



Strengthening Community-Based Seniors' Services (CBSS) in New Brunswick: An Ideas Exchange & Working Session

In Partnership with United Way Maritimes and United Way
Centraide Moncton and Southeastern New Brunswick
November 28, 2025



Executive Summary

The Strengthening Community-Based Seniors' Services (CBSS) in New Brunswick: An Ideas Exchange & Working Session, held in partnership with United Way Maritimes and United Way Moncton and Southeastern New Brunswick on November 28, 2025, brought together community partners and sector leaders to discuss how to better support older adults and strengthen the CBSS sector provincially and across Canada. There were two consultations held in one day: one in the morning with Anglophone participants and one in the afternoon with Francophone participants. Approximately 47 participants were in attendance for the morning/Anglophone session, and 7 participants were in attendance for the afternoon/Francophone session (the full participant list can be found in Appendix B).

Introduction

The “*Strengthening Community-Based Seniors' Services in New Brunswick*” discussion was held in Fredericton, New Brunswick. The event included setting the stage for Community-Based Seniors' Services (CBSS) in New Brunswick and Canada, a National Institute on Aging presentation, and two working sessions – the first focusing on building CBSS in New Brunswick and the second on a Pan-Canadian CBSS sector.

The working definition of CBSS is “*The CBSS sector includes municipal, volunteer, and not-for-profit organizations that provide services and programming for older adults at the local level – at community centres, single and multi-service agencies, seniors' centres, community coalitions and neighbourhood houses and circles, among others. CBSS organizations deliver programs, supports, and services that enable older adults to age in place, stay connected, and thrive in their communities. They are rooted in community and built on trust, relationships, and deep community knowledge and understanding.*”

Purpose and objectives

The discussion employed a community development approach, ensuring the voices of older people and service providers informed New Brunswick and Pan-Canadian strategies, approaches and planning efforts. The consultation questions were developed to reflect the regional context and build on the previous consultations held in Manitoba, Ontario, Prince Edward Island, Newfoundland, British Columbia and more.

The objectives of the session were:

- Participants increase understanding of a provincial CBSS sector.
- Participants build a vision for a provincial CBSS sector in New Brunswick.
- Participants feel motivated to give time and energy to develop a Pan-Canadian CBSS sector.
- Participants see themselves as part of a Pan-Canadian sector.
- To contribute to and inform the development of a Pan-Canadian CBSS sector.
- To identify next steps at the community, provincial, and Pan-Canadian level.

Discussion questions can be found in Appendix A.

Findings: New Brunswick CBSS Sector

The first working session focused on building the CBSS sector in New Brunswick and explored the challenges, opportunities, strengths and desired future state.

Challenges

Both the morning (Anglophone) and afternoon (Francophone) sessions identified several common challenges facing older adults in New Brunswick. Participants consistently noted limited access to services, particularly in rural areas, where transportation options are restricted and information about supports is fragmented. Affordability and financial security were highlighted as critical concerns, with rising costs of living affecting housing, food, and medical care. Social isolation emerged as a key issue in both groups, exacerbated by a lack of centralized community hubs, shrinking volunteer networks, and limited opportunities for social engagement. Participants in both sessions also cited gaps in digital literacy, uneven access to health care, and inadequate public communication about available services, contributing to decreased independence and higher vulnerability among older adults. Additionally, insufficient funding, inconsistent political attention, and poor coordination across service providers were raised as systemic barriers across both Anglophone and Francophone communities.

While many challenges overlapped, there were clear differences between the two sessions. The Francophone session emphasized a lack of dedicated focus on Francophone older adults, noting that services are often lower priority compared to other French-speaking provinces. Francophone participants highlighted systemic inequities affecting minority communities, limited hospital support tailored to their needs, and fewer Francophone doctors. Rural Francophone older adults were particularly impacted by a lack of equipment, transportation, and culturally appropriate services, increasing isolation and poverty risk. The Anglophone session, in contrast, highlighted broader structural and cultural issues such as higher rates of internal self-ageism among older adults, declining neighbour-based support, and uncapped nursing home admissions as indicators of unmet community-level needs. While both groups noted gaps in coordination and service access, the Francophone session stressed the importance of culturally and linguistically appropriate services and advocacy to ensure equitable attention for minority populations.

Opportunities

Both the sessions identified several shared opportunities to strengthen the CBSS sector in New Brunswick. Participants emphasized the importance of engaging younger adults and young older adults, whether through volunteer programs, workforce participation, or education on retirement preparation that includes financial, physical, mental, and emotional readiness. Expanding access to information and services was another common theme, including developing centralized, easily navigable resource hubs accessible by phone or online, along with increased public health communications to raise awareness of available programs. Both groups highlighted the need to strengthen volunteer networks, support intergenerational housing models, and enhance self-reliance programs for older adults. Participants also emphasized leadership and coordination, calling for dedicated government support to ensure long-term sustainability and system alignment.

While there was overlap, each session highlighted distinct priorities. The Francophone session placed stronger emphasis on early retirement preparation for younger adults, addressing physical, mental, and emotional readiness, and ensuring universal pathways could meet diverse needs while recognizing aging as a unique experience. Francophone participants also focused more on structured processes for intergenerational housing, including student recruitment, verification, and legal safeguards, and suggested professionalizing volunteer networks to ensure long-term sustainability. In contrast, the Anglophone session focused more on leveraging underused existing services, such as repurposing school buses for older adult transportation, creating co-op or communal housing, and establishing province-wide directories of services to function as one-stop hubs in each city. While both groups emphasized leadership and coordination, the Francophone session suggested a federal-level seniors' care ministry to guide long-term priorities and system alignment, reflecting a stronger focus on national-level leadership and strategic planning.

Strengths

When discussing opportunities to strengthen and grow the CBSS sector in New Brunswick, participants identified several actionable areas for improvement, emphasizing the need for both systemic investment and community engagement. They noted a strong opportunity to inspire younger generations to volunteer or enter the workforce in roles that support older adults, helping to address labour gaps and rebuild a culture of community care. Many also called for long-term government commitment to improving the well-being and economic security of older adults, alongside stable funding and capacity support for community organizations. Participants suggested establishing a dedicated seniors' care department within government, as well as a specialized seniors' care division or ministry that could lead aging policy with focus and continuity. They highlighted the significant potential in optimizing underused existing infrastructure, providing the example of redirecting available school buses during off hours to transport older adults to and from services and programs. Recommendations also included building or revitalizing a province-wide, centralized directory of services, creating a coordinated, city-by-city one-stop access model for older adults, delivered through phone or digital platforms, similar in function to services like New Brunswick's 211. Participants specifically identified the value of non-digital access points including 211, noting that wider public awareness campaigns and increased public health communications could dramatically improve service reach and trust. They also pointed to opportunities in strengthening housing models, with interest in expanding cooperative, communal, and intergenerational housing options that could pair older adults with students while preserving independence and community connection. There was strong support for programming that enhances self-reliance among older adults, alongside dedicated initiatives that increase social participation, mobility confidence, and personal agency. Many stressed the importance of building stronger and more aligned funding relationships across municipal, provincial, and federal levels, with awareness campaigns embedded as a core component of that collaboration. Finally, participants identified a clear opportunity in expanding and better coordinating the provincial volunteer ecosystem, strengthening networks, support structures, recruitment, and retention across New Brunswick to ensure sustained, community-based care for an aging population.

Both sessions highlighted a vision of a more coordinated and supportive CBSS sector in New Brunswick within the next three to five years. Participants from both groups emphasized stronger collaboration across the sector, ensuring that older adults have access to essential services, including health care, transportation, and community programming. Financial security was also a shared priority, with calls for improved planning, increased funding, and municipal support to help older adults afford housing, meals, medical services, and equipment. Both sessions stressed the importance of reducing social isolation through community engagement, volunteer networks, intergenerational programs, and accessible digital and phone-based resources. Additionally, participants highlighted the need for a central resource hub, better service coordination, and improved infrastructure (such as internet, cell coverage, and transportation) to support independence and overall well-being.

While the overall goals were similar, each session highlighted distinct areas of focus. The Anglophone session placed greater emphasis on system-wide alignment, including the creation of a dedicated government department for seniors' care, standardized age-friendly municipal policies, and long-term program sustainability through simplified funding and streamlined eligibility criteria. Participants also prioritized enhanced home maintenance services, expanded walk-in care options, and increased digital literacy among older adults. The Francophone session, in contrast, emphasized culturally and linguistically appropriate services, including expanded French-language community programming and access to Francophone doctors. Francophone participants also highlighted structured retirement planning support, ensuring older adults are connected with family doctors and essential services when they turn 65, and targeted risk and harm prevention measures. Additionally, there was a stronger focus on financial planning support specifically addressing rising costs of living for older adults within Francophone communities.

Findings: Pan-Canadian CBSS Sector

CBSS definition

Both the morning (Anglophone) and afternoon (Francophone) participants agreed on several key points about how the CBSS definition could better reflect the needs of older adults:

- The definition should highlight that services are “senior-directed” and “that seniors want.”
- Older adults should be identified as a priority in all CBSS programs.
- Relationships, community knowledge, and collaboration between organizations, municipalities, and service providers should be included.
- The definition should include an action outcome, showing “what are we getting out of it” and “how do we move forward.”
- The definition should reflect that CBSS programs “collaborate to deliver” or “coordinate” services.
- Health and healthy aging should be explicitly mentioned, connecting CBSS to social determinants of health.
- Diversity across provinces and regions should be acknowledged.

There were also differences between the two sessions:

Anglophone session:

- Clarify what counts as an “older adult.”
- Define “age in place” more clearly, including “how well do they need to age” and whether it can be qualified.
- Explain the role of municipalities and government programs, including those outside the not-for-profit sector.
- Ensure the definition is inclusive and reflects both urban and rural communities.

Francophone session:

- Include references to “provincial and municipal organizations” and “regional finance and public service commissions.”
- Emphasize “aging well in a safe and chosen location” to restore autonomy for older adults.
- Highlight the link between municipalities and community services, showing how they work together to support older adults.

Defining success and determining impact

When asked about measuring success and impact in the pan Canadian CBSS sector, both sessions’ participants recommended a KPIs framework that relies on regular surveys, structured feedback collection, and community-led focus groups to measure lived outcomes including perceived quality of life, social participation, program satisfaction, access to services, self-reliance, health system navigation, emergency room visits, funding success rates compared to applications submitted, care transitions, and wait times. They stressed that success metrics should reflect whether services feel sufficient from the perspective of older adults themselves, rather than ranking communities or comparing them to others, and highlighted the value of success storytelling through shared regional insights, community-generated reports, and knowledge exchange across municipalities. Many pointed to a need for more seamless coordination between services so supports scale to meet local needs and reach people earlier, reducing both struggle and future demand for intensive interventions. Participants also emphasized prevention-based indicators for younger older adults and working-age adults, advocating for earlier health promotion to decrease dependency on services over time, bolstered by stronger public health education on active living and healthy aging, retirement preparedness supports, and retirement planning measures. They underlined that community programs should continue to be designed and governed at the local level to ensure relevance and agency, and called for consistent, accessible public health communications that reinforce independence, mobility confidence, and aging with dignity. Several highlighted the alignment opportunity offered by existing policy infrastructure such as the National Age-Friendly Standards for Rural & Remote Communities, and the importance of ongoing federal recognition through legislation like the An Act respecting a National Framework on Aging. Participants also referenced network maturity and policy integration signals, including evidence that NAFR has already been reflected in federal policy pathways, alongside the need for continuous local decision-making authority, continuous data collection, and establishing a culture of long-term evaluation where impact is tracked consistently, ethically, and collaboratively with older adults and community organizations at the center of the process.

When asked which actions would best help achieve and strengthen the desired state of a pan-Canadian CBSS sector, both sessions' participants identified several priorities rooted in leadership, coordination, funding, and public engagement. They expressed the need for provincial representation within a national aging-focused body, including a provincial representative role connected to a federal department dedicated to seniors and aging. They emphasized that initiatives should be guided by lived experience, ensuring that older adults are meaningfully involved in shaping policy and programs. Many highlighted the importance of creating a formal mechanism or network to connect the sector nationally, paired with shared success stories that can be scaled and adapted across communities when relevant. Participants also recommended leveraging subject matter experts to support awareness building, long-term monitoring, and evaluation, alongside more responsive and sustainable funding models that reduce barriers including restrictive eligibility criteria. They called for research to move into action more quickly, with clearer national public messaging that inspires participation and behavioral change, drawing on recognizable engagement models like ParticipACTION and the storytelling influence of Historical Canada through campaigns similar in cultural impact to Heritage Minutes. Participants also discussed the value of economic support policies including earlier retirement planning tools, workforce sustainability supports for employers, increased federal advocacy structures that respect provincial and territorial identities, and stronger cross-sector collaboration to improve navigation, funding success, and service alignment. Finally, they pointed to opportunities to leverage existing youth and volunteer networks, citing models like the Canada Youth Network as an example of the type of ecosystem that could support recruitment, awareness, empathy building, and long-term volunteer capacity development across generations.

Summary and Conclusion

The New Brunswick consultation demonstrated both the strength of the province's community-based seniors' services sector and the significant opportunities that exist to better support older adults through stronger coordination, investment, and collaboration. Across both the Anglophone and Francophone sessions, participants shared a common vision of a future where older adults can age with dignity, remain connected to their communities, and access the supports they need regardless of where they live. While each group brought forward unique perspectives, particularly regarding the importance of culturally and linguistically appropriate services for Francophone communities, the discussions revealed remarkable alignment around the sector's priorities.

Participants identified the need for stronger leadership, sustainable funding, improved service coordination, accessible transportation, expanded volunteer capacity, greater public awareness, and centralized access to information. They also emphasized that community-based organizations are uniquely positioned to respond to local needs because they are rooted in trusted relationships and deep knowledge of their communities. Strengthening these organizations will require long-term investment and partnerships across all levels of government, municipalities, community organizations, and older adults themselves.

The consultation also reinforced broad support for developing a coordinated pan-Canadian CBSS sector. Participants recognized the value of a shared national vision that respects provincial and

territorial differences while fostering collaboration, knowledge exchange, common approaches to measuring impact, and stronger advocacy for healthy aging. They stressed that the voices and lived experiences of older adults must remain central to this work and that national efforts should build on the strengths and innovations already occurring within communities.

The insights gathered through the New Brunswick consultation will contribute to the continued development of a pan-Canadian Community-Based Seniors' Services sector and inform HelpAge Canada's ongoing work with partners across the country. Together with findings from consultations held in other provinces and territories, these discussions provide an important foundation for advancing a more coordinated, equitable, and sustainable community-based seniors' services sector that enables all older adults in Canada to age well in the communities they call home.

Appendix A: Discussion questions

Part I discussion questions: New Brunswick focus

Discussion question #1: Thinking about community-based seniors services (CBSS) in New Brunswick, what are the top challenges and where are the opportunities?

Discussion question #2: What strengths or success factors within the CBSS sector in New Brunswick can be built upon to create a stronger provincial network?

Discussion question #3: Looking ahead 3–5 years, what would a strong CBSS sector in New Brunswick look and feel like for older adults, organizations, and communities?

Part II discussion question: Pan-Canadian focus

Discussion question #4: When you reflect on the definition of CBSS (definition provided above), what feels missing or what would you add?

Discussion question #5: If we imagine a pan-Canadian CBSS sector, what would success look like? How would we know we are making an impact?

Discussion question #6: What supports or actions at the pan-Canadian level would best help strengthen CBSS in New Brunswick?

Appendix B: Participant list

Morning (Anglophone) Session	
Name	Organization
Aimée Foreman	Silvermark
Ainsley Congdon	LDANB and Caregivers NB
Alicia Simmons	Enhanced Living Oromocto
Alyssa Hinchey	Enhanced Living River Haven
Amber Bishop	NB Advocate
Anne Marie Hartford	Stepping Stone Senior Centre Inc.
April McAllister	Silvermark
Ben Harrison	United Way Maritimes
Betty Daniels	Meals On Wheels of Fredericton Inc.
Bo Miedema	Multicultural Association of Fredericton (MCAF)
Chelsie Nightingale	United Way Maritimes
Colleen Donnelly	Horizon Health
Colleen Hanna	GFSI Brain Pro Health
Dana Douthwright	Hospice of Sussex
Dorma Grant	National Association of Federal Retirees
Elizabeth Collings	Nursing Home Without Walls
Emily Kenny	Upper Nashwaak Community Outreach
Gail M Farnsworth	Nackawic Area Wellness
Helen Frigault	Volunteer
Jan Seely	NB Special Care Home Association
Jane Moore	Vision Loss Rehabilitation Canada
Janet Toole	Nursing Home Without Walls
Joan McFarland	Third Age Centre
Kathryn Baird	City of Fredericton
Kathy Jenkins	White Rapids Manor
Kelly Blakney	Nursing Home Without Walls
Kelsey Rusk	NGO
Kirstin Duffley	Town of Rothesay
Larysa Motspan	Multicultural Association of Fredericton (MCAF)
Leah Abiertas	Nursing Home Without Walls
Lesleigh Kraft	Office of the Child Youth & Senior Advocate of New Brunswick

Lyne Ouellet	University of New Brunswick
M'hamed Ratmi	Multicultural Association of Fredericton (MCAF)
Mariet van Groenewoud	Village of New Maryland
Mark Wies	NB Special Care Home Association
Mike George	Soaring Families
Nanette Walker	River View Manor
Paolo Korre	Medavie
Paul Toner	United Way Moncton and Southeastern New Brunswick
Paula Colburne-Brkic	Horizon Health
Scott Morehouse	Fung Loy Kok Institute of Taoism
Shelby Soderman	Upper Nashwaak Community Outreach
Stefanie McFarlane	Nutrien Civic Centre
Talia Briggs	Nursing Home Without Walls - Hartland NB
Valerie DeLong	Meals on Wheels
Vicci Dixon	Nutrien Civic Centre

Afternoon (Francophone) Session	
Name	Organization
Clarence Allain	ARCf de Saint-Jean / Club aînés
Etienne Bossé	ARCf de Saint-Jean / Club aînés
Irene Cormier	Centre de bénévolat de la péninsule acadienne
Norma Dubé	Association francophone des aînés du MN
Paul Toner	United Way Moncton and Southeastern New Brunswick
Vanessa Levesque	Société d'inclusion économique et social du NB
Yves Boutot	Association des aînés de la capitale pour l'apprentissage et le mieux-être (AACAME)