Mapping the Brain Health and Dementia Research Landscape in Canada: Final Report

Population Health and Aging Rural Research Centre

2025

This report was conducted at the Population Health Aging and Rural Research (PHARR) Centre at Thompson Rivers University (TRU) located in Kamloops, British Columbia, Canada. The PHARR Centre is an interdisciplinary research centre focused on improving the health equity of rural older adults, including people living with dementia and care partners. For more information about this report, please contact Dr. Juanita-Dawne Bacsu (jbacsu@tru.ca):

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Recommended citation:

Bacsu, J.R., O'Connell, M., Fraser, S., Blackstock, S., M., Viger, M., Berlinguette, C., Ménard, A., Adeyemi-King, A., Mero, K., Mann, J., Norman, M., and Hulko, W. (2025). Mapping the brain health and dementia research landscape in Canada: Final report. Population Health and Aging Rural Research (PHARR) Centre. Thompson Rivers University. Kamloops, BC.

Land Acknowledgement

We respectfully acknowledge that this report was developed at Thompson Rivers University located on the traditional lands of the Tk'emlúps te Secwépemc, within Secwépemc'ulucw, the traditional and unceded territory of the Secwépemc. From coast to coast to coast, we acknowledge the ancestral and unceded territory of all the First Nations, Inuit, and Métis People that call this land home. We work towards reconciliation with all Indigenous Peoples and renewing respectful relationships with Indigenous communities through our collaborative partnerships, service, and research activities.

Acknowledgements

This report is founded on the expertise and insight of diverse voices across Canada. We recognize the contributions of our national team of researchers on this project, Dr. Juanita-Dawne Bacsu, Dr. Megan E. O'Connell, Dr. Sheila Blackstock, Dr. Sarah Fraser, Dr. Wendy Hulko and Dr. Marc Viger. We also extend our gratitude to student trainees, Cheltey Berlinguette, Kiana Mero, Adesewa Adeyemi-King, Stephanie Victor, Ava Ward, Dylan Fiske, and Alixe Ménard. Additionally, we would like to acknowledge the team at the Canadian Institutes of Health Research - Institute of Aging's Dr. Jane Rylett, Joanne Goldberg, Etienne Murgues, and Dr. Ariane Geerts as well as the members from the Dementia Research and Innovation Funders Alliance. We gratefully acknowledge the members of our advisory committee that includes people living with dementia (Jim Mann and Myrna Norman) for their expertise and insight into the development of this report.

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Executive Summary

This report presents findings from a national project conducted to map brain health and dementia research in Canada from 2020-2025. The project was funded by the Canadian Institutes of Health Research - Institute on Aging's Planning and Dissemination Grant. This work builds on Canada's national dementia strategy by drawing on its three priority areas including, dementia prevention, therapies and finding a cure, and quality of life, to inform the project's focus in examining the brain health and dementia research landscape in Canada. The overall purpose of this project was to identify the research gaps, needs, and areas for future innovation to advance brain health and dementia research in Canada.

This report shares information that was gathered through four data collection methods including: an environmental scan, a scoping review protocol, a scoping review of reviews, and focus groups. An environmental scan of brain health and dementia research centres in Canada was conducted to understand their research focus areas and geographic distribution across the country. A scoping review protocol was developed to provide a comprehensive outline of the methodology that would be used to guide the scoping review of reviews. A scoping review of Canadian-led reviews was conducted to identify the knowledge gaps, needs, and areas for innovation to advance brain health and dementia research. Additionally, focus groups were conducted with members of the Dementia Research and Innovation Funders Alliance to gather expert insights on the national dementia funding landscape, knowledge gaps, and research priorities.

By synthesizing evidence from multiple sources, this report sheds light on the critical knowledge gaps in research on brain health and dementia. Limited participant diversity, small-scale projects, and insufficient implementation of research into practice have contributed to existing knowledge gaps. This report underscores the need to prioritize implementation, foster collaboration between research and innovation, and amplify diverse voices of lived experience to advance brain health and dementia research in Canada.

Background

Dementia is a growing issue across Canada. Age is the greatest risk factor for dementia, and the number of older adults is increasing. In Canada, approximately 7.6 million adults aged 65 or older comprised 18.9% of the total population as of July 1, 2023 (Statistics Canada, 2024). It is estimated that 771,939 Canadians live with dementia (Alzheimer Society of Canada, 2025) and about 487,000 of them have a diagnosis (Public Health Agency of Canada, 2023). By 2030, it is estimated that nearly 1 million Canadians will be living with dementia (Alzheimer Society of Canada, 2025; 2022).

The economic cost of dementia in Canada is substantial. In 2020, Canada's total direct and indirect costs of dementia were an estimated $40.1 billion per year, with an average cost of $67,200 per person living with dementia (Canadian Centre for Economic Analysis, 2023). This estimate accounts for the costs associated with the healthcare system as well as the indirect costs on care partners.

Numerous researchers and organizations are working to advance research on brain health and dementia across Canada. Researchers are focusing on a wide range of areas such as dementia prevention to treatment options. While extensive research on brain health and dementia has been conducted, there is a lack of a high-level overview to understand the current landscape of the research activities in Canada.

In 2024, the Canadian Institutes of Health Research (CIHR) announced the Institute Community Support (ICS) Planning and Dissemination Grant, which included funding from the Brain Health and Cognitive Impairment in Aging (BHCIA) Research Initiative. This grant underscored the need to synthesize the scope of research in brain health and dementia.

Our report shares findings from the BHCIA ICS-funded project, that was conducted to examine the brain health and dementia research landscape in Canada from 2020-2025. Building on Canada's national dementia strategy (PHAC, 2019), this report organized its findings according to the strategy's three priority areas: dementia prevention, advancing therapies and finding a cure, and enhancing quality of life. Through this project, we have mapped and synthesized brain health and dementia research activities in Canada from 2020-2025. The findings from this project provide valuable insight to inform funders, policymakers, and researchers working to support brain health and dementia research in Canada.

Research Objectives

This project consisted of two research objectives:

I. Identify and document brain health and dementia research activities across Canada from 2020-2025; and

II. Determine research gaps, needs, and areas for future innovation to advance brain health and dementia research

This research was conducted at the Population Health and Aging Rural Research (PHARR) Centre at Thompson Rivers University, in collaboration with research members across Canada including people living with dementia.

Methods

This project consisted of four methods including: an environmental scan, a scoping review protocol, a scoping review of reviews, and focus groups. First, an environmental scan was conducted to identify research centres, highlight their research areas, and map the geographical distribution of brain health and dementia research centres in Canada. Second, a scoping review protocol was completed to provide a comprehensive methodology to guide the full scoping review of reviews. Third, a full scoping review was completed on Canadian-led reviews to identify knowledge gaps, needs, and opportunities to advance brain health and dementia research. Fourth, focus groups were conducted with members of the Dementia Research and Innovation Funders Alliance to gather expert insight to inform future research priorities.

Overview & Findings

The following section provides an overview of the environmental scan, scoping review protocol, scoping review of reviews, and the focus groups, by outlining their research objectives, methods, results, and conclusions.

I. Environmental Scan:
University Research Centres in Canada

95	35
Research Centres	**Ontario Centres**
Across Canada	Highest Concentration

Research Objective: The environmental scan was conducted to identify the university research centres related to brain health and dementia, their topic areas, and map their geographic distribution across Canada.

Methods

Data were collected in a systematic manner by searching university websites in the geographic order of the provinces, followed by territories to identify research centres related to brain health and dementia. To help ensure that no relevant research centres were missed, we reviewed the list of Directors of the Canadian Centres on Aging from the Canadian Institutes of Health Research– Institute of Aging. While the centre names did not have to include the terms "brain health" or "dementia," the centre's website needed to reference research directly related to this area. We contacted centres where the website content required further data.

Results

A total of 95 research centres related to brain health and dementia were identified. The environmental scan's findings revealed significant geographic concentration, with the greatest number of research centres located in Ontario (n=37), Quebec (n=26), British Columbia (n=12), and Alberta (n=7). Research areas covered a broad range of topics from dementia care to neuroimaging, biomarker development, and community-based interventions. The scan revealed that while some provinces had strong activity, others had limited engagement.

Conclusions

There is a critical need for greater coordination and collaboration across centers to maximize research impact and avoid duplication in brain health and dementia research. Specifically, a centralized hub with a registry is needed to document, monitor, and track the work of research centres. Moreover, many centres addressed similar topics areas, which highlights the opportunity for networking and partnerships to support collaboration, synergies, and capacity building across research centres in Canada.

II. Scoping Review Protocol

Research Objective

The scoping review protocol aimed to provide a comprehensive methodology that would be used to guide the scoping review of Canadian-led reviews on brain health and dementia research.

Methods

This scoping review of reviews protocol will be guided by Arksey and O'Malley's (2005) framework, along with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR) guidelines (Tricco et al., 2018). This review was planned to search: CINAHL, PubMed, PsycINFO, Scopus, and Web of Science. The search will focus on peer-reviewed reviews published between January 1, 2020, and January 1, 2025. Thematic analysis was selected to analyze the data.

Table 1: Search Terms

Concept	Keywords	Databases
Literature Review	Literature review* OR Systematic Review* OR Scoping Review* OR Narrative Review* OR Rapid Review* OR Umbrella Review OR Meta-Analysis*	CINAHL, PubMed, PsycINFO, Scopus, and Web of Science
Cognitive Impairment	Dementia* OR Alzheimer's Disease* OR Cognitive Impairment* OR Brain Health*	
Canada	Author Field (Canada or Canadian)	

Results

This protocol was registered on June 6, 2025 with the Open Science Framework (OSF). The scoping review's data collection and analysis was planned to be conducted from August to September 2025. Ethics approval was not required since the review would be based on secondary data and would not involve human subjects. Findings from the review were planned to be disseminated through a peer-reviewed journal article, conference presentations, webinar, and infographics.

Conclusions

The results from the scoping review were designed to provide a comprehensive synthesis of the current knowledge needed to advance brain health and dementia research in Canada.

III. Scoping Review of Reviews

Research Objective:

The scoping review aimed to identify Canadian-led reviews to summarize the current knowledgebase, gaps, and areas for innovation to advance brain health and dementia research.

Methods

Drawing on Arksey and O'Malley's (2005) scoping review framework, we searched for reviews published between 2020-2025 in CINAHL, PubMed, PsycINFO, Scopus, and Web of Science. Our search included key terms related to dementia and brain health. Our inclusion criteria required that the first author of the review had to have Canadian affiliation to ensure national relevance. The reviews were screened by title-abstract relevancy, followed by full text screening, and subsequent data were analyzed thematically.

Table 2: Critical Gaps and Needs

Dementia Prevention	Advancing Therapies	Quality of Life
Extensive research documented modifiable risks. Significant gaps remain in implementing, scaling up, and evaluating large-scale, long-term risk-reduction interventions. • Few studies integrate multiple lifestyle risks in the same intervention • Limited validation of screening tools across long-term outcomes • Knowledge mobilization needed to promote education of modifiable risks at population level	Despite broad research on therapeutics from neuroinflammation to AI-enhanced imaging and neuromodulation, most on short-term symptom relief rather than long-term disease modification. • Need for national biomarker standards • Consistent validation across clinical subtypes remains lacking. • Shared research infrastructure with multi-site platforms required • Small pilot projects need scaling into useful evidence	Equity-denied groups are underrepresented in brain health and dementia research, with only a handful of reviews addressing racial, cultural, and geographical disparities. • Minimal research on care partner training and supports • Need to address research barriers, stigma, and outreach to enhance diversity • Paucity of research on climate change and disaster preparedness • Limited focus on advance care planning and end-of-life care

Results

Our search identified a total of 7,860 reviews, of which 275 were included in the analysis. The results were organized to align with Canada's national dementia strategy's (Public Health Agency of Canada, 2019) theme areas including: dementia prevention, advancing treatments,

and quality of life. In the area of dementia prevention, extensive research was found to document modifiable risks. However, significant gaps remained in implementing, scaling up, and evaluating large-scale, long-term risk-reduction interventions. In advancing treatments, there was a broad body of research identified on therapeutics ranging from neuroinflammation to AI-enhanced imaging and neuromodulation. However, most research focused on short-term symptom relief rather than long-term disease modification. In terms of quality of life, knowledge gaps were identified in the areas of end-of-life care and advanced care planning, climate change and disaster preparedness, interventions to reduce stigma of dementia, and care partner training and support programs. Additionally, equity-denied groups were found to be underrepresented in the research, with only a few reviews addressing racial, cultural, and geographical disparities.

Conclusions

Despite extensive Canadian-led reviews of dementia research, our study revealed that there were significant gaps in the knowledge base. Differences in approaches, limited participant diversity, and many small-scale projects with inconsistent measures contributed to existing gaps in the knowledge base. Moreover, there has been a lack of coordinated efforts across different research initiatives. Only through collaborative partnerships and targeted research efforts can we ensure that the vision of the national dementia strategy becomes fully recognized to advance the field of brain health and dementia in Canada.

IV. Focus Groups

Research Objective

Using focus groups with members of the Dementia Research and Innovation Funders Alliance (the Alliance), the purpose of this study was to gather expert insight on the dementia funding landscape, knowledge gaps, and research priorities in Canada.

Methods

Using a selective sampling method, three focus groups were conducted virtually via Zoom with members of the Alliance. A total of 20 members participated in the focus groups. Each one-hour focus group included four questions to gather expert insight on the research gaps, needs, and opportunities for future innovation to advance brain health and dementia research in Canada. Thematic analysis was used to analyze the data.

Table 3: Focus Group Findings

Results

A total of 20 members (female = 17; male = 3) participated in the focus groups. Four priority areas were identified: (i) life-course approach to brain health promotion; ii) implementation gap: translating knowledge to action; (iii) research and innovation: global collaboration (iv) diverse populations and partnerships. Predominantly noted was the crucial need to translate research and evidence-based knowledge on modifiable risk factors into practice.

Conclusion

While extensive research has been conducted on brain health and dementia, there is a pressing need to translate current research and understanding into practice at the population level.

Overall Findings: Critical Needs and Gaps

I. Dementia Prevention

In the area of dementia prevention, there is a critical need for accessible research to support education, awareness, and uptake strategies to mobilize knowledge on modifiable risk factors to promote brain health at the population level. There is a gap in research on implementing, scaling up, and evaluating dementia prevention programs, especially in terms of large-scale, longitudinal studies.

II. Advancing Therapies

In advancing therapies, further research is needed to refine the use of biomarkers and pharmacologic and non-pharmacologic treatment options to provide actionable information to support people living with dementia. There is a vital need to consider people with dementia's quality of life in the advancement of biomarkers.

III. Quality of Life

In terms of quality of life, further research is essential to understanding the needs of diverse people living with dementia, especially among equity denied groups such as Indigenous people, women, persons with early onset dementia, refugees, immigrants, ethno-racial groups, gender diverse people, the 2SLGBTQIA+ community, and people with dementia in rural and remote communities. There was a notable lack of research on end-of-life and advanced care planning, stigma-reduction interventions, and care partner training and supports.

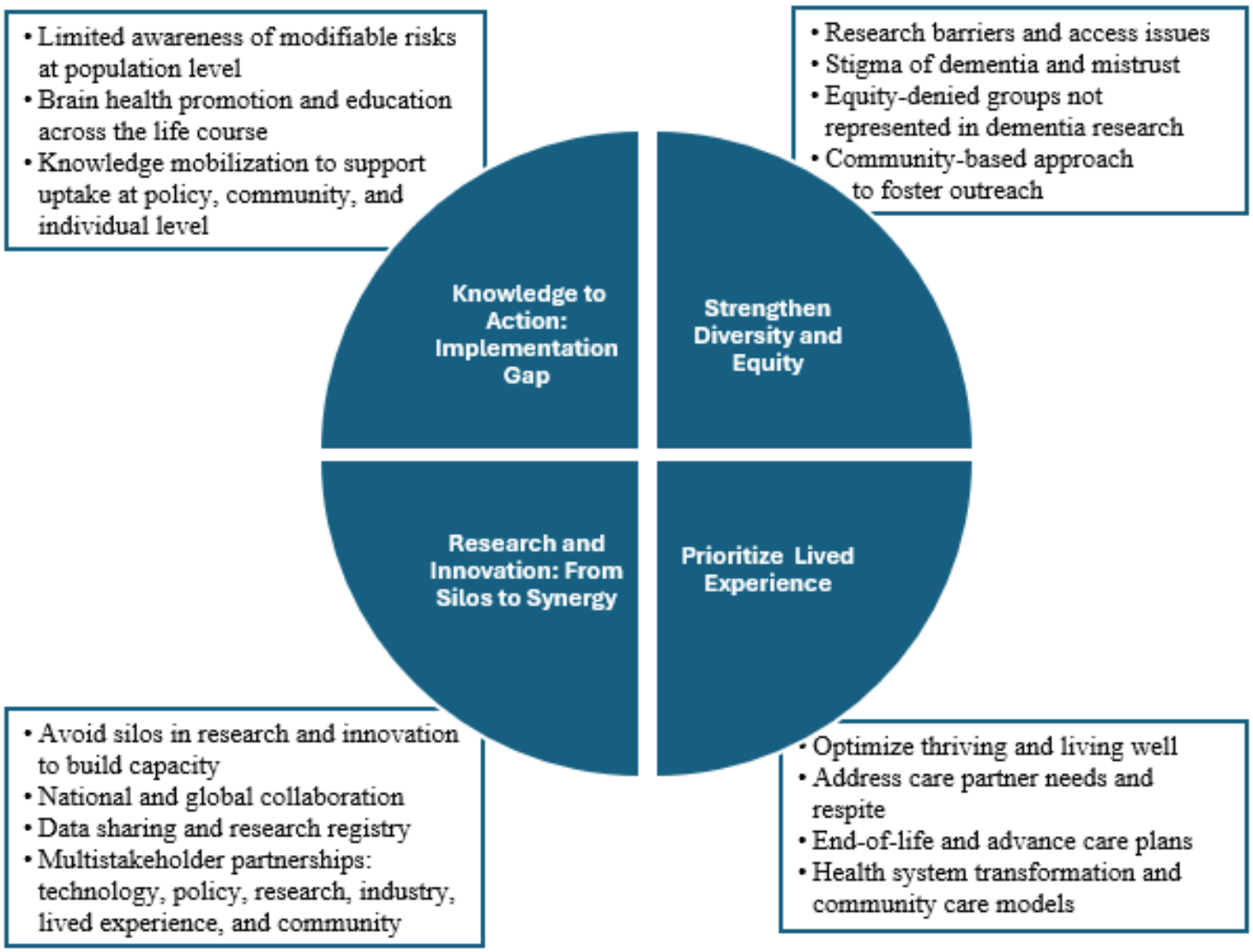
Table 4: Critical Need, Gaps, and Actions

Dementia Prevention	Advancing Therapies	Quality of Life
Critical Need: Implementation with accessible research to support education and uptake strategies of modifiable risks.	**Critical Need:** Refine use of biomarkers and treatment options to provide actionable information for health providers and people with dementia.	**Critical Need:** Understanding needs of diverse people living with dementia, especially equity-denied groups.
Gap: Implementing, scaling up, and evaluating prevention programs in large-scale, longitudinal studies.	**Gap:** Long-term disease modification rather than only short-term relief. Need to include patient and practitioner perspectives in biomarker advancement.	**Gap:** Research on Indigenous peoples, immigrants, refugees, LGBTQ+ community, rural populations, end-of-life care, young-onset dementia, and climate change.
Action: Knowledge mobilization to promote brain health at the population level across the lifespan.	**Action:** National biomarker standards and shared multi-site research infrastructure with emphasis on quality of life.	**Action:** Inclusive, culturally safe, and community-based research approach ("boots on the ground").

Thematic Map

Braun and Clarke's (2006) five-step thematic analysis framework (data immersion, code development, searching for themes, reviewing themes, and naming the themes) was used to identify the four theme recommendations. We also used Braun and Clark's theme generation questions to support the theme development process. For example, we discussed the coherence of our themes, whether the data supported our themes, and whether we were missing any themes (Braun and Clarke, 2006). Additionally, we created a thematic map to document our process of grouping our codes into the development of our four theme recommendations (Figure I).

Figure I: Thematic Analysis Map



Recommendations to Advance Research

1. **Bridging Knowledge to Action: Implementation Gap**

   It is essential to bridge knowledge to action and translate research findings and evidence-based knowledge into practice at the policy, community, and individual levels. Mobilizing knowledge on brain health promotion and modifiable risk factors across the life course is critical to improving brain health at the population level.

2. **Strengthening Diversity and Equity in Research**

   There is a growing need to strengthen diversity and research participation of equity-denied groups through community-based approaches ("boots on the ground") and address issues of dementia-related stigma, mistrust, and barriers.

3. **Research and Innovation**: **From Silos to Synergies**

   Collaboration is required between research and technological innovation to build capacity to accelerate discovery and impact to advance brain health and dementia research. National and global collaboration is required to support data sharing and the development of a research registry to reduce duplication and build capacity. Multistakeholder partnerships are needed with industry, research, policy, technology sector, lived experience, and community.

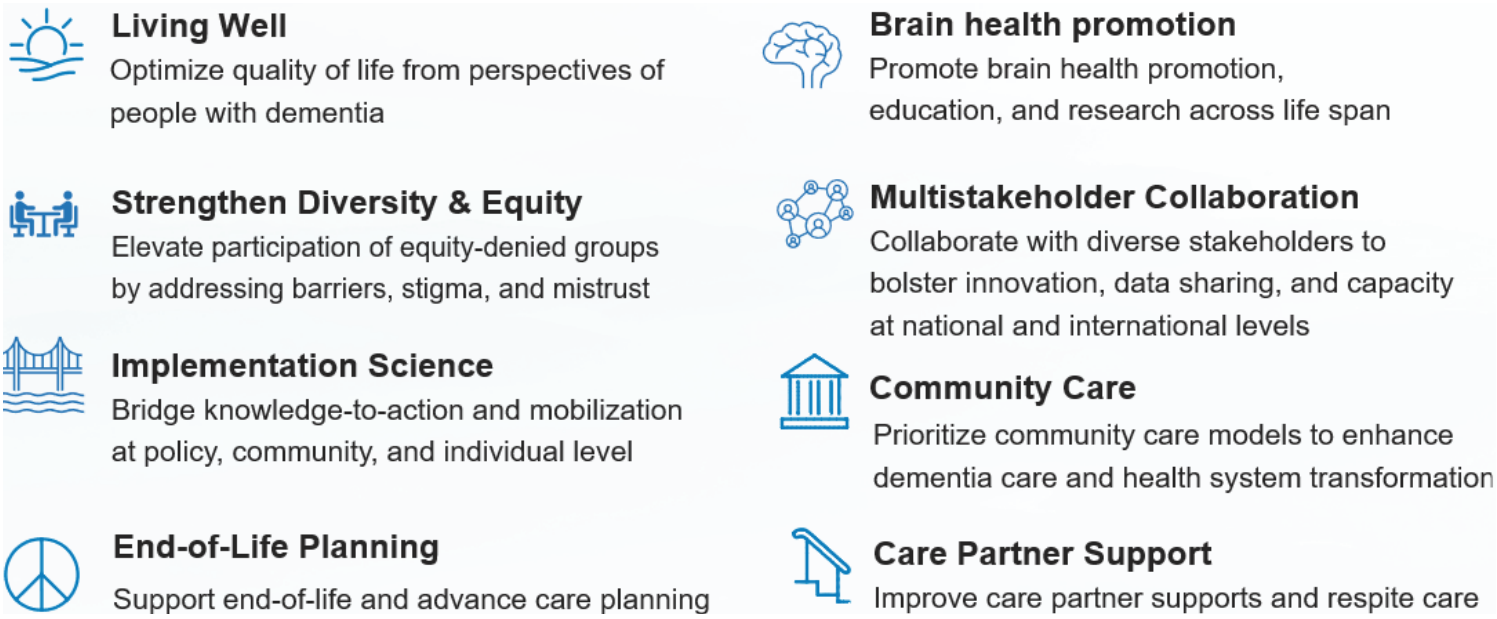
4. **Prioritizing Lived Experience in Research**:

   Elevating the lived experiences and research priorities of people living with dementia are vital to optimizing quality of life. This includes supporting living well with dementia, enhancing care partner supports, providing community-based care models, and improving end-of-life and advance care planning.

Prioritizing What Matters Most

Within our four recommendations, specific actions emerged as high-priority areas. These actions reflect both the knowledge gaps identified and the potential for impact to advance brain health and dementia in Canada.

Figure I: Prioritizing What Matters



Journey Forward: Research Funding Priorities

Based on our comprehensive analysis, we identified five areas as research funding priorities that require further investigation to accelerate progress and maximize impact in brain health and dementia research.

Table 5: Research Funding Priorities

Knowledge to Action: Global Best Practices Review

How do other countries' dementia strategies foster implementation, knowledge mobilization, and evaluation of research progress in advancing brain health and dementia?

Diversity and Equity in Research Participation

What are the barriers, outreach, and solutions-focused strategies to elevate research participation among equity-denied groups?

Research & Innovation Integration

How can research and technological innovation be integrated to move from silos to synergies, fostering national and international collaboration, capacity building, and accelerating discovery and impact?

Identify Lived Experience Priorities

What are the priority areas, needs, gaps, and innovations identified by people living with dementia and their care partners?

Centralized Support Hub

Establish a centralized hub to support collaboration efforts in dementia research. This hub will foster connections, build capacity, provide a research registry, and implement monitoring standards to track progress systematically.

Key Conclusions and Future Vision

Although Canada has significant strengths in brain health and dementia research, there are vital opportunities for advancement. One of the most significant findings from our research was the implementation gap between research evidence and uptake at the policy, community, and individual levels. This implementation gap represents the greatest barrier to improving brain health and dementia outcomes at the population level. Moreover, strengthening equity and diversity through community-based research, and moving from silos to synergies between research and innovation with national and international collaboration will amplify Canada's research impact.

Our findings offer valuable guidance and actions to advance brain health dementia research in Canada. However, success is dependent on the sustained commitment to our four recommendations: i) bridging knowledge to action, ii) strengthening diversity and equity, iii) integrating research and innovation, and iv) prioritizing lived experience. By prioritizing implementation, elevating diverse voices of lived experience, and fostering multistakeholder collaboration we can advance brain health and dementia research in Canada.

Figure II: Journey Forward

Knowledge Mobilization Journey

Reports

- Bacsu, J.R., O'Connell, M., Fraser, S., Blackstock, S., D'Souza, M., Viger, M., Berlinguette, C., Adeyemi-King, A., Mero, K., Mann, J., Norman, M., and Hulko, W. (2025). Environmental Scan of Dementia Research Centre Activities in Canada. Population Health and Aging Rural Research (PHARR) Centre. Thompson Rivers University. Kamloops, BC.
- Bacsu, J., O'Connell, M., Fraser, S., Blackstock, S., D'Souza, M., Viger, M., Mero, K., Mann, J., Norman, M., and Hulko, W. (2025). Brain health and dementia research landscape in Canada: Final report. Population Health and Aging Rural Research (PHARR) Centre. Thompson Rivers University. Kamloops, BC.

Conference Presentations

- Bacsu, J. O'Connell, M. E., Menard, A., Mero, K., Viger, M., Fraser, S., Blackstock, S., & Hulko, W. Examining the Brain Health and Dementia Research Landscape in Canada. Rural Dementia Action Research (RaDAR) Summit, Saskatoon/Remote, November 20, 2025
- Bacsu, J., Mero, K., Menard, A., O'Connell, M. E., Viger, M., Fraser, S., Blackstock, S., & Hulko, W. Dementia research in Canada. Early insights from a scoping review of reviews. Gerontological Society of America Conference, Boston, November 14, 2025

Newsletter

- Bacsu, J., Vogt, K., Klutch-Morrall, M. (2025) Mapping Brain Health and Dementia Research Across Canada. Population Health and Aging Rural Research Centre. Available from, https://pharr.trubox.ca/wp-content/uploads/sites/2712/2025/09/PHARR-Newsletter-Final-Summer-2025.pdf

Infographics

- Mapping Brain Health and Dementia Research in Canada 2020-2025
- Mapping Brain Health and Dementia Research in Canada

Journal Publications

1. Bacsu, J., Mero, K., O'Connell, M. E., Bethell, J., Funk, M., Ménard, A., Norman, M., Blackstock, S., Mann, J., Hulko, W., D'Souza, M. S., & Fraser, S. (Submitted for review, June 12, 2025). Creating a Foundation to Advance Brain Health and Dementia Research Priorities in Canada: A Scoping Review of Reviews Protocol. *JMIR Research Protocols.*
2. Bacsu, J., O'Connell, M. E., Fraser, S., Ménard, A., Mero, K., Norman, M., Blackstock, S., Mann, J., Hulko, W., D'Souza, M. S., & Hulko, W. (Ready for submission, 2025). Building a Foundation to Advance Brain Health and Dementia Research Priorities in Canada: A Scoping Review of Reviews. *Canadian Journal on Aging.*
3. Bacsu, J., Hulko, W., O'Connell, M. E., Ménard, A., Norman, M., Blackstock, S., Mann, J., Hulko, W., D'Souza, M. S., & Fraser, S. (Manuscript in preparation, 2025). Advancing Brain Health and Dementia Research in Canada: Focus Groups with Funder Leaders. *Canadian Geriatrics Journal.*

References

Alzheimer Society of Canada. (2025). Dementia numbers in Canada. [accessed 3 July 2025]. Available from, https://alzheimer.ca/en/about-dementia/what-dementia/dementia-numbers-canada

Alzheimer Society of Canada. (2022). Navigating the path forward. [accessed 8 August 2025]. Available from, https://alzheimer.ca/sites/default/files/documents/Landmark-Study-Report-1-Path_Alzheimer-Society-Canada_0.pdf

Arksey, H. & O'Malley, L. (2005). Scoping studies: towards a methodological framework. *International Journal of Social Research Methodology* 8, 19–32.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. Qualitative Research in Psychology, 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Canadian Centre for Economic Analysis. (2023). Dementia in Canada: Economic Burden 2020 to 205. [accessed 29 October 2025]. Available from, https://www.cancea.ca/wp-content/uploads/2023/07/CANCEA-Economic-Impact-of-Dementia-in-Canada-2023-01-08.pdf

Public Health Agency of Canada. (2019). A dementia strategy for Canada: together we aspire. Ottawa. [accessed 08 February 2025]. Available from, www.canada.ca/en/publichealth/services/publications/diseases-conditions/dementia-strategy.html

Public Health Agency of Canada. (2025). Dementia: Overview. [accessed 29 September 2025]. Available from, https://www.canada.ca/en/public-health/services/diseases/dementia.html

Statistics Canada. (2024). Millennials now outnumber baby boomers in Canada. [accessed 20 June 2025]. Available from, https://www150.statcan.gc.ca/n1/daily-quotidien/240221/dq240221a-eng.htm

Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K. K., Colquhoun, H., Levac, D., Moher, D., Peters, M. D. J., Horsley, T., Weeks, L., Hempel, S., Akl, E. A., Chang, C., McGowan, J., Stewart, L., Hartling, L., Aldcroft, A., Wilson, M. G., Garritty, C., Lewin, S., ... Straus, S. E. (2018). PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. Annals of internal medicine, 169(7), 467–473. https://doi.org/10.7326/M18-0850

Mapping Brain Health & Dementia Research in Canada

Comprehensive Methodology

Environmental Scan

Mapped research centres, focus areas, and geographic distribution across Canada to establish a national baseline of activity and specialization.

Scoping Review Protocol

Developed a comprehensive protocol following Arksey & O'Malley framework and PRISMA-ScR guidelines to ensure transparent, reproducible scoping methods.

Scoping Review of Reviews

Analyzed Canadian-led reviews (2020–2025) across five databases to identify evidence clusters and persistent knowledge gaps requiring attention.

Focus Groups

Gathered expert insights from Dementia Research and Innovation Funders Alliance members to contextualize priorities and implementation barriers.

Four Key Recommendations

Bridge Knowledge to Action

Address the implementation gap by supporting uptake at policy, community, and individual levels—develop toolkits, implementation supports, and evaluation metrics.

Strengthen Diversity & Equity

Promote inclusive research practices focused on equity-denied groups and expand community-based outreach and partnerships to improve representation.

Research & Innovatation

Move from silos to synergies with research and technological innovation, promoting national and global collaboration, coordination, and multi-stakeholder partnerships.

Prioritize Lived Experience

Center people with dementia and care partners in setting research priorities, co-designing studies, and evaluating outcomes to ensure relevance.

PHARR

CIHR IRSC Canadian Institutes of Health Research / Instituts de recherche en santé du Canada

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Mapping Brain Health & Dementia Research in Canada

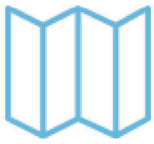
Comprehensive Methodology

This project mapped research centers, developed a structured review protocol, analyzed Canadian-led reviews, and gathered expert insights to identify research gaps, needs, and areas for innovation to advance brain health and dementia research in Canada.

Our methodology included four key components:

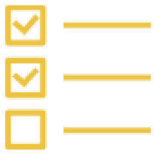
Environmental Scan

Mapped 95 research centres, focus areas, and geographic distribution across Canada to guide dementia studies.



Scoping Review Protocol

Developed a comprehensive review protocol based on Arksey & O'Malley and PRISMA-ScR frameworks.



Scoping Review of Reviews

Analyzed Canadian-led reviews from 2020 to 2025 to identify crucial knowledge gaps in dementia research.

Expert Focus Groups

Gathered expert insights via three focus groups with 20 Dementia Research and Innovation Funders Alliance members.

Four Key Recommendations

Mapping Brain Health & Dementia Research in Canada

Using thematic analysis, four strategic recommendations were identified. These recommendations were designed to bridge identified gaps and advance brain health and dementia research in Canada.

Bridge Knowledge to Action

Address the implementation gap through accessible research, education, and uptake strategies on modifiable risks to promote brain health at the population level.

Enhance Diversity & Equity

Strengthen inclusive research with equity-denied groups, investing in culturally tailored, community-based outreach to address research barriers, stigma, and mistrust.

Research & Innovation

Move from silos to synergies with research and technological innovation, promoting national and global collaboration, coordination, and multi-stakeholder partnerships.

Prioritize Lived Experience

Elevate the research priorities, needs, and lived experiences of people living with dementia and care partners.

PHARR

CIHR IRSC Canadian Institutes of Health Research / Instituts de recherche en santé du Canada

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