



New Vision Framework

KEIRO's Board of Directors is currently engaged in in-depth planning to develop KEIRO's operational and programmatic strategy to achieve maximum community benefit in the coming decade. The New Vision Framework (originally issued as a six-part eNewsletter series) describes core components of the vision framework that serve as the long-range planning roadmap for KEIRO® going forward.



PART1 THE MISSION CONTINUES

The name “KEIRO” – respect for the elderly – symbolizes the organization’s founding commitment to supporting the seniors in the Japanese American community live with the dignity and compassion which they surely deserved. And as long as there are seniors in the Japanese American and Japanese community who require a culturally sensitive approach to support, KEIRO’s commitment to enhancing the quality of their lives will continue.

KEIRO’s mission remains the same:

To enhance the quality of senior life in Our Community

With seniors’ increasing desire to age in place at home, with payers’ decreasing utilization of facility-based care, and with more acculturation, it would have been easy to declare, “Mission accomplished.”

Yet, KEIRO® realized that support for seniors may be even more critical now than in 1960, when KEIRO was founded.

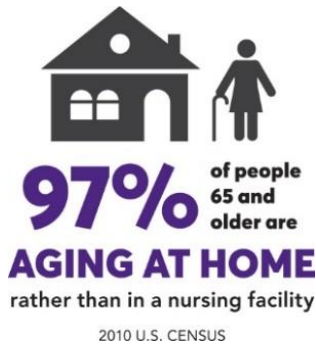
Society is getting older.

In 1960, when KEIRO was being planned, 9% of the U.S. population was 65 years and older; by 2010, it was 13%, and the 2030 projection – just 14 years from now – is 20%! Not only has the percentage of the older adult population increased, the numbers have, as well – 16,500 in 1960 to 40,268 in 2010 to a projected 72,774 by 2030.



<https://www.census.gov/content/dam/Census/library/publications/2014/demo/p23-212.pdf>

In addition, 97% of the people age 65 or older are aging at home rather than in a nursing facility. Our Japanese American and Japanese community is also getting older, we are living longer, we are choosing to live at home as long as possible, and knowing this, it is obvious that KEIRO’s mission must continue.



In this commitment to mission, the “community” is defined as Japanese American and Japanese older adults and their families, caregivers, and the community organizations that support them. Moving from facility based services where KEIRO could serve up to 600 people at any time, we know that there are approximately 70,000 Japanese American and Japanese seniors who have or will have needs in Los Angeles, Orange and Ventura counties. For each senior who needs support, there are many more family and informal caregivers.

There is much work to be done before anyone can say “Mission accomplished.”

PART 2 THE THREE PROGRAM AREAS

The second part in KEIRO’s Vision Framework Series describes the new programmatic focus. The Board has identified three core program areas:

1. Services to Older Adults

One quarter of all Japanese American adults are 65+. This is twice the number of 65+ adults in the general population. The proportion of older adults in Our Community is increasing at an accelerated pace and Japanese American and Japanese older adults in the region are living longer.



KEIRO seeks to support Japanese American and Japanese older adults to age with confidence by equipping them with knowledge, resources, and assistance, so they can effectively manage their lives and wellbeing wherever they call home. KEIRO will work cooperatively with community partners and agencies in order to:

- Improve the health and circumstances of older adults through the holistic lens of *Genki Living*[®] principles
- Support older adults who desire to live independently as long as they are able to do so safely
- Foster a sense of community among Japanese American and Japanese older adults to reduce isolation
- Educate older adults and their families to make informed decisions and thoughtful plans including regarding end of life issues

2. Support of Caregivers

Today, almost 1 in 3 Japanese Americans is a caregiver. There are close to 57,000 Japanese American and Japanese caregivers in Los Angeles, Orange, and Ventura counties. Two-thirds are women and most are family members.



Caregiver demands and burdens are increasing as people are living longer and are choosing to live at home, rather than institutional settings. Caregivers often face tremendous and unrelenting stress and burdens associated with their roles as caregivers, and for many, the demands increase over time and there is little respite.

KEIRO looks forward to continuing and expanding our work with fellow service providers, local agencies, and community centers to enhance the support systems of caregivers including addressing the physical, psychological, and financial burdens of caregiving. We want to help foster a sufficient pipeline of well-trained caregivers, both professional and informal, who are able to provide in-home, culturally sensitive, and appropriate care along a continuum of needs.

3. Programs for Residents of KEIRO’s Former Facilities

KEIRO remains committed to the residents of its former facilities. The third core program area focuses on providing support, resources, and programming to complement that provided by the current owners and operators. The goal is to ensure continued culturally sensitive programs. As a first step, KEIRO will continue

managing the volunteer program at the four facilities, working closely with the residents, facilities



management, and community organizations

Each of the three program areas will be centered in *Genki Living* principles and will be guided by well-defined goals, measurable outcomes and impact, and objectives that are based on community input.

It **“takes a community”** to care for an older adult. According to the 4th International Conference on Health Wellness and Society, March 2014, “in addition to the familial support, community partnerships are imperative for the sustaining of older adults in their respective homes...It takes the

collaboration of multiple well woven community resources to meet the needs of older adults who are aging well in place despite (chronic) conditions.”

As Henry Ford said, “Coming together is the beginning, keeping together is progress, working together is success.”

PART 3 STRIVING TO ACHIEVE MAXIMUM IMPACT BY SERVING THOSE WITH HIGHEST NEED

KEIRO’s constituency is expanding to potentially the over 70,000 Japanese American or Japanese older adults, their families and caregivers in Los Angeles, Orange, and Ventura counties.

Japanese Americans are the
SIXTH LARGEST
Asian American population in the U.S.
ONE-THIRD
of all Japanese Americans live in California
PEW RESEARCH CENTER, 2013



However, financial and staffing resources are finite. Thus, the KEIRO Board wants to achieve maximum impact by prioritizing how KEIRO can best serve those with the highest needs. Here are characteristics of some of the most vulnerable older adults in Our Community:

Low income. Statistics can be misleading. Although overall, Japanese Americans have one of the highest average incomes of Asian American groups, there are many Japanese Americans and Japanese older adults with very limited income or savings, or may only have the asset of their home. A medical or other type of emergency can tip the balance and quickly erode financial resources.

Older adults with limited financial means are at risk for not being able to provide for their basic needs (e.g., food, housing, or healthcare). They are not able to contract for support services in the home, either to help during a critical episode or on a regular basis due to overall declining health or loss of mobility. Cultural norms and a sense of pride and responsibility to care for oneself, can mask the vulnerability of very limited resources and make it challenging to connect with outside assistance.

Isolation. Isolation is one of the most under-recognized issues facing all older adults, including Japanese American and Japanese seniors. Research has linked the lack of regular social interaction to depression, despondency, serious erosion of health status, early onset of mental disorders or mental loss, and even premature death. Older adults, including Japanese American and Japanese seniors can get isolated and cut off when they:

- Have reduced social support systems as they age, with the passing of spouse, friends and relatives
- Have family at a geographic distance (e.g., out of the region or out of country) and thus, cannot play a role in caregiving or emotional support
- Have moved from their long-established homes to reside with their adult children and have not been able to create a new circle of friends and familiar community connections
- Reside in facilities but are without visitors

Multiple Health Conditions. It is common for older adults, especially those over 75 years of age, to be grappling with 4 or more conditions, often with interconnected complications requiring multiple medications. This complexity puts pressure on personal financial resources and requires high levels of physical support. It affects family caregivers, and needs only worsen over time.

There is also very little in-home monitoring to identify challenges or barriers for older adults including: home safety, adequacy of caregiver support, and lack of mobility that threatens nutrition and compliance with health care regimes.



THE RESULT? **Caregiving Burden**

The physical, psychological & financial hardships or stress caused by caregiving is a major public health concern

Memory and Cognitive Disabilities. Older adults with declining mental capacity, especially those experiencing dementia and Alzheimer's, are among the neediest populations. Memory loss and cognitive disabilities place enormous stress on family caregivers, both physically and also psychologically. Not only is their family member's condition steadily worsening, but caregivers are also battling the emotional loss of recognition of their relationship to their loved one. In fact, research demonstrates that the stress on family caregivers, resulting from the support they provide to an older adult

with memory or cognitive disabilities, leads to the decrease in their own health status and even premature death.

Monolingual Japanese. Older adults with limited English proficiency may not be comfortable speaking and communicating in English and can face intense barriers in accessing care and services.

In addition, familiarity with the culture, infrastructure and service delivery models are critical to participating and functioning within society. For example, in Japan health and support systems are the responsibility of the government and every citizen is entitled to appropriate and comprehensive care. In the U.S., the system requires elaborate application, a maze of eligibility challenges, and tiered, non-standardized services. Individuals with permanent residency status who have earned benefits like Social Security and Medicare might not be accessing these benefits due to confusion or cultural stigma. Cultural differences are as important as language barriers.

Immigration Status. Many Japanese older adults living in the U.S. for many years often wrestle with challenges of immigration status. Examples include losing essential paperwork to validate entitlement to services or a lapsed visa. This can cause individuals to live outside the system, not utilizing social services or health care, and allowing health conditions to worsen rather than seeking early intervention. Although resources might be available to them without a negative impact to their immigration status, cultural norms often create barriers in asking for help, further complicating anxiety about immigration status and fear of possible deportation.

Oldest of the Old. The group of older adults who are 85+ years old is growing proportionally at the fastest rate of all subsets of older adults. They face much more serious and pressing issues than the younger, healthier senior population. Challenges include: physical (e.g., frailty, loss of mobility, multiple and complicated health conditions, end-of-life related issues, and limited access to care due to lack of transportation), mental health (e.g., loss of mental capacities, grief and depression due to loss of spouse/family/friends), and higher incidence of social isolation and neglect.

The vulnerabilities described above are not exclusive and often overlap. KEIRO's Board and staff will be developing ways to support the highest needs of Japanese American and Japanese older adults, their caregivers, and their support systems to positively impact the health and wellbeing of Our Community.

PART 4

APPROACHING AGING THROUGH THE HOLISTIC LENS OF *GENKI LIVING*®: THE EIGHT DIMENSIONS OF WELLBEING

Launched well over a decade ago, KEIRO's signature *Genki Living* program has offered a series of wellness promotion and education classes, trainings, and conferences that have focused on stimulating a positive, proactive approach to healthy aging.

As KEIRO moves forward, *Genki Living* will take on a more profound role in addressing the complex needs of older adults in the Japanese American and Japanese community as well as for caregivers. Here is an overview of what *Genki Living* means.

Genki Living: the 8 Dimensions of Wellbeing is rooted in Japanese heritage and Japanese American values and traditions. It is a holistic framework that envisions the spectrum of issues and challenges that older adults face as they age so that individuals are seen not only from a lens of physical health. *Genki Living* is the foundation for KEIRO's programming and helps promote comprehensive support that is provided in a culturally sensitive and appropriate way.



Keiro helps older adults
AGE IN THEIR HOMES
and retain their independence
in order to promote and maintain
the **eight dimensions of wellbeing**

Each of the eight dimensions of *Genki Living* describes a set of issues and potential needs for support and intervention. Each is a continuum from early planning and prevention that promotes wellbeing to addressing some of the most challenging issues that individuals and their families might face. The dimensions are closely interconnected, and balance across the dimensions is critically important to quality of life as older adults transition through life stages. The degree to which needs in any of the eight dimensions are met impacts quality and longevity of life.

Physical. This dimension is primarily focused on the physical health of an older adult from mobility to living with chronic illness. It involves access to quality medical care, how to address multiple health conditions and challenges, and coordination of pharmacological interventions. Food safety, nutrition and hydration, exercise, and appropriate and timely immunization are other aspects of physical dimension that can enhance or decrease life expectancy.

Occupational. This dimension focuses on engagement in meaningful pursuits so that an older adult feels purposeful, valued, and fulfilled. It might be related to finding appropriate work experiences, volunteer opportunities, or civic engagement that draw on older adults' skills, talents, and experience. It also involves keeping the mind and body alert and engaged, disciplined, and active, according to one's capabilities.

Financial. Because Japanese Americans and Japanese older adults live longer than the average American, having adequate financial resources and support systems are important. Financial planning and financial support, including retirement resources, health and long-term care insurance, and estate planning can help, but many face restricted, diminishing or inadequate resources as they age. Family and community can be resources but asking for help is often self-limiting, because of perceived cultural norms and not wanting to be a burden.

Intellectual. Cultivating creativity, lifelong learning, and intellectual stimulation aids in sustaining mental capacity in older adults. However, this dimension is a continuum and declining memory and mental agility are a natural part of the aging process. Coping with memory loss or adapting to changes in mental capacity are amongst the most challenging issues for older adults and their caregivers. Dementia, Alzheimer's, and other cognitive issues are increasing in a growing older adult population.

Emotional. Aging is an emotional experience. We aim to address issues related to expressing levels of dependency, managing loss and grief, and transitioning between life stages. These require one to articulate wants and needs to maintain a strong quality of life in new ways as dependency on caregivers, including family members, grows.

Social. Isolation is one of the most under recognized issues facing older adults. This dimension involves promoting connections with family, friends, and neighbors as well as the challenges of building and rebuilding strong social support systems that address loneliness and seclusion. Reaching those that are cut off from regular social interactions is an extremely challenging issue and it becomes a vicious cycle if left unchecked. Expanding community programs that connect older adults, keeping them engaged in community activities is a priority.

Spiritual. Beliefs and values are inner rudders to help as one navigates life decisions and life changes. They are especially important as one ages and faces end of life and loss. This dimension of *Genki Living* acknowledges the importance of sustaining older adults' daily, weekly, or regular spiritual or religious practice. Spiritual practice can promote peace and equilibrium and can alleviate fear and anxiety about death, meaning, and connection. Unfortunately, the spiritual dimension is often under-recognized for its role in promoting health, inner peace, resilience, and social communities. Access to resources, centers, and support are critical.

Environmental. This dimension starts with the safety of the space in which one lives including assessment of living quarters for easy accessibility, prevention of falls or injury, and improvement of mobility within the home. It also involves personal safety and reduction of harm or violence including elder abuse, as well as issues of neighborhood and community safety.

KEIRO's *Genki Living* framework will continue to be used to assess the needs of older adults and caregivers, to develop programs to fill critical gaps in services, and to guide partnerships with the many organizations and groups working to support older adults in Our Community.



PART 5

PROGRAM IMPLEMENTATION STRATEGIES TO ACHIEVE THE GREATEST IMPACT

This year marks an important and exciting transition for KEIRO. Formerly, KEIRO's impact was achieved within the four walls of each of its high quality health care facilities. With the sale of the facilities, KEIRO has significantly expanded its potential reach. Now its value will be measured by its impact on the lives of Japanese American or Japanese older adults, their families, and caregivers in Los Angeles, Orange, and Ventura counties.

Program Areas, Needs, and Methodology

As we have shared, KEIRO's three core program areas are:

- Services to Older Adults
- Support of Caregivers
- Programs for Current Residents of KEIRO's Former Facilities

In order to achieve greatest impact, we are prioritizing how KEIRO can best serve Japanese American and Japanese older adults in Our Community in greatest need and who are most vulnerable. These populations include older adults who are facing challenges due to:

- Low income
- Isolation
- Multiple health conditions
- Memory and cognitive disabilities
- Monolingual Japanese speaking
- Immigration and residency status
- Oldest of the old

Our approach will use a holistic framework of *Genki Living*[®] which views aging through the lens of eight dimensions of wellbeing: physical, occupational, financial, intellectual, emotional social, spiritual, and environmental.

Implementation Strategies

Many organizations share this dedication to providing services to older adults in Our Community or supporting their caregivers. KEIRO wants to build upon their fine work and lend our capacity to help fill important gaps. Four strategies will be used to pursue our priorities and enhance the work of others who share our goals:

- Collaboration and partnership
- Grantmaking



- Convening service providers across sectors to foster greater communication, coordination, sharing and learning, and field building
- Design of new programs to address critical gaps

As the health care system becomes more complex and the cost of care increases, Keiro's programs to support healthy aging:



Align with Changing Community Needs



Encourage Collaboration & Partnership



Maximize Reach & Impact

Collaboration and Partnerships. Many other organizations serving needs in the Japanese American and Japanese community are providing social services and educational programming to older adults. Some are responding to the immediate needs of caregivers for resources and support. KEIRO doesn't want to reinvent the wheel or duplicate efforts. Thus, we will seek to partner with community organizations to *enhance* their efforts. Working together, we can strengthen existing programs, increase services, and fill critical gaps. Partnership and collaboration is our top priority among the four strategies.

Grants Program. KEIRO grantmaking will be targeted to support organizations that are serving older adults and their caregivers in Our Community. This will provide an immediate infusion of resources to help expand and strengthen existing programs. In addition, it could encourage community organizations to design new services that harness their knowledge and connections to older adults and their families. The grantmaking program will be goal oriented, long term, transparent, and objective.

Convening. Gathering service providers periodically and regularly is a cost effective way to increase services to older adults and their caregivers. It enables organizations currently providing services to get to know each other and learn about each other's work. It fosters sharing resources, perspectives, tools and lessons learned, especially in reaching the neediest and most isolated older adults with culturally sensitive approaches. It helps everyone avoid duplication and stimulates collaboration. KEIRO hopes to convene organizations from multiple sectors, including nonprofit organizations, government agencies, grantmakers, health care providers and community groups, including churches, temples, clubs, and associations.

New Program Design. Key gaps in service delivery will emerge through collaboration, grantmaking, and convening. KEIRO will identify how it could design and implement new programs to fill urgent needs. Where other organizations often have to make hard choices due to lack of resources or the challenges of annual fundraising, KEIRO has greater freedom to undertake important programs for older adults and their caregivers in Our Community that may require significant investment of resources over time. Examples are: individualized needs assessment and interventions, in home care and support, and services rooted in one on one discussions with older adults and their families and caregivers to cope with multiple conditions, high needs, or end of life planning. That requires patience, cultural sensitivity, and trust established overtime.

Pursuing these four new strategies and adopting a regional approach require a culture shift and organizational change from top to bottom. We are recruiting a new President/CEO to lead our work. In the coming months, KEIRO will transform the board of directors to add individuals with new experience and skills, and also a strong level of engagement and knowledge of the community and its needs. Effective leadership will be vital to the successful implementation of KEIRO's New Vision Framework.

PART 6 CORE VALUES GUIDING OUR WAY FORWARD

KEIRO's values are the bedrock from which we were formed. They were first articulated by the Founders in the 1960s, and they have been used to shape our new strategic vision, goals, programs, and the way we operate. They inspire us and propel us towards our desired impact within the community.



As KEIRO's constituency expands to include the approximately 70,000 Japanese American and Japanese seniors in Los Angeles, Orange, and Ventura counties, we will sustain our core values of respect for the elderly, integrity, compassion, community, and stewardship. In addition, we have added a sixth value, *cultural sensitivity*, which has long been the keystone of KEIRO's work in Our Community.

During the planning process of the past year, the KEIRO Board of Directors took each of these values and developed a description of what they mean to the organization. Values are always aspirational, and the new KEIRO, emerging from the sale of facilities, strives to continue to embody these tenets both internally, in the way we work and govern operations, as well as externally, in the way we engage with Our Community.

Respect for the Elderly. KEIRO celebrates the lives of older adults and strives to support their needs so that they may live with dignity, vitality, and confidence. We continue to actively learn from older adults, drawing on their experience and knowledge to guide both our individual actions and organizational decisions.

Integrity. Our organization is guided by the core principle of integrity, which encompasses honesty, accountability, and responsibility in actions. We seek to earn and sustain the trust of community members and stakeholders by taking a thoughtful, deliberate approach to making wise investments that improve the health, wellbeing, and quality of life for older adults.

Compassion. We work to ensure that Japanese American and Japanese older adults are served with compassion and can experience the best of health, home, family and community as they age. We care for Our Community’s older adults, especially the most vulnerable, and strive to meet them where they are in life without judgment.

Community. KEIRO has expanded its reach from serving 600 older adults in four direct healthcare facilities, to serving not only the residents of the former facilities but the 70,000 seniors in Our Community who live in Los Angeles, Orange, and Ventura counties. This includes the residents of our former facilities. We are also collaborating with experts, community leaders, stakeholders, and residents to refine future programs that are culturally relevant, effective, and meet the changing needs of Our Community.

Stewardship. We will always honor the legacy of our founders and supporters by staying true to KEIRO’s mission and infusing Our Community’s values into all programs. Through continuous assessment of the community’s evolving needs, we strive to formulate a sound vision and strategic goals that result in measureable impact.

Cultural Sensitivity. Culture is a critical factor of success in all KEIRO program and service delivery. Our efforts are driven by Our Community’s beliefs, values, and traditions. We will continue providing culturally relevant and linguistically appropriate programs, services, and support systems.

These six important and interconnected values will serve as the rudders for KEIRO’s continuing commitment to enhancing the quality of senior life in Our Community.

Complete Six-part eNewsletter series available online at www.keiro.org



www.keiro.org

KEIRO® is expanding our reach from a focus on long term health care facilities to broadly engaging and supporting thousands of Japanese American and Japanese older adults throughout Los Angeles, Ventura and Orange counties. KEIRO provides services to older adults and caregivers, along with programs for residents of KEIRO’s former facilities—helping older adults in Our Community to age the way they choose.

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