeral, doing all the stuff you do and then officiating

at the actual service: preaching, praying and so on.

Afterwards, there were piles of sandwiches and sweets left over—“funeral food,” my kids call it. (We used to bring leftovers home until we discovered that it creeped them out.) That day, my friend and his wife thought it would be a kind gesture to pack up the food and drive over to the home of the bereaved. As they walked up the driveway, arms laden with the inevitable egg-salad sandwiches on white bread, a voice came drifting out an open window: “Oh, f**k. Here comes the minister.”

Yes, we are the life of the funeral and the death of the party.

It's true that we spend more time at church-basement potlucks than at beach bashes. It can be lonely. It can be tough to figure out how to be a minister's wife in an age when very few women identify themselves in terms of their spouses' careers. Even the phrase “I'm a minister's wife” sounds like something someone's granny would say. And yet, this is a beautiful life.

My husband and I have probably missed some fun, but we have witnessed some miracles. We have seen marriages ripped apart and sewn back up again, one excruciating stitch at a time. I have come to view deep forgiveness within a family as something

just as extraordinary as a sea parting or water turning into wine.

LAST YEAR, we moved to Ottawa and to a new parish, and I planted a garden for the first time. My friend told me to put in sedum or leaf succulents, forms of ground cover that stretch out and spread nourishment and beauty. But you have to keep them in check. A calling such as my husband's can be like that, too. It's wonderful, but it can take over the whole garden. Space needs to be preserved for other living, growing things.



***“They know what I do,”
my husband answered.
“And they want us to come.”***

I protect my space, but ultimately I am grateful because this life is a green and lovely thing.

My husband recently came into the house after a driveway chat with our new neighbour. “They've invited us for supper on Friday night,” he said.

I sighed and said, “Poor things.”

“They know what I do,” Brent answered. “They already asked, and they want us to come.”

Another miracle unfolding—this time on a sidewalk in Ottawa. **R**



Laughter

THE BEST MEDICINE



THE BEST JOKE I EVER TOLD

BY AISHA ALFA

My mixed family looks like a ghost and a shadow made love and I was the result. The Sears family photo was always a little tricky for us. The first few takes and my father would come out just eyes and teeth in the background. Then they'd adjust the lighting and my dad would be beautifully lit, but my mom looked like an apparition.

Find Alfa online at AishaAlfa.com, or follow her on Twitter @aishaalfa



MY FATHER-IN-LAW, Paul, lives on a farm near Wynyard, Sask. Years back, a group of hunters from the United States came up to shoot some birds. During their visit, they noticed a flatbed of manure nearby. One turned to my father and said, “Do y’all put manure on your strawberries?”

My dad smiled, then responded, “I don’t know how you do things where you come from, but up here we put sugar and cream on our berries.”

STACEY HEBERT, *Regina*

APOCALYPSE AVOIDED

Instead of designing robots in our image, we should design them in a dog’s image so they will be loyal good boys that never try to destroy us.

🐦 @PLEATEDJEANS

FACT CHECKED

A guy in the store on his cell said, “Susan, I’m in my car and on my way,” so I yelled, “No he’s not!” because nobody lies to Susan in front of me.

🐦 @MELVINOFYORK

Send us your original jokes! You could earn \$50 and be featured in the magazine. See page 13 or rd.ca/joke for details.

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YOU?**

77th Sweeps
Winner Name





Looking to
explore the
intersection
of food
and family,
Jan Wong
heads to Italy
with her son



Home Cooking

FROM APRON STRINGS

ILLUSTRATION BY TOM FROESE

I couldn't believe my luck. As our train slid through the Alps on a winter morning in 2016, I regarded my son with wonder. Somehow, I had managed to convince Sam, 22, to join me on a journey to learn home cooking with complete strangers in my three favourite foodie countries: Italy, France and China.

At first, my youngest son had hesitated. "Um," he said when I broached the idea, his face scruffy with day-old stubble. He was in our kitchen in Toronto, gulping a glass of orange juice before he cycled off to his job making salads and deep-frying mini-doughnuts at a neighbourhood BBQ joint. The endless hours with me were a concern. Would we get along?

After he left for work, I pondered the "um." It wasn't a flat rejection, but his body language had not been encouraging—shoulders hunched, eyes darting sideways, knees jiggling.

I am a journalist turned journalism professor. Now, I get sabbaticals. My first six-month sabbatical bestowed

that biggest luxury of all for a journalist: time. Time to write another book. About food. About travel. Maybe about Sam?

I've always been a foodie. I'm the granddaughter and daughter of restaurateurs. In the 1930s, my maternal grandmother ran a restaurant in the small Ontario town of Woodstock. My father's flagship restaurant, Bill Wong's, was a Montreal landmark. In the '50s, Dad had opened the first Chinese restaurant outside the safe confines of Chinatown in what was then Canada's largest city. An engineer by profession, my father couldn't cook to save his life, but he was a savvy businessman who hired the

best chef he could find from our ancestral village back in China and, crucially, made him a partner. Dad eventually owned five restaurants.

I PONDERED WHAT shape the book should take and how to research it. I spoke French and Mandarin. I told myself I could enroll in a crash course in Italian at my university. I considered cooking schools but quickly discarded the idea. The *cuisine* program at Cordon Bleu in Paris took nine

So, ever the journalist, I worked my contacts. A Chinese friend who lived in Shanghai said she could set me up with rich pals and I could cook with their maids. A British friend who owned a country home in Italy recommended his neighbour. That left France, where my older son, Ben, connected us with a family he'd stayed with while studying in Lyon.

This was going to be a long trip, and I hoped Sam would be my companion. He was fluent in French and



YOU CAN'T JUST GOOGLE "ORDINARY FAMILY" AND FIND SOMEONE WHO LOVES TO COOK AND IS WILLING TO TAKE YOU IN.

months and cost \$44,000. In contrast, in Tuscany, many courses lasted only four or five days and seemed designed and priced for rich American tourists.

I wanted to learn *home* cooking. I wanted to know how regular people made dinner and if, in this time-starved world, they were still sitting down to eat with their families. I wanted to know how the politics and economics of globalization had affected what they ate. Unlike cooking schools, you can't Google "ordinary family" and find someone who loves to cook and is willing to take in a total stranger.

had a working knowledge of Mandarin after spending his third year of university in Taiwan. More important, he was obsessed with food.

As a toddler, Sam liked hanging around the kitchen. As soon as he and Ben were out of strollers, my husband, Norman, and I would take them on family trips to France and Italy, where the biggest tourist attraction was usually lunch. Sam had worked in restaurants that ranged from a hole-in-the-wall café to a French bistro to a private golf club to remote firefighting camps in northern Alberta. He could carve

roasts, prep salads, slow-cook ribs, make pizza and whip up asparagus risotto for 100 wedding guests. Now he was graduating from university with a degree in philosophy, quite sure he never wanted to spend another day in a classroom. Sam wanted to be a cook.

To be honest, the real reason for the project was so I could spend more time with Sam. When he was a small child, he would literally jump for joy when I returned home from

WHEN SAM AND I arrived in Turin, the capital of the Piedmont region in northern Italy, we wandered around the train station hunting for our car-rental agency. Everything had closed for lunch. Down a deserted side street, we spotted a police station. When I approached the sentry, he did not smile. "*Parli italiano?*" he snapped. I could tell what he was thinking: Of course you don't, you stupid tourists.

"*Un poco,*" I said.



THE SUPERMARKET LOOKED ORDINARY BUT WAS BETTER THAN THE FANCIEST GOURMET SHOP IN NEW YORK.

work. As I watched him grow into an independent adult, I sensed our mother-son bond evolving, stretching, even thinning out. He was currently unattached, without a steady job or romantic partner. It seemed possible that this might be my last chance to cook with Sam, to ride next to him on planes, trains and automobiles, to eat hundreds of consecutive meals together.

Sam eventually agreed to the trip. Though he was nervous about being involved in one of my writing projects, his friends told him he would be crazy to turn the opportunity down.

Suddenly he smiled and rattled off the directions. *A destra, a sinistra*. Thanks to the beginner's Italian course I had taken (and to high-school Latin), I understood! To the right, to the left.

At the agency, we chose a Smart Car and rented a GPS—a wise move because we had to find our way from downtown Turin, a city of 4.4 million people, to Repergo, a dot of a hamlet.

Repergo was an hour's drive south on the autoroute, but we weren't supposed to arrive at our rental farmhouse until later in the afternoon. I proposed we use the extra time and

take the scenic route. We could stop for lunch at some quaint *trattoria* along the way.

The sky was a brilliant blue. The old highway passed through town after town. Finally, at 3 p.m., we stopped at a roadside pizzeria as it was shutting down—just like every other place in sight. We had just missed the national 1 p.m. to 3 p.m. Italian lunch “hour.”

“We’d better get groceries,” Sam said, thinking ahead. “There might not be any place to eat in Repergo.”

He pulled into a *supermercato* off the highway that looked ordinary from the outside but was better than the fanciest gourmet shop in New York. The supermarket sold a dozen kinds of artisanal butter, five varieties of artichokes and about 30 types of olives. I chose a small block of butter wrapped in parchment paper and sealed with metal grommets. We bought the original bologna, genuine mortadella from Bologna. Intensely yellow lemons, from the Amalfi coast, came with shiny green leaves intact. At the deli counter, Sam ordered pickled red onions and marinated eel from Naples. Next we selected a bunch of dewy fresh *puntarelle*, a kind of overgrown arugula. We also stocked up on wine, spicy *antipasti*, crusty bread, heritage tomatoes, dried spaghetti and a jar of *passata*, the strained raw tomatoes that are the base of many pasta sauces.

PIEDMONT, ON THE frilly top left of the Italian boot, was the springboard for Italy’s unification in the 19th century. After Sicily, it was the second largest of Italy’s 20 distinct regions. Famous for its white truffles and bold red wines, such as Barolo, Barbaresco and Barbera, the region was also the epicentre of Italy’s famed slow food movement. Launched in the late 1980s, its avowed mission is to preserve traditional cuisine, a call to arms sparked by the opening of Italy’s first McDonald’s.

Maria Rosa, the neighbour of my British friend Ashley, at first had flatly refused his suggestion that she teach Sam and me. Aside from the bother, she worried that she wasn’t a good enough cook. Ashley, a former diplomat, was relentless, and Maria Rosa eventually caved. That afternoon, with the help of the GPS, Sam drove through the steep, twisting hills of Piedmont to Maria Rosa’s village of Repergo.

“This is just like a video game,” he enthused as he whipped around a hairpin turn. “Do you know what they call this?” I didn’t. “God’s racetrack.” I closed my eyes. Then I opened them because I didn’t want to miss the scenery—the famous vineyards of Nebbiolo grapes. The winding roads ended abruptly as we descended into a gentle valley and drove past farm fields and more vineyards. At 4 p.m. we arrived at Vigneti Brichet,

the winery owned and operated by Maria Rosa's cousin Mirella. She and her husband, Beppe, were renting us a farmhouse.

I rang the bell outside a tall wrought-iron fence. After a moment, the electronic gate swung open. We drove into an empty parking lot big enough for 20 cars. A slim young man with a shock of dark hair invited us into the fermentation workshop and offered us espresso, which we gratefully accepted. He was Alessandro, Mirella and Beppe's 29-year-old son. As we sipped our espresso, his aunt, Maria Rosa, suddenly appeared. Although we'd met only over Skype, she gave Sam and me warm hugs and announced we would be cooking dinner at her house shortly.

But first Alessandro led us to the farmhouse, a short walk down the road. In English, he explained that he lived on the main floor and that we had the entire top floor. From a small balcony, I could see medieval hillside villages. Below were gnarly leafless grapevines, dark as coal. To my right, I could touch an almond tree.

MARIA ROSA LIVED a five-minute walk away. The advent of superhighways and *supermercati* had drained the lifeblood of Repergo (population 201). Aside from Alessandro's family winery, the only business in the village was a butcher store. There was nowhere to buy milk or bread. There

was no post office or pharmacy or espresso bar. The last pizzeria was gone. The local elementary school had shut down 20 years earlier. Repergo exemplified Italy's declining birth rate, among the lowest in the world. One in 10 Reperghese was a widow or widower.

Maria Rosa's father, Giuseppe, was one of them. A retired autoworker, he was 79 and in poor health. Stoop-shouldered and diabetic, he used a walker. While he seemed doddering, he was sharp as a tack, ever on the alert against burglars and thieves. In summer, he would sit on the warm terrace beside the garden. In winter, he sat in the bright sunlight by a window overlooking the garden.

Everyone respectfully called Giuseppe "Nonno" (grandfather). He owned the house, a large 19th-century yellow stucco building with a Juliet balcony, 12 rooms on three storeys and grey terrazzo floors. To me, the house was lovely, but Maria Rosa disliked it. She and her husband owned a modern apartment in Montegrosso d'Asti, a nearby town. They had moved here with their daughter, Chiara, to care for Nonno after he broke his femur in a fall.

How long ago was that? "Nine years," said Maria Rosa, sighing and looking heavenward. At 48, she wore no makeup and dressed casually in a puffy black jacket, V-neck sweater and jeans. Nonno had cut his finger earlier



Clockwise from top: The author with Mirella (third from left), Maria Rosa (centre) and family; pasta-and-bean soup; Sam and Mirella assembling tuna-stuffed peppers; the author making pasta with a colleague of Maria Rosa's; and showing off a yogurt cake overseen by Maria Rosa's aunt.



that day while slicing some stale focaccia. “He was greedy,” said Chiara, laughing. Nonno gave an exaggerated good-natured shrug. When Maria Rosa, a nurse, had gotten home from work that afternoon, she’d taken one look at his bleeding finger and called ahead to her colleagues in the emergency room. She drove back to her hospital in Asti, 20 minutes away. Nonno had received three stitches and now waited patiently for dinner, his finger swathed in white gauze.

solely dedicated to the art of eating. There was a sofa on which no one sat. Instead, family and friends always gathered around a square table that sat six comfortably but could be expanded to accommodate twice that number by pushing together an assortment of old desks and smaller tables until they formed one giant rectangle.

Chiara, a willowy beauty who had just turned 17, studied English at school. She shyly insisted she could not speak a word—until she realized



WHAT KIND OF MEAT WAS IN THE SAUCE? “ASINO,” CHIARA REPEATED. THEN SHE AND HER MOTHER BEGAN BRAYING.

Nonno’s house bordered Via Repergo, the main street, without even a strip of sidewalk to separate it from the occasional car. Decades ago, his father, a builder and a farmer, had taken advantage of the prime location to operate a small convenience store from the kitchen window. Passersby had only to shout, and someone in the family would fling open the wooden shutters, lean out and sell a package of tobacco or some sugar. The kitchen itself was small and narrow, opening onto a large room that in Canada would have been a combination living and dining room. In Italy, it was

I’d had only one term of Italian, and Sam none at all. She plucked up her courage to speak occasional words and then whole phrases in English. Luckily Sam picked up new words at lightning speed. By the end of our first evening, we managed to communicate. Maria Rosa planned to teach us Piedmont’s most famous dishes, including *bagna càuda* (a fondue of garlic, anchovies and olive oil in which vegetables are dipped) and *carne cruda* (the French embrace it as steak tartare). But because she had worked all day and then took Nonno to get stitches, that first evening we

prepared a less labour-intensive meal. As she explained the order of the courses, I realized that Italy was governed by food rules. Our first dinner would unfold in a traditional sequence: *antipasti*, a pasta, a *secondo* of meat (which was really the third course, if you counted the appetizer as a first), *dolce*, fresh fruit and *caffè* (always espresso—and *not* decaf).

The *antipasti* would be cheese, olives and *taralli pugliesi*, a bread made with white wine, flour, olive oil and salt. The pasta would be *agnolotti di Calliano*, a Piedmont specialty of ravioli in a meat sauce. The *secondo* would be *involtini di coniglio*, a ham-stuffed roll of rabbit from the only butcher in Repergo and braised with white wine, carrots, onions, celery, rosemary and a fresh bay leaf from the garden. What kind of meat was in the ravioli sauce? “*Asino*,” said Maria Rosa. I looked at Sam. He shrugged. “*Asino*,” Chiara repeated. When I still didn’t understand, she and her mother began braying: *EE-oo! EE-oo!*

We were having donkey. Ravioli with ass sauce didn’t taste like chicken. It tasted like venison.

THE NEXT MORNING, Maria Rosa’s husband, Fiorenzo, took us to Montegrosso d’Asti, where they owned the flat. First, Fiorenzo explained, we would have coffee at his favourite hangout. Then we would visit

the farmers’ market, after which we would cook with cousin Mirella at her house. I had assumed we would be taught exclusively by Maria Rosa, but I gradually came to understand that she couldn’t manage us every day and had deputized friends and family.

Once back at the winery, I proudly thrust a bag of clams and baby squid purchased at the market in Mirella’s direction. She paused. She sighed. A beat later, I realized that she had already planned her dinner menu. “*Allora*,” she said, smiling broadly. *Well, then*. “Next time we’ll make *pasta e fagioli*. Tonight: *spaghetti alle vongole e seppioline*” (spaghetti with fresh clams and baby squid). I felt a twinge. I loved *pasta e fagioli*, too, and had always wanted to learn how to make the thick pasta-and-bean soup. I apologized for rudely hijacking my host’s menu, but Mirella said it was no problem.

Mirella handed her shopping list to her husband. Beppe was 57, the same age as Fiorenzo. He was a tall, sunburned man with fingers stained grape-purple. Unlike Fiorenzo, Beppe spoke no English at all and motioned for us to get in his SUV like we were hearing impaired. In Asti, Beppe led the way to the city’s famous indoor food market. He halted in front of his favourite butcher, owned by the Massano brothers. “This is the best *macelleria* in Asti,” said Beppe. “It sells only Piedmont meat.”

The word *macelleria* derived from the Latin word for butcher and slaughterhouse. Macelleria Oro Rosso sold rabbit, beef, free-range chicken, liver, beef tripe, *salumi*, fresh sausage, meatballs and hand-shaped patties with herbs and cheese. For our lunch later, Sam and I bought two flower-shaped burgers draped with translucent slices of *lardo*, the famous Italian cured fatback that can be eaten raw.

Beppe ordered a kilo of minced beef filet from Paolo Massano, who carefully trimmed the glistening silver skin, the shiny membrane that doesn't break down when cooked, and then ground the filet by hand. Mirella was making *carne cruda*, a Piedmont specialty that in 1950 inspired Giuseppe Cipriani of Harry's Bar in Venice to create *carpaccio*, paper-thin slices of raw beef served with lemon, olive oil, shaved Parmesan and, sometimes, white truffles. Cipriani named the dish after the Venetian artist Vittore Carpaccio, famous for the blood-red hues in his Renaissance paintings.

Our host herded us back to his SUV and drove at breakneck speed to a gigantic suburban *supermercato*. Beppe raced through the supermarket the way he drove. We trailed in his wake, listening while he phoned Mirella at least three times to find out exactly which type of sweet peppers she wanted, what kind of flour, what

size of capers. She also asked him to buy three tiny tins of tuna packed in olive oil, which were expensive but significantly richer tasting than the water-packed stuff I usually ate in Canada.

For lunch back at our apartment, Sam pan-seared the burgers so that the *lardo* melted, contributing a rich umami flavour. We steamed artichokes and made a green salad. When we finished eating and had washed the dishes, it was time to walk over in the rain to start cooking dinner with Mirella.

BEPPE'S GRANDFATHER founded Vigneti Brichet di Massasso e Figli in 1920. It grew a dozen varieties of grapes, including Merlot, Cabernet and Moscato, producing white, rosé and ruby-red Barbera wines. Beppe began working in the business when he was 18. At 25, he married Mirella, the girl next door, and they had two sons. Alessandro, the elder son, helped him harvest and ferment the grapes and bottle the wine. Stefano, the younger son, worked in Sydney as a sommelier and had an import licence to sell Massasso wines in Australia.

Mirella was a confident, ample woman of 48, with nape-length dyed auburn hair. She handled all the book-keeping and shipping and cooked the 10-course wine-tasting dinners for 50 guests during the fall harvest and spring bottling seasons. Decades earlier the winery had stopped selling

to the public and sold only to a private roster of customers. Beppe delivered cases of wine all over northern Italy, and Mirella couriered the rest to clients further afield, in central and southern parts of the country.

They lived above the shop in a large, well-appointed apartment with high ceilings and windows overlooking the vineyard. Beppe's parents had once lived here. When he took over the business, they swapped homes and the parents now lived down the

his 2006 book *Heat*. To me, kitchens reinforce that cultural message. The Italian kitchens we visited, no matter their size, always had two important pieces of furniture: a large central table and a comfy sofa. Although I rarely saw anyone sit on the sofa, it seemed essential because the kitchen was the place family and friends congregated. (Perhaps it was also a subconscious nod to ancient Rome, where the wealthy reclined to dine.) As for the table, it wasn't merely a



FRIENDS OF FRIENDS OF FRIENDS INVITED US INTO THEIR HOMES AND LET US INVADE THEIR KITCHENS.

road. Mirella knocked down interior walls, repositioned the principal rooms, and built her dream kitchen, even though the winery below was equipped with a professional one.

Mirella's kitchen was spotless and hyper-organized. Sam had instant gadget envy when he saw Mirella's professional meat slicer. Hers was also the only home we worked in that had an espresso machine. Everywhere else we went, people used the two-piece stovetop coffee pot called *la moka*.

"Food is a concentrated messenger of a culture," noted Bill Buford in

place to eat but a key workspace. In the 19th and early 20th centuries, Italian kitchens typically had a stove and, perhaps, a sink, but no counters. To roll out and cut fresh pasta, housewives placed a custom-made board on top of the table. When the meal was ready, they removed the board and everyone gathered around the table.

"The life of an Italian family is only at the table," Mirella said.

DURING THE 15 DAYS that Sam and I were in Piedmont, we learned how to make proper *spaghetti alle vongole*,

two-stir risotto, yogurt cake, *gnocchi alla bava* (“drooling gnocchi,” so named because of a delicious pale sauce that supposedly looks like saliva), *spaghetti carbonara* and so much more. The generosity of strangers—Maria Rosa’s hospital colleagues, for instance—continued to amaze me as people who only knew Sam and me as friends of friends of friends invited us into their homes and let us invade their kitchens. Why did they go to this trouble?

homes all have children, sometimes adult children, with whom they eat dinner nightly. Everyone has kitchen tables that expand to seat a dozen people. Social networks are robust. A friend of a friend is your friend, too, someone you would go out of your way to help.

ON ONE OF OUR final days in Repergo, Sam and I arrived at Maria Rosa’s shortly past noon. Maria Rosa presented me with a box gorgeously



I HAD ENVISIONED PAYING A LUMP SUM TO THE FAMILIES FOR THEIR TROUBLE. THEY ADAMANTLY REFUSED.

The answers are both simple and profound. Italians are fiercely proud of their regional cuisine. This is a country where people still speak in dialect and eat the food of their grandparents. But the deeper reason has to do with family. In atomized societies like Canada and the United States, people move from job to job and from city to city. In Italy, with the exception of those who are forced to leave to find work, people stay close to home, literally. Maria Rosa is living in her father’s home. Mirella swapped houses with her in-laws. Those who welcomed us into their

wrapped with flowered paper and a wide orange grosgrain ribbon. Italians are preternaturally talented at creating beauty. In the land of Michelangelo, *la bella figura* indelibly shaped the psyche. Everyone dresses with care—all the women, including fishmongers, are elegantly coiffed—and no one casually tosses a present into a dollar-store bag with a pouf of matching tissue on top.

I opened the gift. It was a gleaming white-enamelled *moka* by Bialetti, the best stovetop espresso maker in Italy. Maria Rosa said the six-cup pot was for Norman, because she had

heard that North Americans drank vast amounts of coffee. It would work on any stove—gas, electric, ceramic, even an induction cooktop. She pointed out its heat-proof silicone-coated handle. Her own *moka* pots were battered aluminum with handles that became dangerously hot.

On this adventure, I had envisioned paying a lump sum to the families for their trouble, plus groceries, gas and assorted expenses. However, Maria Rosa and Fiorenzo adamantly refused to accept any money. Mirella also declined, but at least I was renting her farmhouse. Flummoxed, I emailed Ashley. As a



Reader's
digest
**EDITORS'
CHOICE**

former diplomat, I reasoned, he ought to have a solution. He figuratively threw his hands in the air and passed me on to his Italian-born wife, Silvia, who suggested I could buy Maria Rosa a trendy Italian-designed bag—because Maria Rosa had once bought one for Silvia. That wasn't remotely adequate, yet the only way I even convinced Maria Rosa to accept the bag was by saying it was for

Chiara (a dirty trick because I lured them both to the purse store and the 17-year-old instantly swooned).

Of course, then Maria Rosa had gone out and bought me *la moka*, saying it was for Norman. **R**

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FOODSTUFF

Billion-dollar idea. A smoke detector that shuts off when you yell, "I'm just cooking!"

@LEMMYWINKLER

I wanted to go out tonight, but the avocado I bought this week will finally be ripe enough to eat between 8 p.m. and 8:15 p.m., so I can't.

@TANISHALOVE

GET SMART!

13 Things Your Accountant Wants You to Know

BY MICHELLE CROUCH
ADDITIONAL RESEARCH
BY ANNA-KAISA WALKER
ILLUSTRATION BY SERGE BLOCH



1 The holy trinity of quick refunds: file early, file online and opt for direct deposit. Some e-filing companies report turnarounds as short as eight business days.

2 Did you win a prize in a raffle at work or receive any gifts or rewards from your employer? If their value totals more than \$500 a year, you'll have to pay tax on them. An exception: frequent-flyer miles or loyalty points earned when using personal credit cards to book business travel—unless they've been converted to cash.

3 Filing late in itself won't hurt your credit rating, but it could lead to penalties and interest that will ratchet up the amount you owe the government. If you don't pay that debt, the Canada Revenue Agency (CRA) can garnish your income or even get a court order to seize your assets.

4 File even if you can't pay. While both failure-to-file and failure-to-pay penalties exist, the first is generally harsher. And don't panic if you can't pay what you owe: you may be able to work out a payment plan if you can prove that you truly don't

have the means. You can also have penalties and interest waived for financial hardship due to circumstances beyond your control, such as illness or job loss.

5 If your income is modest—less than \$30,000 annually for a single person or \$40,000 for a couple—and your tax situation is relatively simple, volunteers can help you prepare your online income tax return for free. Clinics are usually held at community centres in March and April. Visit Canada.ca for details.

6 Itemizing can yield a bigger return, but be careful: too many deductions may increase your chances of being audited.

7 One red flag? Excessive business deductions. The best defense is accurate records. If you drive for work, the MileIQ app will keep tabs on the kilometres you rack up. Meanwhile, apps such as Foreceipt allow you to take photos of receipts or scan your e-mail inbox to instantly log business expenses.

8 Keeping those receipts (for six years) is crucial, says Shannon Mathieu, CPA at Whitehaven Accountants in Ajax, Ont. “People think that their credit or bank statements are enough, but they aren’t accepted as backup for the CRA,”

she says. “Statements don’t show what the actual purchase was for.”

9 You could get hundreds back by applying overlooked tax deductions. Claiming medical expenses—including prescriptions and dental visits—is allowed, for example, if they total more than \$2,237 or three per cent of your income.

10 Has an elderly parent moved in with you? Even if they’re still healthy, you can claim the caregiver amount, as long as they’re over 65 and have an annual income below \$22,728.

11 If you collect a pension, you’re allowed to split up to half of your eligible pension income with a spouse, shrinking your overall tax burden.

12 To avoid an audit, don’t use round numbers—the CRA may assume you’re guessing on expenditures.

13 If you do get a tax review notice (gulp!), don’t go it alone—hire an accountant or a tax attorney. “A professional can respond on your behalf with the right documentation and references,” says Mathieu. “This can help avoid a reassessment or a more in-depth audit.”

R

That's Outrageous!

PECULIAR PRODUCE

BY NATHANIEL BASEN

FORBIDDEN FRUIT

On November 1, 2017, young shoppers at the ASDA Hulme Superstore in Manchester, U.K., had to show identification to purchase four things: prescription drugs, alcohol, tobacco and...kiwi fruit. During a concert a few nights prior, singer Harry Styles had slipped onstage while performing a song that shares a name with the green-fleshed vine-berry; the furry-skinned fruit had been launched from the crowd below. Styles was unharmed (he held his mic stand for support). ASDA, the superstore's parent company, didn't want to endanger Styles, so to prevent a repeat attack at his show that night, security policed the sale of kiwis to anyone under 25.

MIRACLE MEAL

In Corona, Calif., this past August, a daring dinnertime rescue gave way to a lovely friendship. Becky Garfinkel was partway through her spring-mix salad, purchased from Target, when she found a lifeless, dime-sized



frog in her dish. Garfinkel watched agog as her husband gave one-finger chest compressions to the amphibian. The valiant effort succeeded—the frog was revived, and Garfinkel decided to keep him. For their trouble, the couple says they received a \$5 Target gift card and a new pet, named “Lucky.”

MISTAKEN IDENTITY

Last year, in Bretten, Germany, police investigated what one man thought was an undetonated weapon from the Second World War. They were right to be cautious: A few months earlier, a similar situation necessitated a 60,000-person evacuation in nearby Frankfurt. After closer examination, though, it was determined that the suspicious item wasn't a bomb but a zucchini. Investigators admitted that the offending squash did appear nefarious, but they concluded that a neighbour likely threw it over the elderly man's fence. The toss has not, as of this writing, been declared an act of war.

JOEL THOMAS HYNES IS

LITTLE DOG

DOWN
BUT
NOT OUT

NEW SERIES MARCH 1

THURSDAYS 9/9:30NT
OR STREAM ANYTIME

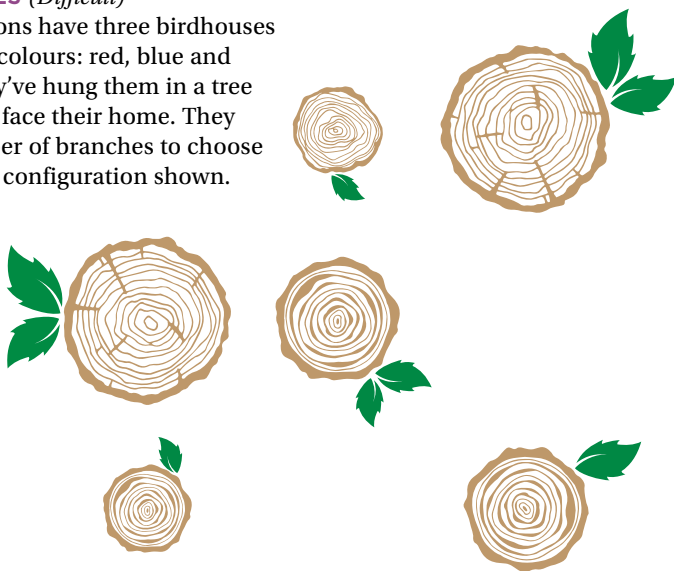


Brain teasers

Challenge yourself by solving these puzzles and mind stretchers, then check your answers on page 127.

BIRDHOUSES (Difficult)

The Robinsons have three birdhouses in different colours: red, blue and yellow. They've hung them in a tree so that they face their home. They had a number of branches to choose from, in the configuration shown.



The red birdhouse is on a higher branch than the yellow one.
The yellow birdhouse is to the left of the blue one, but not necessarily directly to the left.

The blue one hangs from a thicker branch than the red one.

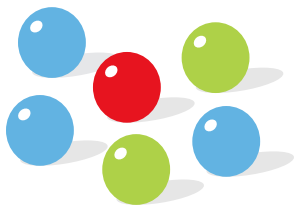
Only one of the following three statements is true:

- The red birdhouse is in the top row.
- The yellow birdhouse is in the left column.
- The blue birdhouse hangs from one of the two thickest branches.

Can you figure out where each birdhouse was placed?

LUCK OF THE DRAW *(Easy)*

There are six marbles in a bag. They are exactly alike except for colour: one is red, two are green and three are blue. Without looking into the bag, what's the smallest number of marbles you would need to draw out to guarantee getting either two green or two blue ones?



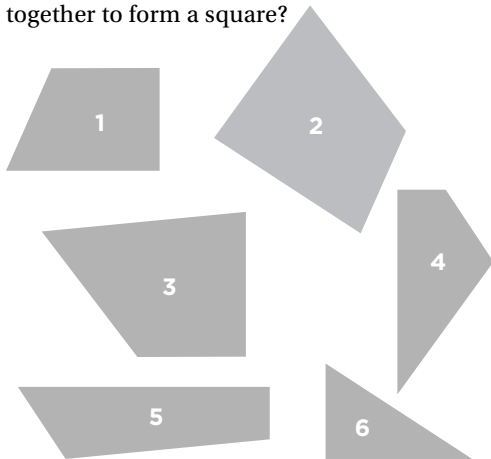
ARITHME-PICK *(Moderately difficult)*

Place one of the four basic arithmetic operations (+, -, ×, ÷) in each box to make a correct equation. Symbols may be repeated, and you don't have to use all four. All operations are performed from left to right, ignoring the mathematical order of operations. The result at each step must be a positive whole number. What's the equation?

$$5 \square 7 \square 3 \square 9 \square 4 = 32$$

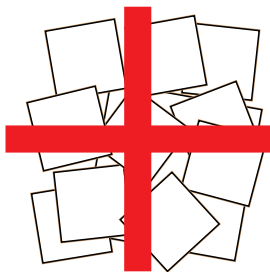
FAIR AND SQUARE? *(Moderately difficult)*

Would it be possible to join these six pieces together to form a square?



CROSSHAIRS *(Easy)*

None of the white squares in this diagram have their edges lined up. One of the squares is a different size from the others. Can you find it?



Trivia Quiz

BY PAUL PAQUET

1. Which Italian city ran a republic that lasted from 697 to 1797 AD?
2. What's the largest animal species alive today that has teeth?
3. Buprenorphine is considered a safer replacement for what drug?
4. Which long-standing European border is known in local languages as "La Raya" and "A Raia" ("The Line")?
5. In what band did Beyoncé sing before becoming a solo act?
6. In 2015, a tourist created an international uproar when he shot Cecil in Zimbabwe. What was Cecil?
7. A type of cancer called mesothelioma is nearly always caused by exposure to what substance?
8. According to past American Supreme Court justice Oliver Wendell Holmes, Jr., what's the fee we pay for a civilized society?
9. What horror novelist dedicated his book *The Dark Half* to "the late Richard Bachman," in honour of a recently exposed pen name he'd been using?
10. Who was called the "grandmother of Europe" because her nine children and 42 grandchildren married into royal houses all over the continent?
11. What Dutch artist painted—among other things—an astronomer and a girl with a pearl earring?
12. In architecture, what is the term for a vertical structure that provides ventilation to a building?
13. American revolutionaries once dumped enough tea for 18.5 million tea bags into what city's harbour?
14. Pau Gasol, a native of which country, was the first European player named the NBA's rookie of the year?
15. *Money raised through an ice-bucket challenge helped scientists discover a gene that might be connected with what disease?*



15. Money raised through an ice-bucket challenge helped scientists discover a gene that might be connected with what disease?

ANSWERS: 1. Venice. 2. The sperm whale. 3. Heroin. 4. The Portugal-Spain border. 5. Destiny's Child. 6. A lion. 7. Asbestos. 8. Taxes. 9. Stephen King. 10. England's Queen Victoria. 11. Johannes Vermeer. 12. A chimney. 13. Boston. 14. Spain. 15. Amyotrophic lateral sclerosis (ALS).



Word Power

Disagreeable to the ear. Grating. These are just a couple of ways to describe this month's quiz, which features some of the worst-sounding words in English. Warning: Do not read aloud.

BY ROB LUTES

1. lugubrious—

A: slow moving. B: exaggeratedly mournful. C: boring.

2. putrid—

A: rude. B: oily. C: foul.

3. cacophony—

A: discordant mixture of sounds.
B: shoddy wooden structure.
C: illogical series of statements.

4. viscous—

A: poisonous. B: sticky. C: insulting.

5. jowl—

A: bog in a valley. B: lower part of the cheek. C: shallow burrow.

6. maggot—

A: soft-bodied, legless grub.
B: threaded wooden bolt.
C: indentation.

7. crepuscular—

A: infected. B: relating to twilight.
C: imposing.

8. wimple—

A: cry of pain. B: complaint.
C: cloth headdress.

9. fester—

A: get worse through neglect.
B: evaporate slowly. C: collapse.

10. squab—

A: sofa. B: ditch. C: tent.

11. fecund—

A: friendly. B: fruitful. C: soft.

12. curd—

A: female yak. B: fragrant herb for infusing vodka. C: thick substance that forms when milk sours.

13. seepage—

A: slow escape of a liquid or gas through porous material.
B: loss of muscle due to inaction.
C: disorientation caused by a lack of sleep.

14. gristle—

A: tough, fibrous matter in meats.
B: sand used in glass-making.
C: abrasive wool.

15. crapulous—

A: soiled. B: overly indulgent in alcohol. C: disbelieving.

Answers

- 1. lugubrious**—[B] exaggeratedly mournful; as, The book's *lugubrious* prose filled Bob with sadness.
- 2. putrid**—[C] foul; as, The rotting meat had a *putrid* smell.
- 3. cacophony**—[A] discordant mixture of sounds; as, The *cacophony* in the hall was so great that Tarik removed his hearing aid.
- 4. viscous**—[B] sticky; as, Five minutes on the stove rendered the oatmeal *viscous* and ready to eat for breakfast.
- 5. jowl**—[B] lower part of the cheek; as, Roland's *jowls* became the most prominent feature of his face as he got older.
- 6. maggot**—[A] soft-bodied, legless grub; as, The young girl was fascinated to find hundreds of *maggots* crawling on the deer carcass.
- 7. crepuscular**—[B] relating to twilight; as, The evening horizon held a *crepuscular* beauty that made Farida long for home.
- 8. wimple**—[C] cloth headdress; as, Mona patiently explained that not all nuns wear a *wimple* and that her own order merely called for tying the hair back.
- 9. fester**—[A] get worse through neglect; as, Alison allowed her mild annoyance at Caleb to *fester* until she became angry.
- 10. squab**—[A] sofa; as, Exhausted, Anu stretched out on the *squab* and took a short nap.
- 11. fecund**—[B] fruitful; as, The landscape was *fecund* with trees and berry bushes.
- 12. curd**—[C] thick substance that forms when milk sours; as, Poutine is made using fries, gravy and cheese *curds*.
- 13. seepage**—[A] slow escape of a liquid or gas through porous material; as, When the old tank cracked, there was substantial *seepage* of oil into the garden.
- 14. gristle**—[A] tough, fibrous matter in meats; as, Caren trimmed the *gristle* from the steaks before putting them on the grill.
- 15. crapulous**—[B] overly indulgent in alcohol; as, The *crapulous* trio of friends stumbled down the street to find another bar.

VOCABULARY RATINGS

7-10: fair

11-12: good

13-15: excellent

Brain teasers:

Answers

(from page 122)

BIRDHOUSES

The **RED** birdhouse is hanging from the smaller branch in the top row. The **YELLOW** one is hanging from the centre branch. The **BLUE** one is hanging from the branch on the bottom right.

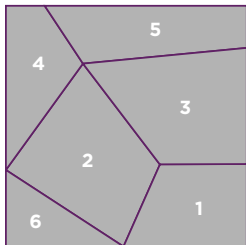
LUCK OF THE DRAW FOUR.

ARITHME-PICK

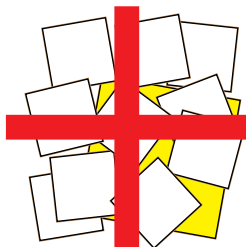
$5 + 7 + 3 \times 9 - 4 = 32$.

FAIR AND SQUARE?

YES.



CROSSHAIRS



Sudoku

BY IAN RIENSCHÉ

			8	4				
	2					6	7	
	4	6	2	9		3		
5						8		
7		1		5		4		9
		8						5
		5		3	6	7	4	
	7	3					8	
			9	7				

TO SOLVE THIS PUZZLE...

You have to put a number from 1 to 9 in each square so that:

- every horizontal row and vertical column contains all nine numerals (1-9) without repeating any of them;
- each of the 3 x 3 boxes has all nine numerals, none repeated.

SOLUTION

1	3	5	1	2	7	9	4	8	6
6	8	4	9	7	2	5	1	3	2
2	7	3	1	4	5	9	8	6	9
9	1	5	8	3	6	7	4	2	4
4	3	8	7	2	9	1	6	5	5
7	6	1	3	5	8	4	2	9	7
5	9	2	4	6	1	8	3	7	8
1	4	6	2	9	7	3	5	8	3
8	2	9	5	1	3	6	7	4	1
3	5	7	6	8	4	2	9	1	5



Quotes

BY CHRISTINA PALASSIO

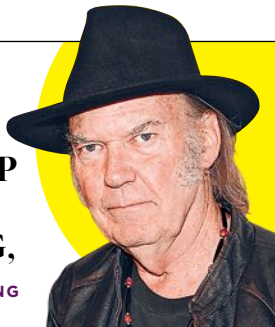


We shouldn't forget to be happy about celebrating who we are and what we'd like to become.

JULIE PAYETTE

I DON'T KNOW IF I HAVE CHARISMA OR NOT. I JUST KEEP CHANGING. BUT I KNOW I CAN'T SING, OKAY?

NEIL YOUNG



I CAN'T JUST LET GO AND GET OUT OF CONTROL. I HAVE TO SCHEDULE IT ALL.

SARA QUIN

History is an awful lot more than statues and names on buildings. If it was that easy to erase, we'd all be in trouble.

MALCOLM GLADWELL

I was planning on starting my diet this week. But I have too much on my plate.

RON SEXSMITH



I CONSIDER MY CHILDREN LESS FORTUNATE FOR NOT HAVING HAD THE IMMIGRANT EXPERIENCE.

PREM WATSA

ALLAN
HAWCO

PAUL
GROSS

ERIC
JOHNSON

ENUKA
OKUMA

TORI
ANDERSON



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CAUGHT

IN A DIRTY BUSINESS THERE'S NO CLEAN GETAWAY

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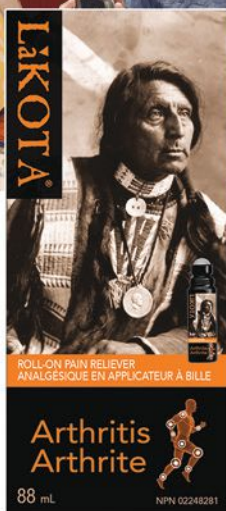
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