Intersection between Health Care and Community Recreation

Langara Recreation Studies

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Image source: https://www.news-medical.net/health/A-Guide-to-Healthy-Aging.aspx

Executive Summary

This research examines the role of recreation in supporting prevention, recovery, and healthy aging, with a focus on strengthening connections between health care and community-based recreation services. While health care systems provide essential medical care, recreation offers ongoing opportunities to support physical function, social connection, independence, and quality of life throughout the aging process. However, gaps remain in the transition between medical care and community participation, limiting opportunities for older adults to access supportive recreation programs.

Findings suggest that a more coordinated approach between recreation and health care professionals is needed to increase awareness of recreation's role in preventative health, rehabilitation, and long-term recovery. Strengthening interdisciplinary education, developing partnerships between health care providers, recreation organizations, and community agencies, and improving pathways to recreation opportunities can enhance support for older adults. By integrating recreation more intentionally into the continuum of care, communities can help reduce barriers to participation, promote lifelong engagement, and contribute to improved health and well-being among aging populations.

Introduction

People in Canada are living longer than ever before, and many can expect to spend 20 years or more in retirement (Government of Canada, 2024). While longer lives are something to look forward to, it also highlights the importance of planning for health and well-being in later years. Maintaining physical activity, staying socially connected, and taking an active role in self-care can help older adults remain independent and engaged as they age. Community recreation programs and services support these goals by providing opportunities to stay active, build relationships, and participate in meaningful activities that contribute to overall quality of life.

As people age and live longer lives, this research explores the physical changes that can affect movement and daily functioning. These changes often include declines in muscle mass, strength, endurance, and mobility, which may impact independence. (Statistics Canada, 2021).

The research highlights how lifelong participation in recreation can shape the aging process. It also examines how healthcare and recreation services can better coordinate to support older adults with mobility challenges as they transition from post-surgical care back into the community. Overall, the study aims to identify practical ways to enhance the well-being and support for older adults, while reducing pressure on the healthcare system, including how recreation can help bridge the gap between medical care and accessible, meaningful community programs.

Accordingly, this research is guided by the question: *How does lifelong participation in recreation shape the aging process, and how can health care and recreation services work together to inform and support older adults who have undergone surgery to transition from medical care to community-based recreation?*

For the purpose of this study, older adults are defined as individuals aged 65 years and older. (Government of British Columbia, 2024). Community recreation is described as the experiences people have, when they choose to take part in activities they enjoy whether physical, social, creative, intellectual, or spiritual - that support both personal well-being and a sense of community, as outlined in the Canadian Parks and Recreation Association's Framework for Recreation in Canada (Canadian Parks and Recreation Association, 2024).

Background and Context

The intersection between healthcare and community recreation presents thought provoking opportunities and possibilities. This research grew out of conversations between faculty in nursing and recreation studies at Langara College. Much like the broader community, where healthcare and recreation are often delivered as separate services, these departments at the college have traditionally worked independently.

The discussions focused on lifestyle factors and strategies to support healthy aging among older adults. The questions focused on how lifelong participation in recreation shapes the aging process, and how healthcare and recreation services might work together to better support older adults as they move from post-surgery care back into community.

The health care system provides essential clinical care from diagnosis through acute recovery. After discharge, community-based recreation organizations can complement these services by supporting ongoing rehabilitation, physical activity, and social participation. Programs such as supervised exercise, mobility classes, and social activities help maintain physical function and reduce isolation. By providing safe, structured opportunities for participation, community recreation can bridge clinical care and independent living. Strengthening connections between health care and recreation could create more continuous, holistic care, improve long-term health outcomes, and help ease pressure on the formal health care system.

Literature Review

The Aging Process

Over the past century, attitudes toward aging have changed significantly. In the 1950s and 1960s, older adulthood was commonly viewed as a period of regression, with most people living only five to ten years beyond retirement (Government of Canada, 2016). The Canadian social and healthcare systems were built on these assumptions. Programs such as Old Age Security, created in 1952 (Government of Canada, 2012) and Canada's universal healthcare system, introduced in 1961 (National Library of Medicine, 2018), were developed at a time when older adults were not expected to live as long or remain as healthy and active as they do today.

These beliefs were reinforced by Disengagement Theory, introduced by Cumming and Henry (1961), which proposed that aging naturally involves withdrawing from social roles and relationships (Schroots, 1996). However, research has shown that social disengagement can have negative consequences for both individuals and the healthcare system.

Strengthening social ties and community belonging was identified as an important way to help reduce demand on the provincial healthcare systems. (Annual Report of the Chief Medical Officer of Health of Ontario, 2017). At the same time, researchers and policymakers were beginning to rethink traditional assumptions about aging.

By the 1970s, these assumptions were challenged by Havighurst and Albrecht who developed Activity Theory. They argued that older adults experience greater health, well-being, and life satisfaction when they remain physically active, socially connected, and engaged in meaningful roles (Khullar & Reynolds, 1990; Gillespie & Louw, 1993). Rather than viewing later life as a period of inevitable decline, this perspective recognized aging as a stage that adults can remain active and fulfilled. Many older adults referred to this stage of life as the 'Golden Years' and others referred to it as 'Freedom 55', referring to early retirement as a life goal.

Lifelong Participation in Recreation

As attitudes toward aging evolved, so did recreation opportunities. Municipalities expanded beyond playgrounds and arenas to include community centres, indoor and outdoor swimming pools, arts and cultural facilities, sports complexes, youth centres and senior centres. Today, communities across British Columbia benefit from publicly funded parks, recreation, and cultural facilities that are supported through municipal taxes and user fees. These services are considered a public good because they are intended to be accessible to everyone and provide broad social, health, and community benefits (Encyclopedia Britannica, n.d.).

Recreation opportunities are delivered through a collaborative network of municipal, provincial, and federal governments, the non-profit sector (YM\YWCA, Neighborhood Houses, Boys and Girls Clubs, churches) and the commercial sector (ski resorts, golf clubs, tennis clubs, destination theme parks). Recreation plays a significant role in influencing a healthy aging process, and through these diverse range of opportunities, provides important benefits to individuals at all stages of life.

Recreation encompasses a broad spectrum of physical, creative, social, and cognitive activities that support individual well-being, social engagement, community connectedness and healthy ageing (Wheatley & Bickerton, 2017). Through opportunities that promote movement, confidence, social connection, and meaningful participation, recreation plays an important role across the lifespan (BCRPA, n.d.), including supporting prehabilitation by helping individuals build strength, mobility, and resilience before medical procedures, and rehabilitation by facilitating recovery, independence, and quality of life following illness, injury, or surgery (Hutchinson, et al. 2022)

Beyond its physical benefits, recreation plays an important role in supporting social well-being. Recreation programs, community events, and leisure facilities provide opportunities for older adults to build relationships, reduce loneliness and social isolation, and maintain a sense of purpose and belonging (Gibson & Singleton, 2011; Winstead et al., 2014). By combining physical activity with meaningful social engagement, recreation helps older adults maintain both their independence and their quality of life while strengthening healthier, more connected communities.

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Regular participation can reduce the risk of chronic diseases, improve strength, balance, and mobility, and help older adults maintain their independence (World Health Organization, 2024). Research suggests that lifelong participation in recreation and physical activity can transform aging from a period of decline into one of continued health and independence (Mandi et al., 2023). This aligns with Activity Theory, which proposes that remaining physically and socially active throughout life supports healthy aging. As Attia and Gifford (2023) emphasize, maintaining fitness is essential for preserving the ability to perform everyday activities such as walking, shopping, preparing meals, and managing personal care.

Population is Getting Older

After World War II, Canada experienced a baby boom as birth rates rose and families grew. Today, the oldest baby boomers are entering senior age, and this generation is expected to become the largest group of older adults in history. (Public Health Agency of Canada, 2010). Advances in healthcare, public health, and living standards have contributed to significant increases in longevity in Canada. Life expectancy at birth rose from approximately 71 years in 1960 to over 81 years in 2023, (World Bank, n.d.) which represents

an increase of more than a decade over the past 60 years. This demographic shift means that a growing number of Canadians are spending a larger portion of their lives in older adulthood, increasing the importance of strategies that support health, independence, and well-being throughout the aging process. With more people living longer, the focus is shifting beyond simply increasing lifespan to supporting quality of life in later years. Staying physically active and socially connected plays an important role in healthy aging, helping older adults maintain mobility, independence, and meaningful connections within their communities.

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Risks of Sedentary Lifestyle

The World Health Organization recommends that adults over 65 years aim for 150–300 minutes of moderate physical activity each week, not just to stay fit, but to stay independent and connected (World Health Organization, 2011). It also recommends that older adults do activities that strengthen muscles two days per week and balancing activities regularly. (Centers for Disease Control and Prevention, 2025). Regular physical activity, including activities such as walking, swimming, gardening, cycling, hiking, and dancing, helps older adults maintain strength, balance, flexibility, and mobility. Staying active can also reduce the risk of falls, support bone health, and help people remain independent in their daily lives. (World Health Organization, 2024). Although the health benefits of regular physical activity are widely recognized, the majority of older adults in Canada do not meet recommended activity levels. According to Statistics Canada's Canadian Health Measures Survey as cited in Participaction, 70% of adults 65 to 79 years of age are not meeting the activity level recommendations (ParticipAction, 2025).

Although a substantial body of research demonstrates that positive physiological changes contribute to improved health and functioning in older adults, (Taylor, 2014), modern populations in North America and globally are spending increasing amounts of time engaged in sedentary behaviours. During their leisure time, they are often sitting - while using a computer or other devices, watching TV, or playing games on screens. Sedentary living poses one of the greatest threats to healthy aging in Canada, surpassing risks associated with smoking, obesity, and many other lifestyle-related factors (Cousins, 2005). Lack of physical activity can reduce cardiovascular fitness, muscle mass, and overall strength, making everyday tasks more challenging for older adults. Research suggests that "Canadians are aging twice as fast as nature intended, equating to a 50% functional loss between age 30 and 80" (Cousins, 2005, p. 4). As strength, balance, and mobility decrease, the risk of falls and related injuries increases. (Montero-Odasso et al., 2022).

Methodology

Two forms of primary research were used to collect current and relevant information: content analysis and interviews. A qualitative approach was used to identify overarching themes across both methods and to examine how the findings aligned with, added to, or challenged existing literature.

Content analysis was conducted on the websites of 18 municipal parks and recreation departments across British Columbia. This review focused on identifying community-based prehabilitation and rehabilitation programs, services, and resources for older adults awaiting or recovering from surgery, as well as assessing how easily this information could be accessed online. Three organizations demonstrating best practices were then selected for more in-depth analysis through detailed website reviews and staff interviews.

Course outlines from four Langara Recreation Studies Diploma and Bachelor of Recreation Management courses focused on research, wellness, community, or aging, (RECR 2395 Recreation & Aging, RECR 3120 Promoting Wellness within Communities, RECR 4150 Community Recreation Systems, RECR 4400 Applied Major Project), along with syllabi from five Langara Nursing courses with community-based content (NURS 1109 – Health I: Health & Wellness, NURS 1209 -Health II: Health and Chronicity, Sections 1 & 2, NURS 2109 - Adult Health and Healing, NURS 2209 - Healing II: Adult Health and Healing), were reviewed to identify opportunities for collaboration between the two programs.

Interviews were completed in June 2026 with five participants from municipal parks and recreation departments and a non-profit community organization, including an Executive Director, Physiotherapist, Area Recreation Manager, Fitness Centre Supervisor, and Health and Fitness Program Coordinator. Participants were contacted via email, provided with an overview of the study, and scheduled for video-call interviews. Prior to each interview, the study purpose and background were reviewed and consent to record was obtained. Interviews followed a semi-structured format using questions focused on program delivery for older adults before and after surgery, as well as program development, inter-organizational relationships, and transitions between healthcare and community services. Participants were given time to respond fully with follow-up questions used for clarification and depth.

The Langara Nursing department was engaged in the project, contributing to the development of the research question, discussions of key issues, and the identification of opportunities within the healthcare system to better support older adults preparing for, or recovering from surgery. They have also provided consultation, access to course syllabi and were included in stakeholder meetings. This collaboration provided opportunities for ongoing input and shared knowledge.

On the community healthcare side, several healthcare professionals initially expressed interest in participating in the study but ultimately did not take part. Their perspectives would have provided valuable insights into current practices, referral pathways, and opportunities to strengthen connections between healthcare and community recreation services. Although the study benefited from the participation of other organizations, broader involvement from community healthcare professionals would have further enriched the findings and strengthened the interdisciplinary perspective of the research.

Discussion

Recreation as an Extension of the Health Care System

As British Columbia's population ages, older adults will continue to make up an increasingly larger share of the population. British Columbia's aging population has been identified as one factor contributing to increased demand for healthcare services, including pressures on hospital capacity and elective surgical wait times. (Government of British Columbia, 2024).

As demand for health care continues to grow, the system is facing increasing pressure to meet the needs of an aging population. At the same time, community recreation services are not typically viewed as part of the broader health care continuum, despite their potential to support health, recovery, and healthy aging.

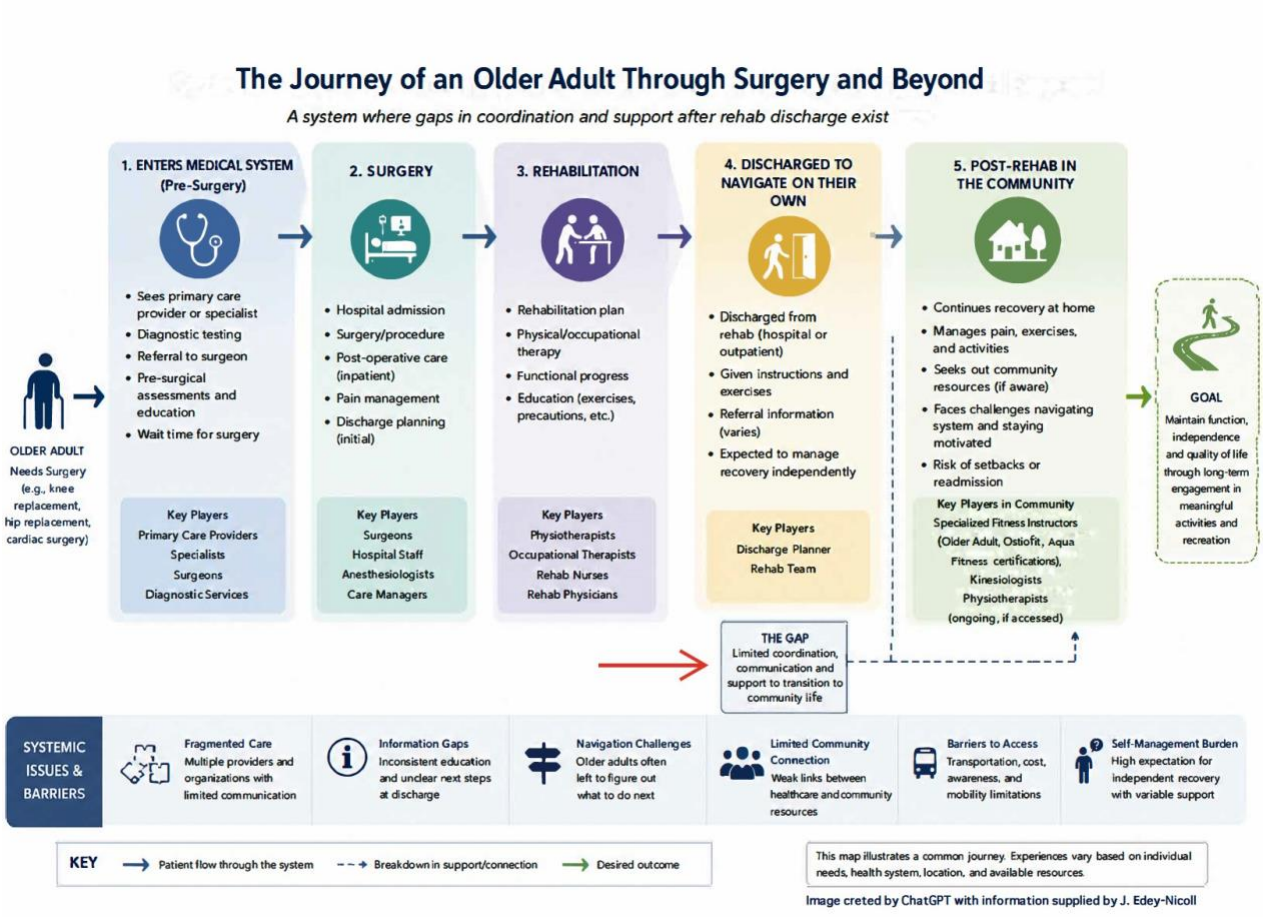
Recreation can play a vital role as a form of preventative health, as well as post-operative care. (Hutchinson et al., 2022). Over the past several decades, the growth of recreation services in BC and the rest of Canada, has led to the increase of skilled professionals and technicians to manage the facilities and systems, to provide programs, services and events and to plan and develop recreation infrastructure (parks, community centres, aquatic facilities, arenas, golf courses, fitness centres, ski resorts, youth centres, arts and cultural centres, etc.). With a growing network of recreation professionals and community facilities in place, recreation services are well positioned to help address the health and mobility challenges associated with an aging population.

As people age, a variety of physiological changes can affect mobility and physical function (Taylor, 2014). Older adults who do not adopt healthy aging behaviours, including regular physical activity, are more likely to experience declines in strength, balance, mobility, and overall functional ability (Cunningham et al., 2020).

However, even those who remain physically active may develop conditions such as osteoarthritis, a common condition associated with aging that often affects weight-bearing joints such as the knees and hips. Although regular exercise is an important part of managing osteoarthritis by reducing pain and improving joint function (GLA:D Canada, n.d.), some individuals may eventually require hip or knee replacement surgery when symptoms become severe and non-surgical treatments, such as exercise, medication, and physiotherapy, no longer provide sufficient relief. Similarly, for some people with other medical conditions such as cardiovascular disease; surgery may still be necessary despite appropriate lifestyle changes and medical management (Heart & Stroke Foundation of Canada, n.d.). As the population ages and more people require medical treatment and surgical interventions, the demand for health care services continues to grow, placing increasing pressure on the health care system (Government of British Columbia, 2026).

When older adults undergo surgery for age-related conditions such as knee replacement, hip replacement, stroke recovery, or cardiac surgery, they receive the required medical care within the healthcare system and based on the pressures of the system, are frequently discharged with the expectation that they will continue their ongoing rehabilitation in the community.

The following systems map illustrates, the journey of an older adult undergoing surgery for an age-related condition, from the healthcare system to community-based recovery. It highlights the key stages of care, the organizations and professionals involved, and the transition from medical rehabilitation to independent recovery.



The map highlights a critical gap in the current system: many older adults require ongoing rehabilitation and support after discharge, yet these services are not always well coordinated

The health care system provides some supports to help older adults transition from hospital to home or another care setting, with social workers playing a central role in this process. They assess an individual's physical, emotional, social, and living circumstances to ensure a safe discharge, coordinate community supports such as home care and meal services and assist with applications for assisted living or long-term care when needed. (HealthLink BC, 2022). Their role does not necessarily extend to community-based recreation services to support their rehabilitation. Recognizing recreation as a contributor to physical, social, and emotional health supports a more holistic approach to patient care. The challenge is not a lack of recognition among healthcare providers, including nurses,

about the value of recreation. Rather, discharge environments are often time-limited, patients may feel overwhelmed with information, and healthcare professionals may not have the capacity or local knowledge to identify every relevant community resource available (Johnston, 2026).

British Columbia communities, particularly urban municipalities, have developed extensive recreation infrastructure, including fitness facilities, aquatic centres, and accessible indoor and outdoor spaces that support older adults transitioning from healthcare to community-based recreation (British Columbia Recreation and Parks Association. n.d.). These facilities provide opportunities for individuals recovering from surgery to safely rebuild strength, mobility, and confidence through structured programs. They also serve as social environments where older adults can connect with others, fostering belonging, motivation, and community support.

Recreation professionals bring specialized education and certifications that support safe and effective programming for older adults and individuals with health-related needs. Credentials such as BCRPA Older Adult Fitness, Aqua Fitness, and Osteofit, along with certifications through organizations such as the British Columbia Association of Kinesiologists, Canadian Society for Exercise Physiology, Canadian Fitness Education Services, and American College of Sports Medicine, demonstrate the sector's capacity to provide evidence-informed support for recovery, prevention, and lifelong wellness (MacKay & Martin; Angela & Lang; Horne, 2026, personal communications).

Despite these resources, many older adults experience challenges transitioning from healthcare to community-based recreation. Limited communication between healthcare providers and recreation services, gaps in information, and uncertainty about available programs can create barriers to continued participation. These challenges are amplified in rural and remote communities where services may be limited and transportation can be a significant barrier (Coughlin, 2026, Hutchinson et al., 2022).

Without continued guidance and support, some older adults may lack the motivation, experience uncertainty about participating independently, or have low confidence in maintaining physical activity. This may be particularly true for individuals who have not previously been physically active, as they may lack the knowledge, skills, and confidence to initiate participation in community-based recreation and exercise programs. Consequently, recovery often relies on self-management, which may contribute to poorer outcomes, including an increased risk of setbacks and hospital readmission.

Recognizing recreation as a contributor to physical, social, and emotional health supports a more holistic approach to patient care.

Benefits of an Integrated System

As Canada's older population continues to grow, there is a need to rethink how we support healthy aging in ways that are more effective and meaningful. Moving forward, this means building on the programs already in place, while also taking the time to evaluate what is working and where improvements are needed. It is also important to understand why some initiatives are more successful than others and to use that knowledge to guide future planning and create stronger, more integrated approaches.

Supporting seniors' health will also mean focusing more directly on their unique needs when it comes to health promotion. To make real progress, strong collaboration will be needed across all levels of government, as well as between healthcare and recreation providers. (Public Health Agency of Canada, 2010; MacKay & Martin, 2026, personal communication).

Reframing recreation as an extension of healthcare creates opportunities to support better health outcomes and reduce pressure on existing services. This perspective challenges the notion that healthcare ends at discharge and instead, positions community recreation as a complementary component within a continuum of care. It aligns with calls for more integrated and community-based approaches to health promotion (ParticipACTION, 2021; Public Health Agency of Canada, 2010). There are several practical benefits for individuals, communities, and the health system as a whole. It helps shift care beyond the hospital, supporting people after discharge so recovery continues at home and in the community, rather than stopping once formal treatment ends.

For many individuals, this is also more comfortable and less stressful, since they can recover in familiar surroundings. It can also improve health outcomes by encouraging ongoing physical activity, social connection, and engagement in meaningful community programs. This is especially important for older adults, where recreation can support both physical recovery and social well-being.

From a community perspective, recreation programs play an important role in fostering connection, belonging, and social support. Strong community connectedness can be a key motivator for individuals who have not been physically active throughout their lives, helping them feel supported as they transition from health care into community-based rehabilitation. Encouragement from health care providers to continue their recovery through community recreation programs may be more influential than receiving information solely from recreation professionals, as it reinforces the connection between rehabilitation, long-term health, and quality of life.

There are also clear benefits for the health system. Supporting recovery and ongoing health through community-based recreation can often be more cost-effective than relying only on clinical care. Evidence from the World Health Organization (2024) and the Public Health Agency of Canada (2018) shows that physical activity and community-based prevention strategies are economically efficient approaches that help reduce healthcare use, lower overall system costs, and ultimately maximize available resources.

The traditional healthcare model, in which healthcare services and recreation services operate independently, can create gaps in patient care and increase risk. Health care systems have historically prioritized the diagnosis, treatment and management of illness (Hunter & Bierma-Zeinstra, 2019), however, there is growing recognition of the need to expand toward prevention, health

promotion, rehabilitation, and community-based approaches that support healthy ageing (World Health Organization, n.d.). Recreation presents an important opportunity for preventative and post-operative care by providing proactive, cost-effective, and holistic ways to support physical and social well-being. It offers a valuable complement to the healthcare plan by emphasizing overall wellness and active living, rather than relying solely on reactive approaches focused on treating illness. Supporting older adults with clear information, consistent education, and coordinated access to community programs can promote continued physical activity, improve confidence, and help maintain long-term health and independence. This integrated system would strengthen connections between healthcare and community recreation providers, creating a more coordinated approach where both sectors contribute to supporting recovery, independence, and healthy aging.

Environmental scanning of the websites of 18 municipal parks and recreation departments across British Columbia, together with the provincial recreation association - BCRPA, identified a variety of community-based prehabilitation and rehabilitation programs for older adults. These include:

- **ActivAge and Choose to Move** (British Columbia Recreation and Parks Association, n.d.); are examples of community-based recreation programs designed to support inactive or less active older adults in developing sustainable physical activity habits while improving strength, balance, mobility, confidence, and social connectedness. Associated with the various health regions across the province, these programs provide supportive, accessible environments where older adults can gradually increase their activity levels, build self-efficacy, and develop meaningful social connections. By addressing common barriers to participation, including uncertainty about how to begin exercising, fear of injury, low confidence, and social isolation, these programs highlight the important role recreation can play in preventative health and healthy aging.

- The **GLA:D** (Good Living with Osteoarthritis) program is an evidence-based education and exercise program that supports individuals with hip and knee osteoarthritis through targeted strength, balance, and neuromuscular training. Offer through community recreation centres and private physiotherapy practices, the program aims to improve physical function, reduce symptoms, and enhance confidence in daily activities, making it a valuable community-based prehabilitation and rehabilitation resource for older adults preparing for or recovering from joint-related health challenges. (GLA:D International, n.d.).

- **Joint Rehab** - This program is designed for individuals who have been referred by a hospital physiotherapist and are preparing for or recovering from knee, hip, or shoulder joint replacement surgery. The program provides guided exercise to improve strength, mobility, and confidence, supporting a safe recovery, greater independence, and a successful transition from hospital-based rehabilitation to community-based physical activity. (North Vancouver Recreation and Culture Commission, n.d., MacKay, & Martin personal communication, June 5, 2026).

Discussions with health care providers further identified the provincial 211 service as a valuable referral resource, offering free and confidential access to community, social, government, and recreation services that can support recovery and ongoing participation in community life. The service helps health care professionals and residents locate local recreation opportunities that are accessible, such as sports programs, prehab and rehab programs, seniors' centres, and parks, as well as information on fee assistance and subsidy programs (United Way British Columbia, n.d.).

A review of five Bachelor of Science in Nursing (BSN) course syllabi at Langara with apparent connections to community health did not identify explicit integration of community recreation as a resource for health promotion, rehabilitation, or ongoing wellness. Expanding this exploration to include community recreation, physical activity, and social engagement could help future nurses recognize the role of community-based resources in supporting prevention, recovery, independence, and quality of life.

Best Practices identified through the primary research provide examples of how communities are positioning recreation as a key partner in supporting health care outcomes and extending care beyond traditional medical settings.

Recope - *Reintroducing Movement to Support Recovery and Independence*

Recope is a non-profit organization that has supported the Summerland community for over 50 years. Originally established as a hospital-based aquatic rehabilitation program following the opening of the Summerland pool in 1976, medical staff recognized the need for ongoing rehabilitation services for patients with impaired mobility and developed a community-based therapeutic exercise program.

Today, Recope provides medically supervised rehabilitation and therapeutic exercise programs that help individuals improve strength, mobility, independence, and overall well-being through safe, personalized exercise. Physician referrals, physiotherapists, occupational therapists, and specialized fitness instructors work collaboratively to support participants throughout their recovery and return to active living.

Beyond rehabilitation, Recope recognizes that lasting health depends on maintaining an active lifestyle and strong social connections. Participants exercise alongside others with similar health experiences, creating supportive relationships that reduce isolation, build confidence, and encourage long-term participation in physical activity. Through partnerships with Summerland and Penticton Parks and Recreation, Recope delivers its programs in municipal recreation facilities, making rehabilitation accessible, while introducing participants to community recreation spaces where they can continue to be active after completing the program. Funded in part by Interior Health, Recope provides pre- and post-surgical rehabilitation, long-term therapeutic exercise, and a pathway from clinical rehabilitation to lifelong participation in community recreation, supporting both physical health and social well-being.

Recope demonstrates how partnerships between health care providers, non-profit organizations and municipal recreation services can bridge the gap between clinical rehabilitation and community participation. (Recope, n.d.; J. Lang, personal communication, June 29, 2026; Angela, personal communication, 2026, June 29).

West Vancouver Parks and Recreation - *Active Rehabilitation Programs Supporting Health, Independence, and Community Connection*

The West Vancouver Parks and Recreation specializes in wellness services, including active rehabilitation programs designed to support individuals living with chronic health conditions and those seeking

preventative care through prehabilitation and post-surgical rehabilitation. These community-based programs provide medically informed, individualized exercise opportunities that address participants' health needs, functional abilities, and personal goals while helping improve mobility, strength, confidence, and overall well-being.

The organization offers a range of specialized programs supporting individuals managing chronic conditions, recovering from medical procedures, or maintaining independence as they age. Programs include Parkinson's Movement Therapy, stroke rehabilitation, and joint health programs that assist individuals preparing for or recovering from joint replacement, managing osteoarthritis, or working to improve mobility and potentially avoid surgery. Additional programs, such as Women on Weights and Better Bones, focus on maintaining muscle strength and bone health, while Well Balanced helps older adults improve balance, reduce fall risk, and build confidence in daily activities. Information about these programs is included on patients' discharge forms, enabling healthcare providers to connect individuals with appropriate community-based recreation services as part of their transition from hospital to home.

Led by instructors with specialized training, these programs extend beyond traditional exercise by creating supportive environments where participants connect with others experiencing similar health challenges. Through shared experiences, peer support, and social interaction, participants develop friendships, motivation, and a sense of belonging. By improving physical capacity and confidence, active rehabilitation programs provide an important bridge between health care and community recreation, helping participants transition into mainstream parks and recreation opportunities and continue lifelong engagement in an active, connected community. (District of West Vancouver, n.d.; I. Horne, personal communication, June 30, 2026).

Richmond Parks and Recreation - *Bridging Recreation, Gerontology, and Health Care*

Richmond Parks and Recreation has developed an interdisciplinary model that integrates recreation, gerontology, and health care within the Minoru Centre for Active Living, a multi-use community recreation facility that includes aquatic programs, a fitness centre, and a seniors' centre. The Centre provides a collaborative environment where recreation, planning, and health service work together to support healthy aging, independence, and quality of life for older adults.

The model is supported by three complementary leadership roles. The Coordinator of Leisure Services oversees seniors' recreation programs and facility operations, ensuring a wide range of accessible recreation opportunities. The Seniors Program Lead provides expertise in gerontology, strategic leadership, and guidance on aging for staff, community partners, and Mayor and Council. The Seniors Wellness Coordinator, with a health care background, connects older adults with recreation programs, community organizations, and health services.

The Seniors Wellness Coordinator serves as the link between the health care system and community recreation by collaborating with Vancouver Coastal Health (VCH), the Richmond Division of Family Practice, and Primary Care Networks. Health care providers refer older adults who would benefit from increased physical activity, social connection, or community engagement, and the Seniors Wellness Coordinator helps them access affordable and accessible recreation programs, wellness education, health clinics, support groups, and community resources. Through partnerships with Community Link Workers (https://richmonddivision.ca/wp-content/uploads/2025-03-COMMUNITY-LINK-SERVICE-BROCHURE-FOR-PATIENTS_DIGITAL- VF-1.pdf) and Community Navigators who are employed by Vancouver Coastal

Health, the model creates a seamless pathway from clinical care to community-based recreation, demonstrating how municipal recreation can complement health care by promoting prevention, reducing social isolation, and supporting older adults to age well in their communities (Fitzpatrick, personal communication, June 15, 2026).

Reframing recreation as an extension of healthcare creates opportunities to support better health outcomes and reduce pressure on existing services.

Potential Opportunities

Strengthening collaboration between healthcare and recreation systems can create clearer pathways that support older adults in maintaining independence, improving quality of life, and achieving long-term health and wellness. There are opportunities for educational institutions, community recreation and health care to connect and collaborate.

Education of Future Practitioners

Health promotion and the social determinants of health are well-established components of healthcare education. Building on this foundation, greater emphasis on the role of recreation in prevention, prehabilitation, rehabilitation, and healthy aging could strengthen prevention-focused care. Healthcare curricula can emphasize community recreation as an essential component of lifelong health promotion, highlighting its role in supporting ongoing physical activity, well-being, and healthy aging beyond clinical care.

At Langara, this could be accomplished by the Nursing and Recreation Studies departments exploring collaborative learning opportunities between the two programs. For example, in RECR 2395 Recreation & Aging, RECR 4400 Applied Major Project, NURS 1109 – Health I: Health & Wellness, students are required to complete an evidenced-based scholarly paper. These assignments could be completed collaboratively, allowing students to examine health and recreation issues from an interdisciplinary perspective while fostering a greater understanding of the complementary roles of both professions. By understanding the health benefits of recreation and becoming familiar with community-based resources, future healthcare professionals will be better prepared to incorporate discussions about physical activity, meaningful engagement, and community participation into routine patient interactions. These conversations, delivered by trusted healthcare providers, can reinforce recreation as an important contributor to health, independence, and quality of life.

Informing and Motivating Patients

Providing patients with practical information about local recreation opportunities, referral pathways, and community resources represents an important opportunity to strengthen the transition from healthcare to community-based support. Access to this information can increase awareness of available programs, reduce barriers to participation, and encourage older adults to remain physically active and socially engaged beyond formal healthcare. Healthcare professionals are uniquely positioned to influence patient behaviours because they are widely regarded as trusted and credible sources of health information. As a result, recommendations provided by physicians, physiotherapists, occupational therapists, nurses, and other members of the healthcare team may have a greater impact than information obtained independently or through community recreation advertising. When community recreation is presented as an essential component of recovery, healthy aging, and long-term well-being, patients may be more likely to recognize its value and participate. Incorporating recreation recommendations into individualized care plans or formal referral processes reinforces the connection between clinical rehabilitation and community-based recreation, supporting sustained participation, independence, and improved quality of life.

Community Connections and Resources

Community parks and recreation departments could improve access to recreation opportunities by providing 211 with information about specialized fitness, recreation and social connection programs available for older adults. This initiative could be coordinated through the British Columbia Recreation and Parks Association to support consistent communication and awareness across communities.

Additionally, parks and recreation departments can continue to develop innovative partnerships with other sectors and community organizations to expand access to active living initiatives and support health system sustainability. This may include building relationships with Community Link Workers and Community Navigators, as well as supporting non-profit organizations through access to facility space, program promotion, and marketing opportunities.

Healthcare professionals are uniquely positioned to influence patient behaviours because they are widely regarded as trusted and credible sources of health information.

Conclusion

This research demonstrates the potential of recreation to contribute to healthier aging by supporting physical activity, social connection, recovery, and independence. Although health care systems play a critical role in treatment and rehabilitation, community-based recreation provides ongoing opportunities that extend beyond clinical care and support long-term well-being.

To realize this potential, stronger collaboration between health care providers, recreation professionals, and community organizations is needed. Increasing awareness of available recreation opportunities, integrating interdisciplinary learning, and creating clearer referral pathways can help older adults transition from health care services into meaningful community participation. Positioning recreation as a partner in population health can enhance prevention efforts, reduce barriers to engagement, and support older adults in maintaining active and fulfilling lives.

(Image source) Annual Report 2024 - Arts for the Aging, Inc.

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