

# Rising to the Challenge:

How BC's Community-Based Seniors' Service Agencies Stepped up During Covid-19

## Executive Summary



# Part 1: Background on the Project

## Opportunity For 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 Sector (CBSS) 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-serving 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 Senior Sector

The CBSS sector is comprised of a variety of municipal and not-for-profit organizations and agencies including seniors centres, community centres, associations, community coalitions, ethno-cultural 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 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, health and wellness supports; affordable housing; 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 sector also builds capacity for communities throughout BC to address the growing challenges of an aging population, now and into the future.

## Approach

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 in their own homes and communities.

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.

*“Volunteers have been a big help for us. We have to rely on the volunteers. All credit goes to them. But we can't rely on volunteers all the time in order to be consistent.”*

- A CBSS Organization Representative

### **The aims of this project were to:**

- demonstrate the value of community-based senior 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 services 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 on-going 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 focused 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 areas of focus 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?*

## Structure of 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 Dialogue 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' Services (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. 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.

*"We were effective because we were already working with those folks. We are very aware of the existing barriers which, of course, were exacerbated by COVID-19 and a lack of social connection."*

- A CBSS Organization Representative



# Part 2: Data Collection

*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** were held with 72 staff, volunteers, partners, and leaders in the CBSS sector. Interviews were completed with staff and volunteers from all five regions of BC, with representatives from remote, rural, suburban, and urban communities, with both single-service and multi-service organizations, and with representatives from organizations focusing on various populations including newcomers and First Nations.
- 2. Group interviews** were held with an additional 27 staff, volunteers, partners and other leaders in three different regional consultations of CBSS sector organizations.
- 3. Sense-making sessions** were convened with eight groups of staff, volunteers, and leaders in the CBSS sector during a provincial online gathering.

## Quantitative Data Collection and Analysis

A survey was designed and deployed throughout the sector to yield quantitative data on perceptions of the impact of the CBSS sector during the pandemic. The survey yielded 101 responses from executives, staff and direct service providers throughout the sector.



# Part 3: Summary of Findings

## The Effectiveness of the CBSS Sector

In many ways, the CBSS sector proved effective in responding to the challenges of the pandemic. The leaders, staff, volunteers, and agencies of the CBSS sector were able to meet the needs of many vulnerable seniors and succeeded in reaching out to seniors who were more isolated and had not previously accessed their services (for an example, see the case study from the North Shore).

CBSS sector organizations rose to the challenge of continuing services to seniors during and through the pandemic by effectively figuring out how they needed to work differently to maintain continuity and increase supports. As one interviewee said, “A lot of things just shut down in March, but we didn’t. Our senior services were slammed. Our service delivery went way up. We were seen as essential.”

Because they were embedded in communities, CBSS sector organizations knew the local context and understood the community landscape of programs and services. As such, the sector brought the right kind of support to seniors rapidly, safely, and effectively. The CBSS knew many of the seniors in their community, so they were able to personalize the support for them. One interviewee said, “[We were effective] because we were already working with those folks. We are very aware of the existing barriers which, of course, were exacerbated by COVID-19 and a lack of social connection.”

Another 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 to tell you before she tells anybody else.”

In addition to showing the significant effectiveness of the CBSS sector during the pandemic, the data also reveal areas where there were challenges to effectiveness. Many of the front-line staff, volunteers, and caregivers were exhausted by the efforts of providing services during the pandemic. Whereas the volunteers proved invaluable to the response of the CBSS sector, the reliance on volunteers also revealed the vulnerability of the sector being dependent on the service of those who are unpaid.

Moreover, because many of the volunteers were seniors themselves, many of them were more vulnerable and cautious during the pandemic. As one interviewee said, “Volunteers have been a big help for us. We have to rely on the volunteers. All credit goes to them. But we can’t rely on volunteers all the time in order to be consistent.”

Funding and resource development are also a concern for the ongoing effectiveness of the sector. For example, one interviewee said, “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. It just feels a little precarious to me.”

*72% reported being substantially effective in responding to the needs of vulnerable seniors during COVID-19*

*75% report being substantially able to identify seniors who were very vulnerable during COVID-19*

*50% report being substantially well-resourced to respond to the needs of the most vulnerable seniors during COVID-19*

Most significantly, the data show a need for developing more effective strategies to reach the seniors who are the most isolated, vulnerable, marginalized, and have difficulties in accessing services on their own. For example, one interviewee noted, “[Our programs] worked more for English speaking seniors than...it did for seniors whose first language is not English.”

In other words, while the sector was successful at reaching out to seniors who were more isolated and had not previously accessed their services, there is still much work to be done in this area. Interviewees and focus group participants reported time and again that the consequences of this pandemic have been felt most acutely by the most marginalized and vulnerable populations of seniors in their community. Included in this group were older adults experiencing vulnerabilities related to social isolation, poverty, inaccessibility to services, health comorbidities, race, sexual orientation, immigration status and indigeneity, among other factors.



## The Responsiveness of the CBSS Sector

The data show that the CBSS sector has been extraordinarily responsive during this time of crisis. One of the hallmarks of the CBSS sector during the time of COVID-19 has been the ability to move

to action rapidly and incisively. The data point to responsiveness as a particular strength of the CBSS sector during this pandemic. The CBSS sector staff and volunteers knew and were close to the need, and were thus poised to take action wisely and effectively (for an example, see the case study on Nelson).

Many agencies showed remarkable speed, nimbleness, and adaptability during the pandemic to adjust their programs, overcome barriers, and find ways to follow through on their commitments to seniors. One said, “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.” Another said, “We started a meal program that didn’t exist before. We’re delivering 200 hot meals in only two days. That’s just taken off like crazy. People love it.”

Still another said, “We had a rapidly changing and adapting program delivery every single day. After you have changed your program delivery model for the sixth time in four days, it takes an internal decision to change it again. It is one challenge to adapt the programs; it is another challenge to just continually adapt them because of the unseen.”

The agencies of the CBSS sector were creative and persistent, and their responsiveness has been exemplary.

Whereas the data show that the CBSS sector has been remarkably nimble and adaptable, the evidence from this study also unveiled some challenges of responsiveness. In some cases human resources were limited. Human capacity has clearly been stretched throughout the pandemic. One said, “I only have

*85% report being substantially creative in meeting the needs of vulnerable seniors during COVID-19?*

*80% report being substantially quick and 84% reported being substantially flexible in meeting the needs of vulnerable seniors during COVID-19.*

so much energy for innovation. I think that one of the stumbling blocks is the incredible pressure that social services agencies have been under throughout this.” In other cases, bureaucracy and the need for resources held back innovation. One said, “[Our programs] need to be nimble enough. And that requires having some money.”

Primary barriers to the responsiveness of CBSS agencies included the limitations of seniors’ access to technology, as well as their limited experience and ability to use the technological tools to which the rest of society was quickly transitioning. One interviewee said, “Many people have little or no access to technology. [They would need a] computer, stable internet, and some basic understanding of how to make it all happen.”

## The Partnerships of the CBSS Sector

Partnerships and collaborations among the CBSS Sector, and with the broader community, were essential in mounting an effective response to the pandemic. The data are clear that partnerships have been powerful during the pandemic. In part, effectiveness is attributed to the local presence of CBSS organizations. 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.”

Partnerships, especially those that were established and functioning prior to the pandemic, were able to maximize the collective response of communities during COVID-19. One interviewee said, “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, as an organization, have spent time working in partnership.”

Another interviewee said, “We have had a health and wellness collaborative over the last four years, and we have 20 organizations that are members of the collaborative. That group morphed into a community COVID response committee.” Partnerships proved to be essential in guiding the community to serve seniors during the pandemic.

The powerful impact of partnerships was revealed in the data with the evidence that CBSS staff and volunteers played important

leadership roles in mobilizing, coordinating, and forming cooperative, community-wide networks. These networks proved to be critical to respond effectively to the needs of the most vulnerable seniors. The data show that during the era of COVID-19, partnerships were strengthened, new collaborations were forged, and habits of collective coordination and strategy were fostered. These partnerships hold promise to improve the capacity of communities to serve their seniors into the future. For example, one interviewee said, “All of us coming together has never happened before. We have facilitated meetings literally two or three times a week with the mayor’s office, the council, and our health authority. The NGOs (non-governmental organizations) have all now come together.”

*74% report that their partnerships and collaborations were substantially effective during the pandemic.*

*37% report partnering in a substantial way with other community-based senior services or other not-for-profit organizations during the pandemic they had not partnered with prior to the pandemic.*

*35% report that their local health authority was open to collaborating and 38% report that their municipalities were open to collaborating with them.*



In general, the data on partnerships reveal strength, resilience, functionality, and acuity of collaboration during this time of crisis, especially when they were functioning well.

However, the data from this study also uncover some challenges to establishing effective partnerships. Organizations that had been competing over resources prior to the pandemic were less well equipped to mobilize themselves in collaboration with others. One interviewee said, “When you’re reliant on limited funding, and you have to compete for it, it doesn’t set the stage for good working relationships.” Another said, “People are playing not to lose their property and protecting what is there instead of thinking more nimbly about the needs of seniors.” The inertia of organizations acting independently was due in part to the systemic pressures and the incentives of funding and programming models based on competition that reinforce the habits of organizations working independently, and reveal areas for growth and needed improvement.



The data also reveal only a moderate effectiveness in the partnerships between the CBSS sector and municipalities and health authorities. This insight shows a vulnerability in the sector’s ability to coordinate a thorough and comprehensive response to the crisis.

What was also clear from the data are that partnerships were most effective in communities where there were pre-existing relationships and a history of working in collaboration.

In some communities relationships between the CBSS sector and health authorities

and/or municipalities were well-established and proved to be critical to effective collaboration during the pandemic; while in many communities these relationships were more limited and tenuous. One interviewee from the health authority described that in the context of the pandemic, health authorities were focused on protecting the acute care system and preventing transmission of the virus. Health authorities also needed to direct their attention to priorities like the homeless population and residential care. As a result, health authorities were unable to give attention to the other needs of seniors being addressed by CBSS organizations: “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.” In several case

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– A CBSS Organization Representative

*53% report being able to substantially help seniors use their voice during COVID-19.during the pandemic.*

*22% report being able to have a substantial influence on decision-makers during COVID-19.*

studies – Cowichan, North Vancouver, Burnaby, and Nelson, for example – there were positive examples of effective collaborations between the CBSS sector, health authorities, and municipalities that became much stronger during the pandemic.

## The Influence of the CBSS Sector

As positioned and prepared as the CBSS sector has been to respond effectively to the COVID 19 crisis, the opportunity within the sector to elevate the voices of seniors, and draw the attention of the community and its civic leaders to the welfare of seniors during the pandemic, revealed both strengths and areas for improvement. Of the four areas of focus in this study, the influence of the CBSS sector showed most need for improvement.

In many ways, the pandemic encouraged attention on the sector. One interviewee said, “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.” CBSS organizations found opportunities during the pandemic to shine a light of attention on the seniors in communities and the needs of aging adults. In a way, the pandemic provided urgency to the sector. During this time, leaders in the sector made modest strides to help other community organizations, community leaders, and the general public focus on the priority of serving seniors, meeting their needs, and supporting them in their homes as they age.

Throughout the pandemic, the CBSS sector has also struggled to provide robust advocacy for seniors and seniors issues.

One said, “Because we have our noses down, I don’t think that we’ve had a whole lot of time to do any advocating.” Data from the CBSS sector survey reveal the perception of a lack of influence from those in the sector among decision-makers, which may be a missed opportunity for advocacy.

The data show that many still struggle to influence the communities’ commitment and engagement in the lives of the most vulnerable of seniors. In addition, the data reveal that some critical voices of seniors have been overlooked and under-amplified. While there has not been enough opportunity to elevate the voice of seniors to advocate for themselves, there have been some examples of successful advocacy led by seniors (for an example see the case study from 411 Seniors Centre).



## The Value of the CBSS Sector

The data from the study reveal a convincing view of the value of the CBSS sector. The results clearly demonstrate the unique ability of community-based organizations to connect with seniors, to be responsive to their individual needs, to have insight into local contexts, and to build trust with both seniors and community partners. Most importantly, the CBSS sector mobilizes partners, volunteers, and community members to work together, and to reach out and attend to the needs of some of the most vulnerable and isolated seniors in their communities. And yet, some challenges facing the sector were also revealed in the data. The seniors in our communities deserve all of the honor and dignity we can afford them; and all of the support and services we can provide for their health and well-being. The lessons learned from the CBSS COVID-19 Response Report will be useful to agencies and communities and governments in preparing for the future.

# Part 4: Recommendations for the Future

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

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 local, community-based senior services focused on health promotion and preventions. Possible focus areas include:

- Promote the cause of serving vulnerable seniors throughout BC and the role of the sector in serving this population.
- Develop capacity for greater advocacy and increased influence to catalyze support for community-based senior services.
- Promote expertise from within the sector.
- Elevate the voices of seniors, particularly the voices of marginalized and vulnerable seniors.

## 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. Time, energy, and resources must be 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 in all times and circumstances, but particularly during times of crisis, a strategy for strengthening partnerships should be developed and prioritized.

- Design provincial strategies to develop, sustain, and fund new local partnerships.
- Develop communication tools to promote the value of working collaboratively within the CBSS sector, with other community partners, and with government.
- Develop leadership skills and fund those leading networking and partnerships.
- Strengthen partnerships with municipalities and health authorities.
- Expand partnerships to include other leaders and agencies.



### 3. Develop the staff capacity of the CBSS 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. We should not take for granted the reality that many sector members have gone above and beyond the typical requirements of their jobs and roles to rise to the challenge. We should match the service of the staff with better supports for the future. The response of CBSS service agencies 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 and funding for staff throughout the sector.
- Develop a process for recognizing and elevating the contribution of CBSS staff.
- Recruit a multi-generational range of staff.
- Involve more diverse and multilingual staff.
- Develop strategies for agencies lacking sufficient staff resources.

### 4. Strengthen the support for volunteers

One of the great strengths of the CBSS sector is the high level of involvement of volunteers. However, an over-reliance on volunteers leaves the sector vulnerable. While the pandemic has brought new volunteers to serve seniors, the perception of many is that volunteering during this time of crisis has been extremely taxing on volunteers. Volunteers need more support, which is critical as they themselves support seniors with complex health and social needs. Increasing staff capacity to train, manage, and provide support for the CBSS sector volunteer corps, will strengthen the sector going forward.

- Invest in the development of the capabilities and skills of volunteers by creating training, mentoring, and social support programs for volunteers.
- Design ways to better support volunteers who are vulnerable or experiencing exhaustion.
- Rethink the balance of volunteers and paid staff to ensure the strength and resilience of the sector.



## 5. Advance strategies for senior inclusion and engagement

The isolation that many seniors have experienced during the pandemic reveals a pervasive pernicious issue, with differing levels of severity for some very vulnerable populations and individuals. What has been illuminated, but not caused by the pandemic, is a persistent and significant problem of visibility, engagement, and integration of many groups of seniors in and by their communities. Of particular concern is the need for access to and training in technology for seniors. The pandemic of 2020-2021 should be a catalyst to remedy isolation and help communities pursue solutions to loneliness and address the on-going marginalization of many groups of seniors.

- Pursue strategies to involve seniors who are unseen and underrepresented.
- Increase ability to connect seniors through technology by providing access, training, and support to technology.
- Strengthen bridges between seniors and the whole community to provide a resilient ecosystem of support for seniors.
- Advance the ability to connect isolated seniors to the services of the CBSS sector.
- Develop a multi-systems and multi-dimensional approach to senior inclusion.



## 6. Strengthen the resilience of the CBSS sector

The health and vitality of the CBSS sector is critical to the health and vitality of seniors. The work of the United Way in bringing the sector together and increasing 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 CBSS sector to promote sharing of best approaches and promising practices among sector agencies.
- Develop and share policies, processes, and tools across the sector to support local agencies and communities.
- Explore and enhance the support for CBSS agencies in rural or remote areas.
- Enhance communication strategies throughout the sector to foster the sharing of knowledge.



## 7. Secure stable and core funding for the CBSS 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 COVID-19 pandemic. The data show that there is a perception of the cost-effectiveness of the CBSS sector's approaches superior to traditional institutional approaches. However, some of the sector's accomplishments resulted from special funding provided in response to the pandemic. Many fear that a return to conventional funding will be a barrier to the effectiveness of the sector going forward. 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 erode the ability of organizations and agencies to work together. The sector needs sufficient, stable, and secure funding for the future.

- Provide core funding, not tied to a specific program, to increase the capacity of the sector to respond flexibly and effectively to the needs of the seniors in their community.
- Secure stable, multi-year funding that allows organizations and partnerships to plan strategically and implement programs confidently.
- Strengthen funding relationships with local governments and health authorities.



# Case Study Summaries

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

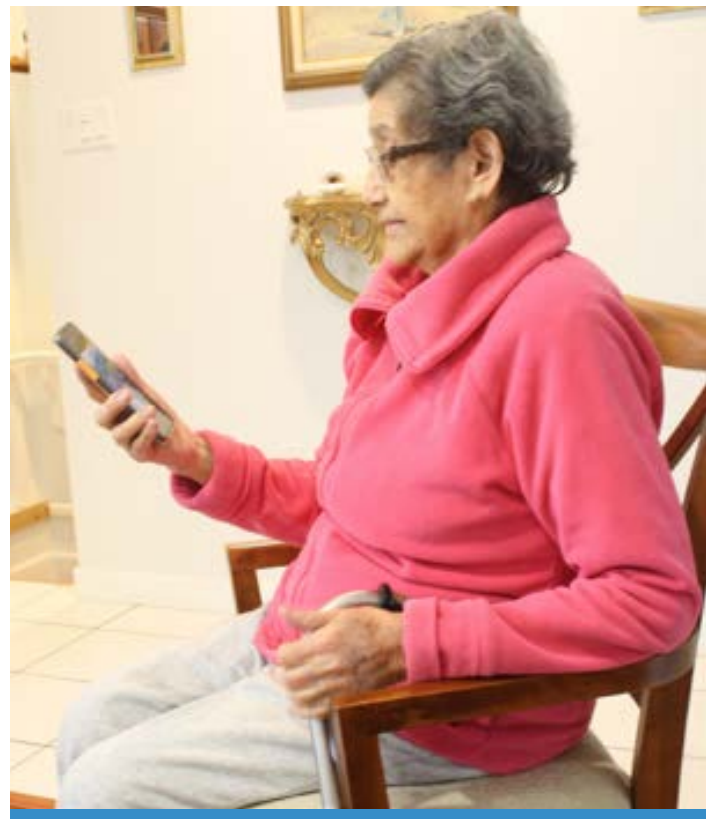
An innovative collaboration led to improved food security for isolated and vulnerable seniors in North Vancouver. The collaboration was initiated by Silver Harbour Seniors' Activity Centre, working with Vancouver Coastal Health, North Shore Community Resources, Family Services of the North Shore, and 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 to other seniors living in the community, from April to September 2020. 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

## **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 senior 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 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.

## **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. This collaborative effort's impact is largely attributable to the close relationships Autumn Services staff has with its community, which allowed them to understand who might benefit and be able to use a cell phone well, as well as the enthusiastic and dedicated leadership of the organization, and the flexible funding provided by United Way of the Lower Mainland.



### **Culturally-Specific Outreach to Seniors**

Members of the Eldercare Project in Cowichan (EPIC) network table leveraged an existing collaboration for senior wellbeing 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.

### **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. The factors that made this effort effective include: 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.

### **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 wellbeing 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 wellbeing of seniors going forward.

