



The Impact of the Community-Based Seniors' Services (CBSS) Sector on Older Adults in Canada: A Scoping Review

HelpAge

Canada

Background

In Canada, the population of older adults aged 85 and older has experienced rapid growth, with a projected 68% increase in the next twenty years¹. This demographic shift is expected to significantly increase healthcare expenditures by up to 88% between 2019 and 2040², intensifying pressure on long-term and home care services³ and resulting in prolonged wait times for access to care⁴. These extended wait times demonstrate the urgent need to bridge the gap between the formal medical care system and community-based seniors' services to support older adults during this transitional period. Understanding the fundamental role of the social determinants of health, which may account for up to 80% of health outcomes for the general population and perhaps more for older adults, is crucial for designing effective community-level interventions and programs aimed at enhancing health equity, particularly among the aging population⁵. The community-based seniors' services (CBSS) sector plays an essential role in promoting healthy aging and bridging the gap between the formal healthcare system and community systems of care⁶, and remains the most responsive to the social determinants of health for older adults in Canada. A scoping review methodology was employed to explore the impact of the CBSS sector in Canada. This approach enabled the thorough analysis of the existing academic and grey literature, offering valuable insights into the impact of community-based support services in facilitating the aging-in-place of older adults.

Methods

The research question that guided this scoping review was: *What is the impact of the community-based seniors' services (CBSS) sector in Canada?* The existing literature on this topic was reviewed using Arksey & O'Malley's (2005) six-stage framework for conducting a scoping review. The literature review included various keywords and conceptualizations of the CBSS sector. Given the limited academic literature on CBSS in Canada, there was an extensive grey literature search to ensure a broad selection of sources. A total of 1233 sources were screened for inclusion, resulting in 77 articles deemed suitable for the scoping review. Of these, the majority of the sources (n=56) were grey literature. The inclusion criteria consisted of articles discussing participants ≥ 55 years of age; studies published in Canada; published in the English language from 2013 to November 2023; peer-reviewed and grey literature articles; and those that discussed CBSS or related community-based programs, initiatives, or interventions. The scoping review identified key themes through thematic content analysis (TCA) and categorized the included articles into themes and subthemes.

Results

This scoping review revealed three dominant themes in the literature. First, it demonstrates the different types and advantages of coordinated care (n=32) in delivering community-based services to older adults. Second, it highlights healthy aging (n=25) as an essential factor in improving access to care, education, and prioritizing inclusive care for older adults. Third, it emphasizes the importance of age-friendly communities/social prescribing (n=20) in fostering aging-in-place and community engagement. Sources were allocated to relevant categories based on the judgment of the primary investigator.

Coordinated Care

To determine the theme of coordinated care and the various subthemes, the CBSS infographic was used to guide the thematic analysis⁸. The infographic identified twelve types of

services provided by CBSS organizations, including caregiver support (n=4), diversity/inclusion support (n=3), end-of-life care (n=2), financial & legal support (n=1), home supports (n=3), information/referral & advocacy (n=15), mental & physical health (n=4), nutrition/food (n=3), senior recreational centres (n=0), social engagement (n=8), supportive living (seniors housing) (n=1), transportation (n=5), and wellbeing supports (n=7).

Healthy Aging

In accordance with the extensive literature promoting the importance of healthy aging of older adults, the primary investigator identified three subthemes: access to care (n=15), education (n=11), and inclusive care (n=10). Access to care emerged as the most prominent subtheme, as numerous sources highlighted the multifaceted challenges older adults face in accessing services in their communities. Education was recognized as another significant subtheme, as many sources aimed to provide insights into the factors that facilitate or hinder the healthy aging of community-dwelling older adults. Lastly, inclusive care was identified as a subtheme, given the intricate relationship between inclusive care and healthy aging.

Age-Friendly Communities and Social Prescribing

The literature review identified two subthemes: aging-in-place (n=20) and community engagement (n=7), which correlate with the emphasis on age-friendly communities and social prescribing highlighted in many of the relevant sources. Aging-in-place emerged as the most prominent subtheme, as numerous sources highlighted the strong preference of older adults to remain in their homes and communities, emphasizing the need for collaboration amongst various levels of government and community support to effectively facilitate aging-in-place. Community engagement was recognized as another significant subtheme, as many sources demonstrated the importance of the community engagement of older adults in policymaking and research.

Discussion

The findings of this scoping review highlighted the numerous benefits of community-based programs and organizations. However, implications for practice, policy, and research remain.

Implications for Practice

There is a need to secure sustainable funding, which was cited as a persistent barrier to the delivery and growth of these programs⁹⁻¹¹. Additionally, the findings demonstrated the importance of considering the varying experiences of older adults residing in rural and urban contexts in accessing community-based support services and lack of transportation as a barrier^{12,13}. Furthermore, it is crucial to prioritize the inclusivity of community-based programs to support individuals from various backgrounds and enhance support through offerings of culturally relevant care^{14,15}.

Implications for Policy

It is imperative to prioritize the establishment of a national conceptualization of the community-based seniors' services (CBSS) sector, as the interchangeable use of terminology introduces confusion and impedes sectoral development. Within this conceptualization, national standards outlining core services are needed, along with a national organization dedicated to coordinating this sector, setting standards, and facilitating collaboration among CBSS

organizations. Furthermore, to support the growth of the CBSS sector, standardized federal funding across all provinces and territories is needed to resource the community-based programs and services used to support older adults choosing to age-in-place¹⁶. Lastly, it is essential that all municipalities mandate the development of an age-friendly strategy to proactively address the needs of older adults within their community and cultivate environments that effectively support them and the work of CBSS organizations.

Implications for Research

Despite extensive literature on the programs, supports, and services the CBSS sector provides, there remains a significant gap in research regarding its impact in Canada. Therefore, it is crucial to prioritize research focusing on the social and economic impact of community-based seniors' services and allocate dedicated funding to CBSS program research. Additionally, exploring strategies for expanding the reach of CBSS organizations to rural settings is essential for ensuring equitable access to services¹⁷. Furthermore, it is essential that older adult engagement in research is prioritized to provide valuable insights into their needs and support the development of more targeted and effective CBSS programs.

Conclusion

The CBSS sector plays a significant role in Canadian society and benefits include facilitating community-based care for older adults, promoting healthy aging, fostering age-friendly communities, and bridging the gap between the formal healthcare system and community-based services.

Future directions and what we need to further understand

1. What are the specific hurdles, whether logistical, financial, or operational, that consistently impede the ability of CBSS organizations to meet the needs of older adults in their community?
2. Are there specific organizations or programs, either locally or nationally, that are viewed as promising examples in the CBSS sector? What can we learn from these organizations or programs to enhance the sector as a whole?
3. Are there any emerging needs or trends in the ageing population that the CBSS sector should be prepared to address?
4. Looking ahead, what do CBSS organizations envision as the ideal direction for the CBSS sector? What support would the vision for the future of the CBSS sector require

References

1. Infographic: Canada's seniors population outlook: Uncharted territory. Canadian Institute of Health Information (CIHI). <https://www.cihi.ca/en/infographic-canadas-seniors-population-outlook-uncharted-territory>. Published 2017 Accessed May 15th, 2024.
2. Health-care spending may spike by 88 per cent due to Canada's aging. The Fraser Institute. <https://www.fraserinstitute.org/article/health-care-spending-may-spike-by-88-per-cent-due-to-canadas-aging-population> Published 2022. Accessed May 15th, 2024.
3. Canada's elder care crisis: Addressing the doubling demand. Deloitte & Canadian Medical Association (CMA). <https://www.cma.ca/sites/default/files/pdf/health-advocacy/activity/CMA-LTC-Deloitte-Report-EN.pdf>. Published 2021. Accessed May 15th, 2024.
4. The Data: Long-Term Care in Ontario. Ontario Long Term Care Home Association (OLTCHA). <https://www.oltca.com/about-long-term-care/the-data/>. Date Unknown. Accessed May 15th, 2024.
5. Social Determinants of Health 101: Decoding Public Health. Pacific Public Health Foundation. <https://pacificpublichealth.ca/resources/social-determinants-of-health-101-decoding-public-health/>. Published 2019. Accessed May 15th, 2024.
6. Submission to the Standing Committee on Human Resources, Skills, and Social Development and the Status of Persons with Disabilities Concerning Advancing Inclusion and Quality of Life for Canadian Seniors. Parliament of Canada. <https://www.ourcommons.ca/content/Committee/421/HUMA/Brief/BR9256053/br-external/ActiveAgingBC-e.pdf> Date Unknown. Accessed May 15th, 2024.
7. Arksey H, O'Malley L. Scoping studies: towards a methodological framework. *International Journal of Social Research Methodology*. 2005;8(1):19-32. doi:10.1080/1364557032000119616.
8. Community-Based Senior's Serving Sector. Healthy Aging CORE Alberta. <https://corealberta.ca/resources/community-based-seniors-serving-sector> Date Unknown. Accessed May 15th, 2024.
9. Canham SL, Battersby L, Fang ML, Wada M, Barnes R, Sixsmith A. Senior Services that Support Housing First in Metro Vancouver. *Journal of Gerontological Social Work*. 2017;61(1):104–125. doi:
10. What we heard. Community Links Nova Scotia. <https://nscommunitylinks.ca/cbssresearch> 2023. Accessed May 15th, 2024.
11. Coordinated Pandemic Response for Edmonton Senior Serving Community Summary Report of Model Reflections to Nov. 2020. Edmonton Seniors Coordinating Council, City of Edmonton, and SAGE Seniors. <https://corealberta.ca/files/14555>. 2020. Accessed May 15th, 2024.
12. Sims-Gould J, Franke T, Lusina-Furst S, McKay H. Community health promotion programs for older adults: What helps and hinders implementation. *Health Science Reports*. 2019;3(1):1-11. <https://doi.org/10.1002/hsr2.144>.
13. Mirza N, Hulko W. The complex nature of transportation as a key determinant of health in primary and community care restructuring initiatives in rural Canada. *Journal of Aging Studies*. 2022;60(1):101002. <https://doi.org/10.1016/j.jaging.2022.101002>.
14. Brooks-Cleator LA, Giles AR. Culturally Relevant Physical Activity through Elders in Motion: Physical Activity Programming for Older Aboriginal Adults in the Northwest Territories, Canada. *Journal of Cross-Cultural Gerontology*. 2016;31(4):449–470. DOI: 10.1007/s10823-016-9307-z.
15. Frigault, J. S., & Giles, A. R. Culturally Safe Falls Prevention Program for Inuvialuit Elders in Inuvik, Northwest Territories, Canada: Considerations for Development and Implementation. *Canadian Journal on Aging*. 2020;39(2):190–205. DOI:10.1017/S0714980819000308.
16. Core Community Supports to Age in Community. Federal/Provincial/Territorial Ministers Responsible for Seniors. <https://open.alberta.ca/dataset/09a6c85e-04b6-4f90-836f-8554f1726c42/resource/65c42966-e631-4df9-9fec-6ca219d2a58f/download/core-community-supports-to-age-in-community.pdf>. 2019. Accessed May 15th, 2024.
17. Morgan D, Kosteniuk J, Stewart NJ, et al. Availability and primary health care orientation of Dementia-Related services in rural Saskatchewan, Canada. *Home Health Care Services Quarterly*. 2015;34(3–4):137–158. DOI:10.1080/01621424.2015.1092907.