Rising to the Challenge
How BC’s Community-Based Seniors’ Service Agencies Stepped up During COVID-19
Acknowledgements

The work we do and the response mechanisms put in place as reflected in this report, would not have been possible without the partnership and collaboration of many partners and collaborators including the Province of British Columbia through the Ministry of Health, the project Steering Committee, and hundreds of community-based organizations and stakeholders. As this assessment shows, the Community-Based Seniors’ Service (CBSS) Sector rose to the challenge and was well-positioned to respond quickly and effectively to emergent and emerging needs of Older British Columbians. Through nimbleness and responsiveness, the sector identified what needed to be done differently to maintain continuity and increase supports where they were needed most. The staff and volunteers in the sector worked long hours, reached out to old and new community partners, established collaborative community responses, and provided services in areas where they had no previous experience; and did this in innovative and ground-breaking ways. We want to acknowledge and honour the investment of time, talent, and resources of all the partners and contributors to not only this project but the work that continues to be done daily to support older British Columbians to remain connected, active, and engaged in their communities.
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Opportunity for this Study

Aging seniors deserve the best of our attention and care – the best of our public policies, allocation of resources, community organizing, and responsive community activity. This need is never truer than during times of crisis and uncertainty. How we care for our most unseen, overlooked, and vulnerable populations reflects our values and resilience as a society. Understanding the effectiveness and responsiveness of those who are serving seniors during this era of COVID-19 helps us see the opportunities for treating our seniors with greater care and attention, now and into the future.

The decision by the provincial government to develop a system-wide response to the needs of older adults (i.e. the Safe Seniors, Strong Communities initiative and the 211 enhancements) very early on in the pandemic, opened up the potential for the Community-Based Seniors’ Service (CBSS) sector to work in new, more timely and more effective ways to address the impact of the pandemic on seniors, and in particular those who were most vulnerable. This systematic response created a unique opportunity for the CBSS sector across the province to learn more about the vital role played by local community-based seniors’ service organizations and their staff and volunteers during the pandemic. This response also provided insight into implications and recommendations for how best to support BC’s growing population of older adults to remain connected, secure, and living well in their own homes and communities for as long as possible.

About the Community-Based Seniors’ Service Sector

The CBSS sector is comprised of a variety of municipal and not-for-profit organizations and agencies including seniors’ centers, community centers, associations, community coalitions, ethnocultural organizations, multi-service non-profit societies, intermediary organizations, funders, and government bodies.

The aim of the CBSS sector is to support the quality of life for British Columbia’s aging population and improve health trajectories for older adults living with chronic conditions and at risk of frailty. The CBSS sector plays a key role in delivering cost-effective programming that helps to build social connectedness and resiliency, foster health and well-being and reduce the healthcare utilization and costs.

The CBSS sector provides older adults with access to a range of low-barrier programs that help them remain independent, at home, and engaged in their communities. The sector provides services such as nutritional supports; affordable housing; health and wellness; transportation; physical activity; programs in education, recreation, and creative arts; and advocacy. The sector supports the well-being of older adults across the province to be able to thrive in their own homes and communities. The CBSS also builds capacity for communities throughout BC to address the growing challenges of an aging population, now and into the future.
Structure of the Project

**Project Leadership**
The leadership team for the project included Marcy Cohen, co-chair of the CBSS Leadership Council and chair of the Steering Committee for this project; Kahir Lalji, the Provincial Director of Population Health with the United Way of the Lower Mainland; and Steve Patty of Dialogues in Action. Interviews were conducted by Steve Patty and Landen Zernickow of Dialogues in Action, Esther Moreno of United Way of the Lower Mainland, and Lynne Romano, the Community Development Coordinator in Golden.

**Steering Committee**
The proposal for the project came from the Community-Based Seniors’ Service (CBSS) Leadership Council, a provincial consultative body to the United Way’s Healthy Aging Department. The Steering Committee for the project includes five members from the CBSS Leadership Council and/or co-chairs of the working group of the Leadership Council (see Appendix A for a brief description of the Steering Committee members). The Steering Committee worked with the leadership team in defining the project goals and priorities, reviewing project materials, recommendations, and developing the outreach strategy for the report.

**United Way of the Lower Mainland**
The project was initiated and sponsored by the United Way of the Lower Mainland. The United Way of the Lower Mainland supports BC seniors to stay longer at home and in their communities. To achieve this goal, the United Way collaborates with a vast network of partners, including governments, researchers, community-based service providers, volunteers, and donors. Together, they are addressing seniors’ isolation and enhancing quality of life for older British Columbians, their families, friends, caregivers, and allies.

Kahir Lalji is the Provincial Director of Population Health with the United Way of the Lower Mainland. Working at a programmatic and policy level Kahir takes a life-course approach in the provision of accessible services to support a good quality of life for all people - always attempting to ensure the representation of traditionally underserved populations.

**Approach to the Study**
The purpose of this study was to undertake a province-wide project to gather data about the effectiveness and responsiveness of the CBSS sector in addressing the needs of vulnerable seniors during the COVID-19 pandemic. The task was to understand the impact of the sector in its ability to be strategic, effective, responsive, and collaborative during this crisis. It was not an evaluation of government initiatives, but rather an assessment of the current capability and future potential of community-based organizations to support a growing number of BC’s seniors to age-in-place.

Anecdotes emerging from the sector during the pandemic are persuasive. However, credible data were needed to demonstrate the value of the sector, the importance of partnerships, and the impact of collaborative work. A study was also needed to uncover the gaps and challenges of the sector, so that recommendations could be provided to increase the impact of the sector into the future.
The aims of this project were to:
• demonstrate the value of community-based seniors’ services to identify and address the vulnerabilities experienced by seniors during the pandemic,
• demonstrate the importance of developing new ways of working and building new partnerships during the pandemic,
• provide recommendations to decision-makers for policies to support the senior sector, and
• identify responses for organizations to increase their impact moving forward.

Two assumptions provide context for this study:

Residents of BC will be continuing to live in uncertain and turbulent times for the foreseeable future due to the threat of the ongoing pandemic, an economic downturn, and climate change, among other challenges. All of this is happening at a time when BC’s population is aging. Therefore, the implications of this study will not be solely limited to the current pandemic but will also seek to inform CBSS strategies in the context of the expected turbulence to be faced on many fronts in the years to come.

Given the information that has already been collected on the unmet needs of seniors during the pandemic, this study will focus on: (1) the sector’s ability to mobilize itself to serve the most vulnerable groups of seniors, and (2) identifying strategies for improving the impact and effectiveness of the sector moving forward.

Four research questions informed the design of the data collection:
1. What has been the effectiveness of the CBSS sector in serving seniors during COVID-19?
2. What has been the responsiveness of the CBSS sector to the needs of seniors during COVID-19?
3. What has been the value of partnerships with the CBSS sector during COVID-19?
4. What has been the influence of the CBSS sector during the COVID-19?

Areas of Focus

The protocols for the in-depth interviews and questionnaire were designed to explore the extent to which the CBSS sector has been making an impact in the following areas:

1. **CBSS sector organizations are effective during crisis to provide seniors the best possible opportunity to experience a high quality of health and life.**
   The core question of this area of focus is the following: To what extent has the CBSS sector been effective? As a result of the CBSS sector, older adults will have the resources they need to be sustained and to thrive. The intent of the CBSS sector is to ensure that seniors experience a sense of community and belonging. If the CBSS sector is effective, seniors will sustain meaningful social connections, even during a pandemic. They will have access to and be supported by programs and services that promote their physical, mental, and emotional well-being. During times of crisis (including COVID-19), seniors will be connected, resilient, and healthy. Seniors will be able to live the best possible versions of their lives.

2. **CBSS sector organizations are nimble and responsive to the needs of seniors.**
   The core question for this focus area is the following: To what extent has the CBSS sector been responsive? As a result of the CBSS sector, organizations and agencies will have the capability and capacity to respond quickly and effectively to the needs of seniors. If the CBSS sector is responsive, organizations will be in touch with the local context and dynamics of the community. During times of crisis (including COVID-19), they will be quick to see needs, they will respond nimbly, and adapt their programs to serve seniors.
3. **CBSS sector organizations have strong partnerships and collaborations to improve and expand the scope and scale of impact among seniors.**

   The core question for this focus area is the following: To what extent has the CBSS sector developed and maximized the impact of partnerships? As a result of the CBSS sector, organizations working in the seniors’ service sector will be developing and utilizing partnerships to advance the impact of their work. If the CBSS sector is collaborative, organizations will be better able to marshal resources, fill gaps in the community, coordinate their services with the services of other agencies, and mobilize themselves and others to meet the needs of seniors. During times of crisis (including COVID-19), organizations will respond strategically and with coordination to maximize their ability to have an impact in the lives of seniors.

4. **CBSS sector exercises influence on behalf of seniors.**

   The core question for this focus area is the following: To what extent has the CBSS sector advocated for seniors? As a result of the CBSS sector, leaders and organizations will be able to utilize their collective voice on behalf of seniors throughout British Columbia. The sector will create opportunities for the voices of seniors to be heard. If the CBSS sector exercises leadership, it will support professionals and volunteers to create caring and supportive environments for aging adults. The sector will influence decision-makers, policy development, public attention, and investment of all kinds to promote the welfare of seniors. During times of crisis (including COVID-19), the sector will effectively draw attention, energy, and resources to benefit the lives of seniors.

These primary areas of focus provided the conceptual framing for this study. The population of the CBSS sector organizations and agencies were at the center of the data collection for this evaluation. The survey instrument, interview protocols, and sense-making agendas guided the data collection and analysis to explore and examine the kind and quality of impact the CBSS sector has had in these four areas.

### Methodology

To answer the guiding questions with an aim toward understanding the impact of the CBSS sector in the four areas of focus, the evaluation team designed a convergent, mixed-method outcome evaluation focused on the impact of the CBSS sector during the COVID-19 pandemic.

#### Qualitative Data Collection and Analysis

Qualitative data were collected in three ways:

1. **Individual, semi-structured, in-depth interviews**

   The project team designed a semi-structured interview protocol that included individual interviews with 72 staff, volunteers, partners, and leaders in the CBSS sector. Each interview lasted between 45 and 60 minutes. Data were collected both through note-taking and recordings transcribed through Otter.ai. Data were coded, themed, and analyzed for themes and findings.

   The sampling of the interviewees was based on five strata among the population of the CBSS sector staff and volunteers:

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of Interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>8 interviewees</td>
</tr>
<tr>
<td>Interior</td>
<td>18 interviewees</td>
</tr>
<tr>
<td>Island</td>
<td>14 interviewees</td>
</tr>
<tr>
<td>Vancouver Coastal</td>
<td>18 interviewees</td>
</tr>
<tr>
<td>Fraser Valley</td>
<td>14 interviewees</td>
</tr>
</tbody>
</table>

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Type of community – The sample was selected from four types of communities:

- Remote: 10 interviewees
- Rural: 18 interviewees
- Suburban: 18 interviewees
- Urban: 25 interviewees

Size of organization – The sample was selected for representation among two categories of organizations as proxy for organizational size:

- Single service: 24 interviewees
- Multi-service: 40 interviewees

Population focus – The sample included interviewees from organizations focusing on two particular populations:

- Newcomer: 12 interviewees
- First Nations: 7 interviewees

2. Group interviews
The project team convened group interviews with 27 staff, volunteers, partners, and leaders in three different regional consultations of the CBSS sector organizations. Each group interview was convened for 60 minutes through Zoom break-out rooms. Data were collected through notetaking and recordings transcribed through Otter.ai. Data were coded, themed, and analyzed for themes and findings.

3. Group sense-making sessions
The project team convened eight, 1.5-hour sense-making sessions with groups of staff, volunteers, and leaders in the CBSS sector during a provincial online gathering. The focus of these convenings was on the meaning and significance of the emerging findings, as well as on the co-creation of responses and recommendations to the findings. Data were collected both through notetaking and recordings transcribed through Otter.ai. Data were coded, themed, and analyzed for themes and findings.

Quantitative Data Collection and Analysis
A survey was designed and deployed throughout the CBSS sector to yield quantitative data on perceptions of the impact of the sector during the pandemic. The survey yielded 101 responses with the following characteristics:

Region – Respondents were from the following regions:

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>8</td>
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<tr>
<td>Interior</td>
<td>21</td>
</tr>
<tr>
<td>Island</td>
<td>21</td>
</tr>
<tr>
<td>Vancouver Coastal</td>
<td>39</td>
</tr>
<tr>
<td>Fraser Valley</td>
<td>11</td>
</tr>
</tbody>
</table>

Type of community – Respondents were from the following types of communities:

<table>
<thead>
<tr>
<th>Type of community</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remote</td>
<td>21</td>
</tr>
<tr>
<td>Rural</td>
<td>49</td>
</tr>
<tr>
<td>Suburban</td>
<td>32</td>
</tr>
<tr>
<td>Urban</td>
<td>45</td>
</tr>
</tbody>
</table>

Size of organization – Respondents were from the following sizes of organizations:

<table>
<thead>
<tr>
<th>Size of organization</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single-service</td>
<td>18</td>
</tr>
<tr>
<td>Multi-service</td>
<td>79</td>
</tr>
</tbody>
</table>

Role in the sector – Respondents held the following positions in the sector:

<table>
<thead>
<tr>
<th>Role in the sector</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive</td>
<td>26</td>
</tr>
<tr>
<td>Direct Service Provider</td>
<td>47</td>
</tr>
<tr>
<td>Volunteer</td>
<td>6</td>
</tr>
<tr>
<td>Other</td>
<td>20</td>
</tr>
</tbody>
</table>

Survey data were collected through the online platform of Question Pro. The data were analyzed primarily using statistics of central tendency.
During 2020-2021, the pandemic of COVID-19 has revealed the needs of vulnerable seniors in our communities across British Columbia more clearly than ever before. The pandemic has introduced new and extremely difficult dynamics in the lives of seniors, especially among the most vulnerable. As a result of the pandemic, seniors have faced innumerable challenges to their health and well-being. In addition, the pandemic has further exacerbated and amplified the multiple needs of vulnerable and marginalized seniors that pre-dated the pandemic.

The experience of countless seniors has been hidden from view for much of the population of BC communities. Prior to the pandemic, seniors experienced isolation, loneliness, food insecurity, challenges accessing health care, and anxiety about the present and future. The pandemic has made these difficulties more acute, more significant, and for some, more desperate.

The pandemic has pulled back the curtain and revealed in sharp and clear relief both the value and the needs of our seniors. Though this study is primarily focused on the effectiveness and responsiveness of the CBSS organizations and agencies during the pandemic, the data also highlight the particular kinds of acute challenges faced by many seniors that have been intensified by the pandemic experience:

1. **Isolation**
   The isolation seniors experience in the normal course of their lives has become acute during the pandemic. Many seniors were isolated prior to the pandemic but had occasional interactions with others who cared about their welfare through their access to community services, family, and friends. The pandemic has severed these ties and increased their isolation. Seniors who previously could meet face-to-face with others in the community were suddenly prohibited from any close contact. This change has heightened their isolation and produced an immediate and significant gap in human connectivity. One interviewee working in the CBSS sector said, “We’re doing phone calls, and [the seniors] were just answering because of the isolation factor. [It was] someone to talk to, someone who was going to call several times a week and just chat and ask about how they were doing. For many that was really important.”
Another interviewee said,
Lots of times [seniors] do not see anyone at all, and not only for a day, but sometimes for a week or longer. If they have someone drop off groceries, or they have the neighbours outside watering their lawn, they will go outside and talk over the fence, but a lot of the people that we are dealing with do not have any connections.

2. Loneliness
Compounding the physical sense of isolation has been the emotional experience of loneliness. Many seniors have experienced an increase in the sense of personal vulnerability through loneliness during this time of pandemic. The requirements of physical distancing have amplified the experience of loneliness for so many seniors. One interviewee said, “We didn’t have enough volunteers to address the loneliness that was happening.” Another said, “The need to address the loneliness is the biggest issue.”

3. Invisibility
Being out of sight and hidden away during the pandemic has kept seniors from being front of mind for some in the community. One interviewee noted, “The senior population was often quite invisible, because our community was really focused on tourists.” And then commented on how seniors are nowhere to be seen now that the pandemic is upon us. Another questioned, “Does nobody see what’s going on here? All these people are invisible because they’re not the speaking-up generation.”

4. Anxiety
The months since the start of the pandemic have been rife with worry for many seniors. The perception of many in the CBSS sector is that a significant number of seniors have an increased concern for their welfare in the present, and an amplified anxiety about their welfare in the future. The real risks of the COVID-19 virus have layered an additional level of worry onto the already tenuous sense of safety and well-being of many seniors. One interviewee said, “I’ve noticed more anxieties, even a general kind of anxiety. There’s a lot of anxiety-producing things going on in the world, whether it’s just about COVID or not.”

5. Transportation
For seniors, transportation has been a source of vulnerability for some time. The pandemic has exacerbated this challenge significantly. One senior said, “I could really use a driver to take me places. The only thing I want is a ride.” The pandemic has compounded an already acute challenge for many seniors. As seniors have been told to shelter at home, the option of taking public transportation to pick up medication or groceries has put many at an even greater health risk.
6. Food insecurity
The interviewees in this study identify food insecurity as one of the primary difficulties for seniors, regardless of where they live in British Columbia. The challenges of navigating shopping while trying to stay safe have made it extraordinarily difficult for many seniors to buy food. Food insecurity has been even more pronounced for those who were already vulnerable prior to the pandemic. One interviewee who worked in a remote location and commented on the difficulty of securing food said,

There are not many stores on the islands. I know some remote communities that don’t even have one store. Food is very expensive here. Most people rely on going to town every couple of weeks and stocking up.

7. Technology gaps
As much of the world has transitioned to technology to stay connected with others during the pandemic, many seniors have been left in isolation due to their inability to access or use technology. Lack of access to technology, unaffordability, English as a second language, low levels of computer literacy, and lack of proficiency in the use of current technology has created a gap that leaves many seniors at a disadvantage and an increased risk of vulnerability. One interviewee said, “We’re dealing with the issue of the number of seniors who either don’t have access to or don’t feel competent or comfortable electronically.” Another said, “The seniors are fading more and more into the background. You can’t say seniors don’t use [the] internet. It’s not about age; again, it’s about income. And it’s those seniors that have already been left out and are isolated.” Still another said,

There’s this enormous rush on getting everybody connected by tablets and all of these Zoom calls. We are so busy pushing that down everybody’s throat, but it’s just making them hibernate more because they don’t want to say, ‘I can’t afford a tablet, and I don’t know how to work a tablet.’

While the needs of the most vulnerable seniors have become more acute during the pandemic, the data from this study also reveal a persistent strength and resilience among seniors that have exceeded the expectations of many. Despite the complications fomented by the pandemic among aging adults, this generation of seniors demonstrated a great deal of strength. Time and again during the pandemic, seniors’ resilience has been on display. One interviewee highlighted, “The people in their 90s are a different breed. They are the most resilient. We can learn so much about resilience from this population.”

The following sections provide a discussion of the value and challenges of the CBSS sector as evidenced during the COVID-19 pandemic.
A. Findings on the Effectiveness of the CBSS Sector in Response to the COVID-19 Pandemic

The value of the CBSS sector has been demonstrated clearly and convincingly during the pandemic of 2020-2021. CBSS organizations and agencies, along with their leaders, staff, volunteers, and partners, have found countless ways to stay connected to seniors, listen to seniors, reach seniors, provide services for seniors, and meet the needs of seniors. The sector has been embedded in communities across British Columbia with substantial local knowledge and relationships both with seniors and with each other. The CBSS sector is practiced at bringing solutions to the needs on the ground; often needs that had been overlooked by many communities. Consequently, the sector has been largely effective in the ability to partner with and serve seniors during the pandemic.

1. Rising to the challenge

In large measure, the effectiveness of the CBSS sector during the COVID-19 pandemic has been due to the ability of community-based organizations and agencies to rise to the challenge of meeting the needs of the most vulnerable seniors. The data reveal an impressive array of actions taken by leaders and volunteers in organizations and agencies across British Columbia to respond effectively to what they knew to be critical for supporting seniors. One interviewee said, “A lot of things just shut down in March, but we didn’t. Our senior services – we were slammed. Our service delivery went way up. We were the hub agency for a safe senior strong community. We were seen as essential.” Data from the CBSS sector survey reveal a strong perception throughout the sector that they have been considerably, very, or extremely effective in their response to the needs of vulnerable seniors; with nearly 3 out of 4 (72%) responding a substantial degree of effectiveness. (see Figure 1)
sentiment was repeated over and again during interviews. Not only did organizations and agencies rally quickly to meet the needs of seniors. They also mobilized themselves to support each other; thus, strengthening their ability to respond to the needs of seniors throughout the entirety of the community.

**Ability to assess the need**

Being embedded in the community has provided CBSS organizations and agencies with proximity, even intimacy, with the needs of seniors in their area. Staff and volunteers know seniors because they live and work near seniors, and they are involved personally. As such, staff and volunteers have been able to assess the needs of seniors quickly and accurately during the pandemic. One said,

We knew right away that many people were going to isolate within their own homes, not for quarantining purposes, but because they were concerned about their health. And so with that in mind, we knew that people needed social connection. And we knew that they needed food. And we saw very early the need for transportation.

**Ability to solve local problems of critical service delivery**

Knowledge of the local landscape has helped CBSS organizations and agencies know how to respond to challenges and overcome barriers to providing needed services for seniors. The following is an example of how one agency leader was able to be effective in helping seniors access their flu shots:

One thing that’s come up recently (is) a concern about getting our seniors their flu shots. It’s more important than ever, as we know. The Interior Health is not doing clinics. They’ve totally washed their hands of it and said, ‘Nope, we’re not doing flu clinics; the pharmacists are going to do it.’ I spoke to a few of the pharmacists, and they were very concerned about how they’re going to keep this physical distancing in place and keep everybody safe, the practicalities of it in these tiny drugstores we have. So, I started making some inquiries. The results are that I’m going to host the flu clinics. I’ve talked to a few different pharmacists and they have committed to come.

**Dedication to safety**

CBSS organizations and agencies took on the added burden of developing and implementing new safety measures, following regulations and recommendations as they were released. One agency leader said, “It was when we first started doing groceries, we were bringing all the groceries back and disinfecting everything before we took them out to people. Overdoing it, but that’s better to be safe.” Another said, “Before, we never supplied our housekeepers with uniforms. They just sort of wore their own clothes. But now we buy them uniforms, and they just switch out their uniforms between clients. We never used booties before. We do a little bit more of a risk assessment now.”

**2. Knowing the seniors; knowing the need**

CBSS organizations and agencies have been able to be effective because they had worked diligently to establish relationships with the seniors in their communities prior to and during the pandemic. Relationships are highly valued in the CBSS sector. The data show that the pre-existing relationships developed with seniors, and the trust forged with seniors has benefited the organizations and agencies in their ability to respond effectively during the pandemic. In the survey data, 75% of respondents, or 3 out of 4, reported that they were substantially able to identify seniors who were very vulnerable during the pandemic. (see Figure 2 on next page)
Knowing the seniors in the community

One of the advantages to being embedded in the community is having personalized knowledge of the seniors who live there. One interviewee said, [We were effective] because we’re already working with those folks. We have to be. Our direct services are through people who we see actually in the building. We are very aware of the existing barriers which, of course, were exacerbated by COVID-19 and a lack of social connection.

Knowing who needs what services

The data reveal the ability of CBSS organizations and agencies to know the seniors in their community well enough and comprehensively enough to be aware of their specific needs, and to be particularly aware of which seniors need what kind of support. One interviewee said, “One of the benefits of being a small organization is that we could look at our client files for the last year and pick out people from memory that we thought might want or need a call out to them. And we did that. That took a bit of time to do but was well worth it.”

Giving personalized attention to seniors and their families

CBSS organizations and agencies have been able to give personalized attention to both seniors and their families in ways that are responsive to their unique needs and cognizant of the context in which they are working. Personalized attention has made the support particularly effective because it fits with and is appropriate for the particularities of the person and situation. One interviewee said, The palliative care unit that was our leading source for new people who are starting to refer people again to us. So, our volunteers were there every day, including the weekends, working with patients, feeding patients, helping the nurses in whatever way that they could, but also providing that emotional support to families who were devastated at that time.

CASE STUDY

Culturally-Specific Outreach to Seniors

Members of the Eldercare Project in Cowichan (EPIC) network table leveraged an existing collaboration for senior well-being to develop innovative and culturally appropriate ways of reaching First Nations communities on Vancouver Island. The depth of collaboration among the Cowichan Seniors Community Foundation, Volunteer Cowichan, and Hiye’ye Lelum Society led to a truly integrated outreach and support system, that included friendly calls, grocery deliveries, and targeted outreach and masks for local First Nations communities. This collaborative was able to accomplish its impact because of existing long-term relationships among participating organizations, frequent communication and shared staff between organizations, the flexible funding provided by the United Way of the Lower Mainland, and the personal contributions of a well-respected community member of the Cowichan Tribes.

See page 59 for the full case study
Identifying with the population

Those working in the CBSS sector are often close to or consider themselves as peers to the population of seniors, which provides them with a sense of identification with the population. They naturally have care, empathy, and understanding of those they are supporting. One said, “I guess we don’t necessarily separate ourselves into seniors and non-seniors so much. I’m still working, but I’m technically in the seniors group. People who are in their 70s don’t really necessarily consider themselves to be seniors.” In many cases, the employees and volunteers are seniors themselves; and they are considering their current and future needs as they work with the population. One interviewee said of her motivation for working with seniors, “Also to ensure when I’m of that need, that there will be something available for me.”

Data from the CBSS sector survey also reveal that the reputation and trust developed with seniors, as well as the agencies serving seniors, allowed agencies to exercise leadership during the pandemic. 81% of respondents reported their reputation with seniors and other agencies was substantially important in their effective leadership. (see Figure 3)

Embedding in community

The knowledge, proximity, and personalized care provided by local CBSS organizations and agencies are valuable for seniors and can be difficult for the government to replicate. One interviewee expressed the dynamics they observed that often inhibited the ability of the provincial system to respond effectively.

Over the years, we’ve tried as part of our collaborative to move that needle to working together to being [effective] for both the Health Authority and ourselves. For the most part, we have a pretty good working relationship. Even though their tagline says every person matters, people don’t often feel like they matter. The policies are not often very friendly to the people who need service.

While the various health authorities have been focusing primarily on preventing transmission of the virus, organizations and agencies within the CBSS sector have been focused on the specific needs of seniors. One Health Authority representative said,

Getting close to seniors, even during a pandemic Staff and volunteers working in the CBSS sector have been effective in part because they have continued their commitment to being close to, knowing, and understanding the seniors in their community, despite the serious obstacles presented by the pandemic.
In terms of the pandemic, [our] response went to protecting the acute care system and preventing transmission. There was a lot that went into the homeless population and residential care. That was about preventing transmission of the virus. So, when you think about the issues that cropped up for seniors, like access to food, primary care, transportation, anxiety, depression, social isolation...we weren’t there as a Health Authority.

3. **Personalizing the support**

The CBSS sector has demonstrated the ability to provide individualized attention to seniors during the time of the pandemic. The knowledge and trust developed between CBSS sector organizations and agencies and the seniors in their communities has allowed their responses to be customized, personalized, and sensitized to individual needs and context.

**Building trust**

The data clearly demonstrate a warm and personal touch that staff and volunteers in the CBSS sector bring to seniors. Personalized interaction is a hallmark of the CBSS sector. One interviewee said, “We know a lot of people on the island. We just reached out by phone to a lot of people and said, ‘Well, what do you need? What can we do?’” Another interviewee said, “We have a phone tree with phone calls going out. One of the things that we talked about with our volunteers is the importance of their role in the life of the senior that they are working with. If you go to [the] store every day, every week for six months, you start to get to know Mildred. And if there’s an issue, she’s going tell you before she tells anybody else.

**Providing hands-on support**

CBSS organizations and agencies interact person-to-person and provide hands-on support to seniors. The CBSS sector has been able to provide a uniquely tangible support during this time of pandemic, because they are part of the community, they are in touch with the community, and they are small enough to be able to interact with people personally. One interviewee explained, “Because we’re small, we work more hands-on with folks. We know who is more vulnerable out there and who requires more support. That’s one benefit of being a small organization.”

**Facilitating peer support**

CBSS staff and volunteers are close to the seniors in their community, which means they can identify, gather, and mobilize seniors in groups of peers to provide peer support networks. These networks have provided seniors with multiple points of connection, not only with those who are caring for them through the CBSS sector, but also with other seniors who provide a sense of belonging and mutual care within communities. One interviewee shared, “I started [this program] because I saw this enormous need for increase in recreation, whether it’s eating together, cooking together,
sharing resources, or peer support. There’s nothing like peer support amongst themselves. And what I found when the pandemic hit is that it just drilled that home a thousandfold – how important that contact is.

Another said,

The seniors are helping seniors. They have been running the senior course as a senior society. They have been trying really hard to continue their weekly or bi-weekly lunches. They have been meeting outside, having picnics together, trying to keep the connections. And they have organized phone support to check in if people feel like they need it.

Using personalized communication

CBSS staff and volunteers have been communicating with seniors in ways that are affable and congenial, fostering a sense of affinity, belonging, and care. One interviewee explained this dynamic of communication in action:

[When I send out a communication], a stretch chair yoga exercise goes in, and [a team member] gives me recipes to put in too. I always put some kind of word game, crossword or brain challenge in. We always have some education pieces, and we always have some jokes. Getting those messages back and forth, has been really important. And every time they get a delivery they say, ‘We love you. Thank you so much. You have no idea. It’s like getting Christmas, we get to open it and know that you guys had your hands on this.’

Assessing the needs of individuals

CBSS organizations and agencies have stayed close enough to clients during the pandemic to be able to provide accurate assessments of the needs of aging adults. One interviewee said,

We’ve gone through and reviewed every single one of our 2,000 clients. We have looked at what they may have needed in their current condition and current situation. We’ve talked to clients and they’ve said, ‘Well, you know, we’re not managing, I have this difficulty or that difficulty.’ And that gives us the opportunity to immediately go in and maybe add some services for them.

Another agency lead explained their process of understanding individual needs,

At the start, we realized we didn’t know who was at risk and who wasn’t. We had 4,000 members, plus 2 community centers. We called all 4,000 members plus 2,761 people over the age of 70, and asked how they are, what they have access to. We discovered that some were at risk for food [insecurity], social isolation, depression, loneliness. We started calling people regularly, just to do these check-ins.

4. Coordinating local resources

The work that CBSS organizations and agencies have done in the years prior to the pandemic to build relationships within and throughout communities, has afforded them the ability to know, connect with, and coordinate local resources; bringing to bear the provision and care of the communities to the needs of their seniors.

Responding to community input

As a result of building habits of responding to community engagement and community input, CBSS sector agencies have been able to design and implement responses that have been effective and appropriate for meeting the needs of seniors in the local community. Survey respondents reported an overwhelmingly strong connection between the input and engagement with the community and their ability to be nimble in the context of the pandemic, with 90% reporting a substantial influence of the community in their responsiveness. (see Figure 4 on next page)
Making local referrals and connections

CBSS organizations and agencies have local connections and local knowledge which means they have been able to make local referrals that have buttressed the support for, and benefitted the experience of, seniors. One interviewee described the dynamic:

[We used to] talk sometimes about, ‘Wouldn’t it be nice if we could do this?’ And then somehow the urgency came more to the point...we should actually sit down and figure out how we can do it. We asked around to check in on people, and I could think, ‘Who would be the best person to pass this to?’ Maybe it could go to this organization, and maybe the seniors helping seniors could follow up on that one. Sometimes a connection with a single person ended up with a few different referrals to another group that could fill a need for them.

Coordinating local efforts

The CBSS sector has been coordinating regional efforts that have clarified and organized the energy and efforts of organizations and agencies in their region. One interviewee said,

I didn’t quite know where to take it, or they didn’t have somebody that was willing to take it further. Our regional director did a fabulous job of bringing those connections together by having a lot of Zoom meetings. That was very definitely a way to network with other groups, because sometimes you have overlapping mandates and you don’t really realize it.

Managing volunteers

The data show that volunteers have been a major driving force for supporting seniors during the pandemic. CBSS staff have been instrumental in coordinating, managing, and mobilizing volunteers. This function of the CBSS sector has produced an outsized effect in many communities. One interviewee described the way coordination of volunteerism worked during the pandemic:

There’s a retired nurse and some people who are working from home. So, they said, ‘I’m available from here to here.’ And they did a lot of grocery shopping, a lot of home visits on the telephone. We were up to probably 50 calls a day. Between the two of us staff and those volunteers calling, we would just call them. We call and say, ‘Are you still okay, you got groceries? You got what you need.

Helping seniors navigate supports

In addition to working from the service side, CBSS staff and volunteers have been reaching out to seniors from the senior side; helping seniors navigate through the opportunities and options available to them. Partnering with seniors in embracing their own agency and decision-making to pursue the services they need and desire has provided an invaluable service. One interviewee said, “We really do a lot of work around helping people navigate through that and connect them to as many places or people that would fit for them, trying to navigate through what we think people need and what they’re ready for.”

Mobilizing the whole community

CBSS organizations and agencies have done a remarkable job organizing and mobilizing the
community. They have been able to equip people in the community to reach out to and serve seniors during this time of COVID-19. One said,

We were wondering how we could personally support [seniors]. We were getting groceries and all the necessities, but we couldn’t leave anything on the front door, because they wouldn’t pick it up. They were too afraid. I think neighbourhoods were doing their best to try and identify [what needed to happen]. Suddenly we were all talking to each other. They say [to neighbours], ‘Is there anything you need? Because we’ll get it for you.’ I think promoting that in community, the best thing we could do was getting neighbours to respond to each other. And it worked. It was our youth that really impressed me how they really answered the call.

5. Embracing a broader mandate
To a great extent, the data from this study reveal the willingness of CBSS organizations, agencies, staff, and volunteers to do whatever is needed to respond to the challenges of the pandemic for seniors, even when this has meant exceeding their customary purview of service.

Willingness to expand services
Staff and volunteers in the CBSS sector have been willing to serve seniors in new and expanded ways. We will discuss this more in the section on “Responsiveness.” However, it is notable that the effectiveness of the sector can be attributed in part to the ability of organizations and agencies to evolve and step into services where they had not much prior experience. This nimbleness has significantly influenced their overall effectiveness within communities. One interviewee said, “I think a lot of groups that are community-based and that aren’t necessarily seen as being seniors’ organizations were able to extend their mandate a little to take in something else, like food security, which isn’t specifically related to seniors.”

CASE STUDY
Collaboration for the Food Security of Isolated Seniors in North Vancouver

An innovative collaboration led to improved food security for isolated and vulnerable seniors in North Vancouver. The collaboration was initiated by Silver Harbour Seniors’ Activity Centre, working with Vancouver Coastal Health, North Shore Community Resources, Family Services of the North Shore, and the Lionsview Seniors Planning Coalition, among others, to build food security among particularly vulnerable seniors in the North Shore area of Vancouver during the pandemic. From April to September 2020, these organizations delivered nearly 450 meals each week to seniors in five senior-specific subsidized housing facilities, and to other seniors living in the community. These services continue today to a lesser extent. This impact was accomplished because of the trust between Silver Harbour Seniors’ Activity Centre and Vancouver Coastal Health, the high quality food honoring seniors, funding from local business and foundations, the operational stability of Silver Harbour Seniors’ Activity Centre, and the depth of relationships between these organizations and the seniors living in these housing facilities.

See page 61 for the full case study

Going beyond the requirements
Time and again throughout the interviews, CBSS staff and volunteers spoke of going above and beyond what has been required of them to serve seniors during the pandemic. Staff and volunteers provided an array of responses beyond what was expected of them; and much of their impact is attributed to these “extra” steps of support. For example, one interviewee described how they stepped in to provide services when government offices were closed.
One of the things that we’ve identified as being critical and not being addressed right now is with the Service Canada office being closed, we have seniors coming to us to fill out forms, which is not a service we provide, but we may have to, because they need that to supplement their income.

Maximizing unrestricted funding
The unrestricted funding that has been provided to CBSS organizations and agencies has been particularly helpful in supporting their ability to be impactful during the pandemic. One leader described, We have some of the United Way funding, and it isn’t prescriptive. They encourage us to do what helps. Because if you have a very narrow mandate on your funding, that’s not going to provide you the tools to do the work, and then it makes it harder on the front line.

B. Challenges to Effectiveness

In addition to showing the significant effectiveness of the CBSS sector during the pandemic, the data also reveal areas of substantial challenge.

1. Care needed for the front-line staff, volunteers, and caregivers

Responding to the unfolding challenges of the pandemic has stretched the staff and volunteers of many CBSS organizations and agencies. The data reveal that the pressure and weight of responsibility experienced by those who have been serving seniors during the pandemic has produced vulnerabilities among those working in the sector.

Needing greater support for the staff, volunteers, and caregivers

Many who do the work of caring for seniors in the CBSS sector are seniors themselves. During a pandemic that disproportionately affects those who are aging, seniors caring for seniors creates vulnerability throughout the sector. Without care offered to those who are caring for others, there is less than full potential for support. One interviewee explained,

If we didn’t have caregivers doing the work that they’re doing, our health system would be completely overloaded. Our long-term care would be completely overloaded. It is just not possible for our society to continue on without caregivers, and many caregivers are elderly. Our seniors themselves have their own health issues.

Doing this, they might be overwhelmed. They’re affecting their own health, and their own health needs. And so we’re creating more people who are going to need care.

Another said of caregivers,

[The pandemic] causes isolation, loneliness, anxiety, and hurts their health quite significantly. It has caused problems for seniors and for their families who are 100% caregivers, trying to juggle all kinds of new challenges - working at home, educating kids, caring for elder adults. [This is] a trying time for not only the elderly, but those caring for them.

Attending to the exhaustion of CBSS staff

Many who work in the CBSS sector do so with their whole being. One interviewee said, “It’s not my job, it’s my passion.” Another said, “When you’re dedicated, I think anything can happen.” Yet, the weight of the responsibility that comes with this passion can leave CBSS staff and volunteers exhausted and stressed. Nearly all interviewees mentioned exhaustion, flagging energy, burnout, or stress. One interviewee said, “The staff are so caring
and are doing everything they can, but they, too are feeling the anxiety, stress, depression, with not being able to serve seniors with the services they deserve.”

**Equipping the supporters**

Given all that is required of those working in the sector, the need to strengthen the sector’s capacity to train, equip, and support both staff and volunteers is significant and crucial. The following is the perspective of one leader but is an illustration of the sentiments of many:

All we can do is work with the people who are delivering the services, to support them, and to give them the tools they need to do their work in this area. It’s just hard to figure out how we’re not going to have burnouts and that kind of thing. I’m concerned about some of them around the mental health piece. I don’t think there’s anybody who isn’t in one way or another affected by it.

**2. If not for volunteers**

One of the most obvious insights from the data is the critical role volunteers have played throughout the pandemic to meet the needs of seniors. Many volunteers who were interviewed reflected on the vital place of volunteers in the strategy and effort to respond to the crisis. Whereas volunteers were identified as a strength of the sector, some interviewees also realized the vulnerability of the sector, as a result of the dependence on volunteers.

**Knowing the risk factors for volunteers**

Since many CBSS volunteers are aging adults, they are also vulnerable to the particular threats this pandemic has posed to those who are aging. As a result, much of the volunteer corps is also the most vulnerable. One said,

We’ve got protocols in place, but people are people and volunteers are also a little bit like herding cats. The people are there out of the goodness of their heart, but if they’re not following protocol, it is a problem. As is bringing on new volunteers. We haven’t been able to meet with them face to face. There are risk factors around screening people, and we’ve had to relax some of our rules.

**Realizing the limitations of volunteers**

Despite the remarkable work accomplished by volunteers and the irrepressible commitment they exhibit, at the end of the day, they are volunteering, which has been both a benefit and a liability. One interviewee said, “You can only do so much with volunteers. You know, they’re certainly very necessarily helpful, but you have to be able to pay somebody to coordinate those volunteers.” Another interviewee said,

Volunteers have been a big, big, big help for us. Because we are not supposed to interact with clients face to face, we have to rely on the volunteers. And thank God, when everybody’s shutting the door, the volunteers say, ‘Hey, we are here, we will go out, we will deliver the food, we will take a risk. We don’t want anybody to be left alone.’ So, all credit goes to them. But, we can’t rely on volunteers all the time in order to be consistent.

**3. Not knowing who is excluded**

The data demonstrate the power of local knowledge and local relationships during a pandemic. However, the data also reveal the perception that there are many seniors who are still unseen and underserved, as well as many issues affecting seniors that are unnoticed and unaddressed.

**Discovering who is being excluded by current programs**

Despite the prodigious ability of CBSS organizations and agencies embedded in communities to know the seniors and know their needs, many are concerned there are seniors who are missed, overlooked, and isolated. Staff and volunteers realize they do not know who they do not know, and many seniors might be missed. One interviewee explained,
Many programs have people who are calling and some people just are refusing to come at all right now, or the program is full, and we’re trying to double up on these tiny little sessions to accommodate more people. But that’s not always possible. And we’re trying to think about who’s excluded.

Being out of touch with the most vulnerable
By their nature, seniors who are more active have been the easiest to serve. CBSS organizations and agencies have continued to struggle with the gap between their intention of serving more vulnerable seniors and their inability to reach those seniors and serve them safely. One interviewee asked, “How do you find people in a community if they’re isolated? How do we find the people who really need our help?” Another, when considering the participants in his in-person programming, noticed the following:

What I’ve learned is that some are far more careful. Others are quite a bit more casual. We see less guys who feel vulnerable. The two wings don’t seem to get each other, especially those who don’t feel vulnerable. That’s a concern. There’s almost a lack of respect for the other person’s position. As a consequence, the people who feel vulnerable just stay away. The ones who don’t (feel vulnerable), are there all the time.

Including the overlooked populations
Developing the capacity to reach and meet the needs of all seniors in the community has continued to be a challenge. An interviewee expressed a sentiment voiced by many,

[Our programs] worked more for English speaking seniors than I think it did for seniors whose first language is not English and who do not speak it. I think that most of the referrals that came through were English speakers.

Finding the time to support and empower seniors
If the CBSS sector aims to support aging adults and amplify their own voices, power, capacity, and agency, then staff and volunteers need to assist seniors in learning new skills and building a personal support system, which takes more time. One interviewee explained,

[The seniors] said, ‘Well, can you just show me how to do this?’ I spent more time doing one on ones with them, preparing them for Zoom, getting them on Zoom. If they couldn’t do it the first time, [we would] then contact a friend or family member. Then I would set up a time to be there for them if they wanted me to do a demonstration with them. That took a bit longer per person.

Avoiding victimizing or ageism
In an effort to respond effectively to the needs of seniors during a time of crisis like the pandemic, there has been a risk of treating seniors as victims and inadvertently expressing ageism. One interviewee said,

The seniors that we work with are very independent, very resilient, very active. This is like a mindset despite their circumstances. And we have not yet figured out a genuine way to support people’s mental health. I am looking for excuses to phone people and say, ‘How are you doing?’, because I feel the seniors I know, if I pick up phones, it’s going to come across as if they were a child. And so I’m butting up against authentically reaching out versus being patronizing and ageist.

4. Ongoing isolation and distancing
The nature of the COVID-19 pandemic has exacerbated an already acute challenge for many seniors: social isolation. According to the perception of those who serve them closely, the reality for numerous seniors during 2020-2021 has been the amplification of loneliness and isolation.
Facing the challenges of ongoing isolation during the pandemic

Despite the increasing ability of CBSS organizations and agencies to serve the physical needs of seniors during the pandemic, the challenge of isolation and its potential effect on mental and emotional well-being has loomed large. The need for face-to-face connection cannot easily be addressed during the pandemic. One interviewee said, “The seniors that I work with are used to going onsite, and they get a lot of their needs met in terms of boredom and isolation. A lot of time, the seniors don’t go just for programming; it’s the ability to have a coffee or meal, sit around the library and chat.” Another interviewee exclaimed, “That’s what COVID has done, is to shut so much down that was helping seniors. There’s been nothing really to fill that place.” Additionally, some services are only available in person. One interviewee said, “Fear is keeping them at home, which is not emotionally healthy, and limiting access to key services.”

Lacking physical space for programming during the pandemic

For the CBSS programs that have been determined to keep meeting in person with seniors, the challenges of finding outside spaces to meet have been daunting. One interviewee said, “We needed a consistent space. Not having a covered space created a huge barrier to us being able to offer in person support.” Additionally, they have worried about how in person programming can occur when the weather changes. One said, “Everybody’s gearing up for what happens during the fall and winter when it gets quite gloomy. There was a lot of really great programming in the summer, outdoors. I doubt that can continue in the fall. Everybody seems to operate with a little cloud over their heads.”

5. Opportunity for growth

The data reveal additional difficulties faced by CBSS organizations and agencies in their efforts to be effective. Among the areas for growth emerging from the data are the following:

Lacking broader support throughout communities

While many communities have come together during the pandemic, in some communities the CBSS sector have been frustrated by the lack of urgency and understanding from community agencies and municipalities. One said,

Housing, transportation, non-medical services, what we are doing here has little support. Our city council were completely tuned out as to what the needs of seniors were in our community. They thought that the seniors’ recreation centers were the answer. And of course, they aren’t.

Needing intergenerational involvement

If the CBSS sector is to be most resilient through times of crises like pandemics, it will need to engage a workforce of staff and volunteers who are multi-generational. There are benefits of including staff and volunteers who are seniors themselves, in addition
also including young adults and all ages in between. One interviewee said,
I think that one shift is how to hire people to work with seniors and how we actually have to think about how to do it effectively. The main staff are seniors, and if you look around the field, you will see that there are a lot of older people working with seniors. The 50 plus crowd really likes to work with seniors.

Another said,
It's been amazing to me how we count on the seniors so much. And then when it's them, they are the group that we shouldn't have working. We shouldn't have them doing all these roles. We need to have younger people in those roles, too.

**Discovering gaps in what is known about seniors’ needs**

Understanding the needs of vulnerable seniors can be elusive, even with the experience and proximity demonstrated by CBSS staff and volunteers. The pandemic has revealed some of the more obvious challenges for seniors: food, transportation, and isolation. Some leaders in the CBSS sector have also expressed concern about all that is not yet understood regarding the experience of seniors during a pandemic. One explained,
The landscape has changed so quickly for seniors. I don't think we even know all the ways we need to meet these needs. When you take a moment to really think about it, you see all these layers to the issues that you hadn't seen before. You really don’t have any sense of how to address them. On the surface, it looks like you and your agency are doing a ton to help seniors. Are we really doing the right things for the right people in the right way? We don’t have enough experience with this to know that.

### CASE STUDY

**Technology in Fraser Lake**

Autumn Services - Society for Senior Support knows their community well. When a donation of smart phones from Telus Connecting for Good was delivered through the United Way of the Lower Mainland’s Better at Home program, Autumn Services knew how and to whom to distribute the phones. The impact of this collaborative effort is largely attributable to the close relationships between staff and community, the enthusiasm and dedicated leadership of the organization, and the flexible funding by United Way of the Lower Mainland. *See page 64 for the full case study.*

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**6. Funding for the future**

The challenge of resources and funding is paramount as leaders and stakeholders in the CBSS sector have been considering the threats to their effectiveness going forward into the future. When asked about the sufficiency of their resources, half of the survey respondents revealed the perception of vulnerability in their funding. (see Figure 5)

![Figure 5. How well resourced were you to respond to the needs of the most vulnerable seniors during COVID-19?](image)

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*Mean : 3.495  |  Confidence Interval @ 95% : [3.297 - 3.693]*
*n=99  |  Standard Deviation : 1.004  |  Standard Error : 0.101*
**Feeling the burden of funding proposals and logistics**

The process of applying for funding can be overly complex, time consuming, and burdensome for organizations and agencies in the CBSS sector. The unknown of when the pandemic will end and whether additional proposals for funding will be required can add to the burden experienced by staff. One interviewee explained,

> You know, funding is always a challenge, right? You spend days and days and days filling out an application form. And they either say, ‘No, thank you’, or they give you 1,000 bucks. And I’m not complaining, we have done very well through COVID; we’ve really done well with raising funds. But we also never imagined it would be going on this long. And at this point we don’t see an end to it.

**Concern about resourcing for future programming**

In the view of many, the ability of the CBSS sector to continue to be effective into the future will be dependent on the ongoing commitment of the funding community to resource the sector. Without sustained funding and critical resources, progress will be truncated. One said,

> I feel a little bit like we’re building this house of cards, and that keeps going up and up and up. People are on certain contracts, and the funding may or may not be at the same level next year. We’re taking on a lot of work, and people are building their capacity and work really, really hard. And it might be taken away from us. If the dollars don’t come through? I don’t know. It just feels precarious. It’s all very short term.

**Needing to stabilize funding for expanded services**

CBSS organizations and agencies have geared up to rise to the occasion and meet the needs of seniors during the pandemic. However, sustaining that capacity into the future will be a challenge for many. One said, “We have expanded. I think when we started our programming, we would have been maybe at five full time [staff] equivalents. Now we’re at nine full time equivalents. We’ve grown in the last two years and we need to stabilize our programming funding.”
A. Findings on the Responsiveness of the CBSS Sector

The study explores the responsiveness of the CBSS sector during the pandemic, including how and in what ways the sector has been able to act quickly, nimbly, and adaptively. In the perception of survey respondents, 72% reported a substantial effectiveness (considerable, very, or extremely able) in responding to the needs of vulnerable seniors during COVID-19.

1. Speed of response

The data show a clear and compelling picture of CBSS organizations and agencies responding rapidly to the unfolding crisis. With so many seniors living in states of vulnerability, there was no time to waste. Organizations had no time for lengthy deliberations or protracted negotiations about what to do; they had to move quickly, and they did. The survey data show that 80% of respondents (or 4 out of 5) reported being able to rapidly respond to the needs of seniors.

Reacting quickly

The data show that many organizations and agencies in the CBSS sector moved quickly to respond to needs, adjust their strategies, and do what was required to meet the needs of seniors. One interviewee described an example of this phenomenon:

“We’re the hub for the ‘Safe Seniors, Strong Communities’ for the region. The United Way got us shifted quite quickly to looking at focusing on connecting with people over the phone or virtually. We went from encouraging people to get out of their house and go shopping with a volunteer to asking them to please stay home and let us shop for you. We had to turn our whole process inside out. (see Figure 6)
Making quick transitions
Those in the CBSS sector have been able to make quick transitions to meet rapidly changing contexts and challenges of seniors during the pandemic. Staff and volunteers spoke of the many changes they made to transition promptly to provide services for the emerging needs of seniors. One interviewee said,

The seniors are very lonely and very isolated, and that needs to be our primary concern. But until we can reach them, we don’t even know if they’re hungry. I ended up having to do a lot of the grocery shopping and delivery myself as we were recruiting and training volunteers.

Receiving timely funding
The responsiveness of the CBSS sector during the pandemic can be attributed in no small part to the speed, generosity, initiative, and flexibility of funding. In some cases, funders stepped in quickly to provide resources with instructions for organizations and agencies to respond nimbly and flexibly. One interviewee explained:

The funder world opened their wallets very quickly and said, ‘We’d like to help out.’ It was a relief to see unfettered money not tied to this task or that task. We were given the ability to make decisions on the basis of where we saw the needs. One funder just called to say, ‘We’d like to give you $75,000. I’ve never had a call like that in 30 years. And they said to use it for, ‘Whatever you think you’ll need it for.’

Some funders have simplified reporting or reduced restrictions; giving the directive for CBSS organizations and agencies to meet needs as they see them. One Health Authority funder said,

The [community investment] team said, ‘We are making your grants super flexible. You may not be working on stuff that you said you would work on. Just serve the vulnerable population, however you can, at this time. Don’t worry about whether or not you’re meeting your grant deliverables.’ They removed a headache for the Non Governmental Organizations in terms of those grant responsibilities.

2. Nimbleness of response
In addition to the speed of response, CBSS organizations and agencies have been able to be nimble and flexible, adjusting their strategies to fit the contexts and constraints of the unfolding pandemic. The data show remarkable flexibility and response-ability among organizations and agencies as they have shifted their programming, re-engineered their strategy, and adjusted their approaches to be strategic in their response. The survey data show the perception of those in the field was of an overwhelming flexibility and adaptability to meet the needs of seniors; with 84% of respondents reporting a substantial ability for programmatic nimbleness. (see Figure 7)

![Figure 7. How flexible were you in meeting the needs of vulnerable seniors during COVID-19?](image)

The ability to adjust
Whereas many organizations and institutions take considerable time and effort to pivot in their strategy, many CBSS organizations and agencies have been able to make quick adjustments to their approach. The data reveal that the CBSS sector has been able to shift focus, adjust personnel, create new strategies, and seize emergent opportunities. One interviewee said,

There’s an advantage to being in an agency that has very few parameters in terms of what we...
can and cannot do. The mandate is a pretty big mandate. There are very few restrictions and a lot of willingness of our board and staff team to say, ‘Yeah, we think we can do that.’ And since we are small enough to not have a huge hierarchy or a big bureaucracy that has to be dealt with to make decisions, then decisions could be made quickly. We could just say, ‘Yes, sure, we'll do that.’

Being flexible to meet unique needs
The data reveal considerable evidence of strategic malleability within CBSS organizations and agencies. People have exhibited remarkable flexibility in what they have accomplished as individual staff members and volunteers. Organizations and agencies have demonstrated an extraordinary ability to adjust themselves to be responsive. One interviewee shared,

We were overlapping [our responsibilities], and that would be a waste of all our resources. So, we [divided and organized responsibilities]; we said, 'I'll take this piece of it. And I can drive that person here. And we'll do their house cleaning, and I'll do the respite piece.' We do need to do this because Island Health just can't be flexible enough to deal with all that stuff.

Maximizing opportunities within the rules and regulations
For some in the CBSS sector, there has been flexibility within the broad guidelines of rules and regulations to be responsive. Some in the sector have not been shackled by organizational rules too strict or constrictive that would reduce their effectiveness. The “can-do” mindset is evidenced throughout the data. One interviewee explained,

I think we've done an amazing job, because we come from the philosophy of breaking all the rules. If it means helping a client, we will do anything to make it happen. So, there have been situations where it has been a one-off, and we've had to do something outside of the ordinary.

Oftentimes, staff are resistant to those type of things. But everybody knows that clients come first. We will do whatever it takes to get to the client and take care of them.

Leveraging human resources
The research shows that time and again, CBSS leaders have been able to maximize the impact of their teams by using a nimble and flexible response to the emerging needs. One interviewee described,

I don't think we have dropped the ball on a single situation. We've been able to jump up and provide whatever is necessary. I have the flexibility of pulling people from one team into the other to make it happen. It takes a lot of being supportive of staff in acknowledging that they are going above and beyond. We just need to do whatever it takes. This may be the first time we're doing certain things, but it may not be the last, and we need to be flexible and open.

3. Adaptability and resilience
Whereas many institutions were shuttered as the pandemic emerged, CBSS organizations and agencies kept going in large measure. The sector has adapted to the challenges and constraints of the pandemic with strength and resilience. CBSS organizations and agencies have exhibited a remarkable ability to find ways to continue their programming and services in the face of the overwhelming odds presented by the pandemic.

Adapting strategies
CBSS organizations’ and agencies’ ability to adapt their strategies and meet the needs of seniors during the pandemic points to their flexibility, malleability, and resilience during times of crisis. One interviewee said,

If you had said to me six months ago that by next spring or next fall, we will be doing flu clinics, I would have said, ‘Not a chance. That’s medical. I would never do that.’ But we have become adaptable to different partnerships to get things done.
Resilience in the face of ongoing change
CBSS organizations and agencies appear to have the capacity to adapt their programs and services in the moment for the current context and need, in addition to continuing to adapt over time to the ever-changing context and need. As such, the data reveal a particular strength of resilience within organizations and agencies to continue to adapt over time. One interviewee said,

We had a rapidly changing and adapting program delivery every single day. That really was the watchword: resilience. It is a factor of change; I have begun to better understand the meaning of that word. Because truly, after you’ve changed your program delivery model for the sixth time in four days, it takes an internal decision to change it again. It’s one challenge to adapt the programs; it is another challenge to just continually adapt them because of the unseen.

Creativity in responsiveness
Time and again, the interviewees in this study referenced creative and imaginative strategies they have designed that have enabled them to rise to the occasion during the pandemic. In one example, an organization established pen pals between elementary school children and seniors. An interviewee described the program:

We need to ask seniors what they need. We did and then we set up old fashioned pen pals with an elementary school with the grades four, five and six classes. We promoted it, got them hooked up, and then we just backed out and let them do their thing. That’s such a simple thing. But it’s great for both parties.

Designing customized responses
The adaptability of CBSS organizations and agencies during the pandemic has been demonstrated in part by the plethora of strategies they have designed to meet the needs of seniors. Throughout the province, an extraordinary array of efforts, many of them unique and customized, have been developed to serve seniors. One interviewee said, “A lot of things are taking place in the communities right across the province. And the ideas they’ve come up with. Every one of them is different.”

The survey data show that those in the field perceive that they were able to be highly creative in their efforts to support seniors during the pandemic. 85% of survey respondents reported that they were considerably, very, or extremely creative in meeting the needs of seniors during COVID-19. (see Figure 8)

Creating online platforms for service delivery
The pandemic has forced many CBSS organizations and agencies to design programs for virtual platforms. Staff and volunteers have quickly and, for many, effectively transitioned much of what they had been doing in person to a technological platform. Not only has this shift helped the sector meet the immediate needs of seniors during the pandemic; it has also paved the way for establishing multiple approaches to serving seniors in the future. One interviewee said,

We will never go back to 100% in person programming. We will always have some hybrid system set up so that in 10 years we will have virtual programming in place. Over the next 10 years, this will give us the impetus to move some
programs so that seniors who get shut in for all sorts of reasons will have a range of services virtually.

Another said,

There’s an assumption that older adults are not adept at technology. For a large number of people, that’s true, but I was quite amazed at how quickly they were able to adapt to this online world. In some cases, they were able to attend more things. There are some benefits to the online world. We tend to think more about the barriers. The barriers are there, that’s absolutely true, but we’ve started thinking about how to make technology accessible.

Maximizing online strategies of support for caregivers

Providing online support for caregivers of seniors has also been adapted during the pandemic. One interviewee, speaking of the new role of technology in their programming said, “We’ve found that people connection is so important. Technology isn’t the be all end all, but it’s what we have right now.” In another example, an organization started to provide support meetings for caregivers online. One interviewee described,

I thought for a while that maybe we could do an online support group for working caregivers who can’t get out of their homes. Now, suddenly, we’ve all been thrust into using these systems. And they actually work really well. We have one caregiver support group over Zoom that is thriving. Here’s a way to make it accessible for people who weren’t able to come to our meetings.
B. Challenges to Responsiveness

Evidence of the responsiveness of CBSS organizations and agencies during the pandemic is resounding in the data. The data also highlight the challenges these organizations and agencies have faced as they have been striving to engage responsively. Amongst the most significant challenges are the following:

1. **Needing flexibility in funding**
   
   Even though many CBSS organizations and agencies have experienced the flexibility of certain funders during the pandemic, some among the interviewees noted the difficulties produced by current funding requirements that inhibit their ability to be responsive.

   **Needing simplicity in funding**
   CBSS organizations and agencies desire funding that is as nimble and responsive as their programming, and this type of funding can be rare. One interviewee remarked on a unique experience with a funder that enhanced their ability to respond quickly to needs. This interviewee said, “[With this funder] there’s a little application form, it’s only two pages with a budget. I have people to make sure it’s complete, and then it comes to me so I can approve.”

   **Needing flexibility of funding**
   The ability of CBSS organizations and agencies to respond nimbly depends on the provision of resources that can be used flexibly. One interviewee said, “[Our programs] need to be nimble enough. And that requires having some money – nimble enough to respond immediately to issues and crises as they come along. And they’re inevitably going to come along.”

   Other CBSS organizations and agencies implemented programming despite a lack of assurance that funding would be coming. This put them in a precarious position. One interviewee said, We didn’t have funding for our first response. We took that on, and I thought, ‘Well, we’ll figure it out.’ So, we applied for COVID funding from our community foundation and we received it. That is how we paid for the staff time that was required to do it. In order to carry on doing that kind of nimble work, organizations need to know that there’s funding to do it.

2. **Challenges of bureaucracy**
   CBSS organizations and agencies can be only as creative as bureaucratic systems allow. In some cases, liability, privacy, and outdated policies have stood in the way of responsiveness. One interviewee said, “We still haven’t implemented a way to do our Minds in Motion program. There are safety concerns if we’re encouraging people to exercise at home.”

   Another organization continues to struggle with Worksafe regulations to implement a housekeeping program. A third has been unable to conduct outreach to potentially vulnerable seniors, because the seniors had not given their explicit permission to be contacted, despite providing their contact information to the organization. An interviewee shared, “That was a gray area whether we could call certain members back.”

3. **Limitations of technology**
   The pandemic has dramatically increased social isolation for seniors who have been unable or unwilling to access computer technology as a means of engagement and communication.

   **Cost of technology**
   While technology has been a successful solution in some cases, not all seniors, especially vulnerable seniors, have access. One interviewee said, “Many people have little or no access to technology. [They’d need a] computer, internet, stable internet, some
basic understanding of how to make it all happen.” Another interviewee shared an example of entire populations left out of technology-based solutions:

Our long-term care facilities have no Wi-Fi. We’ve been fighting since March to get it, and I don’t know why it’s so hard, because we have it in the hospitals. There are concerns about security, etc. I’m still fighting with getting decent Wi-Fi in, so our residents can connect with their families and with the outside world.

Lacking skills with technology
Many interviewees highlighted the challenges experienced by aging adults in using technology. Many seniors find the ubiquitous use of modern technology (e.g., computers, tablets, smart phones) as a means of engagement and communication to be a foreign experience. Without the assistance of others, the use of these types of modern technology can be daunting and can restrict seniors’ options for engagement. One interviewee said, “We were given iPads and phones to be distributed and I still have some left, because some people gave them back. It comes down to the individual’s competency using it.” This highlights the need for staff, volunteers, family members, and others to work with seniors to promote the use of technology on an ongoing basis; particularly if seniors are facing memory challenges and cognitive decline.

Using technology as a substitution for in person engagements
Despite the opportunity and flexibility afforded by technology platforms, there have been limitations to how effective they are at providing meaningful, personal, and authentic support for seniors. These platforms only reach those seniors who are tech savvy and have access. Also, for many seniors the quality of interactions provided by these platforms are inadequate when compared with in person interactions. One interviewee said, “We can convince more older adults that they can actually access the program over Zoom, but they are still a far cry from 60 to 80 people a week at lunch.”

4. Challenges of remote areas
The data reveal special challenges faced by CBSS organizations and agencies in physically distanced and remote communities far from urban population centers. In the perspective of some staff and volunteers, the isolation of the work has proven to have inhibited their ability to respond as effectively as they would have liked.

Connecting to resources from remote areas
Some CBSS leaders in remote areas of British Columbia have been finding it challenging to identify and secure the resources needed for the work. Resources provided by funders based in large urban centers can be more challenging to locate and access. One interviewee said, “It’s difficult to connect with resources off the island.”

Engaging the larger community
Some CBSS leaders in smaller communities have been challenged to connect and engage with the broader CBSS community. At times, they have been limited in their ability to access the kind of interactions and relationships available to CBSS in larger communities. For example, one said, “It’s sometimes hard to connect to the larger picture when you’re a very small community. It takes a whole other amount of time, and people are often very busy doing specific things here instead of looking at the larger picture.”

Needing more coordination among CBSS organizations
Some among the interviewees observed that multiple organizations are trying to implement similar strategies. This overlap has caused organizations to experience some confusion about who is doing what task. The perspective is that there might be some wasted time and resources from redundancy.
and lack of coordination that can come with the proliferation of responsive programs. One interviewee said, “Sometimes we have overlapping mandates.” Providing some clarity on the use of resources and focus along the way would be beneficial for many.

5. Human limitations
To a large degree, the ability to respond quickly, nimbly, and adaptively has depended on the human capacity of those in the CBSS sector. The involvement of skilled and motivated staff and volunteers has proved to be a considerable benefit to the sector during the pandemic. For some leaders, the demands of the work have felt overwhelming and limiting. For others, finding the right people has been one of the challenges to being responsive during the pandemic.

Capacity and energy for innovation
The responsibilities leaders must shoulder, along with the multiple demands on their time, have left many exhausted and with little energy for innovation and adaptation. One interviewee said,

I only have so much energy for innovation. We’re just trying to keep our nose above water. And none of us have ever done this work before. Funders are saying, ‘So how are you doing that?’ And I kept wanting to say, ‘I don’t know, do you know?’ Apparently, that wasn’t the question they were looking for. I think one of the stumbling blocks is the incredible pressure social services agencies have been under throughout this.

Ability to recruit the right people
The capacity to be responsive requires not only funding, but also having the right people on the team to design and implement the programs and services. Many staff and volunteers already have been stretched to capacity and they need others to join them. One said,

Sometimes it’s just a matter of finding the person who has the interest. I have an interest, but I only have so much time and interest in taking it further. Sometimes it just takes that dynamic person who’s willing to spend the time doing that.

The pressure to succeed
The pressure that some CBSS leaders have been under can inhibit their ability to think and act with creativity and verve. One said,

I have a huge amount of pressure around that. I’m finally in a place where I think I can actually articulate that’s what the pressure has been about. It’s not whether we could do the work; it’s a question of just not having the capacity to be creative in 12 different directions all at once.

Challenges of self-care
The ability to stay personally healthy amid service to seniors during a pandemic has been daunting; especially given the considerable dedication and commitment of staff and volunteers. And yet, compromising personal health can lead to compromised support for others. One interviewee said,

We always knew that caregivers take on more than they should. It’s definitely shown us how much they’re willing to take on for the person they love and how they will take on too much. We are trying to make sure we are communicating that they need to look after themselves. But it’s a hard sell, because caregivers are so focused on the other person, and they [the caregivers] come last. There’s been a real information push for self-care and how to look after your mental wellness. Making those boundaries and looking after yourself is incredibly important.
The third area of focus for this study is the value and efficacy of partnerships within the CBSS sector and between the CBSS sector and public institutions and private companies.

### A. The Impact of Partnerships in Response to the COVID-19 Pandemic

The initial catalyst for this research was an interest in understanding both the impact of partnerships on the CBSS sector; and the impact of the CBSS sector on partnerships and collaborations that have proven to be essential to mounting an effective response to the pandemic on behalf of the seniors in British Columbia.

While there is no question that partnerships were critical to success, particularly in supporting more vulnerable seniors during the pandemic, it is also true that there is great variability between communities in terms of strength of the local partnership culture. This variability is within the CBSS sector itself and between the CBSS sector, other community agencies, and municipal and health services. The data show strong perceived impact of partnerships that were in place and working effectively. The data also reveal barriers to effective partnerships, including short term and competitive funding models, and habits of working independently and in isolation. In particular, the CBSS sector had only limited success in partnering with municipalities and health authorities.

#### 1. Nurturing local partnerships

The data from this study show the strength of the partnerships and collaborations that have been developed, nurtured, and sustained by the CBSS sector. In many communities, the CBSS sector has been the “glue” that has held partnerships together as groups of organizations, agencies, institutions, companies, and individuals have sought to serve seniors during the pandemic. Data from the CBSS sector survey show the importance of community partnerships in meeting the needs of vulnerable seniors during the pandemic. Four out of five respondents (80%) report that community partnership and collaborations made a substantial difference in effectiveness. The majority of respondents (58%) report that partnerships were very or extremely important. (see Figure 9) In many communities, CBSS sector organizations are accustomed to interacting within these partnerships.

The time and effort invested in partnership helped to ensure organizations and agencies were poised to respond and act effectively in times of crisis.
**Value of being local**
The CBSS sector does much better when there are purposeful and authentic partnerships that are near to the community and embedded in the community. One interviewee said,

> It is just crucial that we have an embeddedness of agencies. If we don’t know one another, then there’s no referral points. If I’m not on a first name basis with Fraser Health, or the City through Citizen Support Services, then they’re not likely to refer people to me, and I’m not likely to refer people to them. That’s been a really crucial part. We’ve had lots of referrals over this time from Fraser Health because they’ve been overwhelmed by the needs of their seniors. Because we were already connected, it was easy for them to be able to make referrals to us.

**Value of personal relationships**
The data clearly show the advantages of personal connection of people working in the sector. When people know who to talk to, when they can trust the motives of others, and when there are personal connections with clients, the work of serving the most vulnerable seniors advances effectively. One interviewee said, “The very fact that we personally know each other, really, is the answer. And it’s the same in community, you have to be known in your community.”

**Established trust**
Organizations and agencies of the CBSS sector are close enough to local communities to engender profound trust. Trust opens doors. Trust smooths interactions between people and promotes possibilities for support and access to support. Trust is also a critical feature in healthy partnerships between organizations and agencies. One interviewee said,

> You get to know each other. And you know who you can trust. I mean, that trust is really important. To be able to put it out, honestly, and say, ‘This is what we’re running into, what can you guys do to help out here?’ Once they step in, we step back, because we can do it.

**Building local working groups**
One of the unique opportunities the CBSS sector has had is the ability to convene local working groups to address local challenges. Local working groups have helped ensure the network of organizations and agencies knows the needs of the community and have had the ability to respond appropriately. One interviewee said,

> We have a working group that we attend every week. That is the group that keeps its finger on the pulse of what’s going on. Everybody who’s doing this work in Burnaby is sitting at that table. It has been very useful to touch base every week and find out who’s working on what, who’s seen what, who knows what, what’s changed and what hasn’t changed.

**2. Maximizing the impact of partnerships**
The involvement of, and leadership provided by, the CBSS sector in partnerships during the pandemic has proven to be instrumental in maximizing the usefulness and strategic acuity of those partnerships. As noted later in the section on the challenges of partnerships, the survey data show that 63% of respondents (nearly 2 out of 3) reported having a lack of substantial ability to forge new partnerships during the pandemic. Partnerships were essential to marshalling a coordinated response. However, partnerships established and functioning prior to the pandemic were most effective during the pandemic.

**Leveraging the power of collaboration**
There is ample evidence in the data that collaboratives have achieved an outsized impact during the time of the pandemic. The collaboratives that have been functioning during 2020 have resulted in, what many would attest to, the most significant areas of visible impact. One interviewee explained,
One of the purposes of that collaborative is to create efficiencies and leverage our common resources. It’s only now in this third or fourth year of existence, that we’re beginning to see actual proof of those outcomes, because we’re rubbing shoulders with each other. Without it, it is out of sight out of mind. If you’re never in the same room with people, you are in silos just the same way a big organization is in silos. It’s only when [we] are in the same meeting that [we] become aware of each other.

Mobilizing partnerships
Having existing partnerships has afforded CBSS organizations and agencies to move quickly to secure strategic responses to the pandemic. One interviewee said,

We have had a health and wellness collaborative over the last 4 years, and we have 20 organizations that are members of the collaborative. It’s everything from the walking group to the doctors. If you’re connected to wellness, you were invited to join the group, and that group morphed into a community COVID response committee.

Benefiting from the connections of partnerships
Staff and volunteers in the CBSS sector expressed enthusiasm and gratitude for the benefits that partners have brought to them and their work during the pandemic. One interviewee shared,

I have never in my life been so appreciative of the time I have spent developing partnerships. Because all I had to do was pick up the phone and say, ‘We’d like to do this, or we need to do that, or do you have this we could borrow?’ And people just said, ‘Yes.’ Part of it is because we live in a small community. But a more significant part is because we actually, as an organization, have spent time working in partnership.

The safety of partnerships
The culture of partnerships in the CBSS sector has provided a context of authentic dialogue; where staff and volunteers have been able to interact with others without difficulty, pretense, or protectionism. One interviewee said,

I think the strengths [of our sector] always have been bringing as many people together in a safe environment that offers them the opportunity to communicate openly and freely with each other in a non-judgmental way. Those are our core values.

Adapting together
Adjustments and adaptations have not happened solely within individual organizations and agencies. The data reveal that partnerships have been instrumental in helping CBSS organizations and agencies adapt to the challenges of the pandemic in ways that they would not have been able to do on their own. Partnerships have also helped the network of organizations and agencies in many communities adapt, innovate, and evolve to meet the needs of seniors in those communities. One interviewee said,

We worked in partnership with others to close our transportation services and turn them into meal delivery services. We needed to rely on a local Better at Home and the North Shore Neighbourhood House to funnel our transport clients through to them in exchange for us taking on the food that Better at Home didn’t have to do. A lot of it was partnering with other people. And in order to get into low-income buildings, we had to partner with housing managers with Vancouver Coastal Health.

3. Culture of cooperation in partnerships
The practice of partnering with others has positioned many CBSS organizations and agencies to benefit from a culture of cooperation. The cooperation evidenced among organizations and agencies during this time of the pandemic has profoundly influenced their ability to mobilize themselves effectively and strategically.
Designing a coordinated response
The ability of CBSS organizations and agencies to work with each other cooperatively and in coordinated response has been one of the hallmarks of the COVID-19 response. As a result of close working relationships, the coordination between and among organizations and agencies has been much smoother than it would have otherwise been. One interviewee said,

We have meetings where we review our clients together and consistently in those messages we are seeing the themes that are coming out in the needs. And we’re witnessing those together. And then we [solve] those together.

In large part, the ability to mount a strategic and coordinated response to the pandemic has been due to the ability of organizations and agencies to develop and nurture effective partnerships. One interviewee said,

One of our groups is EPIC, which is the elder care project. That is a group of community organizations and Island Health. It’s all around Senior Services. [We] generally get together monthly, but we increased that to weekly so that we could stay on top of things rapidly changing.

Knowing the strategy of the whole community through partnership
Working cooperatively in partnership has allowed the CBSS organizations and agencies within communities to have a view of the needs and resources of the whole community. This perspective has afforded staff and volunteers the ability to make strategic and effective decisions about focus, resource allocation, and coordination to solve problems. One interviewee described,

People’s resources were changing so quickly, we were able to meet regularly. That’s looking at the entire community, but we can also look quite small scale. If we have one caregiver who has an issue, who has a problem, then as a group [we] come up with a solution for that one specific caregiver.

Knowing seniors who have been overlooked
One of the advantages of being community-based is the degree to which CBSS organizations and agencies in partnership with others have been able to see those who might otherwise be overlooked by the larger systems of care. One interviewee said, “We have served all sorts of seniors who are living in very, very isolating and vulnerable positions that we wouldn’t otherwise have seen.” Another said,

Folks that don’t necessarily find themselves participating easily in traditional seniors’ programs might find themselves more likely to fit in at the neighbourhood house. There are barriers of finances, social stigma, language, culture, etc. So, all of those things that may provide barriers, I kind of see us as that place where people fit in no matter what their circumstances.

Developing cross-sectoral partnerships
In some cases, the crisis of the pandemic has provided CBSS organizations and agencies with the opportunity to forge cross-sectoral partnerships with companies and institutions that were new and innovative and could serve the sector in the years to come. One said,

McDonald’s has been one of our biggest supporters even before COVID hit. But since COVID, they have been amazing. They’re going through renovations, and [they are] still helping me do this. [They] sell us those English muffins at cost. And lots of times [they] give things to me too, even little packets of coffee or tea bags. They’ve just been amazing in what they’ve helped us with.

Similarly, entities that previously had not focused on the seniors’ sector have stepped up in collaboration with CBSS organizations and agencies to give back. One interviewee said, “Some of the places that have
fresh fruit and vegetables have asked us to let them know if we have seniors in need who might want fresh veggies out of the garden or fruit from the trees.” Another noted, “Roads and engineering crews would see some seniors displaying unusual behaviors, and we would send our staff team to do a visit, bringing a meal, and do a quick needs assessment.”

**Learning to be less territorial**

The partnerships of the CBSS sector have provided a context for organizations and agencies to decrease a culture of protectionism, action in silos, and territorialism. One interviewee commented on the ongoing challenge of cooperation, but also on the ability of the sector to move through challenges and awkwardness with relative aplomb:

> There is always a little bit of the territorial-ness going on – who is doing what, and who is responsible for what. That hasn’t changed vastly in terms of trying to respond to a crisis. We are all stepping all over each other’s toes a little bit. And everybody is off in directions that they weren’t in before. There have been minor conflicts in terms of who is supposed to be doing whose mandate, but nothing extreme.

Another commented on the openness of their interactions, allowing their network to grow to include anyone who might serve vulnerable populations,

> Most of us met at least monthly. We also had to open the tent a bit more, beyond serving seniors. We realized we can’t draw walls around one group of people. We needed partners beyond the CBSS. We started meeting weekly. The conversations were really full, because the folks that could support all of what people need to move through a pandemic, were there. People lost a bit of their parochialism. It all became collective.

CBSS organizations and agencies have also increased their capacity to share funding, staff, volunteers. One said,

> What I’ve noticed is that there's increased sharing. We all know that we have limited staff, funding, time, more seniors needing our support. When we’re developing policy, new activities, instead of doing it just for our groups, we’re sharing it with other organizations. What used to be proprietary information is now being shared more.

**CASE STUDY**

**Shifting Culture in Burnaby**

Burnaby’s Primary Care Network (PCN) launched a collaborative effort that quickly and effectively coordinated a response to the pandemic that addressed the needs of its most vulnerable residents, including seniors. The PCN developed strategies for information sharing, designed targeted Working Groups, and partnered effectively with the Fraser Health Authority to provide a robust, inclusive, and multi-faceted response addressing physical and emotional well-being of seniors. One example of impact is the Food Security Working Group, which fed over 4,000 people each week in the community, including isolated seniors. The PCN gave its members a broad view of community response which allowed them to be more strategic in their individual initiatives. Largely due to the synchronization and transparency of information, the PCN was coordinated and efficient in their response to the needs of seniors; and solidified the commitment of partners to continue to work together for the well-being of seniors going forward.

See page 66 for the full case study.

**Personal support from partnerships**

Cooperation in partnerships has not only strengthened the work of those in the CBSS sector, it also has strengthened their hearts. One said, “[The...
partnership] makes me feel less like I’m isolated in it. It makes me feel like in the partnerships there’s more room for me and appreciation for me, even just being asked to talk at the [meeting] on Zoom." Another said, “It’s been energizing for us, because it’s our job to do this kind of coordination. People want to get together to have these conversations. We’re as isolated as seniors are.”

4. Leveraging existing partnerships
The data show that CBSS organizations and agencies with existing relationships forged prior to the pandemic have been able to utilize those partnerships and often strengthen them during the pandemic. Notably, the data also show that organizations and agencies have not been as effective in developing new partnerships during the pandemic (see discussion on the difficulties of establishing new partnerships below).

Benefit of pre-existing partnerships
According to the data, one of the most significant reasons for the effectiveness of the CBSS sector’s response to the pandemic has been the presence of pre-existing partnerships, collaborations, and relationships with other agencies and organizations in the sector. The time and energy invested in the development of partnerships prior to the pandemic has given leaders of organizations and agencies the ability to step quickly and effectively into responding. Pre-existing partnerships, and strong relationships among partners, has allowed leaders to know who to connect to, how to connect, and how to move forward with others.

The data from the interviews reveal that CBSS organizations and agencies that were already working collaboratively prior to the pandemic have been able to move quickly and effectively to coordinated response. Nearly three-quarters of survey respondents reported that the partnerships they had developed were highly effective during the pandemic. (see Figure 10)

One interviewee said,

We’re a strong multi service agency, but we have purposely worked in building partnerships. And that’s what we term is our superpower, that we play well in the sandbox. Maybe it’s easier when you have a solid foundation.

Relationships that have been developed over the years can greatly encourage and accelerate the work of the sector. For instance, one interviewee spoke about the value of existing partnerships, “I’ve also been for years involved in the community response network. That’s another way of knowing what everybody does, and knowing who the players are, so that you know how to help people.”

Sharing the power
Another benefit of existing relationships and established partnerships within the CBSS sector has been the ability for power and influence to be shared between larger and smaller agencies. One interviewee shared,

Some of the smaller agencies are hanging on by just volunteers. They don’t have the infrastructure. But what we do is we help to buoy them up. It takes longer. It’s more work. But the end game is so much better if you can build good relationships. We know what each other does. We know how to respond.
Further, with the barrier of needing transportation to attend meetings reduced, partners have been able to collaborate more effectively remotely. One interviewee said, “Technology was wonderful, allowing everyone to attend. I found that attendance was really great. I would love to see that continue.” Another added, “Because of Zoom, we’re having more connection with our partners than before.”

5. Building strategic partnerships

The partnerships that were developed and strengthened prior to and during the pandemic have provided an opportunity for CBSS organizations and agencies to be more strategic about their services and responses. Building on the partnerships and relationships that were already in place, CBSS organizations in many communities were able to design new approaches, mobilize themselves in new ways, and develop new ways of serving seniors.

Partnering in new more effective ways

In some cases, CBSS organizations and agencies were able to build on existing relationships to partner in some new and more effective ways during the pandemic. For example, one interviewee described,

All of us coming together has never happened before. We have facilitated meetings three times a week, with the mayor’s office, the Council, Fraser Health. The Non Governmental Organizations have all now come together. We have been tackling various topics. One on vulnerable seniors. A technology working group by which we’ve been able to access refurbished phones, laptops, and iPads and distribute them to vulnerable seniors, to have them virtually connected. One for food supply shopping. One for the homeless population.

In another case, an interviewee shared how they were able to leverage an existing relationship to develop an entirely new partnership,

I had a chat with the mayor the other day. We got money from Fortis community money, which never goes to a group like ours. It goes to groups that are working on things that are related to Fortis. But the mayor told me to please fill out the paperwork and let’s do this for the community. That’s fantastic. And that’s a whole new partnership.

Seeing new opportunities in partnerships

The ways CBSS organizations and agencies have comported themselves during the pandemic has opened new opportunities to work together with other organizations. One interviewee said, “You have to have the glasses on to sort of see where you could intersect with another community organization. I think COVID had made us super sensitive to that.” And another expressed a renewed willingness to partner with other organizations in their community.

“I can go to [this partner] now. I would go to them in a heartbeat to partner in helping the community. They are this amazing community supporter of us and the people that we serve and the people that they serve.”

Designing new solutions in partnership

CBSS organizations and agencies have been able to solve problems and provide solutions as a network of partners and not just as single, independent organizations. One interviewee described at length the dynamics at work for a CBSS organization that has tackled challenges through a partnership approach,

A huge problem with COVID was a lot of resources completely disappeared, but different ones also opened up which was fantastic. That is
what it means to be a community organization. It was exciting for us to all be able to develop different resources. As a community group, being able to relate to each other, that we are all in the same situation and we’re all just doing the best we can to provide support. It was nice for us to be able to communicate, even just on a small scale and say, ‘There is this caregiver, they have this issue.’ Then for all of us to work together on coming up with a solution for that one person. In turn, they are probably not the only one that’s going through that situation; there’s probably more people. And if we solve this one person’s problem, we may actually be solving it for a lot of people.

Establishing community-wide responses
Partnerships have helped whole communities wake up to the needs of seniors and mount a coordinated response to supporting seniors during this time of pandemic. One interviewee said,

We were one of the only communities in our entire region who had not gone towards what they call an Age Friendly community. Our little group representing the three agencies really pushed for that over the last couple of years, and now that’s happening. So, the timing there is really important.

Developing better, more coordinated responses
The effectiveness of partnerships also has been evident in the ability of CBSS organizations and agencies to employ more strategic responses because they had a more comprehensive understanding of the community needs, resources, and services. One said, “It gave us an opportunity to talk to partners, but also to understand what they were doing, how to streamline what was happening across the community, who needed help to catch those most vulnerable seniors, and make sure they didn’t fall through the cracks.”

B. Challenges to Partnerships
Whereas partnerships proved to be remarkably effective in marshalling a coordinated effort to meet the needs of seniors during the pandemic, the data also demonstrate some of the challenges of working in partnership. Looking at the totality of the survey and interview data, it appears that the most significant factor in determining how successful the CBSS sectors was at establishing meaningful and effective partnerships during the pandemic was the presence or absence of pre-existing relationships and a collaborative network both within the sector, with other not-for-profit agencies, and with the health authority and municipalities. Nearly two-thirds of survey respondents reported that the partnerships they established within the CBSS sector and/or with other non-profits during the pandemic were primarily based on pre-existing relationships. (see Figure 11 on next page)

In addition, nearly two-thirds of respondents found a lack of openness in municipalities and health authorities to partner during the pandemic. This lack of openness is not surprising given the pressures that the health authorities were under during the pandemic (for further detail see below: 2.Challenges in Collaborating with External Partners).

This first section below looks in more detail at what we learned from the interviews in terms of the specific barriers to partnering from within the CBSS sector.
1. Pressures that Limited Cooperation within the CBSS Sector

Some CBSS organizations and agencies that had settled into patterns of working independently from others prior to the pandemic, experienced difficulties in moving into a mode of effective collaboration. The history of competitive funding processes, and the limitations in the funding available to the sector, meant that many CBSS agencies were protective of their agency, and found the process of shifting direction and working more collaboratively confusing and challenging. Other CBSS organizations suggested that it was more difficult to work in partnerships during the pandemic.

*Competitive funding leads to a protective rather than cooperative mindset*

Competitive funding tends to make working relationships fractious and protective instead of trusting and collaborative; as each organization needs to position and defend its independent value, rather than defend the value of the group. One interviewee said,

> When you are reliant on limited funding, and you have to compete for it, it doesn’t set the stage for good working relationships. It takes time to build trust. We took part in the Project Impact in a partnership with three agencies working together. It’s taken a little bit longer to break down those walls and to look at how we benefit each other.

Another interviewee made a similar comment.

> I think it is pretty common to non-profits to think that you can lose things. You can lose the thread by not having the capacity to do stuff. If I don’t maintain those relationships, we can fall back to a position of [protecting ourselves]. We’re fighting against these walls that people have built. People are playing not to lose their property and protecting what is there instead of thinking more nimbly about the needs of seniors.

*Process of working in partnership led to role confusion*

Many new avenues of responsibility and new roles needed to be negotiated swiftly in the early stages of the pandemic. One interviewee commented on the initial duplication of services, saying,

> In the first couple weeks, everyone was scrambling a bit with what to do. It would have been great to have a plan in place. There was a lot of duplication at first. We didn’t really have direction on what to do. It would have been nice to do something like emergency services; if something comes up, everyone has a role and knows what they’re doing. That wasn’t the case.

Others noted that these complications continued and indicated that they were uncomfortable with this new way of working. One interviewee said,

> Before COVID, [an agency] owned the support services. They were the agency to do that. We came to the table only because they couldn’t respond to the huge influx. We had more flexibility around how we could take payments and the sheer number of folks that needed support. It took a little bit of working out at first, because we were essentially wading into their territory, and inadvertently, probably stepping all over their toes.
Reduced focus on finding the people with the right expertise

Concerns were raised about the decision-making process related to who had to deliver a particular service. One interviewee commented,

I think the system is complex. The more people that provide food, the more complicated it is. I think starting to provide food just because there’s money available for you to do it, and you’ve never done it before, is actually really dangerous. We should be doing the things we’re good at.

Reduced ability to form new partnerships

While many organizations talked about the increased opportunity to partner during the pandemic, some were concerned that the opportunity to develop new programs was actually reduced during the pandemic. One interviewee said,

Starting a new program during the pandemic has been hard to form partnerships, building trust is harder. Moving forward, I hope that we’re making more partnerships and I guess I hope that people are banding together to help seniors, and that they will require less trust to promote a program.

2. Challenges of collaborating with external partners, primarily municipalities and health authorities

For the CBSS sector, developing more robust partnerships with municipalities and health authorities is key to increasing the capacity to support BC’s growing population of older adults to live well in their own homes and communities for as long as possible. Historically the relationship between municipalities and the CBSS sector is more established and long-lasting than the relationship with the health system. In fact, in many communities, municipalities deliver and fund many of the programs and much of the infrastructure for the sector. At the same time, it is worth noting that the level of support from municipalities for the CBSS sector varies considerably across the province (see http://www.seniorsraisingtheprofile.ca/about-the-sector/research-report/).

In contrast, the development of a relationship between the CBSS sector and the health system is relatively new and evolving. Over the last few years, the Ministry of Health has provided funding to build the capacity of the CBSS sector. This investment of funds is based on the understanding that the CBSS organizations and agencies provide many of the health promotion and prevention services that seniors need to maintain their health, live well in community, and reduce their utilization of more traditional healthcare services.

And yet the data from the survey suggest that many CBSS sector organizations and agencies struggled to collaborate effectively with local health authorities and municipalities during the pandemic. Close to two-thirds of respondents report that their ability to collaborate with local health authorities and municipalities during the pandemic was quite limited. (see Figure 12 and Figure 13)
This lack of collaboration should not be surprising given the pressure that both the municipalities and health authorities were under during the pandemic. One interviewee from a health authority described that in the context of the pandemic, it was challenging for the health authorities to collaborate with the CBSS services. Instead, they were focused on protecting the acute care system and preventing transmission of the virus. The health authorities needed to direct their attention to priorities like the homeless population and residential care. As a result, they were unable to give attention to the other needs of seniors being addressed by CBSS agencies and organizations. This interviewee said, “So when you think about the issues that cropped up for seniors like access to food, primary care, transportation, anxiety, depression, and social isolation, you realize that we weren’t there as a health authority.”

At the same time, the data already presented in this report – and in the case studies of Burnaby, Cowichan, North Vancouver and Nelson – show that in communities where relationships between community-based services, the health authority and/or municipality were already in place, very robust and effective partnerships did emerge during the pandemic. These partnerships led to remarkable and timely community-wide responses focused on addressing the needs of the most vulnerable and isolated seniors in their communities.

3. Concerns about working collaboratively and being more inclusive in the future

Many organizations expressed concerns that the partnership gains made during the pandemic would be lost once the pandemic is over. Others raised concerns about the closure of services during the pandemic, the exclusion of small agencies from partnership arrangements, and the hope that these issues would be addressed in the future.

CASE STUDY
Maximizing the Impact of Partnership in Nelson

Kootenay Seniors leveraged extensive existing partnerships to reach seniors, addressing not only seniors’ basic needs, but their social interests as well. By connecting with WorkSafe BC and Interior Health Authority to determine safety protocols, policies, and procedures, Kootenay Seniors developed a safe system for volunteers to deliver food and necessities to seniors, and supported both Nelson Food Cupboard and Meals on Wheels with additional drivers. Kootenay Seniors also developed social and educational activities for seniors both virtually and in socially-distanced settings to reduce isolation among seniors. Kootenay Seniors served as a centralized hub for several partners to deliver services to seniors, they relied on provincial resources to ensure safety, and they leveraged intergenerational volunteers to develop a higher level of attention to seniors.

See page 69 for the full case study

Some in the CBSS sector worry that the progress that has been made in providing services beyond the walls of organizational mandates might be lost after the pandemic is over. One interviewee said,

The cooperation was pretty awesome. People cooperated without as many walls. I also think there might be a bit of pulling back into this sense of, ‘Well, I have to protect my agency.’ Funding has become scarcer over the last decade or two. I don’t know if that’s the sole thing motivating people to be so protective of programs, but it doesn’t make us look good.
Concerns about the future of working cooperatively with external partners
Since knowing the people and being able to relate individual to individual has been so instrumental in the ability of CBSS organizations and agencies to partner effectively, some are concerned that staff turnover will inhibit partnerships in the future. One interviewee said,

I feel like we need to keep cooperating. One way I know that happens is individual to individual, not organization to organization. We’ve gotten to know each other better as individuals. But people change positions frequently. As long as we stay in our positions, I feel like I can just pick up the phone and ask someone, ‘What are we going to do?’

Ensuring inclusion of smaller agencies
To build authentic and inclusive partnerships, organizations and agencies of all sizes and capacities need to be included. The activity of the pandemic has revealed some challenges in involving smaller agencies. There is good reason to consider equity in organizational participation going forward for the small groups as well. One interviewee commented, “What I see happening is that it’s all the big guys. It’s not the little seniors’ programs. They don’t have the resources to attend.”

Lack of involvement from agencies that have been closed during the pandemic
The CBSS sector has continued to struggle with gaps in service because of the absence of agencies that remain closed due to the ongoing pandemic. While some organizations and agencies have been able to build capacity to fill those gaps, others look to the future when they hope their missing partners will return. One interviewee said, “This other large agency, the largest resource center in our community, has been essentially shut down since March. A lot of people count on them.”
The fourth area of focus for this study is that of influence and advocacy, the ability of organizations to impact communities, and the leaders of communities, on behalf of seniors.

A. The Impact of Influence and Advocacy in Response to the COVID-19 Pandemic

Although the CBSS sector has been well positioned and prepared to respond effectively to the pandemic; the ability within the sector to elevate the voices of seniors and draw the community’s attention - including civic leaders - to the welfare of seniors during the pandemic, has revealed both strengths and areas for improvement.

1. Attention on the sector
The CBSS sector has found opportunities during the pandemic to shine a light on seniors in communities and bring attention to the needs of aging adults.

Persistent focus on the crucial priority of sustaining seniors at home
The CBSS sector and its persistent focus on the benefits of supporting seniors in their homes as they age focuses attention on the importance of increasing access to CBSS and home health services. The influence that is being exercised on behalf of seniors is not simple or easy, but profoundly significant. One interviewee explained,

As bad as it was to lose so many seniors, I think the jarring result of that is we cannot take our foot off the gas on this one, we’ve got to stay on it with our federal and provincial decision-makers, regardless of what party goes in, keep on them. This cannot happen again. The United Way [has] so many good programs to keep people home. That’s what the advocates believe - most people could be kept at home cheaper than putting them into a facility. I think that’s where we need to go, is really hammering this home: ‘How do we support people to stay in their homes in the safest, healthiest possible way?’

Consistent energy toward what matters most
The CBSS sector has been playing a critical role helping communities gain a better understanding of how to support seniors as they age. The sector has been educative. One interviewee spoke of the influence they are having on the community through a workshop:

The purpose of that workshop is to help communities understand that they, as neighbours, friends, and families, have a responsibility for noticing what is going on in their community. We tend to have been a culture to not interfere. How do you notice your neighbour is not looking as well kept as they usually are? How can you notice there are significant changes? How can you, as a neighbour, intervene without interfering? Sometimes it just means befriending these people, inviting them to go for a walk, or to have a cup of tea. It’s even more difficult during the pandemic, so maybe it’s a phone call, or it’s just letting people know that you’re there.

2. Visibility of seniors
Through the pandemic, organizations and agencies in the CBSS sector have been able to provide greater visibility of seniors’ needs to a broader group of people in the community than has been typical,
Seniors are being seen

One of the consequences of the pandemic has been the awakening of communities to the presence and needs of seniors. Through the months of the pandemic, and through the voice and action of organizations and agencies in the CBSS sector, communities are noticing seniors and becoming aware of their unique needs. One interviewee, in voicing what was heard from a leader in the community, said, “You taught us that seniors are in this picture.” Another interviewee said, “What I’m happy about is that seniors have finally started to make headlines. Others are coming to the realization that we’re not caring for seniors with the respect and dignity they deserve.” A third interviewee shared, “The interesting thing with COVID-19 and seniors is that it has really shone a light on seniors who are in care, and the whole way that the care is being offered in our country. We’re in the middle of a provincial election right now. I was reading the paper this morning and they were commenting that seniors are dying. This is the first time in a provincial election that seniors are being noticed. Visibility is stirring action

The increased visibility of seniors through the pandemic has stirred new and renewed involvement as increasing numbers of community members have stepped up and decided to volunteer and support seniors. One interviewee said, “It’s all about community. It’s all about coming together. One of the upsides is that the spotlight is shining on the senior population through this. And this has brought out volunteers that have not come out before. We have more interest in coming out and helping in some way. That’s something that’s come from all of this – the groundswell.

3. Fostering community will and determination for seniors

The data reveal that the work of the CBSS sector has been instrumental in galvanizing the will and determination of the community to care for seniors, especially during times of crisis.

Community decisions to benefit seniors

Through the work of the CBSS sector, the capacity and determination of communities has been influenced in service to the vitality of seniors. One interviewee shared, “There’s been community members that are suddenly there, putting the vulnerable population like seniors first, thinking about what’s been missing. There has been more awareness because we are talking about seniors a lot more.”

Promoting community agency for seniors

CBSS organizations and agencies have exhibited a proclivity for building the capacity of communities to take action on the priorities and needs of seniors. Agencies are situated within the community as the appropriate place to hear from seniors and decide together what services would best support the needs. One interviewee described, “[What if] people have a say in what they’re going to be doing as a community, or as an individual, or what if they can make those decisions themselves? I believe if you give people time and the resources to make those determinations, then they’ll do it. If somebody comes and tells me what to do, I wouldn’t do it. For me, the whole foundation of community development work is to help the community develop ways that they can determine what the issues are in their community.

Using a community development framework

CBSS sector organizations and agencies often choose to use a community development framework in responding to a community need. And at times, the timelines for communities to respond are incompatible with the requirements of external
funders and government. And yet these communities have persisted as best they can. One leader described the dynamics:

A government department with contract managers and all that structure in place, telling me what to do, and timelines and work plans... then it’s not based on our strategic plan. It's based on somebody else’s artificially imposed deadlines. We have some serious Community Response Networks that have taken five years to actually become a CRN. You just have to keep giving them information, including them, and opening up those conversations. When I first started doing this work, all the Ministry wanted to know was how many CRNs do we have. They put all these pressures on everybody.

4. Influencing community leaders and decision-making

The influence of the CBSS sector has found relevance in communities throughout British Columbia, especially during this time of the pandemic. As a result, the community, and those with roles of leadership throughout the community, have become more aware of what is needed for an effective community response.

Finding the voice to influence policy

The CBSS sector has been able to exercise voice in the service of seniors in their communities. In some ways this exercise has increased the influence of CBSS organizations and agencies at both a local level and a government policy level. One interviewee described,

I think [we were] really feeling like we had a voice, to provide our feedback from our community about what the seniors in our community are facing. To see a response really increased my faith that this works, that we can actually affect real change for seniors that can go as high up as provincial legislation. Just knowing that as a team and as community we can put forward concerns or suggestions and there may actually be some results from that.

Marshalling relationships to influence local community

The knowledge, understanding, and relationships that have been built with people in the community have given CBSS sector leaders the ability to network and influence what is happening for seniors in their community. One interviewee expressed,

My job is not promoting me but is promoting [seniors]. Making sure we’re in the community, they know who we are, and what we do. That’s what’s important, to get out there, make yourself known, that people know they can contact you. But you also have to know what’s happening in all those other communities and be able to call Langley or Coquitlam or Mission [municipalities] and say, ‘You know, this is what we run into. Did you have [the same]? What does it look like?’

Survey data show that almost two out of every three respondents (65%) report that they were able to advocate effectively for vulnerable seniors during the pandemic. (see Figure 14)

Benefits of localized knowledge for local decisions

Being able to bring forward the knowledge and understanding of the individual experience of seniors
and articulate that perspective to decision-makers has informed decision-making for the sector. One interviewee described an incident that captured this: I think having that connection with the Seniors’ Advocate, knowing that she has a direct voice with [the decision-maker] and is able to provide those concerns...was pretty amazing. I was able to share a letter from a caregiver... with her concerns around the quarantine. I was able to take snippets of that letter, read it to them. And then at that meeting have the Seniors Advocate...say, ‘Can I have a copy of that letter?’.

5. Listening to the voice of seniors
Given the proximity of CBSS organizations and agencies to the seniors they are serving, they have been able to tune into the contributions of seniors, and the needs of seniors, in a sensitive, localized way.

Inspiration of seniors
Being close to the experience of seniors and significantly in relationships with seniors has inspired many in the CBSS sector. Many in the sector have appreciated the strength and resilience of seniors. For example, one said, “I think it is such a beautiful opportunity that we can learn so much from this population...around resilience. A lot of these folks survived the Depression. They know, and they’ve been there.”

Learning from seniors
CBSS organizations and agencies have been in tune with the voice and needs of seniors in their communities. The data clearly reveal that these organizations and agencies have staff and volunteers that are attentive and sensitive to the perspectives of seniors. They listen carefully and closely to the voice of seniors. One interviewee said, I think it’s been an eye opener for many organizations. We didn’t even realize some things could be an issue for seniors, not being able to see their loved ones, which ends up in social isolation. There have been people that managed because they were able to go out and get some basic shopping done; all of a sudden, they’re just stuck in the house and they’re not able to go. So, all the groups are now thinking differently. I don’t think any of this is going to go back to where it was, the improvements that have happened, we just need to keep working on them.

B. Challenges to Advocacy

Throughout the pandemic, the CBSS sector has struggled to provide robust advocacy for seniors and seniors’ issues. Data from the CBSS sector survey reveal the perception of a lack of influence from those in the CBSS sector among decision-makers. Only 1 in 5 (22%) reported having significant influence on decision-makers during the pandemic, revealing a substantial lack of impact on leaders in the community. (see Figure 15 on next page)

The data reveal vulnerabilities or missed opportunities in the following areas:

1. Missed opportunity for advocacy
Despite evidence that some advocacy has been accomplished during this time, there are several clear gaps that persist, and missed opportunities that have been overlooked.

Struggling to influence the community
Even though the pandemic has highlighted the needs of seniors for many communities, the survey data show that the prevailing perception of those in the CBSS sector is that their influence on communities has remained limited. Almost half of those surveyed (48%) reported an unsubstantial influence on the willingness of others in the
community to respond to the needs of seniors during COVID-19. (see Figure 16)

**Figure 16. How much influence did you have on the willingness of others in the community to respond to the needs of seniors during COVID-19?**

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>Some</th>
<th>Considerably</th>
<th>Very</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>7%</td>
<td>5%</td>
<td>33%</td>
<td>27%</td>
<td>38%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Mean: 2.655 | Confidence Interval @ 95%: [2.381-2.924] | n=95 | Standard Deviation: 1.351 | Standard Error: 0.139

Persistent lack of visibility

There are aspects of the experience of seniors that have yet to be illuminated for many communities. The gravity of some features of seniors’ experiences remains to be fully grasped. One interviewee said, “I think they are still paying lip service, in my opinion, to the elder abuse piece.”

Lack of capacity

Many CBSS organizations and agencies have experienced their own limitations in exercising advocacy for seniors. One interviewee shared, “Because we have our noses down, I don’t think we’ve had a whole lot of time to do any advocating. Certainly, we are speaking to the issues that we see as issues. I’ve had a couple of opportunities to talk to our local MLA, who’s the seniors’ representative. So, we have had some opportunities.

Lost opportunities

Since many staff and volunteers have been busy serving the needs of seniors during the pandemic, there is reason to consider the lost opportunity of advocacy during this time. One said,

CASE STUDY

Advocacy for Seniors by Seniors in Vancouver

In July of 2020, seniors had not received their anticipated Guaranteed Income Supplement (GIS) from the federal government. In Vancouver, seniors called their local community-based seniors’ service organization for help, the 411 Seniors Centre Society. The ensuing advocacy effort led to near immediate relief for the seniors affected. This effort was effective because seniors trusted the 411 Seniors Centre Society to respond quickly and effectively. The organization acted quickly and nimbly, and the staff and board were able to leverage their existing advocacy network and experience to address the problem.

See page 72 for full case study

**Figure 15. How much influence were you able to have on public decision-makers during COVID-19?**

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>Some</th>
<th>Considerably</th>
<th>Very</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>26%</td>
<td>18%</td>
<td>34%</td>
<td>26%</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Mean: 3.596 | Confidence Interval @ 95%: [3.349-3.843] | n=99 | Standard Deviation: 1.253 | Standard Error: 0.126

Lost opportunities

Since many staff and volunteers have been busy serving the needs of seniors during the pandemic, there is reason to consider the lost opportunity of advocacy during this time. One said,
I feel like from an advocating point of view, we haven't had a lot of opportunity. I think that this pandemic reveals cracks in a system that were already there: that we have a lot of seniors living in poverty, that we have a lot of very isolated seniors, and that we don't have enough resources to properly support seniors. I'm not sure that there's been a lot of opportunity in the middle of this to say those things.

**Absence of good data on collective impact**

Having data about the impact of organizations and agencies in the CBSS sector is critical to prove the value of the CBSS sector in communities throughout the province, and to inform the strategies of the sector. One interviewee said, “[We need to do more to] help the community decide what it is they can do as a community. We must know about [our own impact and our collective] impact.”

Currently, there appears to be a lack of sufficient data. One leader shared their effort to increase the amount of available, quality data:

> When I started doing this work and got the first grant payment from the Ministry, I hired an evaluator and we’re going into our 10th year of a developmental evaluation. We are trying to increase the amount of awareness [of] abuse and neglect, and self-neglect that’s in the community. There’s been a steady increase over the last 10 years. It’s really hard to get that kind of data.

2. **Missing voices**

Throughout the pandemic a number of critical voices have been overlooked and under-amplified.

**Not enough opportunity to elevate the voice of seniors**

Whereas many in the CBSS sector have been able to speak on behalf of seniors, there is less evidence that the sector has elevated the voices of seniors to speak for themselves. One said,

I think giving actual seniors a voice would be good. Having more opportunities for seniors to be interviewed and have their voice heard, their situations and their experiences actually heard would be amazing.

Data from the survey also reveal a mixed ability of agencies to support seniors to use their voice to advocate on their own behalf. 46% report only a moderate ability to help seniors use their voice during COVID-19. (see Figure 17)

**Not enough space to listen to caregivers**

There is also some concern that caregivers do not yet have the kind of voice and influence that they should have during this time. One said,

We certainly are noticing a challenge that caregivers are just too overwhelmed. They don’t have the time to sit and fill out a survey or maybe even to be interviewed. The caregivers need to be heard. Especially the caregivers who don’t have time to be heard or don’t have the emotional capacity or are just too overwhelmed, those are the ones who need to be heard. So how can we make that happen?
Part 3 – Recommendations for the Future

1. **Promote the CBSS sector as an essential service**

The findings from this study confirm the extraordinary value of the sector. Most, but not all, CBSS sector organizations and agencies were able to respond to the pandemic quickly and effectively. This sector forged partnerships; they engaged tirelessly and creatively; they mobilized the care of the community by gathering volunteers and partners; and they illuminated the needs of seniors during the crisis. Going forward, the sector needs to be understood as an essential service for supporting older adults to live and thrive in their own homes and communities for as long as possible. At the same time the sector needs to do more to promote a greater understanding of what is needed to age well in community; influence policies that affect the aging population at the local, regional and provincial level; and magnify and mobilize public support for locally based, community-based seniors’ services focused on health promotion and preventions.

- **Increase attention on the sector to promote the cause of serving vulnerable seniors throughout BC.**
  
  The worth of the sector is supported by the findings from this study. However, the visibility and influence of the sector is not what it should be. The sector will be able to draw more interest, energy, and resources if the role, expertise, and contribution were better understood by municipal governments, the health system, and the general public.

- **Develop capacity for greater advocacy and increased influence to catalyze community care.**
  
  The sector would benefit from a coordinated voice of advocacy and influence. The unique knowledge, perspectives, and insight of the CBSS sector about aging adults and effective approaches toward the seniors in communities should have greater prominence in public policy. Developing greater aptitude for advocacy will serve seniors better. Finding a coherent and convincing voice of the sector will not only elevate the work but enhance the impact of the work in the lives of seniors.

  - **Promote the expertise from within the sector.**
    
    The perception of many in the CBSS sector is that the expertise of those who work in the sector is not respected or valued. Instead of simply being the less-expensive alternative to other forms of seniors’ services, the sector has significant and unique expertise that should be recognized, invested in, nurtured, and appreciated.

  - **Elevate the voice of seniors.**
    
    The findings point to a moderate ability of the sector to speak on behalf of seniors, but a lesser ability, perhaps even an inadequate ability, of the sector to elevate the voices of seniors. There needs to be a concerted effort to clear the way for the voices of seniors to be magnified in communities and throughout regions of the province. Community-based seniors’ services are well-positioned to play this role due to the relationships of trust they have with older adults in local communities and their awareness of emerging trends.

2. **Build, support, and sustain partnerships**

Partnerships have been crucial for the ability of communities to meet the needs of vulnerable seniors during the crisis, but partnerships cannot thrive in a vacuum. There must be time, energy, and resources provided for partnerships to flourish. Given the
profound impact partnerships have had on the ability of communities to serve the needs of their aging adults, increased attention, strategy, and resources to strengthen partnerships would be beneficial in all times and circumstances, but particularly during times of crisis.

- **Establish partnerships early on.**
  Whereas many partners were able to pull together during the crisis quickly and effectively, the data show that the most effective partnerships resulted from pre-existing habits of partnering and cultures of collaboration that had been in place prior to the pandemic.

- **Develop leadership skills for networking and partnerships.**
  Many networks coalesced during the pandemic. The most effective ones were characterized by existing or quick-to-develop leadership in the community. To strengthen networks in the future, strategies are needed to identify and support leaders to build and sustain networks. Strengthening networks requires dedicated resources so that staff in the CBSS sector have the time and support needed to develop effective community partnerships.

- **Develop partnerships with municipalities and health authorities.**
  Partnerships between CBSS sector organizations and agencies and the government partners of municipalities and health authorities proved to be beneficial, but the data reveal they are underdeveloped. Greater attention to the local and provincial partnerships will provide the sector more integration, coordination, and efficacy. These partnerships will provide support for the most vulnerable seniors who are likely to need access to both health and social supports to continue to live and thrive in their homes and communities for as long as possible.

- **Expand partnerships to include other leaders and agencies.**
  Given the power of partnerships to advance the work of those serving seniors, increasing the involvement of other key entities – physicians, business leaders, faith communities, non-profit organizations, advocacy organizations etc. – will nourish partnerships and make them more effective.

- **Support networking among CBSS agencies in small communities regionally and provincially**
  The CBSS sector organizations and agencies working in smaller communities can experience isolation, especially during a crisis. Encouraging networking among the CBSS sector from smaller communities regionally and provincially would strengthen their ability to serve the seniors in their communities.

3. **Develop the staff capacity of the sector**
   The leaders, staff, and volunteers in the sector have demonstrated a remarkable ability to find ways to stay engaged, solve problems, deliver services, and evolve programming strategies. Many people have gone above and beyond the typical requirements of their jobs and roles to rise to the challenge, which should not be taken for granted. We should match the service of the staff with better supports for the future. The response of CBSS sector during the pandemic demonstrates the value of a caring, highly skilled, and well-equipped staff to serve seniors during times of crisis and beyond.

- **Provide more support for staff throughout the sector.**
  The findings of this study point to the dedication of those who are working in the sector. Many staff have become depleted and exhausted from the length of the crisis and the weight of the burden of service. Staff need to be supported and fairly compensated during times of crisis and beyond.
beyond to preserve their capacity and protect the human resources of the sector from burnout or flight.

- **Elevate the credibility and promote the esteem of CBSS staff.**
  CBSS staff play a critical role in advancing the work and effecting impact. Staff assess needs, overcome strategic obstacles, motivate people, and persist through complicated and vexing situations and contexts, which requires a high degree of competency and skill. Creating a learning culture in the sector, building on the work that has already begun (through the development of evaluation processes, leadership training, and communities of practice) is critical. In addition, we should be building the skills and credibility of the workforce and value their contribution through professional training and support, more competitive wages, access to pensions and benefits, and by creating ongoing educational and mentorship opportunities among peers within the sector.

- **Recruit a multi-generational range of staff.**
  One of the vulnerabilities of the sector revealed by the pandemic is the reliance on senior adults to serve senior adults. During times of crisis, especially when aging adults are disproportionately affected by the crisis, having the same generation serve and be served compromises the resilience of the sector. The sector would be strengthened by the involvement of a multi-generational staff.

- **Involve more diverse staff.**
  Given the diversity of the most vulnerable seniors, recruitment strategies should be developed to attract staff and volunteers from historically marginalized communities such as racialized groups, immigrants, Indigenous persons, people with disabilities, LGBTQ people, and people who speak other languages in addition to English.

- **Develop strategies for agencies lacking staff resources.**
  Some organizations and agencies have experienced limitations in their staffing during the pandemic and would benefit from partnering and learning from others in the sector who have developed innovative strategies for addressing short staffing (e.g., cooperative shared staffing models; shared HR resources; etc.).

4. **Strengthen the support for volunteers**
   One of the great strengths of the sector is the high level of involvement of volunteers. However, an over-reliance on volunteers leaves the sector vulnerable. The perception of many is that volunteering during this time of pandemic has been so taxing on the volunteers that many of them will not, or have not, continued to engage and sustain their commitment. Increasing the staff commitment and providing more support for the CBSS sector volunteer corps will strengthen the sector.

- **Develop strategies to train and equip volunteers and invest in the development of their capabilities.**
  Volunteers are essential to the work of the CBSS sector. Greater attention to the recruitment, support, and recognition of volunteers would enhance the ability of the sector to maximize the impact of its work. Many volunteers are working with seniors who have complex needs. Providing sufficient training and equipping for volunteers is essential.

- **Design ways to support volunteers who are exhausted and vulnerable.**
  Volunteers need support and coordination, especially aging volunteers and especially during crises. The ability of the CBSS sector to support volunteers will be critical for the future success of the sector. There will need to be strategies and resources to recruit and re-train volunteers, and to provide ongoing volunteer recognition.
• Rethink the balance of volunteers and paid staff to ensure strength and resilience of the sector. To provide consistency and stability, the sector recommends securing more paid support, especially in contexts with higher need seniors. This transition to more paid support will ensure that fundamental programs and services can be sustained through times of crisis.

5. Advance strategies for senior inclusion and engagement
The acute isolation many seniors have experienced during the pandemic reveals a pervasively pernicious issue of isolation with differing levels of severity for some very vulnerable populations and individuals. Although not caused by the pandemic, what has been illuminated is a persistent and significant problem of visibility, engagement, and integration of many groups of seniors in and by their communities. The pandemic of 2020-2021 should be a catalyst to remedy isolation, help communities aggressively pursue solutions to loneliness, and address the ongoing marginalization of many groups of seniors.

• Pursue strategies to involve the unseen and underrepresented.
  The findings reveal the challenges of inclusion during times of crisis. Despite the effectiveness of CBSS organizations and agencies in reaching seniors broadly during the pandemic, many participants in this study continue to be concerned about those who are still missing. Going forward, the sector would benefit from greater attention to inclusive practices and strategies to address low-income, language barriers, immigration and refugee issues, racism, disabilities, physical and mental health issues, gender, gender identity, indigeneity, and sexual orientation issues, among others, for seniors.

• Increase ability to connect seniors through technology by providing access, training, and support for technology.
  Using technology to communicate has proven to be essential for providing services to seniors during a pandemic crisis. And yet, many seniors still do not have access to technology or the ability or level of comfort to utilize technology. In particular, low-income seniors and seniors who speak a language other than English have unique challenges accessing the internet. If the interaction between one another is a fundamental human need, then it is imperative to provide technology and training. For example, interviewees had specific concerns about seniors needing support to exercise in their own homes to maintain their physical mobility and mental well-being. These challenges can be addressed through technology services. However, the promise of technology will only be realized if seniors have access to reliable and affordable internet services and devices, in addition to the support and resources to learn and engage through technological platforms.

• Strengthen bridges between seniors and the whole community to provide a resilient ecosystem of support for seniors.
  The isolation that seniors have experienced through the pandemic reveals a pervasive challenge of ameliorating isolation more broadly for all seniors in communities. Services and programs that have inadvertently perpetuated models of service that remove seniors from their communities and inhibit their ability to interact inter-generationally and with the broader community, are deleterious. All services and programs should be examined to ensure that they connect rather than divide and isolate seniors from community.
• Advance the ability to connect isolated seniors to the services of the CBSS sector.
The pandemic has revealed that many communities—though certainly not all—did not know who many of their most vulnerable seniors, including where to find them, what their needs were, and how to connect with them. In general, these have been the seniors who did not access resources pre-pandemic. In the future, outreach to isolated seniors will be critical. There is much work to be done to find, engage, and serve the seniors who were already isolated and became even more isolated during this crisis. A concerted effort needs to be undertaken to help every community find, reach out to, and connect these seniors to community-based seniors’ services.

• Develop a multi-systems and multi-dimensional approach to senior inclusion.
One of the primary findings from this study is the benefit of a coordinated, multi-agency effort to engage seniors in the community. Going forward there needs to be ongoing efforts to develop robust and diverse partnerships, coordinate systems of support, and develop multiple layers of resources and responses to secure a systems-level approach to senior engagement and inclusion.

6. Strengthen the resilience of the sector
The health and vitality of the CBSS sector is critical to the health and vitality of seniors. As such, the work of the United Way to bring the sector together and increase the capacity of local organizations, agencies, and communities needs to continue and to be significantly strengthened over time.

• Continue to build a culture of learning in the sector to promote sharing of best approaches and promising practices among CBSS service organizations and agencies across the province, and the learning that each is undertaking in response to the crisis, the sector would benefit from coordinated strategies to elevate best practices and promote learning between and among organizations and agencies. Peer-to-peer learning will maximize the effects of the insights and discoveries from this time.

• Develop and share policies, processes, and tools across the sector.
The findings of this study show there are significant overlaps in how organizations and agencies approach their work, and therefore there would be benefits to developing and sharing common policies, processes, and tools across the sector. Taking on this work at a provincial level will free up time and energy for local organizations and agencies to work on their core mission. Finding opportunities to discuss and identify the specific areas where common approaches, policies, and tools are needed, for example during future regional consultations, would be a positive first step.

• Explore and enhance support for CBSS agencies in rural or remote areas.
Many organizations and agencies that are distanced from population centers face unique challenges. Rural and remote regional access to resources is inconsistent compared to urban centers. Greater attention should be given to supporting organizations and agencies that are isolated.

• Enhance communication strategies throughout the sector to foster the sharing of knowledge.
Information exchange is critical to providing successful services. The CBSS sector would benefit from clearer communications strategies for and from the sector. Some areas for improvement could include regular updates from
all levels of government and foundations on new funding opportunities; access to databases with reporting and resource information; identification of service gaps or overlapping services in local communities; and media strategies and support in distributing information about seniors and to seniors.

7. Secure stable and core funding for the sector
The value of the CBSS sector has been illuminated and confirmed through this study. The data demonstrate the responsiveness and effectiveness of the sector during the pandemic of COVID-19. The data show that many perceive the cost-effectiveness of the CBSS sector’s approaches superior to traditional institutional approaches. However, some of what has been accomplished has resulted from special funding provided in response to the pandemic. Many fear that a return to conventional funding will be a barrier to the future effectiveness of the sector. Episodic funding will erode the ability of the sector to be nimble and respond to the ongoing challenges of meeting the needs of vulnerable seniors, and the staff and volunteers that serve them. Competitive funding will inhibit the ability of organizations and agencies to work together with the effectiveness of collaboration. The sector needs sufficient, stable, and secure funding for the future.

- Provide core funding for the sector.
  Funding to provide for the fundamentals of agency health – like over-head costs, human resources, and spaces and technology to convene – is needed to preserve the effectiveness of the sector going forward.

- Secure stable, multi-year funding that allows organizations and partnerships to plan strategically and implement programs and services confidently.
  Given the innovation and proliferation of nascent programming and service approaches for seniors during the pandemic, there is concern among some that unpredictable and insecure funding will impede the ability of organizations and agencies to sustain their creativity and innovation.

- Find flexible funding to foster the responsiveness of the sector.
  Flexible, unrestricted funding during the pandemic has allowed organizations and agencies to pivot their services and provide what is needed, when it is needed, and how it is needed. The CBSS sector has been able to be senior-oriented instead of funder-oriented. Flexible funding has benefited the sector greatly during the pandemic and its continuation is crucial for the sector to continue to develop original effective services for seniors.

- Strengthen funding relationships with local governments and health authorities.
  Outreach and engagement with key government stakeholders must increase. It will be crucial to highlight positive collaborations and relationships that have developed during the pandemic, and to discuss how these partnerships can be improved and coordination strengthened at a provincial, regional, and local level moving forward.
Part 4 – Case Studies

Culturally-Specific Outreach to Seniors

Members of the Eldercare Project in Cowichan (EPIC) network table leveraged an existing collaboration for senior well-being to develop innovative and culturally appropriate ways of reaching First Nations communities on Vancouver Island.

Who was involved?

Our Cowichan Communities Health Network was formed over 10 years ago with the shared commitment to help people in the Cowichan Valley region attain the highest possible level of health and well-being. The area includes four municipalities, nine electoral areas, nine First Nations and Métis groups, local and regional government organizations, and a population of approximately 81,000 people.

In 2016 members of the Network put to use a New Horizons grant to broaden and strengthen their long-term community collaboration through the formation of the Eldercare Project in Cowichan (EPIC). EPIC became the structure through which entities in the region directed their efforts toward improving outcomes for vulnerable seniors. Prior to that, Volunteer Cowichan had run the Better at Home program for the Cowichan region since 2013. Further cementing the commitment to serving seniors, Volunteer Cowichan moved into a new building in 2019, co-locating with the Cowichan Seniors Community Foundation. The Cowichan Seniors Community Foundation serves seniors in a variety of ways, including operating a United Way funded Community Link program and serving Meals on Wheels. In March 2020, Volunteer Cowichan began operating the Safe Seniors Strong Communities program with the support of Cowichan Elders: Hiye’ye Lelum (House of Friendship) Society. Stella Johnny, Program Coordinator of the Hiye’ye Lelum Society, and a well-respected member of the Cowichan Tribes, connected seniors to services through the Better at Home program.

When the pandemic began, these organizations quickly integrated their volunteers, funding, and human resources to conduct phone check-ins, referrals amongst organizations, and to deliver groceries and food. Simultaneously, organizations worked with Stella Johnny to conduct personalized outreach through social media to local First Nations communities.

What actions did they take?

Volunteer Cowichan and Cowichan Seniors Community Foundation acted quickly to support each other’s services and leveraged relationships with Hiye’ye Lelum Society to reach the Cowichan Tribes, among others:

1. The United Way of the Lower Mainland encouraged the two organizations to combine their funds to respond more nimbly,
2. The Cowichan Seniors Community Foundation’s Community Link Worker called their own list of seniors in their membership as well as the Volunteer Cowichan list of senior members weekly to check in,
3. Volunteer Cowichan staff participated in frequent EPIC meetings, Cowichan Leaders Task Force meetings, and Food Security Task Force committee meetings. As a result, Volunteer Cowichan began referring seniors to several food support services,
4. Volunteer Cowichan hired a Volunteer Coordinator who organized volunteers to grocery shop, conduct friendly phone calls, and deliver other donated goods.

5. Volunteer Cowichan launched a “Mask the Valley” initiative, coordinating volunteers to make masks, in collaboration with the “Maskateers,” another local mask-making group. Together, they produced over 5,000 masks for the community, particularly the First Nations communities, by mid-June, and

6. Upon request from Volunteer Cowichan, Stella Johnny began making videos of herself and sharing information about wearing masks via her social media accounts on a weekly basis. She continues to reach hundreds of First Nations community members this way.

What is the impact?
As a result of this collaboration, many vulnerable seniors received much needed services quickly and efficiently. Local organizations nurtured, leveraged, and cemented existing strategic partnerships. The members of EPIC united to coordinate local efforts and reduce boundaries to services. Due to the high level of cooperation among these organizations, seniors received food services and social check-ins seamlessly.

Additionally, collaborating organizations embraced a broader mandate. For example, Volunteer Cowichan more thoroughly incorporated food security into its Better at Home program. Concurrently, Cowichan Seniors Community Foundation expanded its list of seniors served. Additionally, by adding the Mask the Valley initiative and leveraging Stella Johnny’s reach, the organizations more effectively communicated with vulnerable seniors in their community.

Finally, vulnerable seniors in First Nations communities on Vancouver Island were educated and encouraged to take precautions, especially around masks, by a member of their own community. Stella Johnny’s role amplified the sector’s effectiveness within the Cowichan Tribes and surrounding communities.

What are the key factors that make it effective?
Several key factors make this collaboration effective and efficient:

1. Long-term relationships: The participating organizations leveraged long-term relationships and partnerships to quickly take action. Because of their existing trust and collaboration, organization staff felt comfortable sharing the workload, the power, and the funding.

2. Frequent communication: EPIC moved to weekly meetings in April 2020. Prior to that, they hosted monthly meetings about effectively serving seniors for several years. As a result, participating organizations carried forward existing habits of information sharing and communication. Volunteer Cowichan and Cowichan Seniors Community Foundation’s co-location has simplified communication even more, as has Stella Johnny’s shared role with Volunteer Cowichan and the Hiye’ye Lelum Society.

3. Flexible funding: The United Way of the Lower Mainland alleviated funding restrictions and trusted local organizations to serve seniors in their own way. In the words of a Volunteer Cowichan representative, the United Way of the Lower Mainland encouraged two organizations to “stop everything you’re doing, funnel your funds together to make this work.” She added, “That allowed us to respond quicker, especially during the first four or five weeks. That was a stepping point.”

4. Well-respected community member: The power of an Elder of the Cowichan Tribes advising her community members to wear masks cannot be overstated. Stella Johnny is a highly respected Elder in her community. She was a preschool teacher for 20 years and has been “culturally active for more than 40 years.” In her words, the
reason community members listen and respect her advice is, “I’m a grandma. What would a grandma tell you to do? I’ve survived this long...” She said, “I don’t want to be considered a Dr. Bonnie [Henry] advocate; I just want us to be safe. I can be that voice.”

What are the lessons learned?

1. **Modeling behavior leads to best practices:** Stella Johnny is motivated to use her voice, because she believes her actions have an impact. She said, “In order for our children to learn, we have to model the way we want them to behave. It’s all any leader or Elder can do, walk the talk.” Inspiring others in particularly affected communities can amplify the personalization of messaging to seniors and motivate them to make positive changes.

2. **Volunteers amplify impact:** With an influx of COVID-19 specific funding, Volunteer Cowichan’s Volunteer Coordinator was able to power the grocery shopping and delivery service with volunteers. That change allowed staff to focus on their primary roles. Volunteers made the food security portion of the work possible. Previously, Volunteer Cowichan had avoided relying on volunteers to this extent, due to a fear of replacing jobs or preventing economic benefit to the local economy. However, this collaborative effort taught them the value of passionate and dependable volunteers.

3. **Formalized relationships increase understanding and cooperation:** Much of this collaborative’s impact occurred through informal arrangements, such as sharing funding and contact lists, and personal social media initiatives. Unfortunately, the lack of official agreements resulted in occasional misunderstandings. A formal MOU or communications policy would benefit the collaborative moving forward.

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**Collaboration for the Food Security of Isolated Seniors in North Vancouver**

An innovative collaboration led to improved food security for isolated and vulnerable seniors in North Vancouver. The collaboration was initiated by Silver Harbour Seniors’ Activity Centre, working with Vancouver Coastal Health, North Shore Community Resources, Family Services of the North Shore, and the Lionsview Seniors Planning Coalition, among others, to build food security among particularly vulnerable seniors in the North Shore area of Vancouver during the pandemic. Together, these organizations delivered nearly 450 meals each week to seniors in five senior-specific subsidized housing facilities, and seniors living in the community, from April to September 2020. These services continue today to a lesser extent.

**Who was involved?**

Prior to the pandemic, Silver Harbour Seniors’ Activity Centre’s primary service was focused on building community through the provision of high-quality meals for seniors in a social setting. The Executive Director shared, “You would see about 80 seniors at lunch time in our largest room, eating together. Food is really important around here.” Prior to COVID, the Centre received over 600 visits daily, with one quarter of these related to food. Seniors frequently visited the Centre to participate in one of the Centre’s service offerings, such as an arts class, and then also purchased a meal. However, in the early days of the pandemic, on March 16, the Centre closed to the public. Within weeks, it had developed and implemented an entirely new set of services, new partnerships, and a new structure to address the food needs of seniors.
At first, Silver Harbour simply packaged its existing high-quality lunches and delivered them to existing food service participants. Soon, however, the staff realized, in the words of one, “There would be quite a few people who would be unable to afford the $10 per meal bag.” In response, Silver Harbour secured funding and built partnerships to expand its reach and deliver food to more vulnerable seniors who were not members. Silver Harbour also added a meal pick-up option, just outside the Centre.

The effort is an example of an effective partnership that came together very quickly and succeeded in garnering new funding from a variety of sources including Vancouver Foundation, West Vancouver Community Foundation, New Horizons COVID-specific funding, Community Foundations of Canada, Safe Seniors Strong Communities, and local businesses (e.g. Seaspan and Western Stevedoring, among others). Vancouver Coastal Health served North Vancouver seniors residing in four senior-specific subsidized housing buildings: Twin Towers, ANAVETS, Entre Nous Femmes Housing Society’s Capilano House, and Zajac Norgate House. (Prior to the pandemic their staff and volunteers did not provide services to the seniors living in these buildings but did have a relationship with these housing facilities.) Early on in the pandemic, the Vancouver Coastal Health (VCH) and Silver Harbour developed a partnership to expand food security for these vulnerable seniors. To do that, VCH building managers worked with Silver Harbour volunteers and the VCH housing staff to deliver food directly to the residents. Silver Harbour established a similar partnership, with another housing facility, Kiwanis Lynn Manor and also worked with Family Services of the North Shore to distribute meals and supports to seniors living in the community.

When the majority of funding had been expended in the fall, Silver Harbour staff worked with VCH to determine the best way to reduce services. For example, in one housing facility services were adjusted to a less costly soup and muffin bag instead of the full meal bag. Another approach reduced the total number of meals delivered. Solutions were found to still provide services sustainably.

**What actions did they take?**

Silver Harbour Seniors’ Activity Centre and collaborating partners redesigned their services to address food insecurity and support vulnerable seniors. Specifically, they took these steps:

1. Silver Harbour re-imagined its transportation service, where instead of transporting people, they began to transport food,
2. VCH staff identified the most vulnerable seniors living in the five housing facilities where this partnership took place,
3. VCH provided a list of suite numbers to Silver Harbour Seniors Centre each week to determine where meals should be delivered, without providing residents’ individual contact information,
4. Concurrently, Family Services of the North Shore identified seniors living in community in need of food,
5. Silver Harbour prepared food, transported it to the buildings, and screened and trained volunteers to drop the meal bag, and
6. All participating organizations added content, information, kindness cards, and gifts to the food deliveries as they became available.

**What is the impact?**

As a result of this work, the most vulnerable seniors in four subsidized-housing buildings and living in the community received food and a brief social visit. By partnering with VCH and Family Services, Silver Harbour was able to extend its reach and provide meals and support to vulnerable seniors who were known to be in need, but had no previous connection with the Silver Harbour Centre. This made it possible for Silver Harbour to reach out to a more isolated group of seniors and provide them with a high-quality
food service, and information about COVID-19 and the supports and services available to seniors living in North Vancouver. One representative said of the seniors served, “Seeing us once or twice a week made them feel good. Quite often, they wanted to stand there and chat. They’re still very appreciative.” In addition, the partnership cemented the collaboration between the Community-Based Seniors’ Services sector and VCH’s housing support services.

What are the key factors that make it effective?

Several key factors elevated the impact of this collaboration in the North Shore:

1. **Trust:** As the Executive Director of Silver Harbour, Annwen Loverin said, “When you have a preexisting relationship, you can trust other organizations to make the decisions you would be making. We trust the Vancouver Coastal Health staff to know who needs it (food). It’s the same with Family Services. We know we have good value alignment. At some point, we just need to say that if someone needs to eat, we can give them food.” No partner required undue prerequisites like applications or income verification. Additionally, VCH trusted that Silver Harbour’s volunteer screening and approval was sufficient. As a result, the recipients remained anonymous for the most part. The only information Silver Harbour received was a suite number where the meal bags were to be delivered. Because of this trust, the seniors stayed protected, were not burdened by paperwork, and had their needs met efficiently and effectively.

2. **High quality food:** Silver Harbour has a reputation for honoring seniors with high quality, delicious, and hearty food. It continued to uphold the superior quality of the food, despite packaging and delivering it to seniors in their home.

3. **Funding from local business and foundations:** The influx of funding from local businesses and foundations contributed to this partnership’s effectiveness. As a result of this funding, Silver Harbour maintained its reputation for high quality meal service and expanded their reach beyond their own members to especially vulnerable seniors in the area.

4. **Operational stability:** Silver Harbour had managed an extensive food services program prior to the pandemic, and also had benefited from stable municipal operating funds. As a result, Silver Harbour was well positioned to dedicate human and financial resources to adapting its programming in new and innovative ways.

5. **Knowing the seniors, knowing the need:** Each of the participating partners contributed valuable expertise to this collaboration. Vancouver Coastal Health staff offered their personalized connection to seniors living in four housing facilities and Family Services of the North Shore already had a list of vulnerable seniors living at home through its Christmas Bureau services. Each of these entities also understood their residents’ level of food insecurity and capacity to pay for services. As a result, Silver Harbour leveraged its transportation services, food preparation, and volunteers to meet the specific needs of low-income, vulnerable seniors living in subsidized housing and in the community in North Vancouver.

What are the lessons learned?

1. **Preexisting relationships were a key to success:** The preexisting relationships among Silver Harbour and individual staff members at Vancouver Coastal Health and Family Services of the North Shore meant that they could quickly leverage their trust in each other, use their combined local knowledge, and respond effectively to the crisis of food insecurity created by the pandemic. This successful partnership and collaboration can serve as inspiration for others in the Health Authorities and in the Community-
Based Seniors’ Service sector about the benefits of collaborative relationships in reducing the barriers in serving isolated and vulnerable seniors.

2. Working in less bureaucratic ways has many benefits: Vancouver Coastal Health staff faced a food security crisis for vulnerable seniors in the housing facilities they served; however, providing food was not its focus. High quality food, transportation, and volunteer screening are strengths of Silver Harbour; yet, access to the housing facilities was strictly limited. Recognizing the potential for synergy between VCH and its trusted partner Silver Harbour, VCH chose to reduce barriers for Silver Harbour. This easing of restrictions contributed to the food security of many vulnerable seniors.

Technology in Fraser Lake

Autumn Services - Society for Senior Support knows their community well. When a donation of smart phones from Telus Connecting for Good was delivered through the United Way of the Lower Mainland’s Better at Home program, Autumn Services knew how and to whom to distribute the phones.

Who was involved?
Connecting for Good, a Telus community giving program, helps ensure equal access to technology. In the early days of the pandemic, the United Way of the Lower Mainland’s Better at Home program received a donation of smart phones from Telus. They determined that Autumn Services, a drop-in center in Fraser Lake for local seniors, would be best positioned to identify and distribute the phones to seniors.

At the time, Autumn Services’ drop-in center was closed to the public, yet they continued to offer appointments, deliveries, and other services. The staff and volunteers at Autumn Services hold a deep and personal connection with seniors in the community. As a result, Autumn Services distributed the phones to seniors who had the need and capacity to use the technology.

What actions did they take?
Autumn Services leveraged their deep understanding of the seniors’ needs in their community to appropriately distribute the Telus donation.

Specifically, the collaborating organizations took these steps:

1. Telus gifted smart phones to the United Way of the Lower Mainland’s Better at Home program,
2. The United Way of the Lower Mainland’s Better at Home Coordinator asked staff at Autumn Services to identify who should receive the phones in their community and distribute them accordingly,
3. Autumn Services assessed their senior population to determine who would have both the need and the capacity to use the phones, and
4. Autumn Services distributed the phones and provided limited instruction on how to use them.

What is the impact?
As a result of this collaboration, a crucial need was met for seniors in the community. Autumn Services acted swiftly and adeptly to ensure the donation of smart phones from Telus did not go to waste. In a nimble, thoughtful, and personalized way, Autumn Services turned the donation into a crucial lifeline for specific seniors in their community. Autumn Services
knew the seniors, knew their needs, and provided personalized support to the recipients of the smart phones.

**What are the key factors that make it effective?**

A few factors contributed to this collaboration’s effectiveness:

1. **Close relationships with community:** Autumn Services is integrated in the community and maintains close relationships with seniors. Because of this close-knit ethos, the staff were able to identify seniors who would benefit from a smart phone and could learn and retain the skills to use it. Elaine Storey, one of the founders of Autumn Services, said, “We get to know our clients well, with more intimacy. We really had to know the need and know their background to know it would work in the way that it did.” One example of a beneficiary of this collaborative is a senior named Tex Mailes. Tex is a member of the Autumn Services community and a Better at Home client. The phone allowed him to stay in touch with doctors and family members as Gloria’s health declined throughout the summer of 2020. At 80, Tex learned how to use the phone and took a picture of his wife Gloria to keep on his home screen. While she was in the hospital, the phone enabled him to stay in touch with her. Sadly, she passed away in the fall of 2020, but he cherishes that photo that remains on his home screen.

2. **Enthusiastic and dedicated leadership:** Autumn Services is a small organization, but they wield agility and passion deftly. Elaine attributed their impact to, “our willingness to extend out of our typical job description... we only got better during COVID. We learned quickly. We are not afraid to try new things. It’s a part of the enthusiasm of the team.”

3. **Flexible funding:** The Telus donation is only a portion of the funding and other resources Autumn Services has received from the United Way of the Lower Mainland. These resources have contributed to Autumn Services’ ability to adapt to the pandemic. Elaine said, “It’s a credit to United Way, giving us funding and allowing us to be inventive about it.”

**What are the lessons learned?**

1. **Adaptation is vital:** Prior to the pandemic, Autumn Services did not have a significant focus on technology. However, when offered a generous donation to serve a senior population in need, they nimbly adapted to support seniors in their community in new ways. By embracing this new service, Autumn Services expanded their impact. Other organizations could look to this example as a success in leveraging new resources in a crisis.

2. **Look to community-based organizations for local understanding:** Autumn Services’ close relationships with seniors led to the effectiveness of their smart phone distribution. Without that understanding, the phones could have been distributed to seniors who either could afford one otherwise or would not have had the capacity to use the phone.
Shifting Culture in Burnaby

Burnaby’s Primary Care Network (PCN) launched a collaborative response to the COVID-19 pandemic that quickly and effectively incorporated the community to coordinate a response to the needs of its most vulnerable residents, including seniors. The Burnaby PCN developed strategies for information sharing, designed targeted Working Groups, and partnered effectively with the Fraser Health Authority to provide a robust, inclusive, and multi-faceted response during the initial months of the pandemic.

Who was involved?

Originally funded in 2019 by the Ministry of Health, Burnaby’s PCN is a partnership of the Burnaby Division of Family Practice, local leadership of the Fraser Health Authority, and the community represented through the City and through the Burnaby Inter-Agency Council. This tripartite structure, that includes the community as a full and active partner, is unique among PCNs across the province. It is, as one described, “based on a co-developed, comprehensive, and sustainable vision for the future of PCNs in Burnaby, to enable access to quality primary health care that effectively meets the needs of Burnaby residents and patients.” The Burnaby PCN’s intention stretches beyond a classic definition of a Primary Care Network whose focus is solely on clinical health care, to a broader mission that incorporates additional elements of health and wellness. As such, its implementation is carried out by a wide range of community-based organizations, nurse practitioners, family doctors, Fraser Health departments (including Home Health, Mental Health, Population Health and others), provincial ministry offices, and municipal agencies.

When the global pandemic reached Burnaby in early March 2020, the Burnaby PCN’s governance model and structure had been established, but many of its services were still in development, and its tripartite city-wide and neighbourhood focused governance tables were emergent. Immediately, the PCN convened a clinical response in which doctors partnered with the City of Burnaby and the Fraser Health Authority to set up a COVID-19 testing and primary care center. Simultaneously, the PCN initiated a conversation among community providers to develop strategies of responsiveness. Within a week, the PCN had established nine Working Groups to support vulnerable populations and address specific issues most affected by the pandemic. Several of the Working Groups quickly directed support toward vulnerable seniors, especially the Seniors at Home, Food Security, Financial Supports, Technology and Social Isolation Working Groups.

Participating in these Working Groups were representatives from community-based organizations, Burnaby Division of Family Practice, multiple departments of Fraser Health, City of Burnaby, Burnaby School District, Burnaby Public Library, Parks and Recreation, BC Housing, Work BC, Greater Vancouver Food Bank, United Way of the Lower Mainland, Ministry of Children and Families, Simon Fraser University, the Union Gospel Mission, and others. The Burnaby Public Library acted as a communication backbone, ensuring that the supports that were being developed, and those that already existed, were effectively relayed in real time across the range of Working Groups. Representatives met weekly to share information, support each other, and address continuing challenges collaboratively.

Community-Based Seniors’ Service Sector Response to the COVID-19 Pandemic
As an example of impact, the Food Security Group began feeding over 4,000 people each week, including isolated seniors. This service not only provided physical nourishment, but also provided emotional and relational support as food deliverers checked in on recipients and made a personal social connection.

What actions did they take?
The Burnaby PCN quickly acted to respond to the pandemic, specifically taking these steps:

1. Launched a COVID-19 testing and primary care center in a collaboration between the City of Burnaby and doctors,
2. Convened community partners in nine (9) virtual Working Groups for the purpose of actively connecting and sharing learnings on a weekly basis,
3. Supported the establishment of an Emergency Operations Hotel for people needing to isolate after a positive COVID-19 test,
4. Set up referrals for seniors with agencies providing food security, healthcare, social visits, and other services,
5. Provided technology including laptops, smartphones and tablets to seniors across the community, as well as support and digital literacy training in multiple languages to seniors as well as staff in train-the-trainer sessions,
6. Created mail out, call out, and direct linkage campaigns to identify and support isolated seniors,
7. Developed Doc Talks (one-hour virtual sessions with family doctors around specific topics or population groups in multiple languages),
8. Established new and permanent ties between seniors care providers/agencies in the city and family doctors in neighbourhoods; and with the Fraser Health department, including client-specific consultation avenues and processes,
9. Connected general practitioners with home visit nurses and remote family members via technology solutions,
10. Identified and laid the groundwork for the collaborative development of long-term, city-wide strategies around Food Security, Social Isolation and Technology Support, and
11. Connected the PCN partners directly to existing initiatives, including the United Way supported CBSS Network.

What is the impact?
As a result of the collective work of the Burnaby PCN and its participating members, seniors throughout Burnaby benefited from an effective, community-directed response to the pandemic. One of the primary impacts of this approach can be seen in the ability of all members to know who seniors are, where they are, and what their needs are. In addition, the PCN gave its members a broader view of community response which allowed them to be more strategic in their own initiatives. One participant said, “The collaboration has been so useful. I know what all the settlement agencies are doing and what the City is doing. I know every agency working with seniors, who to call, and who to ask for help if I don’t know who to call.” The weekly calls and nearly full participation of all relevant organizations and agencies promoted a shared understanding of the seniors in the community and the complete picture of community response. This knowledge allowed leaders to enact their own work more strategically.

Largely due to the synchronization and transparency of information, a second impact of the Burnaby PCN was a coordinated and efficient response to the needs of seniors. Fraser Health, primary care doctors, and community-based organizations collaborated and continued to work together to identify and respond to the needs of seniors quickly. One representative said, “What we discovered is that we can tag-team a lot. Sometimes they [Fraser Health] are not allowed to do a certain thing, so I send someone out to Red Cross to pick up crutches,
if their union staff can’t necessarily do that.” Similarly, a Fraser Health representative said, “If one of my nurses sees a client who is doing okay but is not able to get a haircut, we would ask the community-based organizations, and they would identify options for them.”

A third impact of the Burnaby PCN has been members’ enduring commitment to partnerships and collaborations. Though a strong culture of collaboration already existed in the region prior to the commencement of the PCN, the collaborative work during the pandemic solidified the structure and commitment of partners to continue to join together for a common cause. The sense of collaboration spread to the Health Authority, which is notable. A Fraser Health representative said, “I hope that, COVID or not, things continue at this level of integration that we’ve established.”

A fourth impact of the Burnaby PCN was the redefinition of the role of certain entities. As individuals and organizations responded to the needs of the PCN group and discovered where gaps and challenges might lie in the community, they found ways of adjusting their services to meet those needs and bridge those gaps. For example, the local library stepped in and became the information backbone for the PCN. Not only did the library’s representatives record minutes at meetings, but they conducted additional research and designed outward-facing information briefs. As a result, the library changed their organizational strategic plan. Similarly, Fraser Health developed new services like an Emergency Operations Hotel for COVID-19-positive individuals requiring isolation and technology initiatives for seniors and others to accomplish virtual visits while physically distanced.

What are the key factors that make it effective?
Several key factors elevated the impact of the Burnaby PCN:

1. **Common goals:** The PCN had established a set of common goals and values even before the onset of the pandemic. As a result, as one described, “We were on the same page with what needed to be done.” Participating group members were aware that their work together needed to be an expression of their common values and to be aligned with their common goals.

2. **Communication:** The PCN held weekly virtual meetings for each of the Working Groups and distributed curated information to group members. As a result, organizations and agencies maintained a high level of awareness of the needs of seniors and the support options available to them. One representative said, “Establishing these networks and communications was essential. We often work in our own world, but now we’re in direct contact with these organizations and we communicate with each other as needed to get services to vulnerable seniors quickly.”

3. **Culture:** The culture of the PCN has been one of collaboration rather than protectionism. Organizations and agencies discarded previous notions of territoriality relative to particular tasks or funding sources. One representative said, “Even though some organizations have more ability to gain funds than others, they have said they don’t need to own it all and can distribute responsibilities as needed instead.”

4. **Community involvement by design:** The PCN involved seniors and other members from the community from the start as equal partners through the use of neighborhood leadership tables and regional steering committees. The governance structure of the PCN ensured that community-based organizations took a leading role in the development of solutions and sharing of information. As a result, the voices of seniors have been prominent and influential.
What are the lessons learned?

1. **Develop targeted Working Groups:** When designing solutions for a community, the development of targeted Working Groups can be an effective way to not only co-create solutions, but to collaboratively assign and coordinate tasks. The Burnaby PCN Working Groups have been remarkably impactful, in part, because they have been careful to involve the right participants to move conversation to action. These Working Groups have also focused on identified priorities. This is a key learning for future PCN development. One representative said, “Let’s not just convene around what is a PCN, but let’s bring people to the table around very specific themes and use those catalysts, which will accelerate the process of bringing them into the broader conversation around the PCN.”

2. **Continue collaborating:** The organizations and agencies involved in the Burnaby PCN had an established culture of collaboration. The responses of the PCN during the pandemic accelerated the development of structural and relational changes that will lead to continued collaboration in the future. In particular, a Fraser Health representative said, “This has built a strong bond with these organizations, to the point that the improvements that have happened are for the future. Everyone will benefit from them - not just the clients, but the organizations, because we’re able to collaborate.”

3. **Funding for collaboration is key:** Critical for this collaboration’s success was a dedicated lead and funding for the collaboration to occur. As a result, one representative said, “We all know that collaboration is the key to doing the work. But collaboration is the most underfunded piece. So much work can get done if effective collaboration is mentored and supported, but it won’t happen naturally and it won’t happen for free.”

Maximizing the Impact of Partnership in Nelson

Kootenay Seniors leveraged extensive existing partnerships to reach seniors, addressing not only seniors’ basic needs, but also their social interests.

Who was involved?

Kootenay Seniors, a program of the Nelson CARES Society, launched several years ago with the intention of providing supports that allow seniors to live with dignity and joy, to participate in their communities, and to remain in their homes for as long as possible. Kootenay Seniors developed a website with resources for seniors in 2014. Over the past several years, Kootenay Seniors started several additional programs, including the following:

- An Intergenerational Project aimed at reducing social isolation of seniors in Nelson,
- Publication of Old Growth Intergenerational Magazine to share beauty and events from people in the West Kootenay region,
- A transportation service to share information about local transportation options, while operating a volunteer driver program,
- A home support service for light housekeeping, and
- An annual seniors’ fair for sharing services such as resources and referrals.
At the start of the pandemic in March 2020, the Kootenay Seniors office closed to the public. Regular services temporarily stopped, while the staff quickly connected with WorkSafe BC and the Interior Health Authority to determine their path forward. One staff member said, “We knew from our first-hand experience interacting with seniors that they were experiencing extra challenges.”

Kootenay Seniors deftly began leveraging staff to conduct friendly calls, deliveries, and socially distanced events. They also augmented their existing resource database for seniors with COVID-19 specific supports. While expanding their programming, they attended Zoom calls with WorkSafe BC and the Interior Health Authority to ensure safety remained the highest priority.

**What actions did they take?**
Kootenay Seniors leveraged their existing collaborations to serve seniors in need:

1. Kootenay Seniors participated in daily Zoom calls with the Nelson CARES Management Team to learn about the latest safety protocols, policies, and procedures for senior programs.
2. Kootenay Seniors enlisted volunteer drivers and leveraged its Safeway partnership to deliver food and necessities to seniors free of charge by screened volunteer drivers.
3. Kootenay Seniors also sent volunteer drivers to support Nelson Food Cupboard; boosting their delivery capacity, as well as stepping up when Meals on Wheels needed extra drivers.
4. Castlegar and District Community Services Society’s Better at Home program shared referrals and information with Kootenay Seniors, and vice versa.
5. Kootenay Seniors staff conducted over 800 friendly calls and wellness check-ins, between March and July.
6. Kootenay Seniors Intergenerational Coordinator directed website and social media content to include useful information for seniors during the pandemic, curated two publications of Old Growth Intergenerational Magazine, and organized three outdoor, socially distanced “Songs for Seniors” events in collaboration with Nelson Kiwanis Project Society, Mountain Lake Seniors Community, and Lakeview Village.
7. Kootenay Seniors referred seniors to services from Nelson Mental Health and Substance Use, Nelson and District Hospice Society, West Kootenay Caregivers Association, family physicians, and social workers, and
8. Kootenay Seniors helped distribute homemade masks donated by the Rotary Club of Nelson and PPE donated by the Canadian Red Cross Nelson to seniors in need.

**What is the impact?**
As a result of the collaborative efforts of Kootenay Seniors and its partners, seniors in Nelson received significant and streamlined support during the initial months of the pandemic. Kootenay Seniors took the lead in a coordinated service delivery model, seamlessly integrating the offerings of an array of partners into a single mandate to meet the needs of seniors.

Notably, Kootenay Seniors harnessed the energy of intergenerational volunteers to address not only immediate needs, but also the growing social isolation of seniors. They leveraged partners to enhance food security, distribute masks and PPE, and encourage safety protocols. They also conducted safe and fun musical events and released an arts publication.
What are the key factors that make it effective?

Several factors made this collaboration effective:

1. **Centralized contact for many resources:** Kootenay Seniors’ staff team was able to deliver a wide range of services without complicating the experience for seniors. The team maintained primary contact with seniors through friendly calls and wellness check-ins. At the same time, staff served as a resource and referral hub for several partners, directing services to seniors throughout the community.

2. **Support from provincial resources to ensure safety:** Through daily guidance from WorkSafe BC, the Interior Health Authority, and the Nelson CARES Management Team, Kootenay Seniors were able to adhere carefully to provincial and federal safety precautions, restrictions, and protocols. This led the volunteer driver program to be one of the safest transportation options for seniors in their region.

3. **Intergenerational volunteers:** Due to the Intergenerational Project Coordinator’s efforts, youth and others in the community activated to support seniors in need. Specifically, young residents of Nelson participated in the outdoor “Songs for Seniors” events as photographers and contributed to publications of Old Growth Intergenerational magazine. In this way, youth and young adults alike developed a higher level of attention to seniors in their community.

What are the lessons learned?

1. **Leveraging provincial resources is key:** Kootenay Seniors attributes its high level of safety adherence to the safety check-ins with WorkSafe BC, the Interior Health Authority, and the daily meetings with Nelson CARES Management Team. These provincial resources proved invaluable in the design and maintenance of programming for seniors during the pandemic.

2. **Funding and reporting are still hurdles:** This collaboration benefited from new funding sources, propelling the work of Kootenay Seniors forward. However, new funders also increased the reporting, tracking, and application obligations for Kootenay Seniors staff. While Better at Home staff supported staff in these new tasks, the challenge has been ongoing. Despite amplified attention to the Community-Based Seniors’ Service sector, one staff member said, “Although a spotlight was shone on the needs of seniors during the pandemic, the funding options for going forward are still in a shadow of bureaucracy and politics.”

3. **Working with community partners improves services:** Kootenay Seniors continued to nurture relationships with community stakeholders, as well as develop new relationships with organizations in the seniors’ service sector. During the first months of the pandemic, it became very clear that working as a community team for vulnerable seniors was the best way to ensure their needs were being met. Collaboration and knowledge sharing focused the attention where it was needed.
Advocacy for Seniors by Seniors in Vancouver

In July of 2020, seniors had not received their anticipated Guaranteed Income Supplement (GIS) from the Federal Government. In Vancouver, seniors called their local community-based seniors’ service organization for help, the 411 Seniors Centre Society. The ensuing advocacy effort led to near immediate relief for the seniors affected.

Who was involved
The 411 Seniors Centre Society directs a multicultural, proactive resource center in downtown Vancouver. The Centre serves as a community hub where people meet, socialize, and organize around issues important to seniors. The 411 Seniors’ membership model mobilizes the strengths, talents, interests, and expertise of Vancouver seniors to the benefit of their fellow senior citizens. Though the physical center closed at the outset of the pandemic, the 411 Seniors Centre Society re-opened in late June 2020 to meet the high demand for in-person support services.

The responsiveness of 411
By 9 am on the day GIS was to be directly deposited, the staff at the 411 Seniors Centre knew something was wrong. The phone was ringing off the hook and panicked seniors were showing up at the door with their bank statements. It was the end of the month, rents were due and the Guaranteed Income Supplement payments, that lift the lowest income seniors above the poverty line, had not been deposited.

The small staff team knew who to turn to. They reached out to the 411 Board president who also chairs the 411 “Seniors Issues” Committee. These experienced and knowledgeable seniors had previously lobbied the Federal Government to agree to maintain GIS payments through October 1 of 2020. The extension to October from June was intended to provide additional time for seniors to file income taxes in 2020, which had been made more difficult due to the pandemic. (In prior years, if seniors had not filed income tax by June 1, their GIS payment would have been discontinued.) Despite having made a commitment to extend the GIS payments, the Federal Government did not program the change into their computers. As a result, seniors who had planned to take advantage of the extension did not receive their expected GIS payments.

What actions did they take?
Upon receiving the initial calls and verifying this information, staff and board members of the 411 Seniors Centre began to act. Staff and board members relied on existing contacts to reach out to seniors, politicians, and government staff:
1. 411 Seniors Centre staff and senior volunteers fielded calls and visits from distraught seniors, and
2. 411 Seniors Centre staff and board organized amongst themselves an existing list of contacts and began making phone calls. The contacts included the following:
   • Outreach staff at Service Canada,
   • The Federal Minister of Seniors,
   • The Member of Parliament for Vancouver East,
   • The Provincial Ministry of Social Development and Poverty Reduction, and
   • The Seniors Advocate.

What is the impact?
As a result of the advocacy work of the 411 Seniors Centre staff and board, seniors from across Canada received either a check in the mail within a few days, or a direct deposit the very next day. Due to this advocacy work, not only were Federal systems fixed
to reflect the extension, but Provincial Government systems that paid out BC Seniors Supplement and the temporary COVID-19 bonus were rectified as well.

The 411 Seniors Centre staff and board harnessed the voice of seniors in the community as well as within the 411 Seniors Centre board. As a result of this advocacy, the seniors who initially brought the issue to the attention of the 411 Seniors Centre have grown in their pride and confidence to speak out. One such senior now “calls herself a whistleblower.”

Finally, the most salient impact of this effort is the immediate financial relief for vulnerable seniors. This mistake would have left seniors unable to pay rent, buy groceries, or purchase medication.

What are the key factors that make it effective?
Several factors make this advocacy effort effective:

1. **Trust in 411 Seniors Centre:** Seniors served by 411 Seniors Centre are confident in the respect the Centre has for their concerns. When faced with an emergency, they knew they could rely on the 411 Seniors Centre to respond quickly and effectively to resolve their issue.

2. **Nimble organizational response:** 411 Seniors Centre staff value the voice of seniors. As a result, they quickly recognized the urgent nature of the issue and set aside other work to focus on the immediate problem at hand. The strong staff and board relations allowed for an integrated effort to address the problem.

3. **Existing advocacy network and experience:** 411 Seniors Centre has many years of experience in advocating and a network of contacts in positions of influence. Due to this, staff and board members did not waste valuable time searching for names and contact information. Additionally, their contacts in government already trusted 411 Seniors Centres staff and board to provide accurate information, and to collaborate on resolving the problem rather than blame or criticize.

What are the lessons learned?

1. **Advocacy for seniors starts with seniors:** The reason 411 Seniors Centre was able to resolve this urgent issue for seniors was entirely due to the fact that seniors brought the issue to their attention. Seniors felt comfortable in their relationship with 411 Seniors Centre staff, and confident in 411 Seniors Centre’s ability to advocate. The depth of these relationships is important for advocacy to be effective.

2. **Pre-existing relationships with government accelerate advocacy:** 411 Seniors Centre staff and board members leveraged their existing relationships with government staff, officials, and elected persons. The staff and board communicated without blame or criticism with the stated intention of resolving a problem. Those relationships helped increase the speed of initial contact, as well as the efficacy of the conversation. The government officials trusted 411 Seniors Centre information and acted on it.
Charlene

Location: Golden, BC - Interior
Organisation: Golden Community Resources Society

Charlene feels lucky to live in Golden, in the Interior of British Columbia. Charlene has always been an active member in her community. She attends church, belongs to the Lions Club, and helps out with social media for the local hockey team. For Charlene, “The community is a source of joy.”

Due to the pandemic, many of the activities Charlene had been involved with have stopped or slowed down. Charlene noted the many challenges that have come with the pandemic, such as “not seeing people’s faces,” which she said, “feels strange and unnerving sometimes.” She shared, “I am not able to come and go as I used to... and I feel afraid in buildings with other people around me” due to the virus. On top of all that, she said, “Wintertime is coming, which can get difficult.” She added, “As soon as the snow hits, I won’t be able to use my bike, so I’m going to have to call a taxi; that’s another expense.” It also means she will be unable to meet with friends outside for their coffee group. Despite all this, Charlene said, “The kindnesses have been enormous in the town this year...and Golden is very much a caring town, which I feel good about.”

At the outset of the pandemic, Charlene needed to stop much of her in-person community involvement. Despite this, she said, “The response of the community has been powerful.” She provided an example of how the Golden Community Resources Society stepped into action quickly. Every week the Golden Community Resources Society has provided soup and a bun. Charlene noted that this service has been one of the most helpful for her because “I don’t have to worry about a meal.” She also highlighted that this service aids people who are living on a fixed income like she is. In addition, it also has been a source of connection for her. The volunteers delivering the soup always make sure to ask how she is doing. “When you get to see someone and talk it means so much,” Charlene revealed, “This has made me feel that I wasn’t totally alone and forgotten.” According to Charlene, the Golden Community Resources Society “…really moved into action in the first month. That has been a godsend. I can’t imagine what it would be like without them.” She further highlighted, “These services have made it easier, made me feel like I wasn’t alone, made me feel like I was there, and that I mattered.”
About her community, Charlene noted, “Golden is a funky little town and very much a caring town.” However, she also indicated, “The only way anything is lacking is in funding. Seniors aren’t given very much.” That has become Charlene’s biggest worry recently, as she often feels forced to “make uncomfortable decisions” on how to spend her money. She feels, “The seniors in this country do not get a whole lot in terms of old age pension, and that is a concern.” She doesn’t “want to be forced” to always choose between the things she needs and the things she loves, such as “my online activities and my pets, because that’s been a life for me... but sometimes you are forced to make those choices and that makes you worry.” She dearly hopes “the government will look after seniors more financially” in the future.

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**Ev**

**Location:** Duncan - Vancouver Island  
**Organisation:** Volunteer Cowichan

Ev lives in Duncan on Vancouver Island. She has learned to appreciate some of the smaller joys in life during the pandemic.

The Better at Home program, through Volunteer Cowichan, has been a critical support for Ev for a long time. Prior to the pandemic, Better at Home had been providing transportation support for Ev. When the pandemic began, they expanded their services to include grocery shopping and a housekeeper to help her with laundry and cleaning around the house. Additionally, they have been providing a friendly caller once a week. Ev noted, “Better at Home put that into place right away,” when the pandemic began. This social connection and support for her basic needs have been very reassuring for Ev. She said, “I feel so much better” knowing that they are there during these difficult times.

Unfortunately, with the pandemic, Ev no longer has access to a driver, which has been difficult for her. She shared, “I could really use a driver taking me places,” such as the bank, the craft store, and to get bloodwork. When asked what she has been missing the most, she said, “The only thing I want is a ride.” Despite this disappointment, she has begun to find joy in some of her other daily interactions.

Ev has had a constant flow of support throughout this time, noting that she has had “over 600 people in her apartment since the pandemic.” “Having the staff to talk with and laugh” has become a meaningful part of her days. She noted, “I couldn’t do it without them. These services have become lifesaving because I can’t get out.” She only wishes “I could have more consistency with who comes and helps.”

Ev shared how her friendly caller has become a highlight of her week, because she enjoys talking to them and this has reduced some of the isolation she feels at this time. She mentioned her appreciation for the volunteers, who have listened to what she has to say and have taken note if there is something she has not liked. Other than not being able to drive her to conduct errands or to appointments, Better at Home has continued to meet her needs.

Before she started receiving the services provided by Better at Home, Ev thought she needed to go into a nursing home. She mentioned how she had been talking to her doctor about the possibility of going into a home, however, the wait was very long. In the meantime, she said, “My doctor got me all this home help.” When
asked if she wanted to go into a care home now, she said, “No, I want to stay in my own home,” which she will be able to do because of the extra support. Now, when thinking about the future, Ev’s biggest hope is that other seniors will “just have their needs met.”

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Joyce

*Name has been changed to retain anonymity*

**Location:** Slocan Valley - Interior

**Organisation:** W.E. Graham Community Service Society

Joyce lives in the Slocan Valley. She is a very independent older adult who enjoys gardening. Prior to the pandemic, Joyce had never used community support services; however, in the past several months, she has begun to use some services and is starting to see the value in them.

At the beginning of the pandemic, Joyce fell ill and was in need of extra help to get groceries, as she was not able to leave her house. She was thankful for connections with her neighbours who helped her. However, she noted, “I could have really used some services when I was really ill.” Sadly, she was not aware of any services until she received a flyer from the W.E. Graham Community Service Society. Joyce shared, “The W.E. Graham Community Service Society realized that there are quite a few elderly people along the valley,” who need help during the pandemic. As a result of this realization, the Society expanded their services and outreach to these communities, and Joyce, who lives about 45 minutes from the Society’s center, was fortunate enough to receive their flyer and take initiative to contact the Society.

Joyce has been feeling more isolated during the pandemic, “I live alone and that has been difficult.” She began using the friendly caller service offered by the W.E. Graham Community Service Society. This has become a very meaningful service for her. “The support from the calls has been absolutely wonderful,” Joyce revealed. She said Susan, who calls her every week, is “caring, and she wants to see how I really feel and offer help. She is always asking if there is anything I need or have trouble with.” She added, “For people like me, who are alone, it is lovely to be able to talk to someone, so you can talk about your worries and fears. I know those working at the center like what they’re doing and care for people who are isolated. It is important that people want to listen.”

Joyce is beginning to realize she may need additional assistance. She noted, “I could use some help for stuff like my garden and lawn cutting and shovelling snow,” however, “I am too far away for anybody who has volunteered from the center, so that’s why it does not work for me.” Joyce believes, “There needs to be a Better at Home program for the Valley.” At this time, there is no Better at Home program that reaches her community. She maintains that those in rural communities should not be forgotten. She explained, “Organisations should take time to look around at what other people need.”

Joyce wants to stay in her home as long as she can, and she trusts, with the help of organisations like the W.E. Graham Community Service Society, and Better at Home, she will have the best opportunity to remain independent in the home she loves.
Norma

**Location:** Golden, BC - Interior

**Organisation:** Golden Seniors’ Centre

Norma lives in Golden, British Columbia in a lively and engaging community. Norma shared that, despite the pandemic, she still had a very good summer. She had been able to meet friends for coffee at a distance and there were safe activities available for her to participate in throughout the summer in her community.

Before the pandemic, Norma was very involved in her community. She participated in the Golden Seniors Centre and volunteered with both the Golden Museum and Golden Food Bank Society. She also played piano and accordion at Durand Manor - a long-term care home in Golden.

Norma enjoyed going to the Golden Seniors’ Centre prior to the onset of the pandemic and felt that a “week wasn't long enough to do everything.” It was a place where she felt that she thrived, a place where she derived meaning. Norma noted, “Before the pandemic, there was more emphasis on entertainment [at the Golden Seniors’ Centre], whereas now it is about being aware of the pandemic.”

Norma noted her frustration with the closing of the Centre and the changes in offerings, as she has been missing participating in the activities. Despite this, Norma said, “I am easily contented and a happy person,” and therefore, “I am satisfied with the things I have got to do here in this little town.”

Norma has been taking advantage of the weekly soup delivery - a mainstay service by the Centre. Soup is brought to people’s homes once a week, which Norma described as “excellent.” Not only does the Centre provide a meal, but the Centre’s staff and volunteers phone ahead and tell Norma about the soup and take a minute to chat with her. She enjoys the social connection and appreciates the little things like this. She shared, “They have helped to make life more bearable.”

Norma shared, “Everyone is doing what they can do,” and that has made her proud of the way people have come together in her town. They have developed creative forms of entertainment, such as pandemic concerts and farmers markets. The Centre has not only been providing meals, but it has also been working on new ways to keep people involved. Norma noted how community members and organisations “do all these little things which maybe nobody sees as very big or important, but all put together they have helped me during the pandemic.” Sadly, she has also realized these efforts will become increasingly difficult during the winter months.
Norma has hopes that society will “look back on this time and make note of the things they did to get through it.” She has been looking forward to being “able to get together with the seniors club,” and “will be glad to be able to attend her meetings again.” She expressed her hope that in the future the government will be “making sure that seniors are still being cared for and not forgotten about.”

Miriam

**Location:** Surrey - Fraser Valley  
**Organisations:** Meals on Wheels, DIVERSEcity Community Resources Society

Miriam lives in Surrey on the border of the Fraser Valley. She has been in isolation for nearly a year, as she broke her leg in November and continued her recovery through February - immediately prior to the pandemic and its corresponding lockdown. As a result of the pandemic, Miriam has been outside of her home very rarely since March 2020. Prior to the pandemic and her injury, Miriam was mobile, driving her car whenever and wherever she wanted. Since the outset of the pandemic, because of risk factors associated with her age and impaired physical mobility, she has been confined to her home and has become reliant on external support services.

Miriam now has several different, daily visits to her home. Caregivers support her twice a day, Meals on Wheels delivers nutritious meals daily, and groceries are delivered weekly through DIVERSEcity. She shared, “The services I receive have been excellent, and everyone has been so good and so eager to help.”

Because she has been unable to cook or use her oven, Meals on Wheels became an important support for Miriam. However, over time, the expense of the meals grew to be a burden for Miriam and she had to stop using the service. A couple months after stopping the service, she received a call from Meals on Wheels informing her of a government supplement that would make the meals cheaper. Miriam noted, Meals on Wheels “picked up on [the value of the supplement] and I didn’t have to ask.” That call helped Miriam to feel supported and to believe people were looking out for her. With the service reinstated, Miriam has been looking forward to this consistent part of her day. She shared, “The fact that there are people who drop off a meal or say ‘hi’ is important. Knowing that they are coming is very comforting.”

Another important support for Miriam has been the services provided by DIVERSEcity, a community resources society that advocates for the inclusion of all. For Miriam, “DIVERSEcity has been excellent,” in their grocery delivery service. An aspect of their service that Miriam has particularly valued is that they send the same person to get her groceries every week. She explained, “The volunteer is someone I can really count on because she is getting to know me.” Because of this, Miriam has not needed to confirm and clarify her specific order every week, and she also has felt comfortable asking for certain sensitive items that she needs. Miriam expressed her appreciation: “The volunteer is amazing and not overbearing.” Miriam has grown to “feel safe” with DIVERSEcity’s staff and volunteers. She emphasized, “They are worth gold.”

Miriam noted the expense burden of the recent changes in her life. Without access to the support services provided by charities like DIVERSEcity and Meals on Wheels, Miriam believes she would not be able to afford comparable services. She said, “The government is lacking in helping people like me.” When thinking about the future, she “hopes the government will step up and look for people who are isolated like me.”
As an isolated older adult, the social connection and reliable consistency of someone checking in on her every day has been very reassuring for Miriam. She noted, “I couldn't survive without them.” Although the value of these supports has increased for Miriam due to the pandemic, she expects that she will continue to use these services after the pandemic, because they likely will continue to have a positive impact on the quality of her life.

Ashok

Location: Surrey - Fraser Valley
Organisation: DIVERSeCity Community Resources Society

Before the pandemic, Ashok and his wife lived independently in an urban area of the Fraser Valley. He was mobile and would walk or take public transit to buy groceries and travel to various locations for appointments and commitments. Ashok did not require support services, because he was able to do tasks on his own. However, when the pandemic began, Ashok’s entire lifestyle changed. He has been unable to leave his house comfortably and has required the use of support services.

Ashok’s primary worry and priority, at the outset of the pandemic, was his ability to get groceries. He reached out to DIVERSeCity Community Resources Society for help. DIVERSeCity responded immediately and began delivering groceries to his house weekly. With this service, Ashok and his wife have been able to cook meals together while staying protected. He noted how kind the volunteers and staff have been. He shared, “From day one, Daljit has been looking after our needs...she’s doing her best all the time, and whenever we call, she responds back as fast as she can.”

Ashok and his wife also had become increasingly worried about taking public transit to appointments and the impact this might have on their health. In addition to grocery delivery, DIVERSeCity has been providing a volunteer to take Ashok and his wife to appointments. This has been profoundly helpful and reassuring for them.

Ashok’s appreciation of the value of these services has been expanding. He highlighted, “We have some very good volunteers around us. They don’t ignore us, and they are actually going out of their way and helping us, making our life easier in this difficult time.” He has been hoping that these services will continue, saying, “When you don’t have your own family close, then you need somebody like this, and we are grateful for that.” He continued, “If they weren’t around, I would have been lost.”

Ashok emphasized, “With or without the pandemic, we need them.” He also stressed, “They could have more volunteers;” and, “The government can provide more help to them.” He highlighted the critical importance of services provided by organisations like DIVERSeCity because “The government itself cannot provide these kinds of services.” He said, “DIVERSeCity staff and volunteers are working 24 hours a day to make a difference...we need these people.” He also noted these organisations’ reliance on government funding and the need for the government to provide more funding. He said, “The government needs to invest... because otherwise how are they going to function?”

Ashok underscored how thankful he and his wife have been to receive the services provided by DIVERSeCity, “All we can say in the end is that we are very grateful. We are very very glad they are helping us. We thank
them very much.” He continued, “I hope more people will join these organisations so that they can get more
volunteers. More emphasis on volunteers will then naturally improve the service and...help the community. I
hope the government can support the community so that they can support the people.”

Jane

Location: Vancouver
Organisation: 411 Seniors Centre Society

Jane lives in the Lower Mainland and has experienced several health and financial complications during the pandemic. Although Jane was aware of community supports, it was not until the pandemic when she really needed them.

At the beginning of the pandemic, Jane found herself in a desperate situation after returning from an extended stay in the hospital. Without the help of 411 Seniors Centre Society, she said, “I wouldn’t be around.” When Jane returned from the hospital, she realized that her income tax return needed to be filed immediately and she did not have the ability or resources to complete the work herself. 411 Seniors stepped in right away and helped her with the paperwork. Jane shared, “Without that, I would have been out on the street. Thinking about it again just horrifies me all over.”

As a result of the pandemic, Jane also realized, “All of a sudden, I had to be totally dependent on other people and I wasn’t sure how. I have a hard time speaking up for myself.” Needing to request support from organisations has made her feel vulnerable. However, she has felt thankful for those working at 411 Seniors because they have been “sensible adults that I trusted.” Jane praised the responsiveness and effectiveness of 411 Seniors staff: “(They) immediately jumped into action. I have to be really honest, the best thing I did was get in contact with 411. I have lots of faith...and believe in 411 now.” It’s because of the support provided by 411 Seniors that Jane believes “I now have a voice that I didn’t have before.” She explained, “Organisations like 411 are just invaluable, because I now have a number I can call who can advocate for me.” 411 Seniors has become an organisation that she trusts and intends to use more in the future.

Despite the support Jane has received from 411 Seniors, she also repeatedly emphasized the paucity of programs and services for seniors like her who “Don’t have that extra hand.” She has been anxious for there to be more advocacy for seniors, and said, “The government really needs to keep funding organisations like 411.” Although receiving the one-time payment for seniors from the government has helped Jane, she noted, “If you’re poor in the system, you’re in trouble. Every single little crack I seem to have found and fallen into.” Due to this, she highlighted the critical need to “show policy makers how we can improve support services for seniors.”

Sydenia

Location: Terrace - Northern
Organisation: Volunteer Terrace

Sydenia lives in Terrace, a small town in Northern British Columbia. Despite having a compromised immune system, Sydenia has been able to live on her own during the pandemic. She is close with her family, especially her daughter, who has visited and helped her every day.
Although Sydenia considers herself to be an introvert, she has been active in her community, helping with elections, attending church, and volunteering for Volunteer Terrace. Volunteer Terrace delivers programs and services to support the community, including seniors, through volunteer work. The programs and services that Volunteer Terrace offers for seniors include: Better at Home, the Helping Handyman, and Snow Angels, among others.

Before the pandemic, Sydenia would stop by Volunteer Terrace a couple times each week to participate in programs and volunteer. She would help set up for events and facilitate art workshops. Describing Volunteer Terrace, she said, “They were always excellent and everything they do is really well thought out and well organized. I enjoyed going down and pestering them.”

The pandemic has created acute challenges for Volunteer Terrace. However, they have been able to continue many of their programs and services. They reached out to Sydenia to let her know about all the services they continued to offer. Sydenia has started to use their housekeeping services. She has been grateful, and said, “It’s been a big help.” She shared that she feels safe allowing them in her home because “they are really aware and really very careful,” about taking the necessary precautions to be safe.

According to Sydenia, Volunteer Terrace staff and volunteers have been continuing to think of new services they can offer despite the pandemic and have been constantly working on more ways to keep people involved, “I’m very impressed with our [volunteers and staff] down there.” She noted that they have been developing a program for cooking with chefs virtually: “They were getting me involved in it which I’m looking forward to.”

Sydenia has been grateful for her connection with Volunteer Terrace. She has witnessed, benefitted from, and been an active part of Volunteer Terrace’s positive impact on the community. Sydenia also has been worrying about the future. She said, “I don’t know if we’ll ever get over this, but we will need more volunteering.” She added her hope that the pandemic has led “government and organisations to realize where the need is.”

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**Philomena**

**Location:** West Vancouver  
**Organisation:** West Vancouver Seniors’ Activity Centre

Philomena has always been an active member in her community. Living independently in West Vancouver, she enjoys going for walks, connecting with friends and family, and volunteering at the West Vancouver Seniors’ Activity Centre (SAC), which she has done for the past 24 years.

Prior to the pandemic, Philomena worked many hours at the SAC welcome desk, and she sometimes participated in the wide variety of activities offered at the SAC. Philomena has been proud of her volunteer work and grateful for the opportunities the SAC has provided for community members to exercise, learn about electronics, do painting classes, get a hot meal, and more. She noted, “The SAC gives me a purpose in life.”

When the pandemic initially hit, the SAC needed to shut down completely. However, as Philomena observed, “Slowly the SAC started to realize that they needed to open for the seniors.” With the SAC’s re-opening, Philomena has been able to continue her active involvement. She has been working on a new initiative for men who have early dementia. Philomena explained why it has been critical for this program to be available,
especially during the pandemic, “The men enjoy themselves, and it also offers [their caregivers] a bit of a break and a bit of respite care.”

Philomena also has been able to continue to work as a volunteer for the SAC’s switchboard, answering questions for seniors, from 4:00-8:00pm. Philomena shared, “For a lot of people they have this phone number that they can call... and it’s so important for people just to know that there’s someone that is listening to what they have to say.” She highlighted how she answers questions on a wide variety of topics, including the programs and services offered by the SAC and information about the COVID-19 crisis. She said, “I try to help and give advice... because the SAC has developed that in me.”

Philomena described the value of the services the SAC continues to offer during the pandemic, “They make hundreds of seniors very, very happy. The SAC has done a great job and has gone way beyond. I can’t think of anything they haven’t done. I admire them greatly.” She underscored the importance of organisations like the SAC: “They have kept the community together.”

Although Philomena has been missing favourite pre-pandemic activities such as attending discussion groups, sitting with friends in the SAC with a cup of coffee, and playing Bridge, she believes her life has been able to remain relatively normal throughout this challenging time because of her positive attitude, her close connections with her friends and family, and her volunteer work with the SAC. She has been feeling that she still has purpose and enjoyment in her life. She noted, “I have started to feel thankful for what I have.” She has been hoping “we have learned something from this pandemic...and that we can continue to remain compassionate to all our friends and neighbours because we need each other now.”
Appendices

Appendix A: Steering Committee

The steering committee, comprised of sector leaders who generously gave of their time and thought and acted as a consultative body that provided feedback, input, and strategic direction for the project right from its inception. We want to thank all those who contributed to this project:

- **Marcy Cohen** serves as the co-chair of the Steering Committee. Marcy has over 35 years of experience working as health and policy researcher, educator, and advocate. Marcy co-led the Raising the Profile Project that has been instrumental in raising the profile of the Community-Based Seniors’ Service (CBSS) sector in BC.

- **Kahir Lalji** is the Provincial Director of Population Health with the United Way of the Lower Mainland and Executive Director of United Way Southern Interior. Kahir has over 15 years experience in the non-profit sector and serves on several boards including HelpAge Canada, where he serves as vice-chair.

- **Deborah Hollins** is the Executive Director of Nanaimo Family Life Association, an organization that serves older adults. Deborah is a social worker with a history of working with marginalized and vulnerable people.

- **Janice Murphy** is the Executive Director of Kootenay Boundary Community Services Cooperative, a cooperative of 16 non-profit community service agencies operating in communities located throughout the West and East Kootenay and Boundary regions.

- **Lynne Romano** is the Community Development Coordinator (CDC) in Golden, where she works with several organizations and community partners that support and service seniors. Her work also includes multi-generational and multi-cultural opportunities to learn and play in the community.

- **Marion Pollack** is the board chair of the 411 Seniors Center Society whose focus is building an inclusive community of informed and connected seniors in the Lower Mainland. She has a long history of advocating for low-income seniors and persons with disabilities.
Appendix B – Qualitative Interview Protocols

Questions for Community-Based Seniors’ Service Sector Organization Leaders

What did you discover about the vulnerabilities of older adults as a result of COVID-19? What do you know and understand about vulnerable older adults and their needs during the pandemic that you wouldn’t have known if you hadn’t been a community-based organization? What are the limitations of your understanding? What do you wish you could know that you don’t yet know about what older adults are facing? 🔄 How is your perspective or outlook on older adults different because you are community-based? What has changed in your perspective or outlook toward older adults through the pandemic?

What have you been able to do for older adults during this time of crisis that you probably would not have been able to do if you were not a community-based organization? How were you able to respond effectively? In what ways were you not able to respond? 🔄 How has being a community-based organization (or partner) helped you “show up” differently during the pandemic? How have you been limited in your ability to be effective during this time?

What were you able to do differently to connect with vulnerable older adults through COVID-19? Why were you unable to connect with them like that prior to COVID-19? 🔄 What are the implications for you in how you work going forward?

In what ways has being community-based given you energy and motivation during this time of COVID-19? What continues to feel debilitating and discouraging for you as you work with older adults during this pandemic? 🔄 How have you been able to press forward and stay engaged despite feeling daunted at times?

What have you learned from your partnerships with others about how to best serve aging adults through the pandemic? What have you been able to share with others or help others learn? What have you discovered about what makes effective partnerships and collaborations through this time of pandemic? 🔄 How do you think differently about serving BC’s aging adults since you are in partnership and collaboration with others? In what ways do you still sense that you are missing important perspectives even though you are in partnership with others?

What changed in the way you partnered with others through the pandemic? What role did existing relationships and partnerships play for you? What new partnerships did you develop? 🔄 How does that affect the way you will partner moving forward?

What have you been able to accomplish through partnerships and collaborations during this time? How have partnership magnified your impact? How have your partnerships gotten in the way of your work during this time? 🔄 How has being in partnerships and collaborations fundamentally changed how you are able to engage aging adults during this time of crisis?
What have partnerships done to encourage and inspire you and your team? What has been discouraging about being in a partnership or collaboration during this time of pandemic? ➔ How have your partners helped to strengthen your resolve and commitment to pursuing the things that matter most during this time of pandemic?

Since being a community-based organization (or partner), what are you aware of or in touch with in the community that has helped you be nimble and responsive during COVID-19? In what ways are you better in touch with the needs of seniors? In what ways do you know better where to go and how to respond to their needs? What do you still wish you understood better that would help you respond more quickly? ➔ What’s different in your way of thinking or your mindset as a result of being a community-based organization that has helped you be agile and responsive during this time?

How have you been able to be nimble and response during this time as an organization (or partner)? What were you able to do more quickly since you were community-based? What took more time and was more clunky than you would have liked? ➔ How has being community-based given you the capacity you need to see needs and respond quickly and nimbly to them?

What have been the points along the way during the pandemic when you felt most exhilarated by your ability to meet needs? What points did you feel most deflated? ➔ What has changed in your heart toward the needs of seniors as a result of being responsive to them during this time of pandemic?

What unique knowledge or insight have you gained through being community-based that has helped you know how to speak up and advocate for seniors during this time? What unique perspective can you bring since you are community based? ➔ How has this time shaped your views about what people—like community leaders and policy makers—more broadly need to know about aging adults during times like these?

What have you learned about exercising leadership with seniors in your community during this time of pandemic? ➔ How has that informed your view of your role in community?

What advantage does being community-based give you in being able to advocate for the seniors during times like these? What are the limitations of being community-based for your advocacy? ➔ In what ways do you and your organization need to grow and develop to be better advocates of seniors? In what ways are you strengthening your advocacy already?

What have you done during this time to join aging adults in exercising their voice on behalf of themselves? What do you wish you could have done? ➔ What would need to change or develop for you to be able to effectively support seniors in their influence and leadership in our society during times like these?

As you think about the experience of aging adults during times of crisis, what worries you the most? What are you most excited to share with others? ➔ How has your sense of responsibility and dedication to advocating for seniors changed or shifted during this time of pandemic? What change in commitment of you, your organization, or your sector would need to happen to realize that dream of yours?
Questions for Partners (Funders, Municipalities, HCAs)

What did you discover about the vulnerabilities of older adults as a result of COVID-19? What are the limitations of your understanding? What do you wish you could know that you don’t yet know about what older adults are facing? **What has changed in your perspective or outlook toward older adults through the pandemic?**

How were you able to respond effectively? In what ways were you not able to respond? **How has being a partner/funder of community-based organizations helped you “show up” differently during the pandemic?**

How have you been limited in your ability to be effective during this time?

What were you able to do differently to connect with vulnerable older adults through COVID-19? Why were you unable to connect with them like that prior to COVID-19? **What are the implications for you in how you work going forward?**

In what ways has partnering with community-based organizations given you energy and motivation during this time of COVID-19? What continues to feel debilitating and discouraging for you during this pandemic? **How have you been able to press forward and stay engaged despite feeling daunted at times?**

What have you learned from your partnerships with others about how to best serve aging adults through the pandemic? What have you been able to share with others or help others learn? What have you discovered about what makes effective partnerships and collaborations through this time of pandemic? **How do you think differently about serving BC’s aging adults since you are in partnership and collaboration with others? In what ways do you still sense that you are missing important perspectives even though you are in partnership with others?**

What changed in the way you partnered with others through the pandemic? What role did existing relationships and partnerships play for you? What new partnerships did you develop? **How does that affect the way you will partner moving forward?**

What have you been able to accomplish through partnerships and collaborations during this time? How have partnership magnified your impact? How have your partnerships gotten in the way of your work during this time? **How has being in partnerships and collaborations fundamentally changed how you are able to engage aging adults during this time of crisis?**

What have partnerships done to encourage and inspire you and your team? What has been discouraging about being in a partnership or collaboration during this time of pandemic? **How have your partners helped to strengthen your resolve and commitment to pursuing the things that matter most during this time of pandemic?**
Since being a partner of community-based organizations, what are you aware of or in touch with in the community that has helped you be nimble and responsive during COVID-19? In what ways are you better in touch with the needs of seniors? In what ways do you know better where to go and how to respond to their needs? What do you still wish you understood better that would help you respond more quickly?

What’s different in your way of thinking or your mindset as a result of partnering with community-based organizations that has helped you be agile and responsive during this time?

How have you been able to be nimble and response during this time as an organization (or partner)? What took more time and was more clunky than you would have liked? How has partnering with community-based organizations given you the capacity you need to see needs and respond quickly and nimbly to them?

What have been the points along the way during the pandemic when you felt most exhilarated by your ability to meet needs? What points did you feel most deflated? What has changed in your heart toward the needs of seniors as a result of being responsive to them during this time of pandemic?

What unique knowledge or insight have you gained through partnering with community-based organizations that has helped you know how to speak up and advocate for seniors during this time? What unique perspective can you bring? How has this time shaped your views about what people—like community leaders and policy makers—more broadly need to know about aging adults during times like these?

What have you learned about exercising leadership with seniors in your community during this time of pandemic? How has that informed your view of your role in community?

What advantage does partnering with community-based organizations give you in being able to advocate for the seniors during times like these? What are the limitations of partnering with community-based organizations for your advocacy? In what ways do you and your organization need to grow and develop to be better advocates of seniors? In what ways are you strengthening your advocacy already?

What have you done during this time to join aging adults in exercising their voice on behalf of themselves? What do you wish you could have done? What would need to change or develop for you to be able to effectively support seniors in their influence and leadership in our society during times like these?

As you think about the experience of aging adults during times of crisis, what worries you the most? What are you most excited to share with others? How has your sense of responsibility and dedication to advocating for seniors changed or shifted during this time of pandemic? What change in commitment of you, your organization, or your sector would need to happen to realize that dream of yours?
**Appendix C – Quantitative Survey**

**BC Community-based Seniors’ Service Sector COVID-19 Response Survey**

*Effectiveness of the community-based seniors’ service organizations during COVID-19*

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<td>1. How well were you able to identify seniors who were very vulnerable during COVID-19?</td>
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<td>2. How much did you learn about the needs of vulnerable seniors during COVID-19 that you didn’t realize before?</td>
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<td>3. How effective were you in responding to the needs of vulnerable seniors during COVID-19?</td>
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<td>4. How well resourced were you to respond to the needs of the most vulnerable seniors during COVID-19?</td>
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<td>5. How important were the community connections you already had with seniors to your agency’s effectiveness in meeting the needs of vulnerable seniors during the pandemic?</td>
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**What did you do that was most effective for seniors during COVID-19?**

**What was your most significant challenge in meeting the needs of seniors during COVID-19?**
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<td>6. How much did you collaborate with other community-based senior services or other not-for-profit organizations to respond to the needs of vulnerable seniors during COVID-19?</td>
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<td>7. How effective were these partnerships and collaborations during COVID-19?</td>
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<td>8. How much did you partner with community-based senior services or other not-for-profit organizations during the pandemic who you had not partnered with prior to the pandemic?</td>
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<td>9. How much was your local health authority open to collaborating with you during the pandemic?</td>
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<td>10. How much was the municipality open to collaborating with you during the pandemic?</td>
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<td>11. How important were community partnership and collaborations to your agency’s effectiveness in meeting the needs of vulnerable seniors during the pandemic?</td>
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What made your partnerships most effective during COVID-19?

What were the most significant challenges to your partnerships during COVID-19?
**Responsiveness of community-based seniors’ service organizations during COVID-19**

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<td>12. How quickly were you able to respond to the needs of seniors during COVID-19?</td>
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<td>13. How flexible were you in meeting the needs of vulnerable seniors during COVID-19?</td>
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<td>14. How creative were you in meeting the needs of vulnerable seniors during COVID-19?</td>
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<td>15. How confident did you feel to respond to the needs of vulnerable seniors during COVID-19?</td>
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<td>16. How important is the fact that your agency develops its programming based on community input and need, to your ability to be responsive and nimble in the context of the pandemic?</td>
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**What helped you to be nimble and responsive during COVID-19?**

**What inhibited your ability to be nimble and responsive during COVID-19?**
**Exercise of leadership from community-based seniors’ service organizations during COVID-19**

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<td>17. How well were you able to help seniors use their voice during COVID-19?</td>
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<td>18. How well were you able to advocate for vulnerable seniors during COVID-19?</td>
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<td>19. How much influence did you have on the willingness of others in the community to respond to the needs of seniors during COVID-19?</td>
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<td>20. How much influence were you able to have on public decision-makers during COVID-19?</td>
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<td>21. How important was your reputation with seniors and other agencies in your community to your ability to exercise leadership during the pandemic?</td>
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What allowed you to elevate the voices of seniors during COVID-19?

What needs to be developed (in your organization, your partners, or your context) to be able to elevate the voices of seniors more significantly during times like COVID-19?
Demographic Information

22. What region(s) are you serving?
   A. BC Interior
   B. Vancouver and Coastal
   C. Island
   D. North BC
   E. Fraser Valley

23. What kind of community are you serving? (Please check all that apply.)
   A. Remote
   B. Rural
   C. Suburban
   D. Urban

24. What type of organization are you associated with?
   A. Single-service
   B. Multi-service

25. What role do you have in the seniors’ service sector?
   A. Executive
   B. Direct Service Provider
   C. Volunteer
   D. Other