



2025 ASSESSMENT REPORT

Community Health Needs Assessment

DIEPPE AND MEMRAMCOOK

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Summary

Under the Regional Health Authorities Act (Legislative Assembly of New Brunswick, 2011), the regional health authorities (RHAs) are responsible for identifying the health needs of the communities they serve. In this respect, a Community Health Needs Assessment (CHNA) is an ongoing, dynamic process aimed at identifying the assets, strengths and needs of communities, which helps establish health and wellness priorities to improve the population's health status. According to the community boundaries established by the New Brunswick Health Council (NBHC, 2024a), Vitalité Health Network (the Network) includes 13 of New Brunswick's 33 communities.

In 2018-2019, the Network began a CHNA cycle extending over a five-year period. The Dieppe and Memramcook CHNA ran from September 2023 to May 2024.

Data collection for a CHNA prioritizes a participatory action research (PAR) methodological approach combining qualitative and quantitative methods (Koch and Kralik, 2009; McNiff, 2013). This "mixed methods" approach is advantageous because it provides relevant information to guide future Network and community planning.

To ensure that the CHNA is comprehensive and thorough, the creation of a Community Advisory Committee (CAC) is essential to the process. The CAC fosters community involvement throughout the CHNA process and provides advice and relevant information on health and wellness priorities in the community. In addition, a number of focus groups and semi-structured individual interviews provide further information on predefined themes during consultations with the CAC. In total, the CHNA for the Dieppe and Memramcook region consisted of seven consultations with the CAC, four themes explored in ten focus groups and ten semi-structured interviews.

Analyzing the quantitative data and adding additional qualitative information made it possible to draw up a list of eight health needs in the community. Using this list, CAC members participated in a prioritization activity resulting in the prioritization of the following needs (The scores for needs 7 and 8 were equal):

1. Access to health care services;
2. A living wage;
3. Access to addiction and mental health services;
4. Healthy psychosocial development for children and youth;
5. Recreational activities;
6. Access to reliable transportation;
7. Better support for immigrants; and
8. A sense of community.

This report makes recommendations specific to the Network, community partners, decision makers and other key stakeholders in relation to the needs identified during the CHNA.

List of acronyms

PHAC	Public Health Agency of Canada	PH	Public Health
ANB	Ambulance New Brunswick	AMHS	Addiction and Mental Health Services
CREA	Canadian Real Estate Association	PHC	Primary Health Care
AFPNB	Association francophone des parents du Nouveau-Brunswick	PHCS	Primary Health/Care Survey
CAFi	Centre d'accueil et d'accompagnement francophone des immigrants du Nouveau-Brunswick	SWES	Student Wellness and Education Survey
SESPC	South East Social Pediatric Centre		
CAMH	Centre for Addiction and Mental Health		
CAC	Community Advisory Committee		
CHRC	Canadian Human Rights Commission		
SERSC	South East Regional Service Commission		
CDPDJ	Commission des droits de la personne et des droits de la jeunesse		
NBHC	New Brunswick Health Council		
CHNA	Community Health Needs Assessment		
HDC	Human Development Council		
CIHI	Canadian Institute for Health Information		
DEECD	Department of Education and Early Childhood Development		
RHBP	Regional Health and Business Plan		
PAR	Participatory Action Research		
RHA	Regional Health Authority		
HHN	Horizon Health Network		
Network	Vitalité Health Network		



3. Introduction

3.1. Purpose

Referring to the Regional Health Authorities Act (Legislative Assembly of New Brunswick, 2011), the regional health authorities (RHAs) are responsible for:

- a) determining the health needs of the population they serve;
- b) determining the priorities in the provision of health services for the population they serve; and
- c) allocating resources according to the regional health and business plan (RHBP).

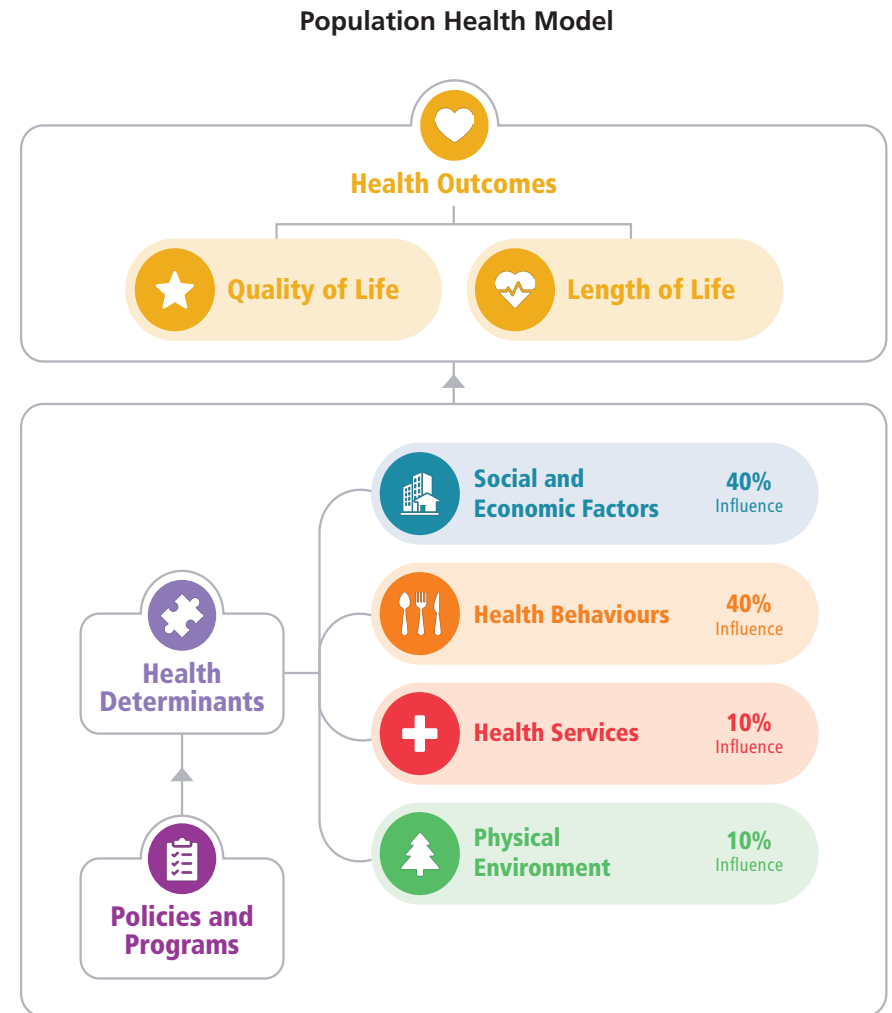
3.2. Definition and main objective

A Community Health Needs Assessment (CHNA) is an ongoing, dynamic process aimed at identifying the assets, strengths and needs of communities to establish health and wellness priorities and improve the population’s health status.

The main objective of a CHNA is to compile a list of priority health and wellness needs that can assist the Network, decision-making bodies and community partners in planning resources in the community. Moreover, community participation and involvement are at the heart of this process. The CHNA process fosters collaboration among community members and various stakeholders (Department of Health, 2018).

In addition, the five-year cycle of the CHNA helps provide baseline information on the health and wellness of communities and on the factors that influence their overall health, i.e., the social determinants of health.

From this point of view, the CHNA process must be approached from a population health perspective. The population health approach aims to improve the health status of the entire population and reduce health inequalities between different population groups. To achieve these goals, this discipline looks at the wide range of factors and conditions that have the greatest impact on health (social determinants of health) and attempts to influence them (PHAC, 2012).



Source: NBHC (2024b).

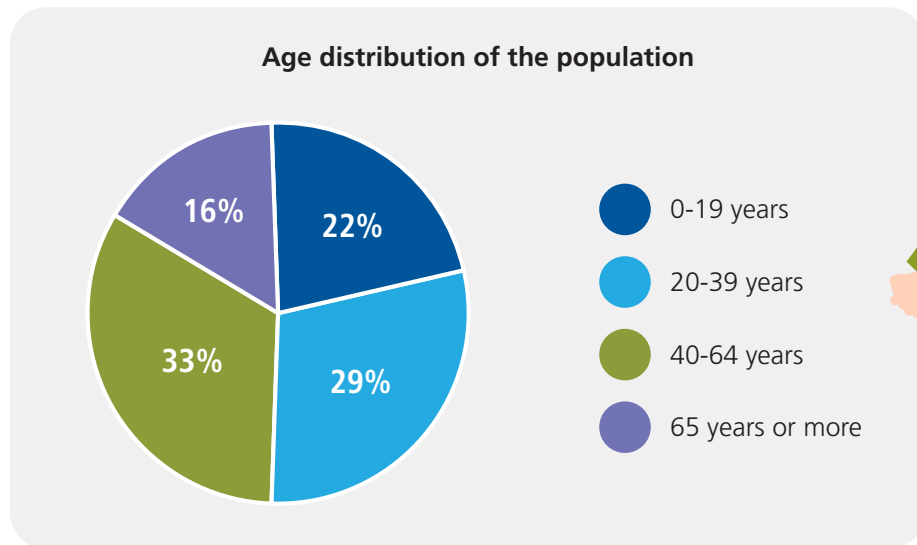
3.3. Accountability structure

The Department of Health has set up a provincial CHNA committee to ensure consistency in CHNA processes between the RHAs and the Department. This provincial committee is made up of representatives from the Department of Health, Horizon Health Network (HHN) and Vitalité Health Network (the Network).

In addition, a CHNA Steering Committee has been set up within the Network to steer the CHNA process. In particular, this committee ensures that the key activities run smoothly and that the CHNA process is applied continuously over a five-year period. The CHNA Steering Committee is made up of the Assistant CEO, Strategic Execution, the Vice-President of Performance, University Mission and Strategy, the Assistant Vice-President of Professional Services, the Director of Strategic and Organizational Planning, the Corporate Director of Engagement, the Director of Public Health, the Director of Primary Health Care (PHC), the Assistant Director of Public Health (PH), the Acting Manager of Community Health Needs Assessment and Improvement, and the two CHNA Project Coordinators.

3.4. Overview of the community's socio-demographic profile

The CHNAs are based on the NBHC's division of New Brunswick into 33 communities (NBHC, 2024a). The Dieppe and Memramcook region is one of 13 communities served by the Network. It is part of Zone 1B of the Network and is located in southeastern New Brunswick. French is the language most often spoken at home (61%), although the community is among those with the highest rate of bilingualism in the province (NBHC, 2021). In 2023, the population of Dieppe and Memramcook was 37,627 (NBHC, 2023).



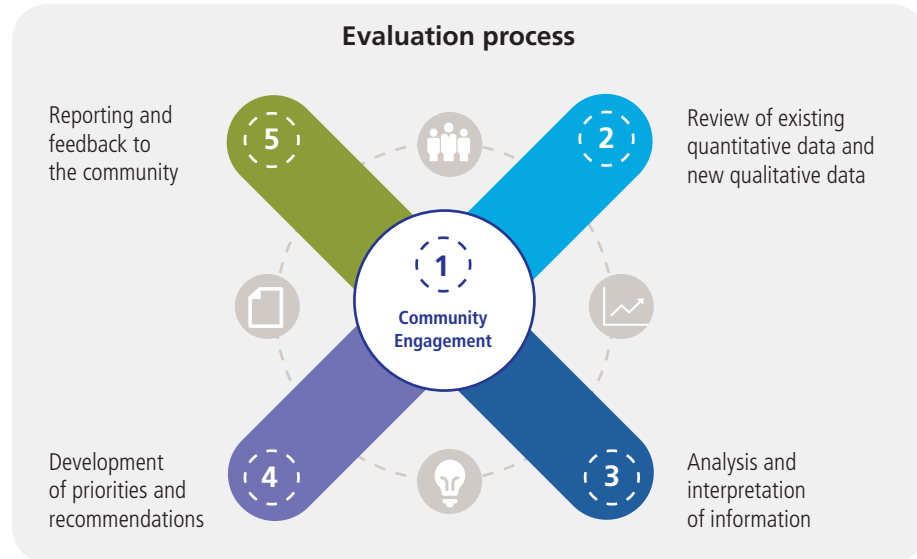
Source: NBHC (2021).



4. Methodology

4.1. Assessment process

The steps in the CHNA process were developed in accordance with the *Community Health Needs Assessment Guidelines* (Department of Health, 2018). From a high-level perspective, the CHNA process is composed of five key activities:



4.2. Community Advisory Committee

To ensure that the assessment is comprehensive, thorough and representative of the community being assessed, the creation of a Community Advisory Committee (CAC) is essential.

In this respect, the CAC fosters community involvement throughout the CHNA process and provides advice and relevant information on health and wellness priorities in the community. The CAC establishes links between the community, the RHAs and the various community stakeholders. It serves to effectively mobilize community partners, service providers, community organizations and citizens in the development of intersectoral, community-wide approaches to improving the health of the population.

The Dieppe and Memramcook CAC for the CHNA was made up of members representing a variety of stakeholders:

- Ambulance New Brunswick (ANB),
- Fierté Dieppe Pride,
- the Southeast Regional Service Commission (SERSC),
- a Memramcook daycare,
- the municipality of Dieppe,
- the municipality of Memramcook,
- the Association francophone des parents du Nouveau-Brunswick (AFPNB),
- the Centre d'accueil et d'accompagnement francophone des immigrants du Nouveau-Brunswick (CAFi),
- the Southeast Social Pediatric Centre (SESPC),
- the Club d'âge d'or de Memramcook (Berceau),
- the Memramcook Wellness Committee,
- the Foyer Saint Thomas,
- École Abbey-Landry,
- École Mathieu-Martin,
- the Department of Education and Early Childhood Services (DEECD) early childhood services section,
- Live Well | Bien Vivre, as well as
- two citizen representatives.

The sectors represented by the Network were:

- Public Health (PH),
- Primary Health Care (PHC), and
- Addiction and Mental Health Services (AMHS).
- Horizon Health Network was also represented.

All CAC meetings took place in person, with the exception of one virtual meeting. Seven consultations were carried out with the CAC between November 2023 and May 2024.

Table 1: Overview of meetings

Meeting	Objectives
1st Meeting November 2023	<ul style="list-style-type: none"> • Present the purpose, main objective and methodology of the CHNA • Present the CAC’s mandate • Propose the schedule and objectives for each meeting
2nd Meeting December 2023	<ul style="list-style-type: none"> • Present and interpret available quantitative data on the community • Identify missing information and find resources to gather it
3rd Meeting January 2024	<ul style="list-style-type: none"> • Present the additional quantitative data requested by the CAC
4th Meeting February 2024	<ul style="list-style-type: none"> • Present a summary of the information gathered in the focus groups and semi-structured interviews, and discuss the results
5th Meeting March 2024	<ul style="list-style-type: none"> • Conduct an affinity diagram workshop to identify the community’s key health and wellness needs
6th Meeting April 2024	<ul style="list-style-type: none"> • Identify the community’s assets and strengths, and prioritize the needs identified by the CAC (individual activity)
7th Meeting May 2024	<ul style="list-style-type: none"> • Validate the final list of prioritized needs • Find solutions to the needs prioritized by the CAC



4.3. Data Collection

Data collection for this assessment was carried out using a participatory action research (PAR) methodological approach combining qualitative and quantitative methods (Koch and Kralik, 2009; McNiff, 2013). This “mixed methods” approach is advantageous, as it allows for the triangulation of methods and data sources, thus increasing the credibility and reliability of the assessment. On the one hand, the collection of quantitative data makes it possible to establish a general portrait of the population, which allows for the analysis of possible trends, socio-demographic factors, health-related behaviours and risk factors. On the other hand, the collection of qualitative information makes it possible to highlight the various contextual and cultural dimensions, as well as to understand the meaning people attribute to their reality and to the challenges present in their community. The combination of these two methods facilitates optimal understanding and interpretation of community needs.

Review of quantitative data

To obtain a general portrait of the community, the quantitative data used for this assessment were gathered from various external sources: the NBHC, Canadian Institute for Health Information (CIHI), Statistics Canada, and the Province of New Brunswick. A second strategy was based on a literature review including internal Network data, such as scorecard indicators, Continuous learning-based strategic planning, the 2022-2025 RHBP, etc.

Qualitative data collection

Qualitative information enriches and completes the picture of a community's health. This information was collected during focus groups and semi-structured interviews with key resources and validated with the CAC (see Table 2). A focus group is a qualitative data collection method that uses open-ended questions, gives participants the opportunity to respond confidentially in their own words, and has the capacity to elicit reactions on a defined field of interest. A semi-structured interview is a verbal exchange in which the interviewer obtains information from a participant by asking open-ended questions. Although the interviewer prepares a list of predetermined questions, the semi-structured interview unfolds in a conversational manner, offering participants the opportunity to explore the topics they deem important (Given, 2008).

Participatory approaches to assessment intentionally include in their process the people and groups most affected by the assessment (Danley and Ellison, 1999). Here, consultation with the CAC ensures that methods and results reflect the community's perspective, culture, priorities and concerns.



Table 2: Description of consultations

THEME 1	THEME 2	THEME 3	THEME 4
<p>Children and youth</p>	<p>Adults</p>	<p>Seniors</p>	<p>Immigrants and newcomers</p>
<p>A total of 59 people were consulted:</p> <ul style="list-style-type: none"> • 4 focus groups: 28 people • 4 interviews: 7 people • 7 CAC meetings: 24 people <p>The following topics were discussed:</p> <ul style="list-style-type: none"> • Physical activity • Cost of living • Psychosocial development • Elitism • Immigrants • Infrastructure • Housing • Recreational activities • Social media • Early childhood • Mental health • Sense of belonging • Health care • Health system • School system • Transportation 	<p>A total of 36 people were consulted:</p> <ul style="list-style-type: none"> • 1 focus groups: 6 people • 5 interviews: 6 people • 7 CAC meetings: 24 people <p>The following topics were discussed:</p> <ul style="list-style-type: none"> • Physical activity • Ambulance • Cost of living • Environment • Groceries • Green space • Dental hygiene • Homelessness • Language • Housing • Lack of professionals • Urban planning • Prevention • Sense of belonging • Home care • Health care • Health system • Smart phones • Transportation 	<p>A total of 32 people were consulted:</p> <ul style="list-style-type: none"> • 2 focus groups: 7 people • 1 interview: 1 people • 7 CAC meetings: 24 people <p>The following topics were discussed:</p> <ul style="list-style-type: none"> • Physical activity • Inflation • Language • Recreational activities • Prevention • Mental health • Sense of belonging • Health care • Health system • Transportation 	<p>A total of 40 people were consulted:</p> <ul style="list-style-type: none"> • 3 focus groups: 16 people • 7 CAC meetings: 24 people <p>The following topics were discussed:</p> <ul style="list-style-type: none"> • Access to resources • Cultural diversity • Employment • Daycare • Language • Housing • International recruitment • Health care • Health system • School system • Transportation

4.4. Prioritization process

The prioritization matrix is a tool for continuous improvement and effective planning. This matrix is used to reduce the number of options by systematically comparing choices through the selection, consideration and application of criteria (Brassard and Ritter, 2001). This exercise forces a team to focus its efforts on priority needs and gives all participants an equal opportunity to express their opinions, reducing the possibility of selecting the “pet project” of a participant.

Table 3: Defining prioritization criteria

A	REALITY	Statistics show that a significant proportion of the population is affected by this need
B	PREVENTION	Actions can be taken to avoid or reduce this need
C	PREMATURE DEATHS	Premature deaths could be avoided if this need were addressed (e.g., a significant proportion of the affected population is young)
D	COST	There is an economic burden generated by this need (high cost to society)
E	SERIOUSNESS AND SEVERITY	This need seriously or severely affects the health of the population
F	PUBLIC CONCERN	There is public concern about this need

The matrix was used to prioritize the community’s needs once these had been identified. An explanation of the weighting criteria was provided to facilitate understanding of each criterion and to give CAC members the opportunity to assign a score to each prioritization criterion.

4.5. Weighting needs

After the results of the quantitative and qualitative data analysis were presented to the CAC, a consultation was held to draw up a list of the community’s key health needs. This exercise produced a list of eight needs. From this list, CAC members were asked to assign a score to each prioritization criterion for these needs.

The prioritization criteria were evaluated according to the following scale:

- 0 : If you deem this criterion as **not important** to consider in prioritizing this need
- 3 : If you think this criterion is **important** to consider in prioritizing this need.
- 6 : If you consider this criterion to be **very important** to consider in prioritizing this need.

Table 4: List of needs prioritized following the prioritization process

Needs	Score	Rank
Access to health care services	336	1
A living wage	327	2
Access to addiction and mental health services	297	3
Healthy psychosocial development for children and youth	276	4
Recreational activities	252	5
Access to reliable transportation	216	6
Better support for immigrants*	162	7
A sense of belonging to one’s community*	162	7

*These needs both received a score of 162, placing them in a tie for 7th place.

5. Community needs

The needs presented below are the findings of the Dieppe and Memramcook CHNA carried out between November 2023 and May 2024. They are the result of a review of quantitative data, a collection of qualitative data and a process of analysis and prioritization. For each need, a summary of the relevant assets identified in the community and the potential solutions generated by the CHNA process are also reported. A detailed version of these can be found in the appendix.

NEED 1

Access to health care services

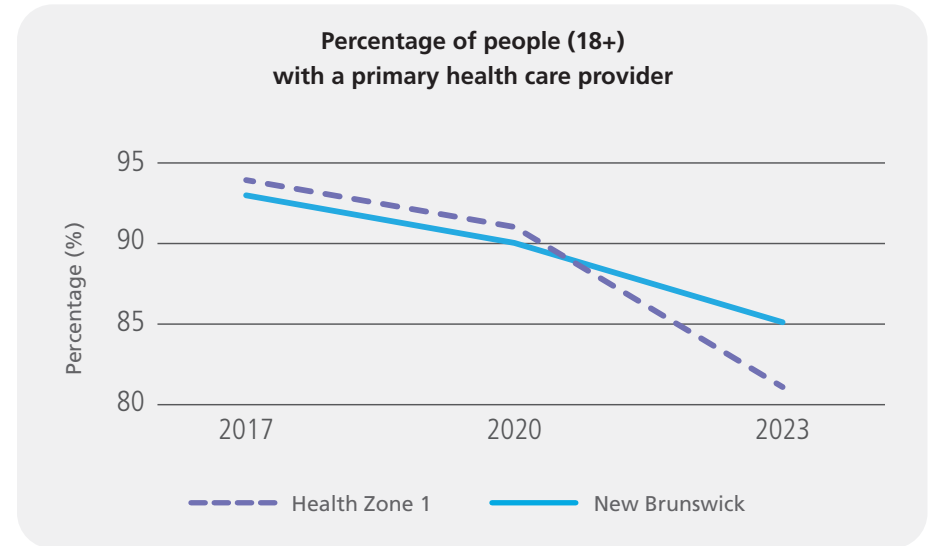
The accessibility of health care services is currently the greatest need for the people of Dieppe and Memramcook. As one of six components used to measure the quality of health care services, it is defined as “the ability of patients/clients to obtain care or services in the *right place*, at the *right time*, according to their respective *needs* and in the official *language* of their choice.” (NBHC, 2024c, emphasis added).

A. People have difficulty accessing health care services

The proportion of people with a primary health care provider is declining in New Brunswick, with Health Zone 1 showing a significant decrease. In fact, in the Moncton and Southeast region, this rate dropped from 94% to 81% between 2017 and 2023 (NBHC PHCS, 2017; 2023). The consultations carried out reveal that people who are newer to the community are particularly affected by the lack of access to primary health care providers.

If they are unable to meet with their primary health care provider, people rely on after-hours or walk-in clinics. Although advantageous, these clinics are intended to be an emergency solution rather than a first resort. Yet 38% of people in the community most often go to a clinic when they need care (NBHC PHCS, 2020). Once again, consultations point to access challenges, including incompatible opening hours, lack of appointment slots and difficulty reaching reception.

As a last resort, we turn to the emergency room. Although fewer people in Dieppe and Memramcook use the emergency room as their usual place of care than elsewhere in New Brunswick (NBHC PHCS, 2020), it is still used inefficiently. The result is an overcrowded department, posing major challenges for hospital staff and patients alike. Obviously, the people consulted deplore the long wait times.



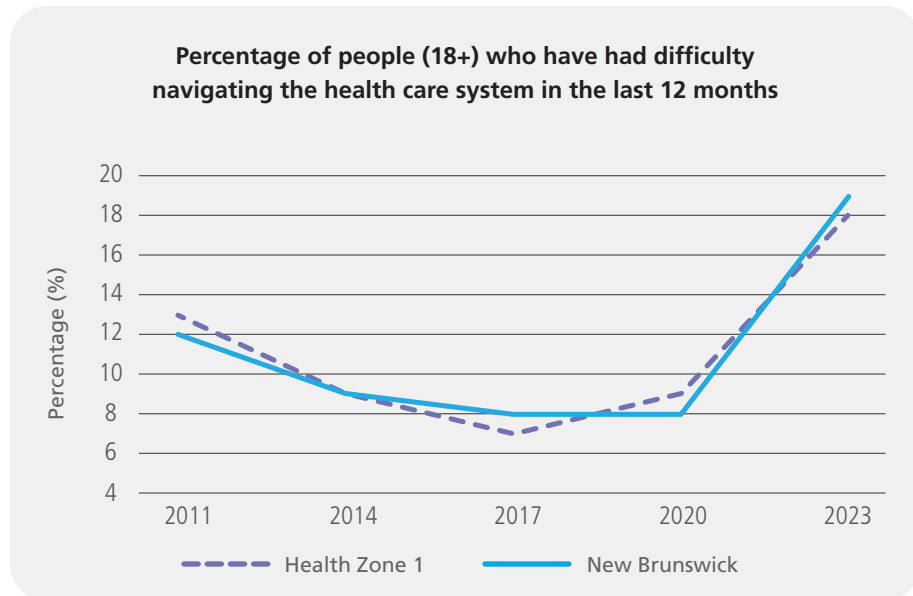
Source: NBHC, Primary Health/Care Survey

“I don’t understand how a developed country has less effective medical care than a country considered undeveloped.”

Finally, in Memramcook specifically, access to ground ambulance services is also a concern. During the consultations, people related unfortunate anecdotes and concerns about the size of the area and the distance of ambulances from certain corners of the village. One person pointed out that, in the face of these shortcomings, the volunteer firefighters of the Memramcook Fire Department make an important contribution and provide a “fantastic” service. Nevertheless, this is another example where the back-up solution should not be replacing an essential service, because clearly, lack of timely access to ambulance services can be serious.

B. People have difficulty navigating the health care system

Access to health care services is further hampered by the complexity of the health care system and how it operates. In fact, 18% of people in Health Zone 1 report having had difficulty navigating this system in the past 12 months, which is double the rates seen in the past decade (NBHC PHCS, 2023). People primarily report having difficulty finding the information they're looking for: it doesn't exist; it's not communicated; it's not accessible; it's contradictory; or it's buried in an abundance of information.



Source: NBHC, Primary Health/Care survey

Finally, people explicitly communicated that access to services is more than assignment to a health care provider. In addition to primary health care efforts, the entire health care system needs to collaborate with its partners, improve its operations and communicate more effectively with the people it serves.

Community strengths and assets for access to health care services

Among the community's strengths and assets, we noted that the Network is prioritizing improving access to primary health care with the deployment of local family health teams, while clinics offer in-person urgent care and other partners provide remote consultations. A detailed list of assets identified can be found in the appendix.

A summary of potential solutions

Solutions proposed through the CHNA process to improve access to health care services include adding resources and points of service (notably in Memramcook), promoting existing services and resources, and simplifying the process for recognizing professional equivalencies. A detailed list of potential solutions is presented in the appendix.



NEED 2

A living wage

Income is an important factor contributing to population health through its influence on living conditions and the ability to make healthy choices. The Human Development Council (HDC) defines a living wage as “the hourly rate a household (with full-time working parents and two children, aged 2 and 7) would require to satisfy basic needs and live with dignity while enjoying a decent quality of life” (HDC, 2023).

A. The high cost of living and inflation hinder people’s wellness

Although the entire population is affected by inflation, low-income earners are particularly vulnerable. While the minimum wage was \$14.75 per hour in 2023, the HDC estimated a living wage of \$22.75 per hour for the City of Moncton, a difference of 54% (HDC, 2023).

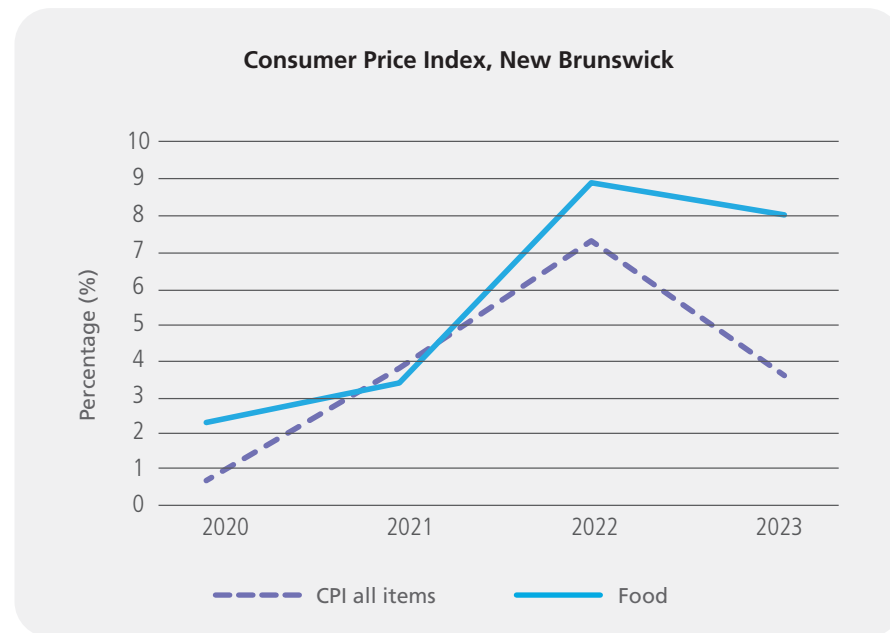
In the community, people are reporting significant increases in grocery costs. These challenges are particularly acute for immigrants, who are over-represented in low wage jobs, and seniors, who are often on fixed incomes. Still, price increases are noticed by everyone, and in fact, the data shows an 8.0% increase in food costs in 2023 (Department of Finance and Treasury Board, 2024). Meanwhile, demand for food bank services also continues to increase.

B. The community lacks affordable housing and the homeless population is on the rise

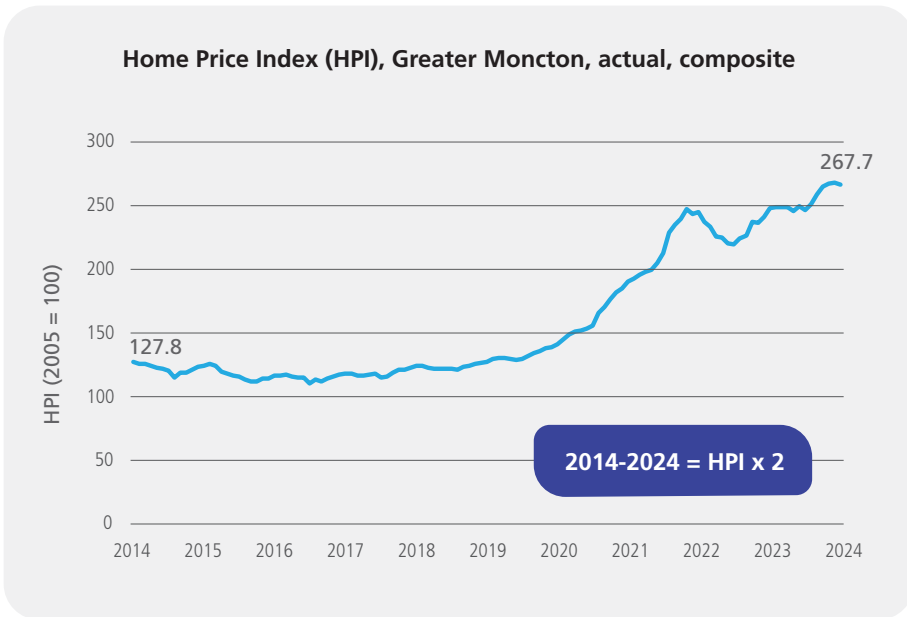
Those consulted lamented the lack of affordable rental properties and housing in the community. In July 2024, the reference price stood at \$309,500 for single-family homes and at \$292,900 for townhouses, representing increases of 6.3% and 15.6% respectively over the previous year (CREA, 2024). In 2023, the average monthly rent in urban centres rose by 10% (\$104) to \$1,120 (Department of Finance and Treasury Board, 2024). As a result, many people struggle to secure housing.

“Families with children are ‘penalized’ in access to rental housing and immigrants only find out about this when they arrive.”

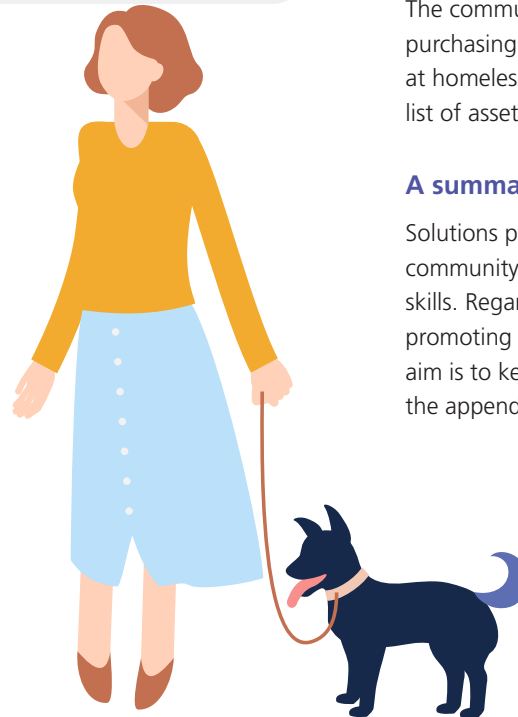
For immigrants, access to housing is a twofold challenge. On the one hand, they have to reconcile the discrepancy between the costs anticipated after their exploratory visit and the inflated rates following immigration; on the other, rental housing rarely corresponds to their family structure, which is often larger than that of the typical New Brunswick family.



Source: Ministry of Finance and Treasury Board (2023; 2024).



Source: Canadian Real Estate Association (2024).



People who can't find a place to buy or rent have no option but to stay on the streets. In recent years, homelessness in the region has become more prevalent than before, and indeed, very visible. We now witness it not only in downtown Moncton, but also in Dieppe and occasionally in the village of Memramcook. Although this societal problem affects people of all ages, the consultations highlighted a particular concern for young people aged 16 to 19 years who, becoming homeless, “fall between the cracks” of available services.

“If you're not addressing poverty, housing affordability and all of those, there's just no way to tackle health problematics.”

In short, inflation – especially increases in the cost of food and housing – affects people in general, but certain vulnerable groups are more severely affected. People in the community are calling for a better balance between income and living costs to be restored.

Community strengths and assets to help meet financial needs

The community reaps benefits from food banks, school breakfasts and bulk food purchasing programs to help with food needs. Housing assistance is primarily directed at homeless people and located in the neighbouring community of Moncton. A detailed list of assets can be found in the appendix.

A summary of potential solutions

Solutions proposed through the CHNA process to alleviate the economic burden of the community include general strategies, such as increasing literacy and financial planning skills. Regarding food, proposed solutions involve developing a food security policy and promoting simpler eating habits through re-education. When it comes to housing, the aim is to keep costs down. A detailed list of potential solutions is presented in the appendix.

NEED 3

Access to addiction and mental health services

“The crisis is real,” writes CAMH. “Most people still don’t have a true understanding of just how big, onerous and potentially damaging the crisis is — on both a societal and personal level” (CAMH, 2024). To respond to this crisis, it is crucial to have accessible AMHS. A service is accessible when it is offered according to the level of need of its patients/clients and when physical (e.g., distance), temporal (e.g., wait time) and comprehension (e.g., language) barriers are overcome (NBHC, 2024c).

A. People have difficulty accessing addiction and mental health services

In Health Zone 1, one third (1/3) of adults report that they needed to consult a health care professional about their mental or emotional health, or their alcohol or drug use, in the last 12 months but ultimately did not (NBHC PHCS, 2023).

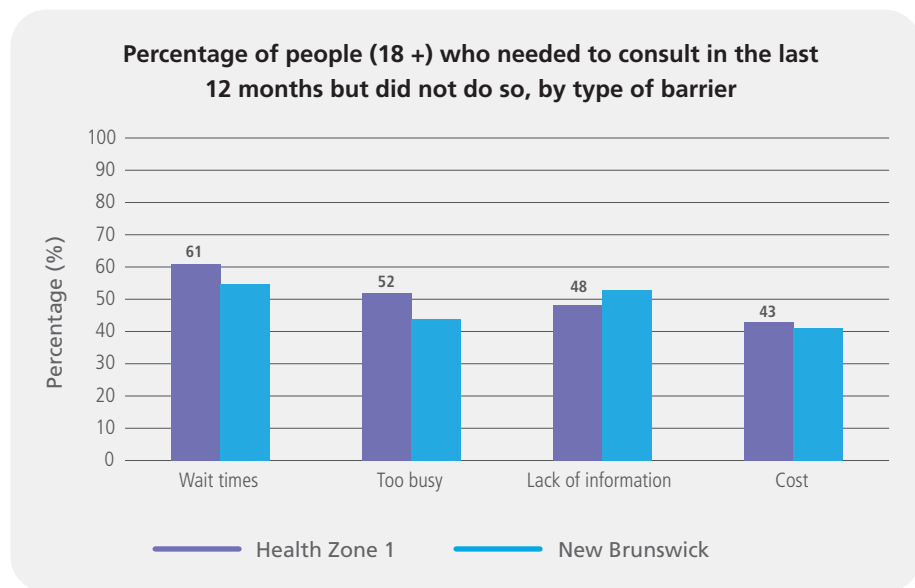
For half of these people, the main barriers are wait times, busy schedules, lack of information and cost-related challenges. So, whether services are available or not, these results clearly indicate unmet needs due to a lack of access, according to the definition of accessibility.

“Adults are overwhelmed. They know the service would benefit them, but their cup is full. They start, then drop out.”

Among young people, the statistical results are more favorable than elsewhere in New Brunswick, but there are still unmet needs. Half of students in grades 6 to 12 perceive their mental health as “excellent” or “very good” while 37% report symptoms of anxiety or depression (NBHC SWES, 2023-2024). Four percent (4%) of young people say they have needed to see someone about a problem related to their mental or emotional health in the past 12 months, but they haven’t seen anyone (NBHC SWES, 2023-2024). This represents a significant reduction from the 8% reported for 2018-2019.

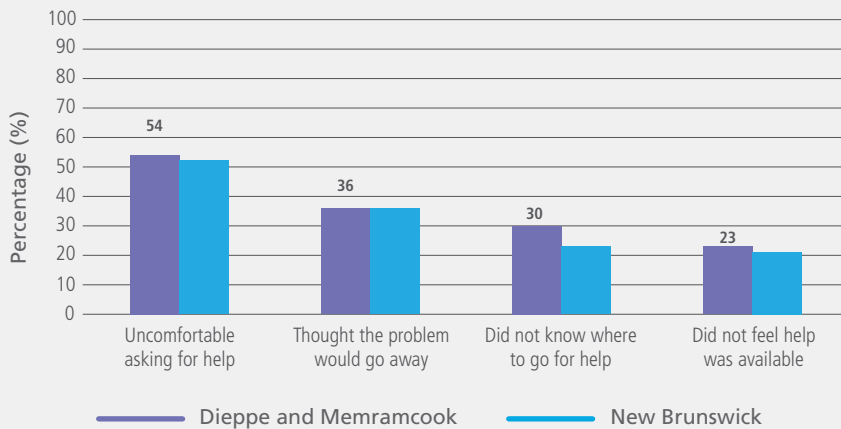
Among the mental health challenges young people face, the consultations revealed a wide range of scenarios. We highlight anxiety and depression, of course, but also difficulty sleeping and remediation with melatonin, vaping, isolation, suicidal thoughts, eating disorders such as anorexia, bulimia and hyperphagia, as well as self-mutilation. “They cut themselves, you know!,” said one person consulted. Witnessing these challenges and a lack of human resources, some seek to find ways to help or better understand, but the issue is vast in scope.

“Sometimes I’m asked to give a ‘little two-hour training session.’ I studied for seven years... in two hours, you’re not going to be able to do what I do!”



Source: NBHC, Primary Health/Care Survey (2023).

Percentage of young people who needed to seek help in the past 12 months but did not, by type of barrier



Source: NBHC, Student Wellness and Education Survey (2023-2024).

B. Some people are particularly vulnerable and lack support

No one is immune to mental health or addiction issues, but some groups are more vulnerable than others. To begin with, let’s note the refugee children and youth who experience incredible culture shock when they arrive in Canada. While the family must find housing and work, the children have to adapt to a school system in which they often do not know the language, let alone the values, rules and customs.

“Yes, let’s welcome people! With open arms! But be sure to give us the resources we need. Otherwise, we are not doing them any favours.”

Not all immigrants are refugees, but some would also benefit from support better adapted to their needs. However, the care relationship between culturally different groups can be very tricky to navigate, especially when the beliefs and values of the service providers in the host country conflict with those of the immigrant family. For example, there are reports of cases where a child’s mental health would benefit from some transition time before they start school, but parents refuse, fearing academic delay. Those consulted also see cases where the child would benefit from professional intervention, but as mental health is a very taboo subject in their culture, parents refuse.

C. Stigma and lack of mental health literacy persist

The stigma surrounding mental health and addiction issues is not seen only among people from “elsewhere.” In fact, there’s a noticeable lack of literacy on the subject among New Brunswickers – even in the Dieppe and Memramcook communities, where people are generally younger and better educated. The people consulted recounted anecdotes such as seniors hiding their depression from their families, parents downplaying their youngsters’ stress and anxiety, and young immigrants refusing services for fear of being reprimanded by their parents.

Community strengths and assets to promote mental health

The two RHAs, along with a host of community organizations, serve the community’s needs in addiction and mental health services. Sometimes these services are general (e.g., single-session therapy), sometimes targeted (e.g., LGBTQ2+ committee). They are available in person (e.g., the SESPC) or virtually (e.g., Bridge the gapp), and target both high-intensity (e.g., the mobile crisis unit) and lower-intensity (e.g., intensive day treatment) needs. A detailed list of assets can be found in the appendix.

A summary of potential solutions

Solutions proposed to improve access to AMHS include improving access to existing services, increasing human resources, promotion and awareness, and community support. A detailed list of potential solutions is presented in the appendix.

NEED 4**Healthy psychosocial development for children and youth**

The healthy psychosocial development of children and youth in the community is essential to the overall health of the population, today and tomorrow. Growing up in an environment conducive to their emotional, social and mental development, children and young people are better prepared to face life's challenges, build positive relationships and participate actively in society.

A. Access to daycare centres is difficult, creating inequity in access to other services

Consultations pointed to challenges accessing childcare services in Dieppe and Memramcook. On the one hand, young families are faced with limited numbers of available daycare spots. Early registration (sometimes even before birth) is therefore recommended, but this disadvantages some people, such as newcomers to the community. On the other hand, access to childcare services is limited by high costs, affecting socio-economically disadvantaged families, as well as families with a typical income.

“From the age of five, school is free and serves everyone, but before the age of five, all families experience differences, which is why it creates gaps.”

What's more, the people consulted explained the important role played by daycare centres in monitoring children's development. As experts in their field, daycare workers can often detect when a child might benefit from certain preventive and pre-intervention services. However, inequities are introduced when children do not all have the same access to services.

B. Some parents are poorly or inadequately equipped to support their children's healthy development

Some parents in the community are unable to meet their children's basic needs. In fact, 7% of students in grades 6 to 12 live in food poverty (NBHC SWES, 2023-2024), meaning they are often or always hungry at bedtime or when leaving for school because there isn't enough food at home. Consultations even raised cases in the community where children and youth don't even have an adequate sleeping space.

“He sleeps on the floor on sofa cushions. That actually happens! Today, and here, there are children who don't sleep on a mattress!”

Parents are sometimes poorly or inadequately equipped to meet their children's social and emotional needs, regardless of their socio-economic level. Two examples were frequently repeated during consultations. First, young people do not feel that their parents listen to them. One young person expressed the feeling that his parents only seek reassurance that things are going well, without really paying attention or being available to listen to him in case of real need. Second, people agree that the expectations placed on children and youth, whether explicit or implicit, are disproportionate. Criticism focused, in particular, on expectations linked to academic results, sports performance and (for young girls, especially) aesthetics.

“Parents perform and are very demanding of themselves, which has a huge impact on children. Being average is not OK.”

C. Children lack opportunities to develop essential skills

The people we consulted noted children and youth in the community have difficulty managing conflict. More specifically, it is reported that children now need adult help more often than before to resolve their conflicts and that more and more parents are “fighting the battles” of their youngsters.

The consultations also raised challenges related to the management of free time. In fact, it was reported that children are finding it harder to cope with boredom than before, and they sometimes appear to have lost the ability to play freely in the playground, as if they are running out of inspiration. Those consulted criticized the imbalance between time spent on structured activities, such as school and sports practices, compared to unstructured activities. When an adult or other responsible person is always present to direct and supervise their behaviour, children miss out on opportunities to fend for themselves and develop skills that will be essential later.

“Activities are always structured: there's always an adult present to manage, rule and referee.”

D. Social media has a negative impact on young people’s mental health

Healthy use of technology is a universal challenge of the age we live in. Social media, in particular, has significant negative consequences for young people’s mental health, which can include anxiety, depression and substance abuse, among other issues (PHAC, 2021). In the community, nearly half of students in grades 6 to 12 (42%) report spending three hours or more a day on social media (NBHC SWES, 2023-2024). Digital literacy is important in the face of this problem, yet parents and staff alike feel overwhelmed by the immensity of the task and the anticipated pace of its evolution.

E. The school curriculum is perceived as outdated, cumbersome, lacking flexibility and relying too heavily on assessment

Those consulted criticized the school system for not being up to the task of meeting the educational and social needs of today’s students. Firstly, the school curriculum was criticized for being outdated, cumbersome and lacking in flexibility. One participant felt this was the case because curriculum revision is normally entrusted to experts in the field: “They don’t want to take anything away, they want to add to it.” That said, the bottom line is this: students and teachers who participated in the consultations would like to see a curriculum that offers more educational pathways to postsecondary education, with greater emphasis on personal development, life/career planning, goal setting, community experiences and life skills development. In short, students need to be equipped to face the realities of today and tomorrow.

*“Some study programs are 25 years old.
The Internet didn’t even exist then.”*

A second criticism concerned learning assessment methods and the importance attached to them. In New Brunswick, student learning is first measured by classroom assessments, then by standardized provincial exams. Ideally, these assessments are designed to support learning. However, people easily slip into the “good/bad” dichotomy, both when comparing students and schools. Some individuals report that assessments, especially provincial exams, become a source of stress and feel that the school system should eliminate them.

Community strengths and assets for healthy child and youth development

While government bodies are looking into the accessibility of daycare services, programs like “Talk With Me” are aimed at early childhood development. Dedicated people work in schools to foster the intellectual and psychosocial development of children and young people. Services and resources are also available to parents through the AFPNB, for example. A detailed list of strengths and assets can be found in the appendix.

A summary of potential solutions

Proposed solutions to support the healthy development of children and youth include improving access to daycare by reducing or subsidizing costs, parenting education, earlier screening through academic registration from birth, reinstating school nurses, stricter measures on the use of technology, and strengthening partnerships between the District scolaire francophone sud and CAFi. A detailed list of potential solutions is presented in the appendix.

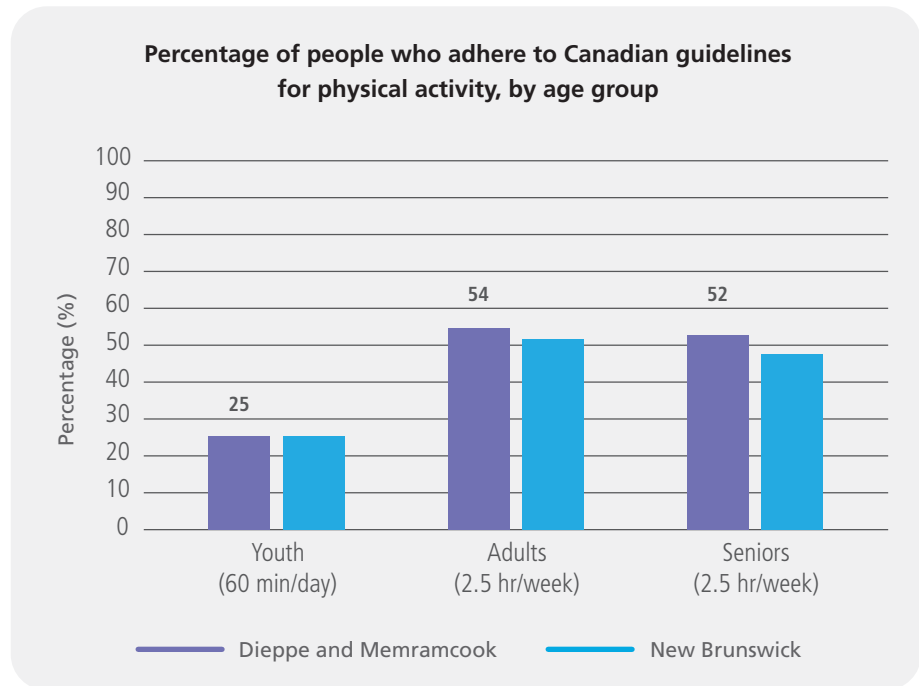


NEED 5

Recreational activities

A. There is a lack of variety in the range of (free) recreational activities for certain age groups

In Dieppe, there is a reported lack of community green spaces for the growing population. These spaces are important so that people of all ages can get together with friends. Young people, who have less autonomy when it comes to getting around, find that the distance that currently separates them from these places and various activities is an obstacle to their accessibility. One youth said: “If you don’t have a car, you can’t have fun.” The situation is all the more difficult for English-speaking young people, who often have to go to Moncton for their recreational activities. An in-depth study of recreational activity needs was recently carried out among young people (Viminio, 2024), but their main wish here was access to free recreational activities.



Source: NBHC, Student Wellness and Education Survey (2023-2024); Primary Health/Care Survey (2020).

In both Dieppe and Memramcook, the people consulted highlighted the lack of physical activity for all age groups. According to Canada’s 24-Hour Movement Guidelines, young people should accumulate at least 60 minutes a day of moderate-to-high-intensity physical activity, while adults and seniors should aim for at least 2.5 hours a week (ParticipACTION, 2024). Community statistics show that 25% of youth report adhering to the guideline, and over 50% of adults and seniors accumulate the prescribed amount of weekly activity (NBHC SWES 2023-2024; PHCS 2020).

In Memramcook, consultations revealed a lack of access and variety in the range of recreational activities available for certain age groups. For pre-schoolers, young parents lament the fact that programming is mostly offered during working hours and is therefore not very accessible. For school-age children, there’s a lack of variety in recreational activities available within the municipality. There is also too much focus on highly structured and supervised activities (linked to point 5.4.C.) and a lack of unstructured activities. Finally, adults and seniors report that certain environmental factors limit opportunities for physical activity. As this point is closely linked to the next, readers are referred to section 5.6.B. for a full explanation.

Community strengths and assets that encourage participation in recreational activities

Natural spaces such as parks and trails, as well as built spaces such as arenas and playgrounds, are available to get moving in the community. People can also join various clubs, groups, committees, associations and programs according to their interests. Some opportunities are open to all, while others have eligibility criteria. A detailed list can be found in the appendix.

A summary of potential solutions

Proposed solutions include promoting the benefits of recreational activities, promoting and maximizing currently available services and resources, and developing infrastructure. A detailed list of potential solutions is presented in the appendix.

NEED 6**Access to reliable transportation**

Reliable transportation is essential to a healthy community, as access to essential resources and services depends on it. The municipalities of Dieppe and Memramcook are both experiencing transportation-related challenges, but these challenges differ in the urban and rural settings. In both cases, the issues concern both intra- and inter-municipal travel.

A. Public transit is inefficient in Dieppe and non-existent in Memramcook

Those consulted raised concerns for those without the privilege of owning a vehicle. At-risk groups include seniors, immigrants, people in precarious socio-economic situations and young people. In Dieppe, the bus transit service is criticized for its lack of efficiency. Specifically, people report excessively long journeys and inconvenient transfers. In Memramcook, population density cannot support the presence of such a service, which greatly limits travel to amenities, community resources, workplaces and health services for those at risk. In short, the community remains generally dependent on the automobile.

B. Land-use planning does not encourage active transportation

Active transportation means using your own energy to get around, such as walking or cycling. Globally, the state of people's health and the environmental crisis are leading people to consider active transportation. In Dieppe, despite the presence of a pedestrian and cycling network, challenges to active transportation are reported due to a lack of continuity and cohesion of these networks. In other words, network sections are not always well connected to each other, and they don't necessarily have starting points and destinations that favour non-recreational travel. The issue is examined in depth in the "Plan de transport actif" (City of Dieppe, 2022). Memramcook has the same issues. However, with such a vast territory and few suitable infrastructures, active transportation is virtually impossible.

"I almost walk in the ditch for fear of getting hit."

Although resources exist to encourage public transit and active transportation in the community, those consulted raised the following challenges: lack of awareness of available services, lack of human resources to deliver the service properly, poorly adapted vehicles and incompatible time slots or points of service. So, even in a community with services, the most vulnerable people could ironically face challenges in finding a way to access essential services.

Strengths and assets that facilitate transportation for people in the community

Public transit and a few on-demand transportation services serve the community. Many organizations reimburse cab fares for their clients in need. Dieppe has some active transportation options. A detailed list can be found in the appendix.

A summary of potential solutions

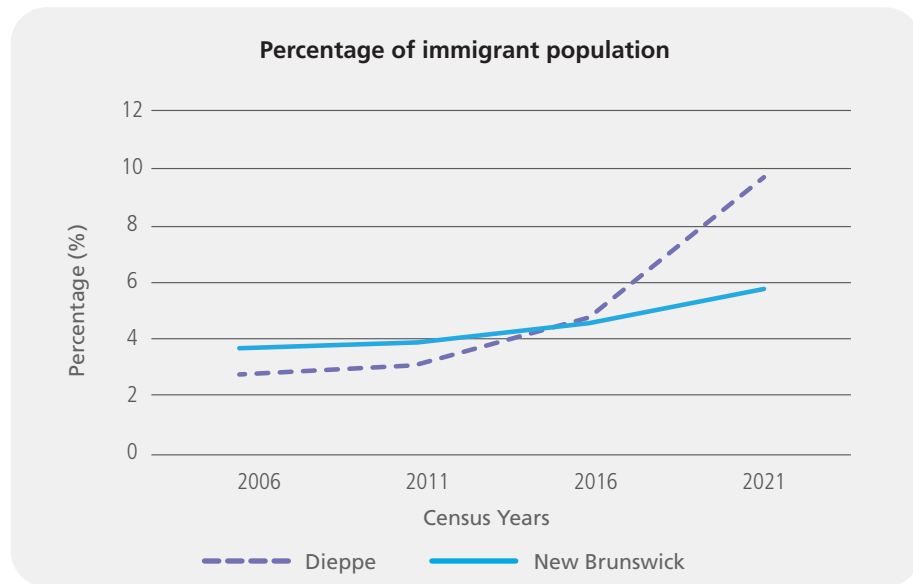
The solutions proposed to improve access to transportation focus mainly on expanding public transit options and subsidizing their cost for low-income people. Opportunities to partner with various organizations to maximize the use and utility of their vehicles were also identified. A detailed list of potential solutions is in the appendix.



NEED 7

Better support for immigrants

Over the past decade, Dieppe has undergone a dramatic transformation, largely due to its soaring immigrant population. According to the 2021 census, one in ten people in Dieppe was not born in Canada, and half of these people arrived between 2016 and 2021 (Statistics Canada, 2017; 2022). It's crucial to take an interest in this population and its specific needs, especially considering that projections only foresee a continued increase in the number of immigrants.



Source: Statistics Canada.

A. Transparency, support and welcome for immigrants are lacking

According to the consultations, the message communicated to potential immigrants during international recruitment does not necessarily reflect the conditions in which they are welcomed. There is a reported lack of transparency from employers regarding access to housing, recognition of prior learning, and the linguistic context of the community (challenges detailed in sections 5.2.B., 5.7.C., and 5.8.A., respectively). However, the success of international recruitment depends on being transparent with potential candidates to find a good arrangement for both employer and employee.

“Employers know this and excuse themselves by saying: “Otherwise, you wouldn’t come.”

Once the immigrant and their family have arrived, it's crucial that the employer and host community continue to provide support. Specifically, immigrants in the community need support in navigating systems and services, learning a new language, and finding housing and employment.

“There’s a preconception that the immigrant must integrate fully into the local culture, while their own culture is only for the home.”

If the province and communities are encouraging immigration, not only must the employer and the immigrant be prepared for change, but so must the people in the host community. Consultations raised ethnocentrism in the community, i.e., [translation] “a tendency to use the norms and values of one’s own society to evaluate other societies” (Larousse, 2024), as well as discrimination. Those consulted felt that the entire community would benefit from multicultural awareness and cultural competency development.

B. Immigrant students and families feel misunderstood and disengaged from the school system

Immigrants consulted lamented the homogeneity of the school system’s staff and the lack of adults sharing the experiences of young immigrants. Dieppe is currently experiencing a significant and rapid increase in its immigrant population (Statistics Canada, 2017; 2022), an increase possibly disproportionate to the needs or hiring capacity of the school system. This disparity contributes to a sense of disconnection for some immigrant families, who express the need to see their experiences and identities better represented within the education system. A review of the literature identifies three roles for immigrant staff: 1) the role of model for students from immigrant backgrounds; 2) a contributor to the academic success of students from immigrant backgrounds; and 3) the role of mediator in relations between the school and immigrant families (Niyubahwe et al., 2019). Finally, the lack of ethnocultural diversity is a major factor that hinders the academic success of immigrant students (CDPDJ, 2009).

“We live with two different cultural mentalities: one at home and one at school. It’s a challenge to uphold each and you can’t really pick one.”

There is also a reported lack of cultural competence within the school system. Those consulted on this topic felt that staff members are insufficiently trained to recognize and understand certain cultural behaviours or reflexes. One person consulted said that staff “never seem to question [themselves].” These challenges of cultural sensitivity sometimes lead to misunderstandings or conflicts between the immigrant family and the school or school system. Strong cultural competence is essential to avoid potential instances of discrimination, unfair discipline and microaggressions, as well as to promote the health and wellness of all students equitably.

C. Many immigrants struggle to find a job that meets their needs and expectations

One of the major challenges posed by immigration is the recognition of professional qualifications acquired abroad. To ensure public safety, 38 professions are regulated in New Brunswick. However, the processes involved in recognizing professional qualifications are often long and arduous for people trained elsewhere. For example, it can take between 12 and 24 months to obtain a licence to practise as a registered nurse. Immigrants with nursing training work as patient care attendants. For many, therefore, the challenges involved in recognition of professional qualifications mean jobs that pay less than they had anticipated, which creates other challenges (as discussed in section 5.2).

“I didn’t cross the ocean to get my food from the food bank.”

Moreover, the road to employability is often strewn with irony for immigrants. According to the consultations, people are struggling to get jobs locally, in a context of labour shortages, but Quebec employers are contacting them. In addition, local employers maintain “We’re hiring” ads, without having contacted immigrants who have applied. These examples show how “systemic racism is deeply rooted in Canadian society” (CHRC, 2024).

Without greater openness and support for immigrants, the community will face challenges in retaining its immigrant population, as well as significant economic and social costs.

A summary of our strengths and assets in welcoming immigrants

The community’s greatest asset in this respect is undoubtedly the Centre d’accueil et d’accompagnement francophone des immigrants du sud-est du Nouveau-Brunswick (CAFi), which helps with the integration of immigrants. A list of other resources can be found in the appendix.

A summary of potential solutions

Proposed solutions include increasing the number of human resources working to welcome immigrants, strengthening collaboration between welcoming agencies and community organizations, organizing inclusive community events and pairing local residents with newcomers. A detailed list of potential solutions is in the appendix.



NEED 8**A sense of belonging to one's community**

A sense of belonging to one's community represents an emotional and social attachment to one's local environment, reflecting a sense of connection, security and inclusion. It manifests as social engagement when group members share the same values, goals and experiences, and it promotes physical, mental and emotional health.

A. In Dieppe, we see a decline in service in French and people perceive a disengagement among citizens

The municipality of Dieppe has undergone major transformations in recent decades: from an economic boom to international immigration, each transition has shaped the local culture. Consultations revealed concerns about the rapid expansion of the city and the repercussions on the sense of belonging to the community.

On the one hand, Dieppe's rapid economic and demographic growth is seen as encouraging individualism, to the detriment of mutual support and community spirit. For example, one person who said she was "from old Dieppe" explained that she sees a disproportionate number of people arriving who she describes as "highly educated," but also "very busy" and "disengaged." This demographic bias is seen as contributing to changes in collective values. In addition, unlike in other large cities, the municipality's First Nations people have no gathering place to exchange with peers who share their culture. In short, the consultations suggested that people now live more anonymously in the municipality and help each other less than before.

"People come to Dieppe from all over, we no longer have a sense of belonging to the community."

On the other hand, the labour shortage adds complexity to an already delicate linguistic environment. For international recruits, the realities of linguistic duality are initially a surprise, then a barrier to employment. For Dieppe residents, it's important to be able to communicate in the language of their choice, but this is reportedly becoming increasingly difficult. For retailers, sometimes the workforce that meets linguistic needs is lacking. Since language is closely tied to the sense of belonging to one's community in the local context, it feels unsettling.

B. In Memramcook, the community is perceived as not very inclusive

In Memramcook, the community is driven by strong engagement and a real desire to participate and contribute. However, some residents feel that local clubs and groups are not sufficiently open to welcoming new people. This lack of openness creates a dynamic in which the same people are repeatedly called upon, for example to do volunteer work, which overloads them and exposes them to burnout. Moreover, internal conflicts persist within the community, limiting collaboration and discouraging newcomers. So it's crucial to create a more inclusive and accessible environment by reaching out to those who want to contribute and encourage collaboration beyond local rivalries. By diversifying participants and volunteers, Memramcook could not only lighten the load for those already active, but also strengthen social cohesion and enrich community life by welcoming new ideas and energies.

"It's not necessarily that they don't want to fit in, it may be that we don't invite them."

Community strengths and assets that contribute to its population's sense of belonging

Resources are available to help Dieppe residents learn a new language, and the Abbey-Landry school is an important asset that brings the people of Memramcook together. Further details can be found in the appendix.

A summary of potential solutions

The solutions proposed to strengthen the sense of belonging to one's community focus, for Dieppe, on access to language courses and the organization of community activities and events. This last point also applies to Memramcook, but with the distinction that ideally these activities and events should go hand in hand with new community facilities. A detailed list of potential solutions is in the appendix.

6. Recommendations

NEED 1

Access to health care services

Challenges	Recommendations	Involvement	PHP priorities
1.A. People have difficulty accessing health care services	1. Create an online appointment booking platform for clinics.	Department of Health	Access to PHC
1.B. People have difficulty navigating the health care system	2. Establish a health clinic for everyone in Memramcook	Vitalité Health Network, community partners	Access to PHC

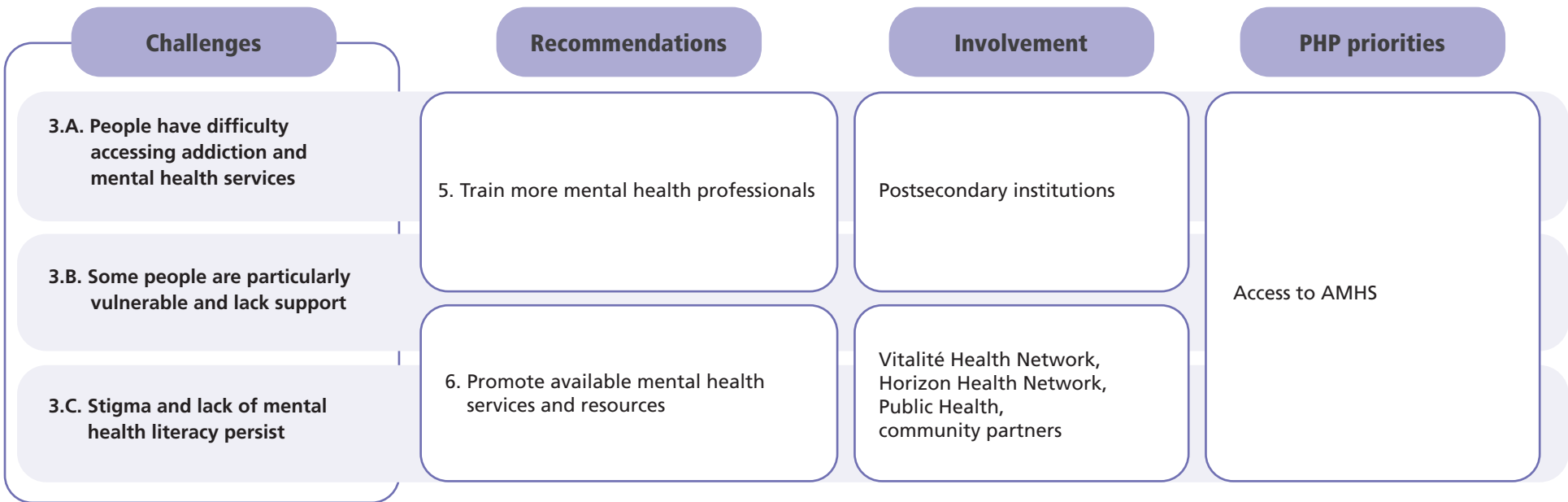
NEED 2

A living wage

Challenges	Recommendations	Involvement	PHP priorities
2.A. The high cost of living and inflation undermine people's wellness	3. Impose a firm limit on annual rent increases (as is done in NS)	New Brunswick Housing Corporation	N/A
2.B. The community lacks affordable housing and the homeless population is on the rise	4. Promote the development of affordable housing	Community partners	N/A

NEED 3

Access to addiction and mental health services



NEED 4

Healthy psychosocial development for children and youth

Challenges	Recommendations	Involvement	PHP priorities
4.A. Access to daycare centres is difficult, creating inequity in access to other services	7. Have alternative schools that offer more types of learning	Community partners	N/A
4.B. Some parents are poorly or inadequately equipped to support their children's healthy development			
4.C. Children lack opportunities to develop essential skills			
4.D. Social media has a negative impact on young people's mental health	8. Increase control of smartphones in the school environment		
4.E. The school curriculum is perceived as outdated, cumbersome, lacking flexibility and relying too heavily on assessment			



NEED 5

Recreational activities

Challenges	Recommendations	Involvement	PHP priorities
<p>5.A. There's a lack of variety in the range of (free) recreational activities available for certain age groups</p>	<p>9. Add suitable roadways</p> <p>10. Promote community spaces</p>	<p>Community partners</p>	<p>N/A</p>

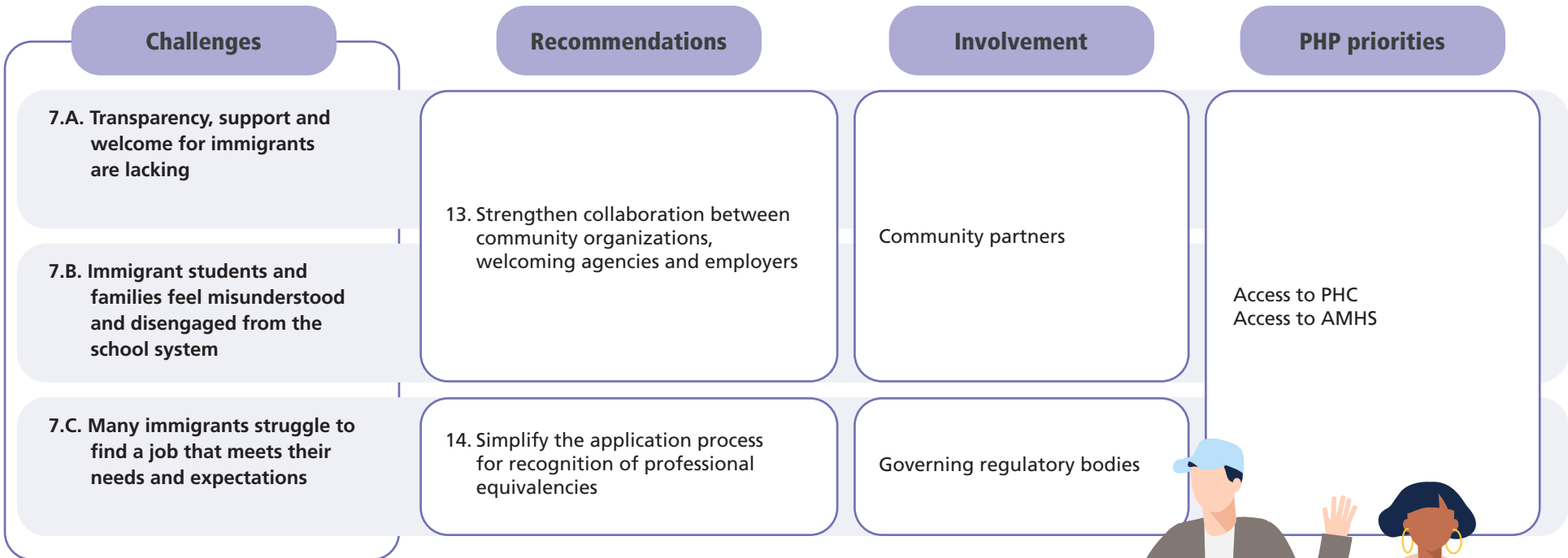
NEED 6

Access to reliable transportation

Challenges	Recommendations	Involvement	PHP priorities
<p>6.A. Public transit is inefficient in Dieppe and non-existent in Memramcook</p>	<p>11. Subsidize taxi services for people commuting to amenities from further away</p>	<p>Community partners</p>	<p>Support seniors to age in place</p>
<p>6.B. Land-use planning does not encourage active transportation</p>	<p>12. Make streets bike-friendly</p>		<p>N/A</p>

NEED 7

Better support for immigrants



NEED 8

A sense of belonging to one's community

Challenges	Recommendations	Involvement	PHP priorities
<p>8.A. In Dieppe, we see a decline in service in French and people perceive a disengagement among citizens</p>	<p>15. Organize activities and gatherings in both municipalities</p>	<p>Community partners</p>	<p>N/A</p>
<p>8.B. In Memramcook, the community is perceived as not very inclusive</p>	<p>16. Create a community centre in Memramcook</p>		<p>N/A</p>



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Appendices

Appendices 1 to 8 present all the needs, challenges, assets and potential solutions (brainstorming activity) identified in this CHNA.

Appendix 9 provides an overview of the needs and challenges identified in this CHNA.

Appendix 1. Access to health care services

Challenges	Assets	Potential solutions
<p>1.A.</p> <p>People have difficulty accessing health services</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Vitalité Health Network shifting focus • Patient flow: a priority for Vitalité Health Network • Employee champions • Local family health teams • NB Health Link • Maple/eVisitNB • Single Entry Point • Pharmaceutical care clinics pilot project • Proximity to two hospitals • Holistic care in the community • Relevant patient follow-up once in care • Tele-Care 811 <p>Dieppe</p> <ul style="list-style-type: none"> • Healthy Aging Clinic • Walk-in / Appointment-based clinics <p>Memramcook</p> <ul style="list-style-type: none"> • Medical clinic • Fondation Mélissa Et Ses Ami(e)s • Pharmacy • First responder firefighters 	<p>Recognize professional equivalencies:</p> <ul style="list-style-type: none"> • Simplify the recognition application process • Support immigrants with their applications • Pair foreign professionals with a local professional <p>Increase prevention:</p> <ul style="list-style-type: none"> • Invest more in preventive measures • Reinstate school nurse positions • Increase the number of dental hygienists visiting facilities • Increase the number of dentists working in hospitals <p>Increase services in Memramcook:</p> <ul style="list-style-type: none"> • Increase the range of health services offered by the clinic • Increase the health services available at the pharmacy • Establish a clinic available to all • Create a community centre with a health component • Increase the use of nurse practitioners in the community • Offer a phlebotomy service (e.g., assign this service to extra-mural, offer free premises to a private company, use the Handi-Bus to transport people to Dieppe) <p>Improve access for First Nations:</p> <ul style="list-style-type: none"> • Offer culturally appropriate resources and services • Offer a translation service, especially for serious cases • Create a cultural space in hospitals (art, music, books) • Have an Indigenous public health liaison officer <p>Other solutions:</p> <ul style="list-style-type: none"> • Invest more in health • Increase the income of health care professionals • Increase the income of civil servants • Adjust the health care system to meet current needs • Take the ego out of departments and health care ecosystems, build bridges, optimize and collaborate (not just talk about it) • Increase services offered by health clinics (e.g., offer after-hours services, serve infants and children in the evening, have an outpatient clinic attached to the emergency department and a health clinic in Memramcook)
<p>1.B.</p> <p>People have difficulty navigating the health care system</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • 211 • Public libraries • Patient flow: a priority at Vitalité Health Network • CODAC NB (Moncton) • Single Entry Point • Integrated Service Delivery (ISD) 	<p>Promote services:</p> <ul style="list-style-type: none"> • Promote available services and how to access them (e.g., information sessions for target groups, information kiosks, community resource fairs, post an infographic, create a podcast on health services) <p>Consult citizens:</p> <ul style="list-style-type: none"> • Identify barriers to navigating systems • Organize a public meeting with Network management <p>Address navigation barriers:</p> <ul style="list-style-type: none"> • Provide a “single” platform for directing users to resources • Provide an appointment booking platform for clinics • Provide mobile technical assistance to seniors • Provide an information and service centre for seniors • Create a community services coordinator position

Appendix 2. A living wage

Challenges	Assets	Potential solutions
<p>2.A.</p> <p>The high cost of living and inflation undermine people’s wellness</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Flash Food • Eat better, spend less • Too Good to Go <p>Dieppe</p> <ul style="list-style-type: none"> • United Way • Food Dépôt Alimentaire (Moncton) <p>Memramcook</p> <ul style="list-style-type: none"> • Cœurs chauds / Warm Hearts • Handi-Bus • Community garden • École Abbey-Landry helps families at Christmas • Eat Fresh • Semer dans la Vallée • Community greenhouse 	<p>Achieve better financial balance:</p> <ul style="list-style-type: none"> • Bring national control over the cost of living • Raise minimum wage • Increase income for seniors <p>Increase food choices in Memramcook:</p> <ul style="list-style-type: none"> • Open a grocery store or cooperative in Memramcook • Organize a local market in Memramcook <p>Maximize gardening opportunities:</p> <ul style="list-style-type: none"> • Cultivate community gardens • Transform curbsides into mini gardens • Plant apple trees in the community • Develop community food programs: • Organize community suppers and kitchens • Relearn how to eat and cook simply • Donate surplus food to those in need • Sell surplus food at low prices <p>Other solutions:</p> <ul style="list-style-type: none"> • Develop a food security policy • Provide education on financial literacy and planning • Provide more funding and creative collaboration to not-for-profit organizations serving the public • Promote and synchronize discount days for seniors • Organize a community barter market
<p>2.B.</p> <p>The community lacks affordable housing and the homeless population is on the rise</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Public housing and Rent Supplement • Shelters (Moncton) • Salvus Clinic (Moncton) • Youth Impact Jeunesse (Moncton) 	<p>Address the housing crisis:</p> <ul style="list-style-type: none"> • Create a committee to address the housing crisis, possibly with the help of grants, fundraising, etc. • Promote the development of affordable housing (co-op housing, prefabricated housing, cost-price rental, government subsidies, etc.) • Make housing available to vulnerable families • Eliminate double taxation for rental property owners • Impose a firm limit on annual rent increases (as is done in Nova Scotia) <p>Help the homeless:</p> <ul style="list-style-type: none"> • Set up a wet shelter (i.e., with alcohol tolerance) • Centralize group homes and shelters • Plan services with population growth in mind



Appendix 3. Access to AMHS

Challenges	Assets	Potential solutions
<p>3.A.</p> <p>People have difficulty accessing addiction and mental health services</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Friendly Calls • Canadian Mental Health Association • Integrated well-being centres for young people • Teachers who open their classrooms as a “safe space” • Addiction and Mental Health Services for Children and Youth • Hospice Southeast New Brunswick • Guidelines for assessing the capacity of minors • Mathieu m’informe • Atlantic Wellness • Bridge the gapp • Little social pressure to consume • Mobile crisis response services • Single-session therapies • Intensive Day Treatment • Social workers specializing in addiction, available to students <p>Memramcook</p> <ul style="list-style-type: none"> • Social Pediatric Centre • First responder firefighters 	<p>Promote resources more:</p> <ul style="list-style-type: none"> • PH initiatives and single-session therapy • Canadian Mental Health Association and Bridge the gapp <p>Collaborate:</p> <ul style="list-style-type: none"> • Take the ego out of departments and different health care ecosystems and build bridges, optimize and collaborate (not just talk about it) • Create a community services coordinator position • Create a community centre with a health component in Memramcook <p>Increase services offered:</p> <ul style="list-style-type: none"> • Create mental health centres • Offer a 24-hour mobile crisis service • Increase the number of mental health professionals • Increase free or funded mental health services • Offer a mental health clinic (where no one is turned away) <p>Increase the funding offered:</p> <ul style="list-style-type: none"> • To the Canadian Mental Health Association • To the Social Pediatric Centre • Close the remuneration gap between school-based mental health professionals and public health professionals <p>Foster connections and peer support:</p> <ul style="list-style-type: none"> • Create a mental health mentoring service • Create volunteer support groups • Reduce taboos and stereotypes in mental health <p>Other solutions:</p> <ul style="list-style-type: none"> • Eliminate barriers to accessing mental health care due to non-consent for minors • Create a mobile team associated with the nursing home that goes to people’s homes
<p>3.B.</p> <p>Some people are particularly vulnerable and lack support</p>	<p>In addition to the aforementioned assets:</p> <p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Alter Acadie NB • DSF-S committees and alliances • Employers offering intercultural skills training • DSF-S Policy 713 	<p>Increase services for vulnerable people:</p> <ul style="list-style-type: none"> • Make the mobile crisis service available 24 hours a day • Develop a men’s mental health program • Develop a tool for identifying vulnerable persons • Open an Indigenous friendship centre <p>Other solutions:</p> <ul style="list-style-type: none"> • Give immigrants a year to get used to the language(s) • Develop a grief strategy
<p>3.C.</p> <p>Stigma and lack of mental health literacy persist</p>	<p>In addition to the aforementioned assets:</p> <p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Reduction of stigma with the pandemic 	<p>Provide education:</p> <ul style="list-style-type: none"> • Teach about the difference between a psychological disorder and distress • Offer parenting courses and presentations to the public • Set up information booths <p>Raise awareness about mental health:</p> <ul style="list-style-type: none"> • Raise awareness in schools • Raise employer awareness about mental health issues

Appendix 4: Healthy psychosocial development for children and youth

Challenges	Assets	Potential solutions
<p>4.A.</p> <p>Access to daycare centres is difficult, creating inequity in access to other services</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Family Resource Centre • Famille et petite enfance francophone sud • Federal funding to support the creation of daycare spaces • Parle-moi (Talk With Me) • Centre éducatif les p'tits crayons • DEECD parent portal <p>Memramcook</p> <ul style="list-style-type: none"> • Social Pediatric Centre • École Abbey-Landry 	<p>Increase daycare spaces:</p> <ul style="list-style-type: none"> • Open an after-hours daycare centre for Vitalité Health Network employees • Open spaces for 0- to 5-year-olds at École Abbey-Landry (day) <p>Reduce daycare costs:</p> <ul style="list-style-type: none"> • Subsidize daycares more • Reduce the cost of daycare • Offer free daycare <p>Promote early intervention:</p> <ul style="list-style-type: none"> • Invest more in early childhood • Open spaces for 0- to 5-year-olds at École Abbey-Landry (day) • Provide identification and screening at neighbourhood activities for community children <p>Reduce the potential for inequity:</p> <ul style="list-style-type: none"> • Identify and take action with pregnant women to promote early intervention for all children • Start communication between services and parents earlier, with school enrolment from birth • Offer a ("real") inclusion service in schools
<p>4.B.</p> <p>Some parents are poorly or inadequately equipped to support their children's healthy development</p>	<p>In addition to the aforementioned assets:</p> <p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Public libraries • AFPNB newsletter 	<p>Enhance parenting skills:</p> <ul style="list-style-type: none"> • Offer parenting courses • Provide greater support for single-parent families • Educate parents on the healthy use of technology devices and social media <p>Improve communication with parents:</p> <ul style="list-style-type: none"> • Start communication between services and parents earlier, with school enrolment from birth • Establish a community services coordinator position to help connect people to services and resources <p>Other solutions:</p> <ul style="list-style-type: none"> • Reduce parental pressure
<p>4.C.</p> <p>Children lack opportunities to develop essential skills</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Family Resource Centre • Famille et petite enfance francophone sud • Public libraries • AFPNB newsletter 	<p>N/A</p>
<p>4.D.</p> <p>Social media has a negative impact on young people's mental health</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Mathieu m'informe • Stricter measures at École Mathieu-Martin 	<p>Provide education and coaching:</p> <ul style="list-style-type: none"> • Educate parents and young people about the healthy use of technology devices and social media • Reinstate school nurse positions <p>Control use:</p> <ul style="list-style-type: none"> • Create a law limiting the age of access to social media • Increase control of smartphones in schools

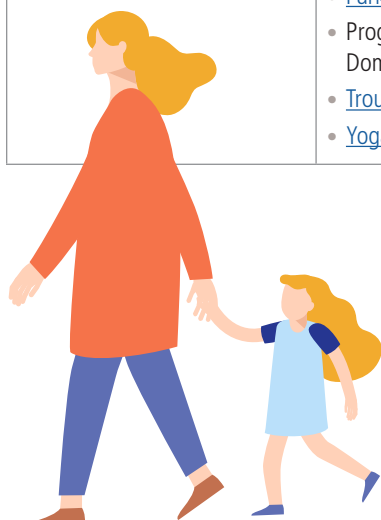
Appendix 4: Healthy psychosocial development for children and youth (cont.)

Challenges	Assets	Potential solutions
<p>4.E.</p> <p>The school curriculum is perceived as outdated, cumbersome, lacking flexibility and relying too heavily on assessment</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Outside classes • Parent committees • Employee champions • Pivot towards an educational and assessment approach based on competencies or projects, growing desire on the part of teachers and interest on the part of students • 10-year education plan • Curriculum review <p>Memramcook</p> <ul style="list-style-type: none"> • Parents' confidence in École Abbey-Landry 	<p>Revise the school curriculum:</p> <ul style="list-style-type: none"> • Include volunteer work • Include cooking • Include peer mentoring • Include community experiences • Include more meaningful experiences for students • Teach healthy eating as part of a compulsory course • Eliminate components less relevant to the current context <p>Restructure the educational approach:</p> <ul style="list-style-type: none"> • Stop provincial exams • <i>Value and listen to student voices</i> • <i>Offer placements to high school students</i> • Focus on developing critical thinking skills • Focus on developing curiosity • Focus on developing mutual support • Focus on accountability towards others • Focus on environmental responsibility • <i>Make school more fun and offer more field trips</i> • <i>Offer more educational pathways to postsecondary education</i> • Create forest schools <p>Develop life skills:</p> <ul style="list-style-type: none"> • <i>Foster personal development</i> • <i>Develop goal-setting skills</i> • <i>Develop life planning skills</i> • <i>Develop career planning skills</i> • <i>Develop workload management skills</i> <p>Promote volunteering:</p> <ul style="list-style-type: none"> • Instill the value of helping each other among students through community volunteering • Require a minimum number of volunteer hours for high school graduation <p>Provide alternative learning pathways:</p> <ul style="list-style-type: none"> • Offer more types of learning at alternative schools • Maximize the opportunities offered by Place aux compétences • Continue to work with community organizations
<p>Other challenges:</p> <p>Resources and infrastructure</p>	<p>N/A</p>	<p>Address the lack of space in schools:</p> <ul style="list-style-type: none"> • Keep meeting spaces open for crisis situations • Take demographic projections into account when planning renovations and new buildings • Develop partnerships with neighbouring facilities to offer certain courses

Note: Italics indicate suggestions from students.

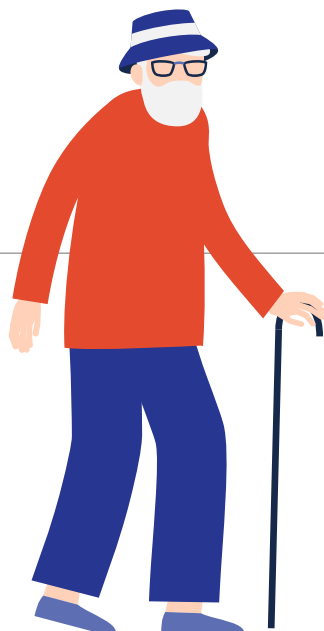
Appendix 5: Recreational activities

Challenges	Assets	Potential solutions
<p>5.A.</p> <p>There's a lack of variety in the range of free recreational activities for certain age groups</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Public libraries • Sports clubs and associations • Funding from the Department of Tourism, Heritage and Culture • Activity ideas shared on social networks • P.R.O. Jeunesse (PRO Kids) • Interscholar sports <p>Dieppe</p> <ul style="list-style-type: none"> • Club d'âge d'or • 55+ Corner • Comité des aînés de Dieppe • Youth House • Active Tuesday • Parks, Trails and Sports Fields • Place 1604 • Boys & Girls Club (BGC Dieppe) <p>Memramcook</p> <ul style="list-style-type: none"> • Atelier l'artisan • Belle nature • Bénévolat Memramcook Volunteering • Knights of Columbus • Walking club • Clubs d'âge d'or • Dames d'Acadie • Danse en l'air • Availability of École Abbey-Landry for rental • General registration • Kinfitt • Monument-Lefebvre • Parks, Trails and Sports Fields • Program of activities at Foyer le Domaine • Troupe du Monument • Yoga 	<p>Encourage participation in recreational activities:</p> <ul style="list-style-type: none"> • Create a committee to identify people's needs and interests in terms of recreational activities at different ages • Improve English-language programming and resources • Promote the Boys & Girls Club and its various activities more • Increase free cultural and artistic programming with a focus on fun <p>Add outdoor infrastructure in Memramcook:</p> <ul style="list-style-type: none"> • Widen roadways • Develop more walking trails in Memramcook • Develop a cycling network to promote active transportation • Convert golf course into cross-country ski trails in winter <p>Build a sports facility in Memramcook:</p> <ul style="list-style-type: none"> • Open a public swimming pool • Build a community centre • Build a training gym • Equip the Abbey-Landry school with a regulation gymnasium <p>Promote available resources:</p> <ul style="list-style-type: none"> • Promote available community spaces • Promote the Boys & Girls Club and its various activities more • Promote the recreational activities and resources available • Use existing sports infrastructures and facilities to their full potential <p>Promote physical activity:</p> <ul style="list-style-type: none"> • Promote daily physical activity for all ages • Raise awareness about the consequences of a sedentary lifestyle at all ages • Share ideas for free physical activities for all ages that do not require any infrastructure • Increase programming of free physical activities with an emphasis on fun • Support all sports, not just those played in arenas <p>Reduce barriers to physical activity:</p> <ul style="list-style-type: none"> • Identify barriers to physical activity at different ages • Create more public green spaces • Improve access to parks and play spaces for children • Increase support for sports and leisure organizations • Support all sports, not just the arenas • Provide free access to the Abbey-Landry school gymnasium on weekends (Open gym) • Offer parents opportunities to get active during their children's sports practices




Appendix 6: Access to reliable transportation

Challenges	Assets	Potential solutions
<p>6.A.</p> <p>Public transit is inefficient in Dieppe and non-existent in Memramcook</p>	<p>Dieppe au Memramcook</p> <ul style="list-style-type: none"> • Services that pay for the taxi • Dieppe • Blaise Transit • CODIAC Transpo • More people are using public transit <p>Memramcook</p> <ul style="list-style-type: none"> • Eco Vision bus • Handi-Bus • Fondation Mélissa Et Ses Ami(E)s • Urban/Rural Rides 	<p>Improve public transit in Dieppe:</p> <ul style="list-style-type: none"> • Develop informed urban planning of transportation needs • Add Codiac Transpo routes • Develop a tramway system • Use school buses for students’ after-school transportation <p>Improve Memramcook’s transportation system:</p> <ul style="list-style-type: none"> • Create a taxi service • Create a public transit service • Provide a bus that accommodates medical travel • Make Eco Vision or Handi-Bus available for rental (e.g., for seniors’ outings) <p>Promote mutual support in transportation:</p> <ul style="list-style-type: none"> • Recruit new volunteers for Urban/Rural Rides with Bénévolat Memramcook Volunteering • Compensate Urban/Rural Rides volunteers • Create carpool groups and stations <p>Subsidize transportation:</p> <ul style="list-style-type: none"> • Subsidize taxi services for people in remote areas for going to hospitals, clinics, food banks, etc. • Offer a tax bonus to low-income earners who use public transit • Offer free public transit to low-income earners <p>Reduce the need for seniors to travel:</p> <ul style="list-style-type: none"> • Bring services to seniors rather than the other way around • Create a mobile team associated with the nursing home that goes to people’s homes <p>Other solutions:</p> <ul style="list-style-type: none"> • Open a grocery store in Memramcook
<p>6.B.</p> <p>Land-use planning does not encourage active transportation</p>	<p>Dieppe</p> <ul style="list-style-type: none"> • Plan de Transport actif 	<p>In Dieppe:</p> <ul style="list-style-type: none"> • Develop informed urban planning of active transportation needs in Dieppe • Plan new streets in Dieppe with greenery and bike paths to get to work • Create more bike paths in Dieppe to promote safe active transportation • Connect Dieppe’s various neighbourhoods to the cycling network • Make existing streets bike-friendly <p>In Memramcook:</p> <ul style="list-style-type: none"> • Widen Memramcook’s roadways • Develop walking trails in Memramcook • Develop a cycling network to promote active transportation



Appendix 7: Better support for immigrants

Challenges	Assets	Potential solutions
<p>7.A. Transparency, support and welcome for immigrants are lacking</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Public libraries • CAFi • Newcomers' Guide • MAGMA (Moncton) • Working NB (Moncton) <p>Memramcook</p> <ul style="list-style-type: none"> • Bénévolat Memramcook Volunteering • New resident kit 	<p>Improve international recruitment processes:</p> <ul style="list-style-type: none"> • Provide greater transparency in the messages conveyed by employers during the recruitment process • Recruit immigrants whose skills and preferences (linguistic, among others) fit well with the community • Educate employers, employees and the general public about diversity, inclusion and cultural sensitivity <p>Provide a better welcome for immigrants:</p> <ul style="list-style-type: none"> • Create an immigrant welcoming committee • Increase the number of staff working to welcome immigrants • Strengthen collaboration between host agencies and community organizations • Organize introductory evenings for various organizations • Offer a free lodging program in Memramcook <p>Promote inclusion and sharing between cultures:</p> <ul style="list-style-type: none"> • Inform immigrants about their host culture • Pair immigrants with Canadian citizens • Organize “living libraries” • Organize experience sharing evenings with immigrants
<p>7.B. Immigrant students and families feel misunderstood and disengaged from the school system</p>	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • Training on intercultural skills 	<p>Develop cultural skills:</p> <ul style="list-style-type: none"> • Offer training on cultural competency • Develop partnerships between school districts, their schools and CAFi and MAGMA • Post education jobs on LinkedIn
<p>7.C. Many immigrants struggle to find a job that meets needs and expectations</p> 	<p>Dieppe and Memramcook</p> <ul style="list-style-type: none"> • CAFi • Immigrant skills • Employers designated for international recruitment • Immigrant resilience 	<p>Help immigrants with their job search:</p> <ul style="list-style-type: none"> • Recruit immigrants whose skills and preferences (e.g., language) are a good match for the community • Offer free courses in both official languages • Organize a francophone job fair • Educate employers, employees and the general public about diversity, inclusion and cultural sensitivity • Identify and address the barriers immigrants face when applying to RHAs • Offer tax relief to those who employ immigrants <p>Promote the recognition of qualifications:</p> <ul style="list-style-type: none"> • Provide greater transparency in the messages conveyed by employers during the recruitment process • Improve and simplify the application process for recognition of professional qualifications • Support immigrants with their applications for recognition of professional qualifications • Match immigrants with local professionals in their field of expertise who can support them <p>Offer financial support to immigrants:</p> <ul style="list-style-type: none"> • Encourage micro-loans for immigrant entrepreneurs • Pay immigrants who are required to take refresher courses

Appendix 8: A sense of belonging to one's community

Challenges	Assets	Potential solutions
<p>8.A.</p> <p>In Dieppe, we see a decline in service in French and people perceive a disengagement among citizens</p>	<p>Dieppe</p> <ul style="list-style-type: none"> • CAFi • Language learning centre • Those who demand service in French keep it alive • Francophone immigration • Language Policy 	<p>Organize community activities:</p> <ul style="list-style-type: none"> • Offer a wider variety of activities • Connect people through activities that interest them • Organize a day each month where people can try out new activities in the community • Offer information sessions involving young people, police officers, firefighters, teachers and health care professionals • Organize neighbourhood parties • Promote French-language services: • Offer more courses and training to learn French • Increase francophone immigration targets to maintain demographic weight • Promote bilingualism among English-speaking graduates
<p>8.B.</p> <p>In Memramcook, the community is perceived as not very inclusive</p>	<p>Memramcook</p> <ul style="list-style-type: none"> • Bénévolat Memramcook Volunteering • The École Abbey-Landry is great for bringing the community together • Société culturelle de Memramcook • New resident kit 	<p>Promote inclusion:</p> <ul style="list-style-type: none"> • Sponsor immigrants and newcomers • Offer educational sessions on diversity and inclusion <p>Encourage mutual support:</p> <ul style="list-style-type: none"> • Raise awareness among the population to look out for their neighbours • Develop a service exchange project among citizens using the Bénévolat Memramcook Volunteering platform <p>Promote inclusive gatherings:</p> <ul style="list-style-type: none"> • Provide a community space where everyone feels welcome • Build a community centre with a program of activities that brings people together <p>Organize community activities:</p> <ul style="list-style-type: none"> • Potluck • Community cafés • Summer concerts • A day each month where people can try a new community activity for free
<p>Other challenges :</p> <p>Environnement</p>	<p>N/A</p>	<p>Adopt more sustainable urban planning:</p> <ul style="list-style-type: none"> • Improve leadership in urban planning • Preserve and plan more green spaces • Deploy a zero-carbon development project in Dieppe • Ban large chains downtown, as is done in Sackville

Appendix 9: Overview of needs and challenges identified

Need 1: Access to health care services

- 1.A. People have difficulty accessing health services
- 1.B. People have difficulty navigating the health care system

Need 2: A living wage

- 2.A. The high cost of living and inflation undermine people's wellness
- 2.B. The community lacks affordable housing and the homeless population is on the rise

Need 3: Access to addiction and mental health services

- 3.A. People have difficulty accessing addiction and mental health services
- 3.B. Some people are particularly vulnerable and lack support
- 3.C. Stigma and lack of mental health literacy persist

Need 4: Healthy psychosocial development for children and youth

- 4.A. Access to daycare centres is difficult, creating inequity in access to other services
- 4.B. Some parents are poorly or inadequately equipped to support their children's healthy development
- 4.C. Children lack opportunities to develop essential skills
- 4.D. Social media has a negative impact on young people's mental health
- 4.E. The school curriculum is perceived as outdated, cumbersome, lacking flexibility and relying too heavily on assessment

Need 5: Recreational activities

- 5.A. There's a lack of variety in the range of free recreational activities for certain age groups

Need 6: Access to reliable transportation

- 6.A. Public transit is inefficient in Dieppe and non-existent in Memramcook
- 6.B. Land-use planning does not encourage active transportation

Need 7: Better support for immigrants

- 7.A. Transparency, support and welcome for immigrants are lacking
- 7.B. Immigrant students and families feel misunderstood and disengaged from the school system
- 7.C. Many immigrants struggle to find a job that meets their needs and expectations

Need 8: A sense of belonging to one's community

- 8.A. In Dieppe, we see a decline in service in French and people perceive a disengagement among citizens
- 8.B. In Memramcook, the community is perceived as not very inclusive



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