

Vaping Reference Guide

TEACHER'S GUIDE ON VAPING
PREPARED BY PUBLIC HEALTH NURSES
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Preamble

Although the decline in cigarette use among Canadian teens continues, the emergence of electronic cigarette use needs to be monitored. Studies lead us to believe that in addition to adverse effects on health, the use of electronic cigarettes might serve as a gateway to nicotine addiction and tobacco use. Therefore, it is important to look carefully at the trends that are emerging with regard to the use of the electronic cigarette.

The feeling of belonging at school, positive relationships with caring adults within and outside the family unit, the solidarity of classmates and safety at school and in the community may improve the ability of a person to assume their daily responsibilities and reduce the potential difficulties that result in substance abuse.

As the Comprehensive School Health Approach (**see appendix 1**) indicates, schools can directly influence student health and behaviour. This approach fosters healthy lifestyle choices and student health and well-being. As development theorists have recognized for a long time, the best parents, educators and societies are those that teach children to control negative behaviours, be caring toward others, develop problem-solving skills, and understand the reasons for following the rules. (**See Appendix 2 for resources for parents.**)

The following document, which aims to facilitate teaching in the classroom, offers additional information which completes the content of the PowerPoint presentation on vaping created by the Public Health nurses.

The information presented in this guide will help you better understand the problem and thus support school-aged children in making healthy, informed choices.

<https://www.canada.ca/en/public-health/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/2018-preventing-problematic-substance-use-youth.html>

<http://canadiensensante.gc.ca/publications/science-research-sciences-recherches/health-behaviour-children-canada-2015-comportements-sante-jeunes/alt/health-behaviour-children-canada-2015-comportements-sante-jeunes-eng.pdf>

<https://www.ccsa.ca/sites/default/files/2019-04/CCSA-Child-Adolescent-Substance-Use-Disorders-Report-2014-en.pdf>

<https://www.heartandstroke.ca/-/media/pdf-files/position-statements/ecigarettesincanada.ashx?rev=4bea8e80452e418195d4d726e5f8547d&hash=C8388925B2D415D78AB62924E755DC36>

Health Canada warns

Health Canada warns of potential risk of pulmonary illness associated with vaping products

[http://healthy Canad ians.gc.ca/recall-alert-rappel-avis/hc-sc/2019/70919a-eng.php](http://healthy Canadians.gc.ca/recall-alert-rappel-avis/hc-sc/2019/70919a-eng.php)

Information update : October 10, 2019

Health Canada is advising Canadians who use vaping products to monitor themselves for symptoms of pulmonary illness (e.g., cough, shortness of breath, chest pain) and to seek medical attention promptly if they have concerns about their health.

In the wake of the recent cases of severe pulmonary illnesses and a number of deaths reportedly linked to the use of vaping products in the [United States](#), Health Canada and the Public Health Agency of Canada provided national guidance to the provinces and territories on identifying cases of severe pulmonary illness related to vaping or e-cigarette use in Canada.

The Public Health Agency of Canada alerted provincial and territorial public health officials and asked them to report probable and confirmed cases in their jurisdictions. The Province of Quebec has notified the Public Health Agency of Canada of [a confirmed case of severe pulmonary illness](#) related to vaping products. This is the first confirmed case in Canada. This follows the report out of the Middlesex-London Health Unit in Ontario of another possible case. At this time, the Middlesex-London incident is not considered confirmed as it is still under investigation and has not been officially reported to the Public Health Agency of Canada by the Province of Ontario.

Electronic cigarette under surveillance in New Brunswick (September 23, 2019)

The electronic cigarette is in the sights of public health authorities in New Brunswick. They asked the province's doctors to report any cases of lung disease that they suspect are related to vaping. This has alarmed health authorities, and a fresh wave a health warnings is being issued related to vaping.

<https://atlantic.ctvnews.ca/concern-grows-in-new-brunswick-over-danger-of-vaping-products-1.4619277>

Please note that the information in this document and in the PowerPoint presentation may change based on New Brunswick and Canadian surveys and reports data.

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Choose the right path for your health



It is recommended to start the presentation by assessing the knowledge and viewpoints of students by asking open questions, such as:

“Why do some young people start vaping?”

“What is attractive about it to them?”

Reasons young people vape

It has been consistently observed in recent studies that youth are most likely to cite reasons associated with friends and social influences or flavours when explaining why they vape. For example, research commissioned by Health Canada found that the top reasons cited for vaping initiation among Canadians aged 13 to 19 were:

- Friends (58%);
- Flavours (37%);
- “Vaping looking fun and exciting” (22%); and
- Being offered a vape (21%).

A public opinion research study commissioned by Health Canada found that among youth who had ever tried a vaping product, “because e-cigarettes are cool” was the second most cited reason for trying (37%). This same response ranked sixth for young adults and seventh for adults 25 years and older.

Data on American youth recently presented to Health Canada suggest a preference for small-sized, pod-based products (such as JUUL) over other vaping products. The top three explanations for this being popularity among friends, ease of use and better flavour/taste.

<https://www.canada.ca/content/dam/hc-sc/documents/programs/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures-eng.pdf>

Module 1

What is an e-cigarette?



Most vaping devices use electrical power from a battery to heat a liquid solution. The heat causes the solution to become vaporized. The vapour then condenses into an aerosol, which is breathed in by the user through the mouthpiece.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>

For more information on how e-cigarettes work, visit Health Canada’s web page [“Vaping: The Mechanics \(infographic\).”](#)



In vaping liquids, nicotine and/or flavouring ingredients are dissolved in a liquid mixture. This mixture is typically made up of propylene glycol and/or glycerol (vegetable glycerin) and other chemicals. Flavouring ingredients include chemicals and blends of chemicals used to make different flavours.

The number of chemical ingredients used in vaping liquids varies. Between 2017-2019, researchers at Health Canada detected an average of 22 chemicals and roughly nine flavouring chemicals in Canadian vaping products.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>



The vaping process needs the liquid to be heated. This can create new chemicals, such as formaldehydes (colourless gas found in paints, detergents and glues). Some contaminants (e.g. heavy metals such as nickel, tin, aluminium) might also get into the vaping products and then into the vapour.

The amount of substances (including nicotine) a person can be exposed to by vaping is affected by the:

- battery power;
- type of vaping device;
- settings on the vaping device;
- combination of internal components;
- type of vaping liquid and amount of nicotine;
- user behaviour patterns;
- user’s experience with vaping.

It has been shown that using vaping products with higher power and temperature settings can produce more chemicals.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>
<https://www.cdc.gov/tobacco/infographics/youth/pdfs/e-cigarettes-usb-flash-508.pdf>

Popcorn lung

There is a concern that people who vape might get ‘popcorn lung’ from being exposed to diacetyl. Diacetyl is a flavouring chemical used to give butter-like and other flavours to food products, as well as vaping products. When inhaled, diacetyl can lead to this chronic disease (also known as bronchiolitis obliterans), which damages the small airways in the lung. This disease was discovered in popcorn factory workers. Although diacetyl is already commonly used in vaping products, measures have been taken to reduce its use.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>

Nicotine poisoning

Vaping liquid containing nicotine is poisonous, particularly to young children. Even in small amounts, vaping liquid containing nicotine can be very harmful if:

- swallowed;
- absorbed through the skin.

There have been fatalities as well as non-fatal nicotine poisoning caused by children swallowing vaping liquid.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>

Nicotine Salts



Nicotine salt formulations are a relatively new innovation. Nicotine is combined with an organic acid to create a formulation that cause less irritation in the throat than regular e-liquid. Users can vape higher concentrations of nicotine and consume less e-liquid in the process, achieving high nicotine blood concentrations.

Nicotine salts are used in a number of the advanced pod-based systems that appear to be popular among youth. However, nicotine salts are not unique to these systems and can also be purchased for use in refillable, open vaping systems.

The emergence of new vaping products that deliver higher nicotine doses than other available products increases the risks of nicotine exposure, including the risk of nicotine dependence, particularly among young non-smokers.

<https://www.canada.ca/content/dam/hc-sc/documents/programs/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures-eng.pdf>

Cannabis



Cannabis oils or other extracts with concentrated levels of tetrahydrocannabinol (THC), such as hash oil, can be vaporized using an e-cigarette or other vaping device or mixed with dried cannabis and smoked. People can also consume dried cannabis in a cartridge with an e-cigarette device.

Vaping concentrates can expose people to higher levels of THC, the chemical ingredient of cannabis, that most affects the brain.

When cannabis is vaped it does not produce the tell-tale smell of smoking cannabis through a joint, blunt (cigar formed of tobacco papers rolled around the cannabis) or pipe. Teens and young adults can consume cannabis more discreetly using a vaporizer than with a joint, blunt, pipe, or e-cigarette using dried cannabis.

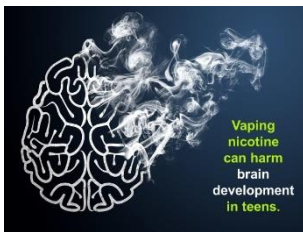
https://www.drugfreekidscanada.org/wp-content/uploads/pdf/Cannabis-Talk-Kit_EN.pdf

Some people use the e-cigarettes to inhale active ingredients other than nicotine, including tetrahydrocannabinol (THC), hashish oils, amphetamines, and synthetic cannabinoids.

<https://www.merckmanuals.com/en-ca/professional/special-subjects/illicit-drugs-and-intoxicants/vaping>

Module 2

Harmful Effects of Nicotine



Kids and teens are especially susceptible to the harmful effects of nicotine because brain development continues throughout adolescence and into early adulthood.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>

Vaping nicotine can interfere with healthy brain development until the mid-20s.

<https://www.canada.ca/en/services/health/publications/healthy-living/talking-teen-vaping-tip-sheet-parents.html>



As a person's brain develops, the executive functions of the frontal lobes (i.e., the ability to plan and organize activities) can progressively exercise greater control over emotions. This transition is at the foundation of cognitive behaviour control and can be disrupted by psychological trauma and drug abuse.

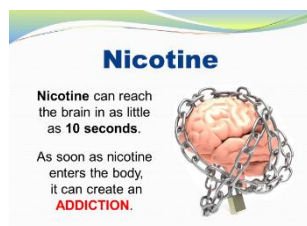
Nicotine can affect memory and concentration and is known to alter teen brain development.

Exposure to nicotine during adolescence may cause reduced impulse control as well as cognitive (learning) and behavioural (mood) problems.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/Quick-Facts-on-the-Risks-of-E-cigarettes-for-Kids-Teens-and-Young-Adults.html

Nicotine



Using cigarettes and other forms of tobacco, such as e-cigarettes, can create a dependency.

After inhalation, the nicotine can reach the brain in as little as 10 seconds.

When young people introduce nicotine into their body, they may:

- cough;
- get dizzy;
- have a dry, irritated throat;
- be nauseous;
- feel weak;
- get headaches.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/effects-smoking/smoking-your-body/nicotine-addiction.html>

Addiction



The use of vaping products that contain nicotine could:

- lead to dependence;
- cause nicotine addiction among users who would not have started using nicotine otherwise.

Children and youth are especially susceptible to the harmful effects of nicotine, including addiction. They may become dependent on nicotine with lower levels of exposure than adults.

Nicotine exposure could potentially predispose youth to addiction to other drugs.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>

How to describe addiction

Addiction means that a person cannot control their use of a substance, i.e., they use it despite harmful consequences. Nicotine causes addiction and physical dependence. It may cause you to temporarily feel good or energized, and it stimulates the pleasure centres of the brain. It also causes the release of natural chemicals in your brain, such as dopamine. This creates a temporary feeling of pleasure that makes you feel more alert and calm.

Over time, your body builds a tolerance to some of the effects of nicotine. You must therefore continue to use it to make the effects last. When you go without tobacco for more than a few hours, you may experience withdrawal symptoms. Many people continue to use it to avoid feeling this way.

Withdrawal symptoms may include:

- dizziness and shakiness;
- headaches;
- anxiety and irritability;
- nervousness and restlessness;
- difficulty concentrating and sleeping;
- increased appetite;
- slight depression.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/effects-smoking/smoking-your-body/nicotine-addiction.html>

Module 3

History and Marketing



In the United States, after a cigarette making machine was invented in the 1880s, the tobacco industry began to grow, and the number of smokers began to increase. Many companies started using strategies to convince people to smoke. Many of these companies still exist today.

Smoking rates continued to climb (in the United States) until 1964, the year in which a published report demonstrated the harmful effects of smoking. After this report was released, smoking rates began to decline. The tobacco industry's manipulation was exposed and accurate information from reliable sources was finally available to the public.

<https://med.stanford.edu/tobaccoprevention toolkit/E-Cigs.html>

History in Canada

- **1963** – Federal Health Minister Judy LaMarsh declares that smoking is a contributory cause of lung cancer and may also be associated with chronic bronchitis and coronary heart disease.
- **1963** – Canadian Medical Association President urges doctors to stop cigarette smoking, at least during professional duties.
- **1964** – US Surgeon General's Report concludes that cigarette smoking is a cause of lung and laryngeal cancer in men, a probable cause of lung cancer in women, and the most important cause of chronic bronchitis.
- **1969** – CBC television stops accepting tobacco advertising.
- **1969** – House of Commons Standing Committee on Health, Welfare and Social Affairs recommends that tobacco advertising be banned and that many other tobacco-control measures be adopted.
- **1977** – National Non-Smoking Week is launched. (This is now an annual event held in Canada in January.)
- **1986** – US Surgeon General concludes that second-hand smoke causes disease, including lung cancer, in otherwise healthy non-smokers.
- **1988** – US Surgeon General concludes that the pharmacologic and behavioural processes that determine tobacco addiction are similar to those that determine heroin and cocaine addiction.
- **1988** – WHO organizes first World No Tobacco Day. (This day is now celebrated on May 31 every year.)
- **1988** – The federal *Tobacco Products Control Act* is adopted to ban tobacco advertising.
- **1988** – The Calgary Winter Olympics becomes the first smoke-free Olympics.

- **1993** – The federal *Tobacco Sales to Young Persons Act* is adopted to increase the minimum age of sales of tobacco to minors from age 16 to age 18. In some territories and provinces, the minimum age is 19.
- **1994** – The *Tobacco Products Control Regulations* (federal legislation) is amended to require black and white health warnings covering 35% of the front and back of tobacco product packaging. This is a world first.
- **1997** – The *Tobacco Act* (federal legislation) is adopted, implementing strong restrictions on tobacco advertising and promotion, to replace the *Tobacco Products Control Act*.
- **2003** – The federal ban, under the *Tobacco Act*, preventing tobacco manufacturers from sponsoring sports and arts events comes into effect.
- **2004** – Manitoba, New Brunswick, Northwest Territories and Nunavut become the first provinces/territories to adopt legislation making all restaurants and bars 100% smoke-free. (All provinces and territories have now done so.)
- **2007** – The Supreme Court of Canada unanimously upholds federal advertising restrictions and the sponsorship ban under the *Tobacco Act*, as well as federal regulations on warning images covering 50% of tobacco product packages.
- **2008** – Imperial Tobacco Canada Ltd. and Rothmans, Benson & Hedges Inc. plead guilty to illegal tobacco contraband for actions in the early 1990s. JTI-Macdonald would do the same in 2010. Fines and civil payments total \$1.7 billion.
- **2009** – Parliament adopts Bill C-32 to ban flavoured cigarettes and little cigars (effective July 5, 2010) and to ban tobacco advertising in magazines, newspapers and other publications.
- **2012** – New federal regulations come into effect increasing the size of health warnings to 75% of the front and back of cigarette packages and including a toll-free quitline number and website address in the warnings.

<https://www.cancer.ca/en/about-us/for-media/media-releases/national/2013/war-on-tobacco-background-highlights/?region=qc>
<https://cancer.ca/en/get-involved/advocacy/what-we-are-doing/tobacco-control/history-of-tobacco-control>



The industry is evolving... advertising is now found in films and social media.

Arrival of the e-cigarette

Electronic nicotine delivery systems, electronic cigarettes (e-cigarettes), or vapes are a relatively new product category, which first emerged in 2004. E-cigarettes have been growing in popularity and are a source of great public debate. As a recently regulated product, people want to know more about the associated implications, including their harmful effects on health.

<https://www.heartandstroke.ca//media/pdf/positionstatements/ecigarettesincanada.ashx?rev=4bea8e80452e418195d4d726e5f8547d&hash=C8388925B2D415D78AB62924E755DC36>

Module 4

Legislation and Policies

Federal legislation – *Tobacco and Vaping Products Act*

<https://laws-lois.justice.gc.ca/eng/acts/t-11.5/FullText.html>



The *Tobacco and Vaping Products Act* (TVPA) became law on May 23, 2018. The TVPA creates laws for vaping products. It:

- protects youth from nicotine addiction and from incentive to use tobacco and vaping products;
- allows adults to access vaping products as a less harmful alternative to smoking.

The key elements of the TVPA related to vaping include:

- not allowing vaping products to be sold or given to anyone under 18 years of age;
- not allowing the sale of vaping products that appeal to youth in how they look or work;
- setting rules about promoting vaping products, including:
 - not promoting flavours that appeal to youth;
 - not misleading consumers about the health effects of these products;
- giving us the ability to make rules about:
 - industry reporting;
 - manufacturing standards;
 - product and packaging labelling (for example, health warning messages);
 - banning the use of certain ingredients.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/product-safety-regulation.html>

- In the vaping substances that contain nicotine, the level of nicotine can vary widely. Prior to July 2021 in Canada, vaping substance nicotine strengths ranged from 0 to over 60 mg/ml of nicotine. Since July 2021, the *Nicotine Concentration in Vaping Products Regulations* establish a maximum concentration of 20 mg/mL for vaping products manufactured in or imported into Canada. Legal vaping substances now contain 0 to 20 mg/ml of nicotine.

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>

Provincial Legislation - *Smoke-free Places Act*

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/LivingTobaccoFree/legislation.html



The *Smoke-free Places Act* became law in New Brunswick in 2004. The purpose of this legislation is to protect New-Brunswickers from exposure to second-hand smoke and to “denormalize” tobacco use. This legislation prohibits smoking in enclosed public areas, in indoor workplaces, on school property and in vehicles when a person under 16 years of age is in the vehicle.

As of July 1, 2015, tobacco and e-cigarette use is no longer permitted in many outdoor areas.

Use of e-cigarettes or water pipes is prohibited wherever tobacco use is prohibited.

The *Smoke-free Places Act* prohibits smoking:

- in enclosed public areas;
- in indoor workplaces;
- in public vehicles;
- inside a vehicle when another person in the vehicle is under 16 years of age;
- in a vehicle used for employment with two or more employees in the vehicle;
- on patios or similar outdoor public areas where food and/or alcohol is served and at least 3 metres from patio perimeters;
- at least 9 metres from doors, windows and air intakes of enclosed public areas and indoor workplaces;
- on or within 20 metres of children’s equipment and sports areas located in an outdoor public place;
- on or within 9 metres of a public walking or jogging trail in an outdoor public place;
- within the boundaries of provincial parks except within the boundaries of rented campsites, golf courses and designated areas within the park; and
- all regional health authority grounds.

On September 15, 2017, General Regulation 91-50 was amended under the *Provincial Offences Procedures Act* to bolster enforcement of the *Smoke-free Places Act*. The regulatory amendments allow officers of the peace and inspectors to issue tickets to people smoking in public areas.

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/LivingTobaccoFree.html

Tobacco and Electronic Cigarette Sales Act

<http://laws.gnb.ca/en/ShowPdf/cs/T-6.1.pdf>

The purpose of the *Tobacco and Electronic Cigarette Sales Act* is to reduce the number of youth with access to tobacco products by limiting the purchase age to 19 and over, and also to denormalize use of these products by prohibiting their display and advertising.

On June 5, 2015, the Legislative Assembly adopted Bill 57, which aimed to amend the *Tobacco Sales Act*. This act is now called the *Tobacco and Electronic Cigarette Sales Act* and is aimed at both tobacco products and products related to e-cigarettes.

As of July 1, 2015:

- it is illegal to sell e-cigarettes and vape liquids to persons under 19 years of age, and these products must be concealed;
- it is illegal to sell smoking supplies (rolling papers, blunt wraps, cigarette tubes and filters, and pipes) to persons under 19 years of age or to put such items on display;
- persons under 19 years of age are not allowed to enter a vape shop unless accompanied by an adult;
- it is illegal for tobacco and vape shop owners to advertise outside, and promotional materials displayed in these shops must not be visible from outside;
- restrictions on promotional material that presently apply to tobacco products in other retail stores also apply to e-cigarettes and smoking supplies.

Since September 1, 2021:

- Flavoured e-cigarettes, except for tobacco flavour, are no longer be permitted to be sold.
- Flavoured substances, except for tobacco flavour, meant to be added to e-cigarettes are no longer be permitted to be sold.

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/LivingTobaccoFree/legislation.html

“No vaping/smoking” signs are available at:

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/LivingTobaccoFree.html



School Policy – Department of Education and Early Childhood Development

Policy 702 : Tobacco - Free Schools (see Appendix 3)

<https://www2.gnb.ca/content/dam/gnb/Departments/ed/pdf/K12/policies-politiques/e/702A.pdf>

Module 5

Refusal Strategies



For more information on refusal strategies, visit:

<https://www.gov.mb.ca/health/tobacco/docs/bot/gr6.pdf>

<https://commencepasafumer.ca/en>

Topics frequently raised by youth

“Are e-cigarettes safer than regular cigarettes?”

Vaping is not for youth and non-smokers. For people who smoke, completely replacing cigarettes with a vaping products will reduce exposure to certain harmful chemicals. However, use of products containing nicotine, including cigarettes and vaping products, poses risks to youth.

You can use the following example: Driving 150 km/h while wearing a seatbelt is safer than driving 150 km/h not wearing a seatbelt, but neither is safe. The same goes for vaping; it’s a substitute for someone who wants to quit smoking cigarettes, but neither option is without danger.

“Everybody’s doing it.”

This can seem like the reality because of the presence of e-cigarettes at school and on social media, but, in fact, **nearly 70%** of New-Brunswick youth have never used an e-cigarette.

<https://nbhc.ca/table/grades-6-12-substance-use?cuts=NB>

“You smoke. So, why can’t I?”

If you’ve already tried to quit smoking, you can reply: You’re right. Smoking is bad for my health. I have tried to quit smoking and I wish I had never started smoking. I don’t want you to start this bad habit and then have difficulty quitting too.

“It’s not dangerous. Why don’t you want me to use e-cigarettes?”

You can reply: Until now, we know there are cases of severe pulmonary illnesses and a number of deaths reportedly linked to the use of vaping products in the United States. The Province of Quebec has also notified the Public Health Agency of Canada of a confirmed case of severe pulmonary illness related to vaping products. However, we do know that use of vaping products by youth 11 to 17 years of age should be discouraged because of the risks of developing addictions and being exposed to the chemicals inhaled. Remember that the sale of e-cigarettes to minors is illegal in New Brunswick and Canada.

“What’s wrong with nicotine?”

Since young people’s brains continue to develop until they are 25 years old, studies have shown that it is harmful for them to use e-cigarettes containing nicotine. Nicotine creates a strong addiction and can harm brain development. This can also affect memory and concentration. Even if it doesn’t contain nicotine, e-cigarettes contain ingredients that are harmful to your health.

“I have no risk of developing an addiction.”

You can reply: Keep in mind that every time you use a vaping product you increase your risk of developing a nicotine addiction. Addiction means that you are no longer able to control your use, however minimal. Nicotine addiction is similar to heroin or cocaine addiction. It can be just as difficult to quit using nicotine as heroin. Symptoms of nicotine addiction can happen faster than you think, long before use becomes weekly or daily.

“The ingredients that I put in my e-cigarette are recognized as safe food ingredients. Therefore, they are not harmful to my health.”

The flavours used in e-cigarette fluids are considered safe when added to foods for consumption, but they are not safe for health when they are heated and inhaled. For example, diacetyl, used as a butter flavouring in popcorn, has been linked to lung disease in workers who inhaled this chemical as part of their job.

“It’s not dangerous, my mother gave it to me.”

You can reply: Most adults don’t know the risks associated with e-cigarette use by youth. Remember that just the action of vaping creates a reflexive behaviour in the body and brain.

“The industry obeys the regulations and does not target youth.”

You can reply: Vaping product manufacturers have a massive budget to develop very persuasive strategies that take advantage of vagueness in the regulations.

<https://drugfree.org/wp-content/uploads/2018/11/What-You-Need-to-Know-and-How-to-Talk-to-Your-Kids-About-Vaping-Guide-Partnership-for-Drug-Free-Kids.pdf>

The unique challenges of commercial tobacco use by Indigenous peoples

Traditional tobacco plays a sacred and ceremonial role in certain First Nations communities. However, commercial tobacco use for recreational purposes is harmful and highly addictive.

Use of traditional tobacco

Tobacco is used by many First Nations, Métis and Inuit peoples for ceremonies and medicinal purposes. Growing and harvesting tobacco for traditional purposes is considered a sacred act. When tobacco is burned in sacred pipes or fires, it is believed that the smoke carries prayers to the spirit world. Many Indigenous people still use tobacco in this way today. Every Indigenous community is different, but there are some common ways that tobacco is used.

Recreational tobacco use

The recreational use of tobacco does not have the same sacred and spiritual meaning as the traditional use of tobacco. First Nations Elders maintain that recreational use is disrespectful of the spiritual, medicinal and traditional use of tobacco. Indigenous peoples have the same health and social problems from smoking as non-Indigenous people.

Smoking rates among Indigenous youth are at least three times higher than among their non-Indigenous peers, which is an alarming statistic on many levels.

The Government of Canada is working with national and regional Indigenous organizations to co-develop distinct approaches that would address high rates of commercial tobacco use, while recognizing the unique circumstances of Indigenous populations in Canada.

<https://www.canada.ca/content/dam/hc-sc/documents/services/publications/healthy-living/canada-tobacco-strategy/overview-canada-tobacco-strategy-eng.pdf>

<https://tobaccofree.novascotia.ca/special-concerns/first-nations-inuit-and-metis-peoples/>

<https://www.canada.ca/en/health-canada/services/publications/healthy-living/strong-foundation-renewed-focus-overview-canada-federal-tobacco-control-strategy-2012-17.html>

<https://www.cps.ca/en/documents/position/tobacco-aboriginal-people>



Appendix 1

Comprehensive School Health Approach

[http://www.icsh-cces.ca/images/What is Comprehensive School Health - 2-pager - July 2016.pdf](http://www.icsh-cces.ca/images/What%20is%20Comprehensive%20School%20Health%20-%202-pager%20-%20July%202016.pdf)

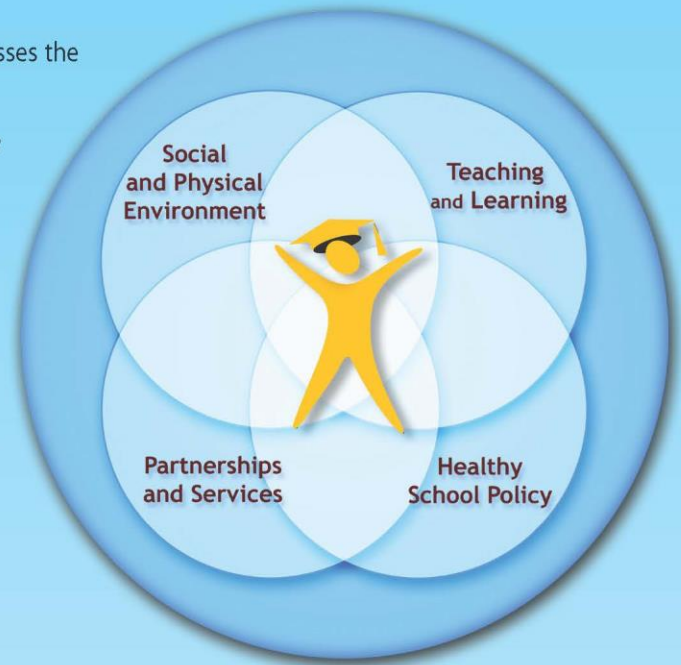
What is Comprehensive School Health?

Comprehensive school health is an internationally recognized framework for supporting improvements in students' educational outcomes while addressing school health in a planned, integrated and holistic way.

It is not just about what happens in the classroom. Rather, it encompasses the whole school environment with actions addressing four distinct but inter-related pillars that provide a strong foundation for *comprehensive school health*:

- social and physical environment;
- teaching and learning;
- healthy school policy; and
- partnerships and services.

When actions in all four pillars are harmonized, students are supported to realize their full potential as learners – and as healthy, productive members of society.



Why Do We Need Comprehensive School Health?

Health and education are interdependent: healthy students are better learners, and better-educated individuals are healthier. Research has shown that *comprehensive school health* is an effective way to tap into that linkage, improving both health¹ and educational outcomes² and encouraging healthy behaviours that last a lifetime.

In the classroom, *comprehensive school health* facilitates improved academic achievement and can lead to fewer behavioural problems³. In the broader school environment, it helps students develop the skills they need to be physically and emotionally healthy for life.

Comprehensive School Health:

- Recognizes that healthy young people learn better and achieve more
- Understands that schools can directly influence students' health and behaviours
- Encourages healthy lifestyle choices, and promotes students' health and wellbeing
- Incorporates health into all aspects of school and learning
- Links health and education issues and systems
- Needs the participation and support of families and the community at large

¹ Stewart-Brown, S. (2006). *What is the evidence on school health promotion in improving health or preventing disease and, specifically, what is the effectiveness of the health promoting schools approach?* Copenhagen, WHO Regional Office for Europe (Health Evidence Network report; <http://www.euro.who.int/document/e88185.pdf>, accessed 16 Sep. 2008).

² Murray, N.D., Low, B.J., Hollis, C., Cross, A. Davis, S. (2007). Coordinated school health programs and academic achievement: a systematic review of the literature. *Journal of School Health*, 77 (9), 589-599.

³ *ibid*

Pillars of Comprehensive School Health

When We Say	We Mean
<i>Social and Physical Environment</i>	The social environment is: <ul style="list-style-type: none"> • The quality of the relationships among and between staff and students in the school. • The emotional well-being of students. • Influenced by relationships with families and the wider community.
	The physical environment includes: <ul style="list-style-type: none"> • The buildings, grounds, play space, and equipment in and surrounding the school. • Basic amenities such as sanitation and air cleanliness.
<i>Teaching and Learning</i>	<ul style="list-style-type: none"> • Resources, activities and provincial/territorial curriculum where students gain age-appropriate knowledge and experiences, helping to build the skills to improve their health and wellbeing.
<i>Healthy School Policy</i>	<ul style="list-style-type: none"> • Management practices, decision-making processes, rules, procedures and policies at all levels that promote health and wellbeing, and shape a respectful, welcoming and caring school environment.
<i>Partnerships and Services</i>	Partnerships are: <ul style="list-style-type: none"> • The connections between the school and students' families. • Supportive working relationships within schools (staff and students), between schools, and between schools and other community organizations and representative groups. • Health, education and other sectors working together to advance school health.
	Services are: <ul style="list-style-type: none"> • Community and school based services that support and promote student and staff health and wellbeing.

Different Terminology, Same Ideas

The term “*comprehensive school health*” is widely used in Canada. In other jurisdictions, the approach may be known as “health promoting school” or “coordinated school health” and its pillars may be expressed in different ways.

However, the underlying concepts are the same; they are all based on the World Health Organization’s Ottawa Charter for Health Promotion (1986).

Comprehensive School Health in Canada

Effective, sustainable progress in *comprehensive school health* depends on a common vision, shared responsibilities and harmonized actions among health, education and other sectors. The challenge is to coordinate these efforts so that partners pool resources and develop action plans together with, and in support of schools.

In Canada, the Joint Consortium for School Health models, supports and encourages the partnerships between health and education that are essential to *comprehensive school health*. It works across provincial, territorial and federal governments to better coordinate and integrate efforts that champion improved health and learning for children and youth. For more information on *comprehensive school health* in Canada, contact the Consortium at inquiry@jcsh-cces.ca, or visit www.jcsh-cces.ca.



Appendix 2

Talking with your teen about vaping

How to talk with your teen about vaping

Inform yourself before the conversation.

For more information on vaping, go to: canada.ca/vaping.

Set an example.

If you use tobacco or vaping products, be honest with your teen about the risks, and any regrets, difficulties and health effects resulting from your experience. Talk with your teen about when and why you started to smoke/vape and explain how you thought it would make you feel, and how it is affecting your health.

Start the conversation.

Find the right moment.

- Take advantage of situations where you can talk about vaping. It doesn't have to be formal. For example, when passing by a group of teenagers who are vaping, take the opportunity to have a conversation with your teen about it. Discuss the facts and correct any misconceptions.

Be patient and ready to listen.


- Avoid criticism and encourage an open dialogue.
- Remember, your goal is to have a meaningful conversation, not to give a lecture.
- Thank your teen for being honest with you if they tell you that they have tried vaping or vape regularly. Then offer to share some information about the risks of vaping, and discuss the benefits of being smoke- and vape-free.

Get support.

- Ask a healthcare provider to talk with you and your teen about the risks of vaping and ways to be smoke- and vape-free.
- Consider suggesting that your teen talk with other trusted adults, such as relatives, teachers, faith leaders, coaches, or counsellors whom you know are aware of the risks of vaping. These supportive adults can help reinforce your message.

Keep the conversation going.

- Don't expect to have just one conversation with your teen. Odds are you will probably need to talk about the subject many times and in many different places.

- 
- Strike up a conversation again whenever you have some time together. You will also find that as your teen grows, your conversations about vaping will change and reflect their growing maturity, intellectual abilities and the pressures they face.
 - Keep in mind that talking about it can also set the stage for important discussions about tobacco, alcohol, cannabis, drugs and other risky behaviours.

<https://www.canada.ca/en/services/health/publications/healthy-living/talking-teen-vaping-tip-sheet-parents.html>

TALKING WITH YOUR TEEN ABOUT VAPING

A TIP SHEET FOR PARENTS



BEFORE THE TALK: GET THE FACTS

Vaping has risks

- > Vaping can increase one's exposure to chemicals that can potentially harm your health.
- > Vaping can lead to physical dependence and/or addiction.
- > Vaping can increase coughing, wheezing and asthma exacerbations in teens.
- > The long-term health consequences of vaping are unknown.

Risks of nicotine

Nicotine is a highly addictive chemical. Youth are especially susceptible to its negative health effects, as it can interfere with healthy teen brain development and can affect memory and concentration. It can also lead to physical dependence and/or addiction. Youth may become dependent on nicotine with lower levels of exposure than adults.

Although not all vaping products contain nicotine, the majority of them do, and the level of nicotine can vary. A vaping product can deliver more or less nicotine than a cigarette.

Quitting vaping can be challenging once one has developed a physical dependence and/or an addiction to nicotine. Nicotine withdrawal symptoms can be unpleasant.

Vaping nicotine can interfere with healthy brain development until the mid-20s.



Even if a vaping product does not contain nicotine, there is still a risk of being exposed to other potentially harmful chemicals.

How it Works: From liquid to aerosol



Did you know?

- > Data from the 2021 Canadian Tobacco and Nicotine Survey (CTNS) shows that reducing stress (33%) was the most common reason youth ages 15–19 reported vaping with and without nicotine; other reasons include because they enjoyed it (28%) and wanted to try it (24%).
- > Vaping products can be difficult to recognize:
 - Devices come in a variety of shapes and sizes, such as resembling a USB flash drive or a pen;
 - Vaping may not leave a lingering identifiable smell;
 - Add-ons like vinyl “skins” or wraps can also make these items harder to recognize; and,
 - Some types of clothing may hide the use of vaping products.
- > Vaping products have many names, such as: e-cigarettes, vape pens, vapes, mods, disposables, and e-hookahs. They may also be known by their brand names.
- > The Tobacco and Vaping Products Act (TVPA) prohibits tobacco and vaping products to be sold or given to anyone under the age of 18. Be aware of the laws in your province or territory, as some have increased the age to 19 or 21.
- > The TVPA also sets out other limits on vaping products such as a maximum nicotine concentration of 20 mg/mL and restrictions on promotions, flavours and other ingredients.



Vaping and quitting smoking

Nicotine vaping products have not been approved in Canada as a quit smoking aid, so they are not available as a prescription at this point. However, a number of Canadians are trying to quit smoking by vaping nicotine, and have said it has helped. While the science is evolving, evidence suggests that vaping nicotine (using e-cigarettes), can help adults quit smoking.

For adults who are unable to quit smoking using approved methods, completely replacing cigarette smoking with vaping will reduce their exposure to many of the harmful chemicals from tobacco smoke.

Learn more Canada.ca/quit-smoking.

It is not safe for youth to use any nicotine or cannabis products, including cigarettes and vaping products. The use of vaping for smoking cessation has only been studied in adults and there is no information currently available on the effectiveness in teens. If you suspect your child is struggling with addiction or physical dependence, talk to your healthcare provider.

Vaping liquids

The ingredients typically found in vaping liquids include glycerol, flavours, propylene glycol and varying levels of nicotine.

The heating process can cause reactions and create new potentially harmful chemicals. Some contaminants, such as metals, might also get into the vaping products and then into the aerosol.

The long-term health effects of vaping nicotine and cannabis are unknown and continue to be researched.

Vaping and cannabis

Cannabis can be vaped using either dried cannabis, liquid, or solid cannabis extracts. Cannabis vaping products containing cannabis extracts (disposable vape pens, for example) can be very strong and contain up to 95% THC. THC, one of the substances in cannabis, can interfere with healthy brain development until the mid 20s. The higher the THC consumed, the greater the risks to mental health, including the development or worsening of cannabis dependence, and feelings of anxiety and depression.

Risks of illegal vaping products

The use of cannabis products including cannabis vaping accessories outside of the legal market can pose additional risks to health and safety. In 2019, an unregulated cutting agent, vitamin E acetate, was used in illegal THC-containing vaping products and was associated with an outbreak of Vaping-Associated Lung Illness which caused thousands of hospitalizations and dozens of deaths in the United States.

SET A POSITIVE EXAMPLE

If you use tobacco, cannabis or vaping products, be honest with your teen about the risks, and any regrets, difficulties and health effects resulting from your experience. Talk with your teen about when and why you started to smoke/vape and explain how you thought it would make you feel, and how it is affecting your health.

It is never too late to quit smoking. If you are vaping to help you quit smoking, talk with your teen about it. Talk with them about addiction and dependence and how hard it can be to quit smoking. And remember, quitting smoking is possible. For free help, visit [Gosmokefree.gc.ca/quit](https://gosmokefree.gc.ca/quit) or call 1-866-366-3667.

START THE CONVERSATION

Before you start the conversation, learn some of the various words that teens use to describe vaping to better relate with your teen. Check out the **Learn the lingo** video.



Find the right moment

Take advantage of situations where you can talk about vaping. It doesn't have to be formal. For example, when passing by a group of teenagers who are vaping, take the opportunity to have a non-judgmental conversation with your teen about it. Find out if your teen has friends who vape or if they considered trying it or felt pressured to try vaping.

Talk with your teen about ways to refuse vaping in a way that makes them comfortable. You can help them to make a plan and think-through what they will say, or do.



Be patient and ready to listen

- > Avoid criticism and encourage an open dialogue.
- > Remember, your goal is to have a meaningful conversation, not to give a lecture.
- > Thank your teen for being honest with you if they tell you that they have tried vaping or vape regularly. Then offer to share some information about the risks of vaping, and discuss the benefits of being smoke- and vape-free.
- > If your teen tells you they are interested in quitting or reducing their use, help them come up with their own goals and support them in achieving them.

Get support

- > Ask your healthcare provider to talk with you and your teen about the risks of vaping and ways to be smoke- and vape-free.
- > Consider suggesting that your teen talk with other trusted adults, such as relatives, teachers, faith leaders, coaches, or counsellors whom you know are aware of the risks of vaping. These supportive adults can help reinforce your message.

KEEP THE CONVERSATION GOING

- > Don't expect to have just one conversation with your teen. Odds are you will probably need to talk about it many times. Remind your teen that you are always available to chat about this issue.
- > Keep in mind that talking about it can also set the stage for important discussions about tobacco, alcohol, cannabis, nonmedical use of prescription drugs, like opioids, or other risky behaviours.



For more information on vaping or cannabis, visit:
Canada.ca/vaping or **Canada.ca/cannabis**





Appendix 3

Policy 702

Tobacco-Free Schools

<https://www2.gnb.ca/content/dam/gnb/Departments/ed/pdf/K12/policies-politiques/e/702A.pdf>

Subject: Tobacco-Free Schools
Effective: March 9, 1998
Revised: July 1, 2001; September 6, 2005; June 2015; October 18, 2018

1.0 PURPOSE

This policy is to provide tobacco-free learning environments for public school students and to assist them in making healthy choices.

2.0 APPLICATION

This policy applies to all persons on public school premises and in school vehicles, including vehicles parked on school premises.

3.0 DEFINITIONS

Comprehensive School Health is an approach to school-based health promotion involving a broad spectrum of programs, activities, and services which take place in schools and their surrounding communities. Such actions are designed not only to affect the health of individual students but also to change the environment in which they live and learn. Comprehensive school health is an integrated approach to health that incorporates four components: (1) social and physical environment, (2) teaching and learning, (3) healthy school policy and (4) partnerships and services.

Public school premises include all school buildings and school properties (as defined by the *Education Act* and *Regulation 2001-51*), leased by, or otherwise furnished to, the Minister and used for the provision of public education to students.

School personnel as per the *Education Act*, school personnel means a) superintendents, Senior Education Officers and other administrative and supervisory personnel, b) school bus drivers, c) building maintenance personnel, including custodians, d) secretaries and clerks, e) teachers, f) persons other than teachers engaged to assist in the delivery of programs and services to students, g) and other persons engaged in support areas such as social services, health services, psychology and guidance.

School vehicle means a motor vehicle operated by a school district or under a conveyance contract for the conveyance of pupils in the public school system and excludes motor vehicles in a public transit system.

Tobacco means any form of tobacco or tobacco-like product, including, cigarettes, cigars, pipe, fine cut tobacco, as well as smokeless tobacco items such as electronic cigarettes (e-cigs) with or without nicotine, chewing tobacco and snuff.

ORIGINAL SIGNED BY

MINISTER

4.0 LEGAL AUTHORITY

[Education Act](#), section

6(b.2) The Minister may establish provincial policies and guidelines related to public education within the scope of this Act.

[Cannabis Control Act](#), section

19 Despite any other provision of this Act or the regulations, no person shall smoke cannabis or medical use cannabis in a place where smoking is prohibited under the Smoke-free Places Act.

5.0 GOALS / PRINCIPLES

- 5.1 The Department of Education and Early Childhood Development recognizes that the use and exposure to tobacco have shown to negatively impact the health of both users and non-users alike.
- 5.2 The Department of Education and Early Childhood Development believes that a comprehensive school health approach can help students learn and foster healthy lifestyles by providing them with knowledge, skills, social supports and environmental reinforcement. This approach will help prevent the use of tobacco, protect non-users from second-hand smoke, assist those who wish to cease using tobacco and encourage students and school personnel to refrain from using tobacco or tobacco-like devices, such as e-cigarettes.
- 5.3 The Department of Education and Early Childhood Development believes that learning in a tobacco-free environment and modeling healthy behaviours can help guide students in making healthy lifestyle choices.
-

6.0 REQUIREMENTS / STANDARDS

- 6.1 The use of tobacco, as defined in this policy and in the [Smoke-free Places Act](#), including e-cigarettes, is prohibited at all times:
- on all school premises,
 - in schools vehicles (i.e., vehicles used by school districts for transporting students), and
 - in vehicles on school premises.
- 6.2 The superintendent and/or the principal must ensure that:
- required signs are posted, in keeping with the specifications of the [Smoke-free Places Act](#);

- community use agreements reflect clearly that the use of tobacco is prohibited at all times and in all areas of school premises, including in vehicles parked on school grounds;
- tobacco company sponsorship of school-related initiatives is not permitted; and
- complaints received about the use of tobacco on school premises are addressed, as appropriate.

7.0 GUIDELINES / RECOMMENDATIONS

7.1 Schools should:

- Advise students, parents, school personnel and others who come onto school premises that the use of tobacco is not permitted.
- Work with students, school personnel, parents and school neighbours to find alternative options for students and school personnel who use tobacco.
- Ensure the school's approach and any sanctions associated with the use of tobacco on school premises are well-communicated to students, parents, school personnel and others.

7.2 Schools should ensure school personnel is able to field questions about the school's approach to:

- students who use tobacco on school premises (supports available and discipline);
- students/school personnel using tobacco off school premises (what are the rules that have been communicated to students, parents and school personnel), and
- complaints (what steps will the school take to follow-up on complaints);

8.0 DISTRICT EDUCATION COUNCIL POLICYMAKING

Not applicable.

9.0 REFERENCES

[Policy 315](#) – *School/Community Partnerships and Sponsorships*

[Policy 703](#) – *Positive Learning and Working Environment*

[Smoke-free Places Act](#) (information line – 1-866-234-4234)

[Regulation 2004-99](#) under the [Smoke-free Places Act](#).

[Cannabis Control Act](#)

10.0 CONTACTS FOR MORE INFORMATION

Department of Education and Early Childhood Development – Policy and Planning Branch
(506) 453-3090

Department of Education and Early Childhood Development – Student Services Branch
(506) 453-2816

ORIGINAL SIGNED BY

MINISTER

Resources

Health Canada

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>

Consider the Consequences of Vaping – Health Canada

<https://www.canada.ca/en/services/health/campaigns/vaping.html>

Smoking Cessation Clinic – Vitalité Health Network

<https://www.vitalitenb.ca/en/points-service/smoking-cessation-clinic-0>

New Brunswick Anti-Tobacco Coalition

<http://www.nbatc.ca/en/index.php?page=e-cigs-vaping-products-flavouredtobacco>

New Brunswick Lung Association

<https://nb.lung.ca/>

Quebec campaign to prevent vaping

<https://avoidthetrap.ca/>

<https://commencepasafumer.ca/en> (Don't start smoking)

The Cannabis Talk – Know How to Talk with Your Teen (Drug Free Kids)

<https://www.drugfreekidscanada.org/>

Go Smoke Free NB hotline: 1-866-366-3667

Resources to order free of charge

Consider the Consequences Kit – Health Canada

<https://considertheconsequences.ca/resources/>

Talking with your teen about vaping: A tip sheet for parents – Health Canada

<https://www.canada.ca/en/services/health/publications/healthy-living/talking-teen-vaping-tip-sheet-parents.html>

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<https://www.heartandstroke.ca/-/media/pdf-files/position-statements/ecigarettesincanada.ashx?rev=4bea8e80452e418195d4d726e5f8547d&hash=C8388925B2D415D78AB62924E755DC36>

<http://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2019/70919a-eng.php>

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease.html

<https://www.msss.gouv.qc.ca/ministere/salle-de-presse/communiqu-1927/>

<https://atlantic.ctvnews.ca/concern-grows-in-new-brunswick-over-danger-of-vaping-products-1.4619277>

<https://www.canada.ca/content/dam/hc-sc/documents/programs/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures/consultation-reducing-youth-access-appeal-vaping-products-potential-regulatory-measures-eng.pdf>

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>

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<https://www.cdc.gov/tobacco/infographics/youth/pdfs/e-cigarettes-usb-flash-508.pdf>

<https://www.merckmanuals.com/en-ca/professional/special-subjects/illicit-drugs-and-intoxicants/vaping>

https://www.drugfreekidscanada.org/wp-content/uploads/pdf/Cannabis-Talk-Kit_EN.pdf

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/factsheet/index.html

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<https://med.stanford.edu/tobaccopreventiontoolkit/E-Cigs.html>

<https://www.cancer.ca/en/about-us/for-media/media-releases/national/2013/war-on-tobacco-background-highlights/?region=qc>

<https://cancer.ca/en/get-involved/advocacy/what-we-are-doing/tobacco-control/history-of-tobacco-control>

<https://laws-lois.justice.gc.ca/eng/acts/t-11.5/FullText.html>

<https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/product-safety-regulation.html>

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/LivingTobaccoFree/legislation.html

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<https://www2.gnb.ca/content/dam/gnb/Departments/ed/pdf/K12/policies-politiques/e/702A.pdf>

<https://www.gov.mb.ca/health/tobacco/docs/bot/gr6.pdf>

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<https://www.canada.ca/en/services/health/publications/healthy-living/talking-teen-vaping-tip-sheet-parents.html>

Public Health Offices

Bathurst

165 St. Andrew Street, 2nd floor
Bathurst, NB
506-547-2062

Caraquet

295 Saint-Pierre Blvd. West
Caraquet, NB
506-726-2025

Grand Falls

131 Pleasant Street, 2nd floor
Grand Falls, NB
506-475-2441

Moncton

81 Albert Street
Moncton, NB
506-856-2401

Sackville

8 Main Street
Sackville, NB
506-364-4080

Shippagan

239B J.-D.-Gauthier Blvd.
Shippagan, NB
506-336-3061

Campbellton

19 Aberdeen Street, Suite 200
Campbellton, NB
506-789-2266

Edmundston

121 De l'Église Street, Suite 330
Edmundston, NB
506-735-2065

Kedgwick

39 Notre-Dame Street, Unit D
Kedgwick, NB
506-284-3422

Richibucto

25 Cartier Blvd., Unit 153
Richibucto, NB
506-523-7607

Shediac

342 Main Street, Unit 360
Shediac, NB
506-533-3354

Tracadie

3520 Principale Street
Tracadie, NB
506-394-3888