

# the Tide

Vol. 6 No. 3

April 2014



## Spring seeds!

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# March

## *in review*

*A look at what the Halifax Media Co-op and others covered during the month of March. Visit [halifax.mediacoop.ca](http://halifax.mediacoop.ca) to read the full stories and more. Compiled by Kendra Lovegrove.*

### March 1

Loretta Saunders' death becomes the latest in the growing epidemic of missing and murdered aboriginal women. The Native Women's Association of Canada documented the names of 582 aboriginal women who went missing or were murdered between 1990-2010.

### March 3

Nova Scotia's Legislature, led by Liberal Premier Stephen McNeil passed the essential service legislation, which stripped 700 nurses from their right to strike. This was an effort to challenge health workers' right to free collective bargaining.

### March 6

The day before HMC journalist Miles Howe was scheduled to appear in court in Moncton, Howe finds out the charges in relation to his November 26th arrest were dropped.

### March 6

Eighty residents from Kennetcook, Nova Scotia gathered in the Fire Hall to hear newly appointed Minister of the Environment, Randy Delorey explain the latest leaks of fracking waste water from the Kennetcook ponds. The ponds were once again found to be leaking their contents into adjacent streams and wetlands.

### March 7

Halifax is not equipped to deal with accessibility, and that's not going to change anytime soon, writes Gus Reed.

### March 10

Nurses discuss the possibility of going on strike if their employer, Capital Health, does

not listen to their demands. In February, 90 per cent of nurses voted in favour of a strike if safe patient care was not addressed. Nurses believe that staff-to-patient ratios are not adequate.

### March 11

Weekly pickets continue outside the Organic Earth on Quinpool Road against their SodaStream products, which are manufactured in the occupied West Bank.

### March 12

The federal government wants to see a share of funding go towards a new employer-led program, at the expense of organizations that use to receive the funding. These funding cuts to job training will hit people with disabilities. The funding was suspended April 1.

### March 18

The Goldboro Liquefied Natural Gas (LNG) project should not have received environmental approval without an emissions management plan in place, says the Ecology Action Centre and Nova Scotia Fracking Action and Resource Coalition.

### March 19

The South House and the Halifax Sexual Health Centre raise over \$4,000 to put pro-choice ads on every bus in the HRM, starting March 24. The ads are in response to pro-life, anti-abortion ads.

### March 19

The Nova Scotia chapter of the Canadian Centre for Policy Alternatives (CCPA) releases an alternative budget for the province of Nova Scotia. Fifty academics and activists use their expertise to make a

budget for the "99 per cent."

### March 20

A new video called "In Whose Backyard?" documents the thoughts and feelings of people from predominantly African-Nova Scotian and Mi'kmaq communities in Nova Scotia that are facing environmental racism.

### March 29

Hundreds of home support workers, nurses and sympathizers gathered in front of the Westin Hotel, while inside the Provincial Liberal party's annual general meeting was being held.

### March 31

Public health care advocates rally at Victoria Park, in order to show disapproval for the federal government and their lack of interest to negotiate a new agreement in regard to federal funding levels.



► Turn the page for more grassroots news.

## Web developer creates tool to rate HRM's landlords and buildings

by JON GRANT

K'JIPUKTUK (Halifax) – A new website allows anyone with an internet connection to rate their landlord and the apartment they are renting.

apt411 allows users to anonymously rate their apartments for things like noise and safety, and give details about utilities and laundry facilities, as well as a brief comment.

"The goal is to give people information about rental properties that is beyond what they see in a Kijiji ad," says Cara Gammon, the developer behind apt411.

Gammon says that while all demographics are affected by tenancy issues, it is crucial to target students about their rights.

"With all the universities around, people are in and out of a place in a year and some people don't have the time to go through the tenancy board, and mediation hearings, and all this stuff you need to go through in order to have justice served," says Gammon.

And even then, adds Gammon, "the tenants that come after you still have no idea."

"It's not a revolutionary idea," says Gammon. "It's something I would want to look at before I rented a place."

## Concerns over potential repeal of Halifax's pesticide bylaw

by ERICA BUTLER

K'JIPUKTUK (Halifax) – In March, HRM council took the first step toward repealing the municipality's pesticide regulations, a move which has some citizens groups concerned.

City staff had already stopped administering bylaw P-800 in 2011 when provincial legislation on the sale of cosmetic pesticides came into effect, and they deemed the municipal law redundant.

That's not the case, says Pesticide Free Nova Scotia (PFNS). The coalition has written to Halifax mayor and council asking them to keep the bylaw because it offers important protections not covered by provincial law.

Among the differences is a requirement to post warning signage 24 hours before spraying, and to verbally inform neighbours within a 50 metre radius. "This gives the opportunity for vulnerable people to vacate their premises during and after spraying," says the letter. Provincial legislation only requires signage after spraying occurs.

Another key difference is HRM's permitting system, which involves in-person

site visits before issuing permits to use controlled pesticides.

Provincial pesticide regulations place controls in stores where pesticides are sold. Trained retail staff are required to advise consumers on the spot about non-toxic alternatives to treating their lawns. However, that's not happening, says PFNS.

In 2013, PFNS volunteers conducted a "mystery shopper" survey of 21 retailers in Nova Scotia. They found 3 in compliance with the rules, and 14 with controlled pesticides available directly to consumers without trained consultation.

The HRM bylaw has seen more success. The number of approvals for pesticide use has dropped dramatically under the bylaw, from 3,505 in 2003, to just 43 in 2010.

That success doesn't mean we should stop enforcing the bylaw, says long time anti-pesticide activist, Florence Senay. "It's like a stop sign. You don't say, well, we might as well take it away because no one has been hit by a car in a long time."

## Successful crowd-sourcing puts pro-choice ads on HRM buses

by MILES HOWE

K'JIPUKTUK (Halifax) – Pro-choice advertisements are to appear on every bus in the Halifax Regional Municipality over the month of April.

The South House and the Halifax Sexual Health Centre coordinated the successful fundraising campaign, which raised \$4000, in response to pro-life, anti-abortion advertisements that have been on Metro Transit buses and shelters for some time.

"A couple months back we noticed that there were a lot of anti-choice ads that had gone up with a lot of misinformation and unscientific claims," says Jude Ashburn, outreach coordinator at South House. "We made the call and asked how much it would cost to run our own ads, with a focus on re-education around the words 'pro-choice' and what it means to actually value hard-won rights in basic health care."

Taking the pro-life/pro-choice debate to the public transit system is within the 'advocacy advertising' guidelines of the Canadian Code of Advertising Standards, says Sherry Kirwin, a manager at Pattison Outdoor Advertising. The company is responsible for handling advertising contracts for Metro Transit buses and ferries.

"We can't say no to someone if they want to advertise, because then you're interfering with their free speech," says Kirwin.

For Ashburn, the pro-life ads aboard Metro Transit busses are targeting a group of people.

"I feel like it's a very specific group of folks who are going to be shamed by that type of misinformation," says Ashburn. "It's very important to reaffirm peoples' rights and understand that access to abortion is a basic human healthcare right. Those [pro-life] ads target the working poor, so it can be eight in the morning and you're going to your job and that's what you see."



# Province announces funding for gender confirming surgeries

*Trans individuals and advocates say barriers remain for the right procedure*

“When you’re looking at a gender transition from a medical perspective, it’s a long, complicated and multi-step process.”

— Kate Shewan, vice-chair, NSRAP

by **KENDRA LOVEGROVE**

K’JIPUKTUK (Halifax) – The provincial government has released a list of gender confirming surgeries (also known as sex reassignment surgeries) which will now be paid for by MSI.

Though this is a large step for Nova Scotia, many concerns still remain, says Kate Shewan, vice-chair of Nova Scotia’s Rainbow Action Project in a recent NSRAP press release.

Gilanders Ungar, a transgender man, says he was ecstatic when he first heard the announcement and called MSI right away. However, he learned very quickly that the chest masculinization procedure he was looking for would not be funded.

The province has said it will be funding standard mastectomies but not chest masculinization, a surgery designed to remove breast tissue and create a masculine looking chest. It’s also the procedure many female-to-male transgender individuals are seeking.

“Chest masculinization and chest contouring both involve nipple reconstruction as well as implants and other procedures, which aren’t part of standard mastectomies,” says Christine Gibbons, manager of policy and planning at Nova Scotia’s Department of Health.

Ungar says that top surgery (also known as chest surgery) seems to be the most sought after surgery for females transitioning to males. He says that bottom surgery can be complicated and risky, and as a result top surgery is more common.

Ungar says if the full top procedure that he is looking for is not being offered within

Nova Scotia, he might choose to pursue it elsewhere. “So this isn’t really helping me much,” he says.

Shewan says not every transgender individual is seeking surgery, but those that do vary in their needs and desires.

“[Doctors] need to understand the surgical outcomes that people are looking for,” says Shewan.

Though individuals of the transgender community in Nova Scotia now have more opportunity to seek out surgical options, other barriers and challenges still stand in their way.

“When you’re looking at a gender transition from a medical perspective, it’s a long, complicated and multi-step process,” says Shewan.

Access to counsellors, hormone therapy, and wait times for not only surgeries, but also clinical eligibility, create a bottleneck in the system leaving patients without proper care.

The province estimates they will see potentially four to eight patients who want to undergo gender-confirming surgery per year, says Gibbons. This number, she says, is based on the volume of patients in other jurisdictions in Canada.

However, any patient who wants to undergo surgery must first be assessed and deemed clinically eligible. Potential patients can be denied if they do not fit criteria stated within the World Wide Standard created by the World Professional Association for Transgender Health (WPATH), which is a globally recognized assessment tool, says Gibbons.

“We are committed to working with NSRAP as well as other members of the trans community and other advocacy groups [...] to identify where the barriers and challenges are and determine what we might be able to do to address them,” says Gibbons.

“We realize that providing funding for sex reassignment surgery is a significant step, it is only one of the ways we’re addressing those barriers.”

## *MSI will be funding the following eight surgeries:*

**Mastectomy:** Surgical removal of the breast and breast tissue.

**Oophorectomy:** Surgical removal of one or both ovaries.

**Hysterectomy:** Surgical removal of all or part of the uterus.

**Penectomy:** Surgical removal of the penis.

**Orchiectomy:** Surgical removal of one or both testicles.

**Phalloplasty:** Surgery, which constructs, repairs or enlarges the penis.

**Metoidplasty:** Testosterone treatment used to enlarge the clitoris, which is then followed by surgery to construct a penis.

**Vaginoplasty:** Surgery, which creates or repairs the vagina.

# Aboriginal children in foster care

*Dal law students discuss "the ongoing legacy of residential schools"*

by RANA ENCOL

K'JIPUKTUK (Halifax) – Roslyn Chambers was a mature student taking an intensive class on residential school survivors when she met students who had never heard about this dark legacy of colonial Canadian history.

"I was shocked that people didn't know, so I wanted to start a discussion group," she said.

As a black law student who has worked with vulnerable communities and recently learned about her Métis heritage, Chambers says she feels her individual role in reconciliation efforts is to help people understand what happened.

The Truth and Reconciliation Commission found that at least 4,000 of the 150,000 First Nations children who passed through the residential school system died while attending school. These children were removed from their families, deprived of their ancestral languages, and were frequently subject to physical and sexual abuse.

Chambers has organized talking circles on the subject at the Dalhousie law school since October 2013; the most recent discussion in March spotlighted the current plight of

*Roslyn Chambers, expressed hope that the law students and prospective foster parents who attended the talk walked away with greater awareness of the need for culturally appropriate resources for Aboriginal children in the province. | Photo courtesy Roslyn Chambers*



their life have difficulty forming attachment to caregivers. One example is the story of the aboriginal girl who was moved 10 times in the first 17 years of her life.

"This is not uncommon," says Hounsell-Gray. There is a disconnect among First Nations' governance, provincial, and local agencies when coordinating services for

these children, she added.

There is no child advocate in Nova Scotia, unlike the office of the child advocate in Ontario. There is real concern among social workers and advocates that children raised in care are more likely to struggle in adulthood.

Nova Scotia could be doing better.

Hounsell-Gray points to the "Signs of Safety" risk assessment model being used in Alberta and Ontario. The program offers new hope for children to stay with their families by doing "assessment of risk." There is no record of deaths in parental care or kinship placements done by this program.

The model, which originates in Australia, is a more holistic approach akin to traditional perspectives. In New Zealand, a Maori approach promotes family, kinship,

and community rather than the patriarchal approach of agencies or government agents.

A parent who is genuinely concerned about their parenting should not be stigmatized, she says. "If they want to do better for their child, we should support them."

There is a "learned helplessness," that happens among parents or families in more vulnerable populations, says Hounsell-Gray. She encourages Aboriginal leaders to take more initiative on the crisis in their communities.

Community-based resources for parenting in Nova Scotia are becoming more culturally appropriate. (See below for resources.) Materials available in Mi'kmaq, such as a video describing child protection proceedings are being developed in Eskasoni First Nation in Cape Breton.

"Now that we've moved to big cities, we've lost the community-based awareness and support regarding child rearing." She tips her hat to social workers of all stripes – they are not the problem, they are simply overworked, she says.

"In Ontario right now, if a child comes into care, they're recognizing that children need to remain connected with their family – a worker looks into kin and kith to see if there's an appropriate and available caregiver to retain continuity in family," says Hounsell-Gray. This practise is not mandatory in Nova Scotia.

aboriginal children in out-of-home care.

Of the roughly 30,000 children aged 14 and under in Canada who were in foster care, nearly half were Aboriginal children. In 2011 3.6 per cent of Aboriginal children were foster children, compared with 0.3 per cent of non-Aboriginal children (Statistics Canada, 2011 National Household Survey).

Studies attribute the disproportionate number of Aboriginal children in foster care to the fact that at least a generation of school survivors are less able to parent as a result of their institutionalization.

Shelley Hounsell-Gray works in the Dartmouth family office for legal aid and provides counsel for parents in child protection matters. She says children who have moved several times in the early stages of

# Community Services Transition Roadmap hits speed bump

*People with intellectual disabilities still in need of proper housing*

by ROBERT DEVET

K'JIPUKTUK (Halifax) – Last September, the Department of Community Services did something bureaucracies don't often do. It changed its mind. In public.

People with disabilities in Nova Scotia have long argued that they shouldn't be warehoused in large institutions. Long waiting lists for community-based housing options made parents fear for the future of their loved ones. Too many rules and regulations made life feel like hell.

People rallied at Province House to deliver that message. People with disabilities and their caregivers angrily vented at province-wide consultations.

"Anything I am eligible for, my daughter should be eligible for," said one parent at such a consultation. "We don't care about anything else until we have food, safety, shelter and transportation. Our thing is broken at the very bottom."

Then, in September of 2013, the government issued a document that talked about changing all that.

The report called for the phasing out of large institutions, a more individualized approach in terms of care and funding, and altogether a new emphasis on changing services to better accommodate people with disabilities.

At the time the department committed to "implementing these recommendations over a five-year time frame, with major action steps for each of the ten recommendations being plotted over 2013-14 through 2017-18."

Because the report is so explicit in terms of concrete actions and dates, everybody refers to it as the roadmap.

That was September of last year.

Now, it appears things are moving ahead, but not at the pace that the report suggested.

Of the thirty or so action steps scheduled for the previous fiscal year 2013-14, not one has been completed. But work has started on all of them, Elizabeth MacDonald, departmental spokesperson, tells the Halifax



*December 2012 rally at Province House. A Community Services initiative to address complaints is not moving as fast as was initially suggested. | Photo Robert Devet*

Media Co-op.

Stakeholder provincial advisory groups, which according to the report should have been in place by now, have not yet been announced.

And membership of advisory groups will not be announced before March 31, MacDonald writes in an email dated March 11.

In a late February op-ed in the Chronicle Herald, Community Services Minister Joanne Bernard assured readers that she was completely committed to the roadmap.

In that same article, Bernard announces that "later this spring, the province expects to have its implementation plan ready."

But maybe not. In a March 5 email MacDonald writes "we will have a clear, strategic plan by the fall of 2014."

So what to make of it?

Wendy Lill, playwright and former Member of Parliament, has been advocating on behalf of people with intellectual disabilities for a very long time. She was co-chair of the team that helped shape the transition roadmap.

In March, she attended a roadmap progress update for stakeholders organized by Community Services. That was also the first update provided by the department since the roadmap was launched seven months ago.

"After that meeting I am hopeful that there is some real movement happening and that there is good faith there," Lill tells the Halifax Media Co-op.

Brenda Hardiman is one of the parents who has been calling for changes at Community Services for a long time. She is the mother of Nichele Benn, the young woman with intellectual disabilities who was charged with assault for allegedly attacking staff at the institution where she lives against her will.

Hardiman is sceptical but reserves judgement.

"I see things going in a positive direction. But I have also been around for a very long time. I can see how they can quickly fall apart.

"I am hopeful, but we will see," says Hardiman.



# 2,500 nurses strike for patients' safety

*Liberals strike back with Essential Services legislation that affects 40,000*

photos and story by **ROBERT DEVET**



“What they taught me at nursing school is that the essence of nursing is to advocate for our patients.

We need to put our foot down.”

— Nurse on strike



“To be a new grad with eight months experience and to be the most senior nurse on your floor... Making decisions that you're not comfortable with is terrifying.

I challenge Stephen McNeil to work shortstaffed for just one shift.”

— Nurse on strike

K'JIPUKTUK (Halifax) – Joan Jessome, President of the Nova Scotia Government and General Employees Union (NSGEU) saw it coming. In early March, Jessome told the Halifax Media Co-op that the Liberal government would use essential services legislation to end a looming nurses' strike.

She was right. On April 4, that was exactly what happened.

But it wasn't just the Capital Health nurses who were affected by Bill 37, the legislation that sent the nurses back to work after having been on a legal strike for all of a day.

The legislation affects hospital and Community Services staff province-wide, union members who work in group homes, as ambulance dispatchers, and many more.

For the nurses the issue was never about money, but about patients' safety and working conditions.

The nurses were asking for mandated nurse-to-patient ratios, arguing that without it too many hospital units operate short-staffed, putting patients' lives at risk.

"Currently there is a policy where the first and sometimes even the second nurse who calls in sick is not replaced," says Ginger Hampton, a registered nurse who works in the Neurosurgical Intensive Care Unit.

"Nurses are exhausted. There are nurses who work for hours on end without sitting

down, having a drink of water, or using the bathroom."

"Meanwhile these nurses are dealing with potentially harmful medications. A single slip-up could cost a life."

Accidents do happen. Capital Health staff filed 40,000 Patient Safety Reports over the last two years.

A summary report suggests that three per cent of the affected patients suffered severe harm, or even death, because something was amiss. That amounts to 600 patients each year.

Having more nurses on duty reduces the risk of harm. Studies show that every extra patient added to a nurse's workload increases the risk of death within a month of surgery by seven per cent.

"I met with 500 nurses a few weeks ago, and nurse after nurse shared their story of working conditions and the impact on patient safety, the near misses and nurses not getting breaks, not being able to go the bathroom," Jessome told the Halifax Media Co-op.

"It's not about money, it isn't about their wages, they can't function under these working conditions anymore," Jessome says.

Capital Health authorities say that there is a formal process for nurses to report on situations when being shortstaffed might

jeopardize patients' health. But Jessome counters that nurses have long lost faith in a process that is cumbersome, lengthy, and never delivers concrete results.

Capital Health also says that hiring the necessary 800 new nurses would cost \$60 million annually.

Jessome thinks, based on what people on the ground tell her, that the real number is more like an extra 150 nurses. Savings in overtime would go a long way in balancing out the cost of new hires, she argues.

It is often said that it takes a special kind of person to be a nurse. But working without adequate supports is taking its toll, Hampton says.

"A lot of nurses cry in the bathroom, cry on their way home because they can't believe what they just have endured," she says. "The heartbreak we witness on an everyday basis, the horrors we see, you can't just erase it from your memory."

"We see patients in shock and crying because the doctor has just told them they have a terminal brain tumor, and we don't have time to spend with them. We look at that poor patient and we have to run away."

"If you can't provide the care you want to, it breaks your heart," says Hampton.



# Seeds for the people

What a marvelous thing, the seed!

by OWEN BRIDGE

Embodied in each seed are thousands of years of co-evolution between humanity and our plant allies. It was that first act of saving and selecting edible wild seeds that allowed us to settle down and farm in our Neolithic past. In the millennia that have passed since, millions of farmers in millions of places have grown and selected and saved seeds from their best plants. Certain varieties became adapted for warm microclimates, other varieties adapted to cool ones. An ancient farmer

beans and grains and other crops.

The cyclical dance between farmer and seed has been steadily increasing diversity. But a very recent thing has happened which threatens that agricultural inheritance: for the most part, we've stopped saving our seeds! Starting in the mid-20th century, we've allowed control of the seed to slip from



in the Andes would have had a particular Bean or a Quinoa variety ideally suited to growing in the fertile garden by the village, and another variety suited to growing on that dry northern slope outside town. The neighbouring village down the mountain would have different soil and elevation and growing conditions, and would likely have grown a whole new set of varieties.

Through saving countless seeds in so many places, we guided the process of natural selection towards the enormous range of traits and tastes and diversity we have among food plants today. By some estimates, there are over 30,000 tomato varieties in existence around the world, and similar numbers of



the hands of the people into the hands of

agribusiness.

Rather than seeds saved and exchanged between growers – seeds that are truly adapted to their environment – we're reliant on a consolidated seed industry which offers the same seed to everyone, replacing thousands of varieties with just a few.

Often, a single huge grower in Oregon or California or farther afield will produce nearly the entire continent's supply of a certain variety, supplying most of the mainstream seed houses in North America with the exact same seed. Such a centralized system is putting all our eggs in one basket when it comes to crop failures or contamination issues.

Increasingly, we're stuck relying on seeds

specifically designed not to be saved, such as hybrid seeds which won't breed true to type or even seeds patented by their breeders so as to make propagating them illegal. That's without even mentioning the prevalence of genetically modified seeds with genes inserted from unrelated species (though you're not likely to find those in garden seed catalogues yet).

There's a lot of power in seeds. It's been said that whoever controls the seed controls food, and whoever controls food controls the world. The reality is that we still have a great wealth of bio-diverse seed available to us, and their power can be in our hands if we want it to be! We simply need to grow them and save them! Learn to grow food and save seeds, discover your own favourite varieties and become familiar with their traits and personalities. If every gardener and farmer saved and maintained





just one variety, we'd have no need to worry about losing our diversity of seeds.

Everyone who grows food can be a seed saver. It's a very simple extension of regular growing. The plants know how to reproduce; you just have to let them complete their life cycle and be there at the right time to collect the seeds.

Start off with open-pollinated or heirloom varieties. These are the "people's seeds" that come true from year to year, and when saved and selected will adapt to your particular conditions over time. In contrast, there are F1 hybrids, which are a first generation cross between two open-pollinated varieties. Hybrids have certain benefits (mainly increased vigour in the first generation), but usually the second generation isn't stable, forcing you to go back to the seed company for more.

A few particularly easy crops to begin saving seeds with are beans, peas, tomatoes and lettuces. What makes these ones easy is they have self-fertile flowers, so cross-pollination between varieties is quite rare and you don't need to worry about large isolation distances.

**Beans and peas** are both very easy to grow, and their seed saving technique are really

similar. You simply let the pods mature on the plant well past the fresh eating stage until they're crispy and brown, and then you crack them open to get the seeds inside. Easy! It was the amazing array of colours and forms of dry beans that first got me excited about seed saving as a kid.

**Lettuce** produce their seeds quite differently. As a food crop, lettuce thrives in cool weather, and once the summer heat arrives, it triggers the plants to bolt and flower. Each plant can grow to about three feet in height, with a beautiful umbel of hundreds of yellow flowers. Each flower develops into a fluffy seedhead of 10-15 dandelion-like seeds... and as soon as their fluff fully develops they're ready to be collected. From just a few plants, you can get thousands of seeds – probably enough for multiple seasons.

**Tomatoes** are an exciting process! The very simplest method would be to scoop a few seeds out of a fully ripe tomato and dry them on a paper towel. Those would likely grow, but if you've noticed each fresh seed has a layer of gel around it. That gel contains enzymes which inhibit germination (can't have seeds sprouting inside the fruit!) so to get the best germination rate you can ferment them.

Take really ripe tomatoes from your best plants, and squish them up into a bucket or a mason jar. Add just enough water to cover the tomatoes, and let it sit somewhere warm for 3-4 days (with a lid!). After that time you should have a nice mold layer on top, and something amazing has happened underneath. The skins and pulp will have floated to the surface, and all the fertile seeds will have sunk to the bottom, and their gel coatings will have removed themselves. Now just drain off the water and pulp, and give the seeds a few rinses to get them clean. Spread the seeds to dry on a tray or paper towel and you've got top notch tomato seeds!

*For anyone interested in learning more in-depth seed saving techniques, we frequently have workshops in the summer and fall at our farm. Keep an eye on our website ([www.annapolisseed.com](http://www.annapolisseed.com)) for details.*

*We also hold Tomato Fest at our farm in early September, a free tomato tasting and open farm event to which you're all invited!*

## Contribute!

*We have weekly meetings, Mondays at 8pm, Cafe Cempool on Agricola Street. Or write us at [hmc@mediacoop.ca](mailto:hmc@mediacoop.ca)*

[halifax.mediacoop.ca](http://halifax.mediacoop.ca)

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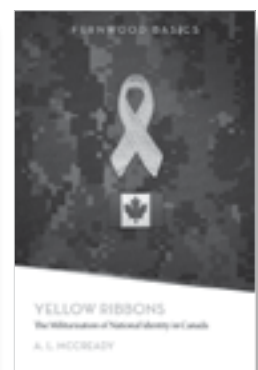
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