



HAWAI'I COMMUNITY FOUNDATION

Amplify the Power of Giving

Kūpuna Aging in Place Program for Elderly Services White Paper 2018

Theory of Change

The Kūpuna Aging in Place Program for Elderly Services (KAP) supports organizations that provide a range of supportive services including community based support services, adult day care & adult day health, and caregiver support services for low- to moderate-income kūpuna (seniors) age 65 and older and their caregivers **so that** kūpuna in Hawaii are able to age in place, for as long as it is in their best interest.

Hawaii Community Foundation (HCF) is focused on creating long-term, large-scale **CHANGE** across six sectors, covering a broad mosaic of community issues. **CHANGE** stands for **C**ommunity & Economy, **H**ealth & Welfare, **A**rts & Culture, **N**atural Environment, **G**overnment & Civics, and **E**ducation.

Within Health & Welfare, HCF believes that effective systems of community support – especially for Hawaii's most vulnerable – improves the welfare of families, the long-term outlook for children, and the ability of residents to lead productive lives. The KAP program aligns with this change area to assist the growing number of kūpuna and caregivers in Hawaii to achieve their personal goals.

Background

There are an estimated 243,541 kūpuna 65 years and older in Hawaii making up 17% of the total population in the state according to the U.S. Census. About 8.9% of kūpuna in Hawaii are below 100% of the federal poverty level and are considered low-income. According to the U.S. Census, in 2030 all baby boomers will be older than age 65 and 1 in every 5 residents will be retirement age.¹ By 2030, the population of kūpuna in Hawaii, 65 years and older, will represent 23% of the population as compared to only 8% in 1980.² In addition, Hawaii has the highest life expectancy in the nation at over 82 years of age.

Many kūpuna in Hawaii rely on informal or family caregivers (hereafter “caregivers” refers to “informal or family caregivers”). Data indicates that this trend continues to grow and for many caregivers this is a source of stress which can negatively impact workforce productivity and quality of life. There are approximately 154,000 family members in Hawaii providing care for their loved ones throughout the year. The value of this unpaid care totals about \$2.1 billion. In 2010, there were about 6 potential family caregivers for every person 80 or older. By 2030 that ratio will fall to 3:1.³ In an AARP survey of Hawaii voters age 45 and older, about half said they were providing for or had provided care to an adult loved one. Sixty-three percent reported feelings of emotional stress and 51% struggled to balance their family and job responsibilities.⁴

¹ “Older People Projected to Outnumber Children for First Time in U.S. History.” *United States Census Bureau*, 13 Mar. 2018, <https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html>. Accessed 8 May 2018.

² “Population and Economic Projections for the State of Hawaii to 2040.” *Department of Business, Economic Development and Tourism*, Mar. 2012, <http://www.oahumpo.org/wp-content/uploads/2013/02/2040-long-range-forecast.pdf>. Accessed 8 May 2018.

³ Gima, Craig. “Hawaii Gets High Marks for Long-Term Care Services, but Aging Baby Boomers will Stress System in the Future.” *AARP Hawaii*, 14 June 2017, <https://states.aarp.org/hawaii-gets-high-marks-long-term-care-services-aging-baby-boomers-will-stress-system-future/>. Accessed 8 May 2018.

⁴ “AARP hosts ‘Caring for Family, Caring for Yourself’ caregiver conference.” *Hawaii News Now*, 19 Mar. 2018, <http://www.hawaiinewsnow.com/story/37759447/aarp-caregiver-conference-caring-for-family-caring-for-yourself>. Accessed 8 May 2018.

Aging in Place

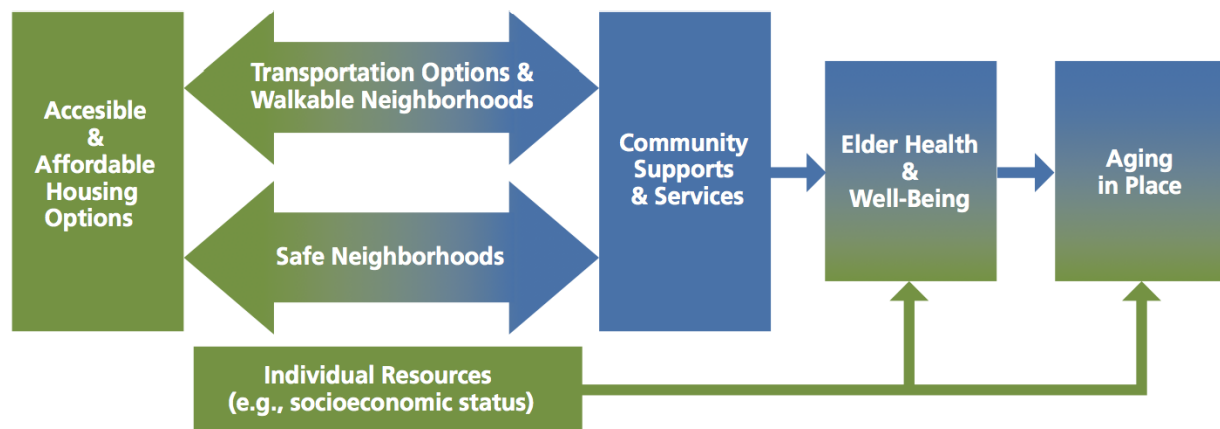
The U.S. Centers for Disease Control and Prevention defines **aging in place** as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level".⁵ Eighty-nine percent of Americans over age 50 wish to remain in their homes for as long as possible. Aging in place benefits kūpuna, their families, and greater communities.

Often kūpuna choose to age in place because other options are very expensive and limited. According to AARP Hawaii, private nursing homes in Hawaii charge almost 50% more than their counter parts on the mainland. In addition, in-home health care costs are thousands of dollars more than the U.S. average.⁶ Another factor is the limited number of beds and spaces at institutional facilities. Hawaii has about 4,400 beds in nursing homes and 7,000 spaces in residential facilities. With these spaces only 30% of kūpuna projected to need long-term care will be served.

Indicators for Sustainable Aging in Place

The Stanford Center on Longevity and the MetLife Mature Market Institute developed a list of initial indicators of community characteristics that influence a kūpuna's ability to effectively age in place.⁷

Liveable Community Characteristics



The report states that one of the key community characteristics that supports sustainable aging in place is "Community Supports & Services" including the availability of health care, supportive services, healthy food, and social integration. Supportive services include home- and community-based services and caregiver support services. The report shares that one study found that supportive services reduced the risk of nursing home placement for older adults with cognitive impairment. With the continuing increase in the number of kūpuna and limited senior facilities in Hawaii, it is evident that community supports and services are integral to enable kūpuna to age in place.

⁵ "Healthy Places Terminology." *Centers for Disease Control and Prevention*, 15 Oct. 2009, <https://www.cdc.gov/healthyplaces/terminology.htm>. Accessed 8 May 2018.

⁶ Cauterucci, Christina. "Elder Care is a Looming Crisis. Hawaii is Facing it Head-On." *Slate*, 5 June 2017, http://www.slate.com/blogs/better_life_lab/2017/06/05/hawaii_is_facing_down_a_looming_elder_care_crisis.html. Accessed 15 May 2018.

⁷ "Liveable Community Indicators for Sustainable Aging in Place." *Stanford Center on Longevity and MetLife Mature Market Institute*, Mar 2013, <http://162.144.124.243/~longevl0/wp-content/uploads/2017/01/mmi-livable-communities-study.pdf>. Accessed 15 May 2018.

Continuum of Services

In 2013, HCF and the Nonprofit Finance Fund published a report entitled “Caring for Our Kupuna, Building an Aging in Place Movement in Hawaii”.⁸ The report identifies the need for a continuum of wrap-around services specific to the needs of kūpuna and their families. There are a range of services available in the community to assist kūpuna to age in place across a continuum of needs:

Preventative healthcare	Transportation	Adult Day Care & Adult Day Health
Fall prevention education	Home companionship	Caregiver support respite
Nutrition education	Socialization	Personal Care
Home delivered meals	Chore Services	

Caregivers play a significant role to support kūpuna to age in place. Caregivers often experience stress that can affect their emotional and physical health as well as impact their jobs and finances. In a 2014 study of Hawaii residents, 39% of caregivers reported having to take a leave of absence from work, 19% had to work reduced hours, and 21% had to give up working entirely to provide care.⁹ A study conducted by the AARP Public Policy Institute found that family caregivers who leave the workforce to care for a parent lose an average of nearly \$304,000 in wages and benefits over their lifetime with women experiencing an estimated \$324,044.¹⁰

Community supports and services for kūpuna provides respite for caregivers to enable them to continue working and have time for themselves. There is also a need to provide services targeted to meet the specific needs of caregivers. A study that identified key factors associated with institutionalization of seniors with dementia, found that screening caregivers for burden and depression and designing interventions to “decrease the consequences of behavioral disturbance on caregivers” are appropriate to decrease institutionalization of people with dementia.¹¹ A report by the Administration on Aging found that when caregivers are supported in their roles they are able to provide better care for longer periods of time.¹²

Landscape of funding to support kūpuna

Access to supportive services can be unaffordable for many kūpuna. In Hawaii, 226,000 kūpuna receive government health insurance including Medicaid, Medicare, or VA care. These kūpuna are eligible to receive some supportive services through this coverage. Upper and higher middle-income kūpuna are able to privately pay for services. There is a gap group of kūpuna who are not qualified for Medicaid, but cannot afford to private pay for services. This is exacerbated by the high cost of living including housing and food costs that can cause financial strain for many kūpuna in Hawaii.

Subsidized support is available to assist some kūpuna to age in place. Government support for kūpuna is provided through Medicare and Medicaid. Kūpuna who qualify can receive benefits and services including chore services, home health services, homemaker services, adult day care & adult day health, and personal care. The state has several in-home and community-based programs to support aging in place including the chore services program, a

⁸ “Caring for Our Kupuna, Building an Aging in Place Movement in Hawaii.” *Hawaii Community Foundation and Nonprofit Finance Fund*, 2013, <http://issuu.com/hcfhawaii/docs/caring-for-our-kupuna-study?e=1137810/33121494>. Accessed 12 April 2018.

⁹ Bortorff, Bruce. “Hawaii Caregivers Provide \$2.1 Billion in Unpaid Care.” *AARP Hawaii*. 16 July 2015. <https://states.aarp.org/hawaii-family-caregivers-provide-2-1-billion-in-unpaid-care-sc-hi-wp-advocacy/>. Accessed 5 June 2018.

¹⁰ Feinberg, Lynn and Choula, Rita. “Understanding the Impact of Family Caregiving on Work.” *AARP Public Policy Institute*. Oct. 2012. https://www.aarp.org/content/dam/aarp/research/public_policy_institute/ltc/2012/understanding-impact-family-caregiving-work-AARP-ppi-ltc.pdf. Accessed 5 June 2018.

¹¹ Hebert, Rejean. “Factors Associated with Long-Term Institutionalization of Older People with Dementia: Data from the Canadian Study of Health and Aging.” *The Journals of Gerontology*, vol. 56, issue 11, 1 Nov. 2011, <https://academic.oup.com/biomedgerontology/article/56/11/M693/591123>. Accessed 15 May 2018.

¹² Foster, Leslie and Kleinman, Rebecca. “Supporting Family Caregivers through Title II and the OAA.” *Administration on Aging*. Sep. 2011. https://www.acl.gov/sites/default/files/common/AoA5_SupportFamilyCaregivers.pdf. Accessed 5 June 2018.

Senior Companion program, Kūpuna Care, and Kūpuna Caregiver Support. The Kūpuna Caregiver Support program began in 2017 and the legislature approved funding of \$1.2 million for FY2019 to expand the program. The goal of the program is to support working caregivers in Hawaii to enable them to remain in the workforce. Families receive up to \$70 per day in benefits to cover the costs for adult day care, chore services, homemaker services, personal care and other services to support kūpuna. While this is landmark legislation in the United States the program is still in its infancy.

Aloha United Way currently has a Supportive Active Aging strategy and provides funding to three programs to support seniors to enhance their quality of life so they can live independently longer, safer, and in their own homes.

HCF has provided grants for elderly services for nearly 30 years through the Persons in Need (PIN) program, now known as KAP. Recognizing the rapid growth in the number of kūpuna and the dependence on caregivers, in 2011, HCF adopted a new focus for its aging grants to *“strengthen the safety net of family and informal care giving services for the elderly, with an emphasis on families and elderly of modest means.”*

Purpose

The “Livable Community Characteristics” model identified many characteristics that contribute to a community that supports aging in place. HCF recognizes within the aging sector there is a broad range of needs including housing, transportation, nutrition, employment, volunteerism, safe and accessible public spaces, health care, elder fraud and abuse, workforce services training, community support services, and advance care planning. With the available funding and fund purposes, HCF prioritizes supporting “Community Supports and Services” as the area in which it can make the greatest impact.

The KAP program will fund nonprofit organizations to provide the following:

1. Community-based support services for low- to moderate-income kūpuna age 65 or older provided in kūpuna’s homes or at a facility
2. Tuition assistance for low- to moderate-income kūpuna age 65 or older to attend licensed adult day care or adult day health programs
3. Caregiver support services through education, support groups, and respite

HCF is investing in each of these areas to assist kūpuna as their needs change. It is important for kūpuna to receive preventative services to maintain their fitness and health for as long as possible. Community-based support services can include fitness classes, nutrition education, chore services, transportation assistance, meal preparation, overnight respite, home assessments, and falls prevention education. HCF’s investment in this area is especially important since these services are not usually supported by government funding. Kūpuna who may have higher needs can attend adult day care or adult day health programs and benefit from socialization, nutritious meals, and fitness activities. Caregivers receive the support they need through support groups, education, respite, and other activities to help kūpuna to age in place.

Results and Evaluation tools

Evaluation will be utilized for the following purposes:

1. To ensure programs are assisting kūpuna to age in place, in alignment with the theory of change for the KAP program (*measured by aging in place*)
2. To evaluate quality of programs (*measured by feedback from kūpuna and caregivers*)
3. For programs to utilize evaluation data to review their services and make changes to programs to best meet the needs of kūpuna and caregivers (*utilizing kūpuna centered goal and feedback from kūpuna and caregivers*)
4. To assess the effectiveness of programs providing caregiver respite and support services (*measured by caregiver feedback*)

Key indicators which can contribute to kūpuna's ability to age in place include prevention of falls, nutrition, social engagement, and functional mobility. Based on the organization, all or some of these indicators should be incorporated into kūpuna's care plans and should be continually assessed to evaluate the effectiveness of the services to meet kūpuna's needs.

KAP Program grantees will track and report the following aggregated data each year:

- Kūpuna-Centered Goal
 - Total Projected – number of kūpuna projected to be served during the year.
 - Total Served – number of kūpuna served during the year.
 - Total Aging in Place – number of kūpuna who remained in their home at the end of the year.
- Kūpuna Feedback
 - Are you satisfied with the services you received?
 - Would you recommend these services to a friend?
 - Did the services you received help you to meet your personal goals?
 - In general, compared to other people your age, would you say your health is: excellent, very good, good, fair, or poor?
- Caregivers Feedback
 - Are you satisfied with the services provided to the person in your care?
 - Would you recommend these services to a friend?
 - Have the services provided, enabled you to provide care for a longer period of time than would have been possible without these services?

Organizations receiving Caregiver Support Services funding will be required to complete and report individual data for caregivers utilizing the Caregiver Support Services Annual Survey.