2022 HEALTHIER BARRINGTON STUDY FINAL REPORT

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Advocate Good Shepherd Hospital Barrington Area Chamber of Commerce Barrington Area Community Foundation **Barrington Area Council of Governments** Barrington Area Council on Aging **Barrington Area Development Council Barrington Area Library Barrington Area Safety Council Barrington Career Center Barrington CUSD 220 Barrington Park District Barrington Township Barrington Youth and Family Services BStrong Together** Citizens for Conservation Cuba Township Jensen Jacobsen & Associates, Inc. Journey Care National Alliance on Mental Illness **Neurobalance** Center Samaritan Counseling Center Smart Farm of Barrington The Campus Life Center of Barrington Village of Barrington



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EXECUTIVE SUMMARY

The Healthier Barrington Coalition and University of Illinois College of Medicine Rockford's Division of Health Research and Evaluation partnered to survey Barrington area residents and business leaders on current health needs, issues, and barriers to achieving optimal health in the community. Quantitative survey data and qualitative focus group data from community residents and qualitative data from local business leaders was collected from late winter to early spring of 2022.

The survey instrument covered eight topics: Social & Demographic Characteristics of Respondents - including finances and employment, Community, Overall Health – including general, behavioral, and mental health, Health Literacy, Youth, Impact of COVID-19, Environment, and Community Recommendations. Qualitative data expanded on the quantitative data to understand the stories and context of health needs in the community with an emphasis on the impact of COVID-19 on health. New this year we obtained qualitative data from business leaders to understand the impact of COVID-19 on Barrington area businesses and how this impacted their ability to support health within the community.

Community Context

Respondents to the survey and participants in the focus group represent a convenience sample from the community and may not reflect all community perspectives.

Key Quantitative Findings

Social & Demographic Characteristic of Respondents

Thirty-four percent of respondents were 45-65 years old, followed closely 32% of respondents who were 30-40 years old. Respondents were 78% white, 69% female and 90% identified as straight.

Seventeen percent of respondents had difficulty paying housing or other expenses in the past year and 18% were stressed about difficulties related to paying for various living expenses. Public transportation to accomplish various activities of daily living is an additional stressor for at least 16% of respondents.

Of the total respondents 25% are retired and 49% are working full-time. Of those working in any capacity, 50% are working from home full-time. Of this group working from home, only 38% worked from home before COVID-19. Overall, 25% of households stated that no one in their household is currently working, of which 81% of these are respondents who also said they are retired. Forty-four percent of households have 2 or more people working. Of the households that had 2 or more people working, over 50% are male and 20% are between 45 and 54 years old.



Fifty-five total respondents identified as unemployed, of which 66% of these were female. More than 25% were unemployed for reasons related to COVID-19. One-fifth of households had a member that was having difficulty finding or keeping employment with the majority of those linking the difficulty to COVID-19 factors.

Forty-nine percent of respondents plan to retire and 35% want to retire between 61 and 65 years old and 32% of those who plan to retire plan to stay in their current home when they retire. Leisure and travel are the primary activities people want to do in retirement.

Community

Thirty-five percent of respondents live in the village of Barrington with 52% having lived in Barrington for 21 years or more.

Overall Health

Everyone in the household is covered by insurance in 90% of households responding. For those that do not have insurance, 32% of them fall in the 6–15-year-old age group. Premiums and deductibles being too high are the primary reason for not having insurance, but 40% of respondents who do not have insurance feel they don't need insurance.

Respondents looking for supportive services or programming, go to the internet first followed closely by family and friends.

Twenty-nine percent of households responding are providing caregiver services to another adult or a child with special health care needs and 54% of these respondents are providing care in the respondent's home. Of those needing caregiver services, 56% were older adults. Of those providing caregiver services, 37% said that there was no one to step in if they themselves were no longer able to provide care.

Help with housework was indicated by 34% of families and affordable respite care was indicated by 33% of families as primary respite care services needed. When asked specifically about services needed for family members over 65, 24% of respondents need assistance with benefit programs and a quarter need assistance coping with Alzheimer's and dementia.

Emotional abuse of someone in the household was reported by 10% of respondents with financial abuse following close behind at 9%. The level of reported abuse continues to increase with each iteration of this survey. Thirty-four percent of respondents sometimes feel lonely or isolated from those around them. Thirty-nine percent of respondents stated a household member had considered and 34% had sought professional help for behavioral or mental health issues in the last year. Alcohol and drug use assistance was thought about or sought by about 9% and 8% of respondents respectively. Nine percent of respondents reported someone in their household



considered suicide in the past year and 45–64-year-olds represented 30% of this group. Thirty-five percent of respondents consider themselves "a little bit" stressed.

Twenty-six percent of respondents state they have a drink 2-4 times per month and 21% of respondents indicated that their drinking increased during the pandemic. Twenty percent of respondents engage in exercise at least 3 days per week and 31% engage in moderate to strenuous exercise about 30-40 minutes total per week. Seventy-eight percent of respondents have not used any tobacco products in the past year. Twelve percent of respondents have used prescription drugs for non-medical reasons at least once or twice in the past year and 7% had used illegal drugs at least once or twice in the past year.

Health Literacy

Sixteen percent of respondents always or very often have someone help them process health materials. Ten percent of respondents always or very often have trouble understanding their medical problems. Twenty-one percent of respondents struggled to sometimes understand COVID-19 materials.

Youth

Forty-two percent of respondents stated that there was someone under 18 living in their household. The most prevalent issue reported by respondents for the youth in their household was anxiety and anxiousness, as reported by 40% of respondents. Depression was reported as an issue for youth by 23% of respondents.

Thirty-one percent of respondents believe that unsupervised parties where youth have access to alcohol and/or drugs occur in their community at least sometimes and 27% of respondents think they happen often. Eighty-two percent of respondents believe that parents should be held accountable for alcohol underage alcohol consumption if they know about it.

Impact of COVID-19

The survey was completed in April of 2022 and all responses regarding COVID-19 refer to experiences through from March 2020 to the date of completion of the survey by the respondent. Thirty-four percent of respondents stated at least one person in their household had tested positive for COVID-19 and 32% of this group stated that COVID-19 symptoms had lasted 4 weeks or more for someone in their household.

When asked who respondents trust the most regarding information on COVID-19 guidelines and resources, 63% reported that they trust their health care provider the most.

Shopping for groceries and all other shopping was disrupted by COVID-19. In both types of non-grocery shopping and grocery shopping, the shift from BEFORE and DURING COVID-19 doubled or more than doubled. Respondents who did all of their



non-grocery shopping online BEFORE the pandemic was 2% and DURING the pandemic this rose to 8%. Grocery shopping rose from 1% to 5% for those who did all of their grocery shopping online BEFORE and then DURING the pandemic. For those who did most, but not all non-grocery shopping online, respondents stated that they did 25% of shopping online BEFORE and 45% online DURING the pandemic. Most, but not all grocery shopping shifted from 11% BEFORE the pandemic and 22% DURING the pandemic.

Environment

When asked about environmental improvements to their household, 47% of respondents have considered purchasing an electric vehicle and 5% did purchase one. Forty-seven percent have considered switching electrical systems (LED bulbs, programmable thermostats and 15% have done this. Thirty-one percent of respondents have considered landscape changes or and 31% have considered adding solar panels.

Forty-two percent of respondents do not think the Barrington area local government is doing enough to prepare for severe weather events and 42% are not sure. Twenty-six percent of respondents think the government needs to improve communication and education around weather preparedness.

Forty-five percent of respondents believe Barrington's water comes from deep aquifers and 46% are concerned about whether the Barrington area will have enough clean water to supply residents' needs in the future. Four out of five respondents believe local government should protect natural open areas.

Community Recommendations

Respondents were allowed to provide open-ended responses regarding recommendations to improve their community. The environment and the protection of natural spaces was frequently mentioned. Tolerance and divisiveness and a feeling of not being accepted was written in by many people and it appeared to be coming from both sides of the political aisle. There were also differing perspectives on a range of topics from how open space is used to COVID-19 mitigations. Traffic and train issues were discussed by multiple people with many offering suggestions on how to alleviate issues in these areas. Finally, residents mentioned the need for more recreational services and a senior center.

Key Qualitative Findings - Community Residents

Participants agreed on an all-encompassing view of health and that physical, mental, and social needs be met to be healthy.

Significant Issues Related to Health

The significant issues related to health that were mentioned in both the English and Spanish focus groups were: mental health, infrastructure – including built and system

infrastructure that allows access to healthcare and services, loss of routines around health care due to COVID-19, equity in terms of access to care, but also in terms of the freedom to use existing resources in different ways (ex. roads for cars and for bicycles), nutrition, and a lack of social connection.

The topics covered were the same across both language groups but there was a difference in the way concepts were defined and understood between the groups. A good appreciation of how people understand issues around health is important. Health issues are not conveyed or understood in the same way across generations in both groups and the need to improve this understanding is highlighted in the focus group quotes.

Impact of COVID-19

Across both language groups, the impacts of COVID-19 were similar with the following topics mentioned across both groups: COVID and mental health, pandemic restrictions, increased use of technology, health issues affecting youth including uncertainty, and obesity caused by pandemics issues.

Health Issues Affecting the Elderly

The topics raised in both focus groups around the elderly included isolation, fear, congregate care facilities, nutrition, and COVID side-effects with the Spanish language group most concerned with this last topic.

Services and Resources Needed in the Community

Educational resources around health were prominent in discussions in both language groups, but the Spanish group pointed out that you cannot simply translate the same message into Spanish to provide the education. Education resources must also be culturally sensitive and appropriate to reach the intended audiences. The Spanish language group raised additional equity issues around green space. There is green space near their communities, but the resources within it are not the same as in other areas of Barrington.

When discussing resources related to COVID-19, there were distinct differences in perspective between the English and Spanish groups. What was seen as a strength in one group (English) such as the vaccine roll-out was seen as a weakness in the other group (Spanish) where it seemed to be rolled-out too fast.

Sources for Health Information

The perspective differences carry over to where each language group looks for health information. Physicians, newsletters, and the hospital are top resources in the English language group whereas the internet, social media, email, and videos are the primary sources of health information mentioned in the Spanish language group.

Strengths with the Barrington Area Community

Hospitals, fitness centers and the park district are some of the strengths listed in the English language group while the Spanish language group mentioned strengths within their cultural community such as families and God, with non-profit organizations of the Barrington area also listed as strengths.

Issues Residents Worry About Most

There were seven issues mentioned across both language groups including youth, equity, misinformation, mental health, social, physical health, and climate.

Key Qualitative Findings - Community Residents

Significant Issues Impacting Local Businesses in the Barrington Area

The significant issues raised by business leaders were the ability to pivot and be adaptable and flexible, staffing, costs, supply chain issues, safety, and personal connections.

Sustainability Plans

The COVID pandemic highlighted the need for sustainability plans for the businesses. Being flexible and adaptable allowed businesses to create stronger sustainability plans for the future.

Supply Chain

Supply chain issues were and continue to be a significant issue for businesses. Supply chain issues relate to not just products for retail sale, but also related to resources needed to run the business and to carry out events.

Resources

Resources were discussed in the focus group as a both resources that helped the business such as the Payment Protection Programs and national and state professional organizations as well as how the business became a resource to employees and the community by providing benefits such as paid time off when anyone in an employee's house was ill to yoga to alleviate stress. Businesses still need assistance recruiting and keeping staff.

Future Needs

Businesses continue to have needs including finding staff, combating inflation, making sure that employees and clients feel safe, addressing mental health and social connection needs and maintaining continued high standards of customer service while dealing with these challenges.



Project Overview

The 2022 Healthier Barrington Study represents the ninth iteration of the Healthier Barrington Study, sponsored by the Healthier Barrington Coalition – a public healthoriented coalition of twenty-four local organizations and agencies. Similar studies have been conducted since 1996.

The 2022 study includes both qualitative and quantitative data, to provide a comprehensive analysis of the community's health-related needs, gaps, issues, knowledge, and opinions.

Quantitative data was collected using a community resident survey and non-for-profit organization survey which was conducted January - March 2022. New to this year's survey are questions on understanding the impact of COVID-19 on the health and needs of the Barrington area and questions specific to understanding how the area is addressing climate and environmental issues.

Qualitative data was collected in March and April of 2022, by conducting a total of three focus groups. Two focus groups were conducted with Barrington area adults, one in English and one in Spanish. The third focus group was with Barrington area business leaders.

This study was conducted by the Division of Health Research and Evaluation (HRE)¹ at the University of Illinois College of Medicine Rockford, within the Department of Family and Community Medicine. HRE has conducted this study for seven of the eight iterations.

This report is organized into chapters for the survey and focus group methods and results. Graphs are included in the body of the report to help explain the text. Detailed tables describing results in are contained in the Appendix I. De-identified verbatim comments from the open-ended response questions are included in Appendix II. Appendix III contains the English and Spanish versions of the survey instruments. Appendix IV contains the Focus Group Guides. Appendix V contains the Focus Group consent forms.

¹ Formerly Health Policy and Social Science Research (HPSSR)



Chapter I: COMMUNITY RESIDENT SURVEY

Survey questions for the Barrington Area Resident survey were developed over a 3month period. Healthier Barrington Coalition members met and reviewed the 2017 survey. Suggestions were made regarding which sections and questions should be dropped and what topic areas needed to be added. Advocate Good Shepherd provided several social determinants of health questionnaires which were used to identify items for the current survey. New sections in the survey this year included the impact of COVID, environmental and climate issues and social determinants of health. HRE researchers created the current survey based on these recommendations as well as using information on how COVID-19 might be affecting certain areas.

The survey was finalized with input from coalition members and programmed into Qualtrics. Community residents could access the survey in both English and Spanish online, on mobile phone as well as on paper. The survey was distributed by coalition member organizations via a QR code, tiny URL, or a paperversion. Additionally, the Healthier Barrington Coalition sent emails to their extensive network for distribution.

The survey took approximately 28 minutes to complete. Digital links allowed us to track how many respondents clicked into the survey and completed no questions, how many completed part of the survey and how many completed all of the survey. A total of 659 individuals completed at least a portion of the survey. A total of 903 individuals did access the survey, but 229 of these surveys did not have any data. An additional 15 surveys appeared to be spam responses as the responses appeared to be identical across multiple questions. These 244 surveys (229 no data + 15 spam) were removed from the data set resulting in 659 surveys that were analyzed.

Most surveys were completed online (98.7%, N=651) and only 8 surveys were completed on paper.

Survey Mode			
Paper	8	1.2%	
Web	651	98.8%	
Total	659	100%	

In the following sections we report detailed analysis of the survey. Each section corresponds to specific questions in the survey. The survey is attached in Appendix III.



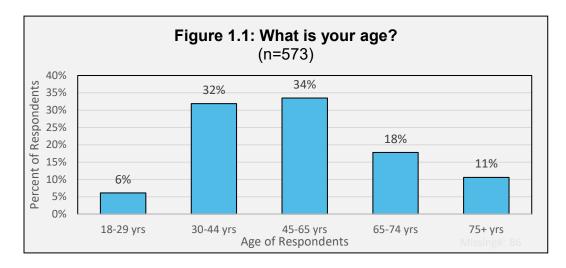
1. Social & Demographic Characteristics of Respondents

A: Age, Race and Gender

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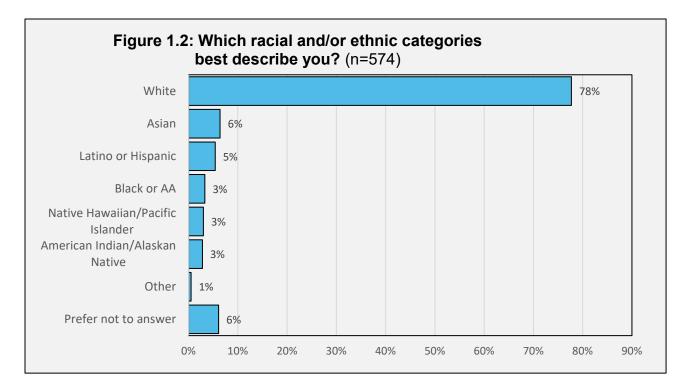
This section of the report refers to the second part of *Section IX: Household Characteristics,* questions 9.3 to 9.7 in the survey. This section's survey questions focused on demographic characteristics of respondents and their households. Respondents were asked questions regarding age, gender, race/ethnicity, and sexual orientation.

As seen in Figure 1.1, the most reported age range for respondents was 45-65 years (34%, n=192). Nearly one-third (32%, n=183) of respondents were between the ages of 30 and 44 years. About three in ten (29%, n=163) respondents were 65+ years old. Few respondents (6%, n=35) were young adults between the ages of 18-29 years.

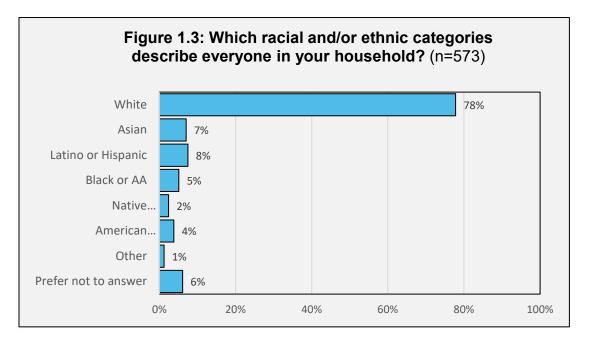


Respondents were asked to report on the ethnic-racial categories that best describe them (Figure 1.2). Respondents could select more than one category. Most respondents identified as White (78%, n=446). Few respondents selected a non-White ethnic-racial category. The second most selected category was Asian (6%, n=37), followed by Latino/Hispanic (5%, n=31). Six percent (6%, n=35) of respondents chose "Prefer not to answer."

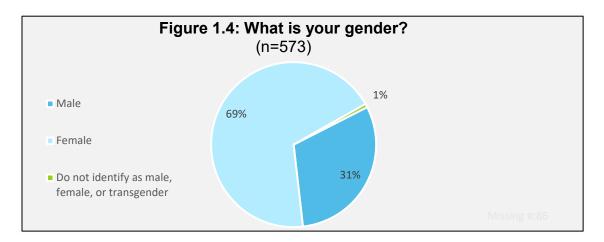
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Respondents were asked to report on the ethnic-racial categories that best describe everyone in their households (Figure 1.3). Respondents could select more than one category. Most respondents selected White (78%, n=446). Few respondents selected a non-White ethnic-racial category. The second most selected category was Latino/Hispanic (8%, n=43), followed by Asian (7%, n=40). Six percent (6%, n=35) of respondents chose "Prefer not to answer."



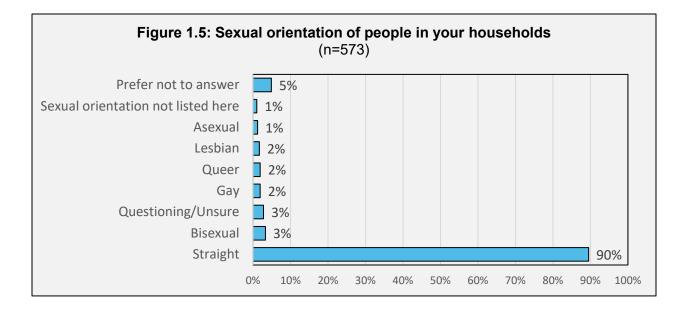
Most survey respondents identified as female (69%, n=393). Three in ten (31%, n=176) respondents identified as male (Figure 1.4). One percent (1%, n=4) of respondents selected "Do not identify as male, female, or transgender" and no survey respondents selected "transgender" for the gender question.



Mirroring the results for the gender survey item, 69% (n=391) of respondents indicated that they were assigned the "female" sex on their birth certificate. Thirty-one percent (31%, n=178) of respondents indicated that they were assigned the "male" sex on their birth certificate.

Respondents were asked to provide the sexual orientation of people in their households (Figure 1.5). Multiple response categories could be selected for this survey question. A large majority (90%, n=513) of respondents selected "straight". Few respondents selected any other response category; with 3% (n=19) selecting "bisexual" (3%, n=19) and 3% (n=16) selecting "questioning/unsure".



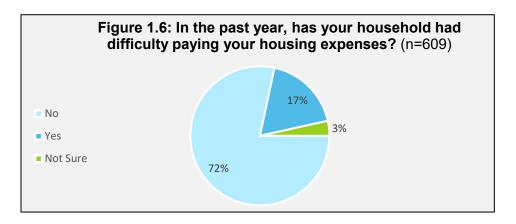




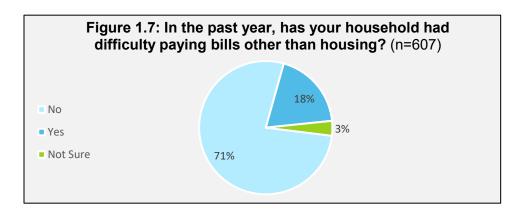
B: Household Finances

This section of the report refers to Section III: Household Finances, questions 3.1 to 3.9 in the survey. This section's survey questions focused on the financial health of households in the Barrington area. Respondents were asked questions regarding their housing, finances and stress related to these issues.

The survey asked respondents if they had difficulty paying housing expenses over the last year (Figure 1.6) Of the 609 respondents who replied to this question, 18% (n=111) stated their household had difficulty paying housing expenses and 3% (n=21) were not sure if they had difficulty.

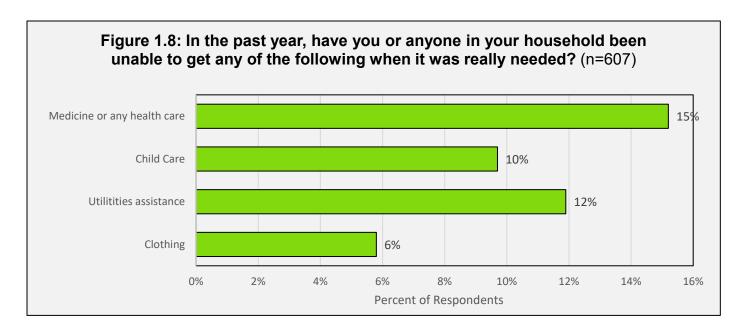


When asked whether they had difficulty paying household expenses other than housing (Figure 1.7), 19% (n=115) of 607 respondents replied 'yes' and 4% (n=22) replied that they were not sure.

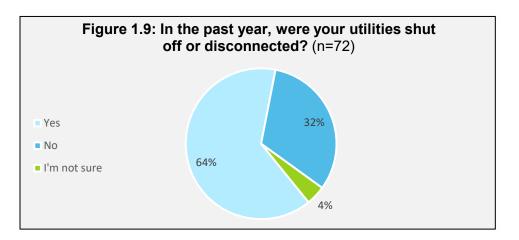


Respondents were asked if their household had been unable to meet household needs when it was really needed (Figure 1.8). When really needed 15% (n=92) of respondents stated their household was unable to get medicine, 10% (n=59) could not get childcare and 6% (n=35) had difficulty getting clothing. Utilities assistance was not attainable for the household when it was really needed according to 12% (n=72) of respondents.



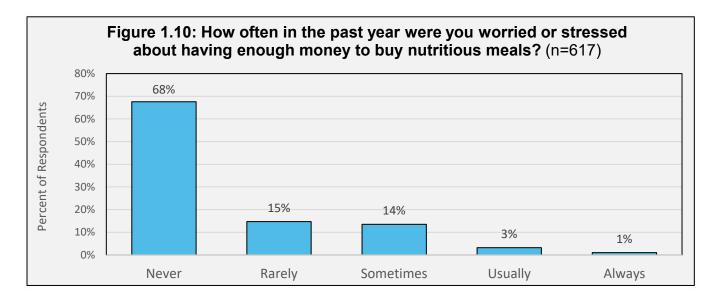


For the 72 respondents who said their household could not get utilities assistance when it was really needed, 64% (n=46) of these households had their utilities shut off or disconnected in the past year and an additional 4% (n=3) were not sure if the utilities had been cut off or disconnected (Figure 1.9).



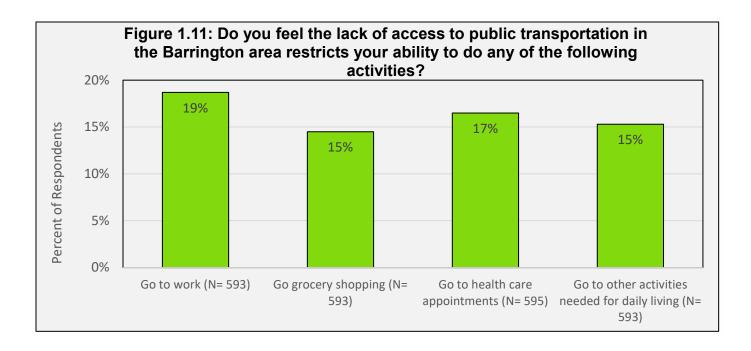
When asked about their current housing situation, 624 respondents replied and 9% (n=57) stated that they did not have housing. Access to housing is a known stressor for many households and 15% (n=92) of 617 respondents in this survey stated that they are worried about losing their housing.

The survey asked about additional stressors related to household finances. Respondents were asked if they were worried or stressed about having enough money to buy nutritious meals. Of 617 respondents, 68% (n=417) are never worried and an additional 15% (n=91) are rarely worried. For those who are worried about having money for nutritious meals, 14% (n=83) are worried sometimes, 3% (n=20) are worried usually and 1% (n=6) are worried always (Figure 1.10).



Fourteen percent (14%, n=89) of 617 respondents stated a lack of transportation kept them from meetings, work or from getting things needed for daily living in the past year (Figure 1.11). The survey asked if a lack of access to public transportation in the Barrington area restricted any activities. Lack of public transportation restricted the ability of 19% (n=111) of 593 respondents to go to work, 15% (n=86) of respondents' ability 'to go grocery shopping' and 15% (n=91) of respondents' ability to 'go to other activities of daily living'. Of 595 respondents, 17% (n=98) reported a lack of access to public transportation affected their ability to go to health care appointments.

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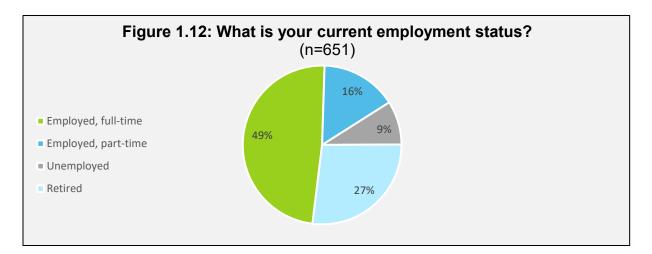




C: Working & Retirement

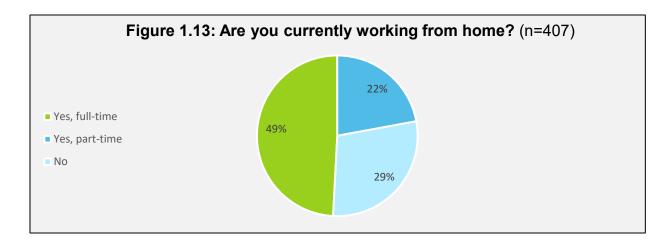
This section of the report refers to Section II: Working and Retirement, questions 2.1 to 2.47 in the survey. The survey questions in this section focused on the employment and retirement activities of individual household members. Respondents were asked how many people in the household were working or not working, why they might not be working and how COVID-19 was affecting employment of individual household members.

Less than half, 49% (n=316), of 651 respondents stated that they were working full-time. Just over a quarter, 27% (n=176), of respondents stated that they were retired. Of the remaining respondents, 16% (n=101) were employed part-time and 9% (n=58) were unemployed (Figure 1.12).



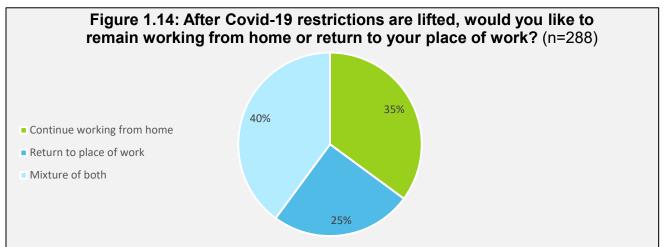
Of the 415 respondents who are currently employed, either full- or part-time, 98% (n=408) are currently engaged in work activities. Two percent (2%, n=7) of respondents are employed and receiving income but are not currently carrying out work duties. For respondents currently working full- or part-time, 407 of these individuals answered the question of whether or not they were currently working from home. Of this group, 49% (n=200) are working from home full-time, 22% (n=90) are working from home part-time and 29% (n=117) are not working from home (Figure 1.13).





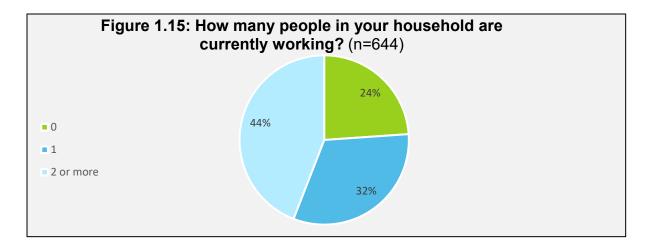
Just 38% (n=110) of the 290 working from home full- or part-time worked from home prior to COVID-19.

COVID-19 is changing how people view employment and where they work. The Healthier Barrington Coalition wanted to understand where people want to work after COVID-19 restrictions are lifted. For the 290 respondents who are working and responded to the question about where they would like to work when COVID-19 restrictions are lifted, 35% (n=101) would like to continue working from home, 25% (n=72) want to return to their place of work and 40% (n=115) would like a mixture of both (Figure 1.14). Of those currently working and not working from home (117 respondents), just 26% (n=30) of respondents reported that their job can be done from home.



The survey asked about the current working status of individuals in the household; 24% (n=154) of respondents said no one in their household was currently working. Thirty-two percent, 32% (n=206), of respondents had one person in their household currently working and 44% (n=284) stated '2 or more people' were currently working.



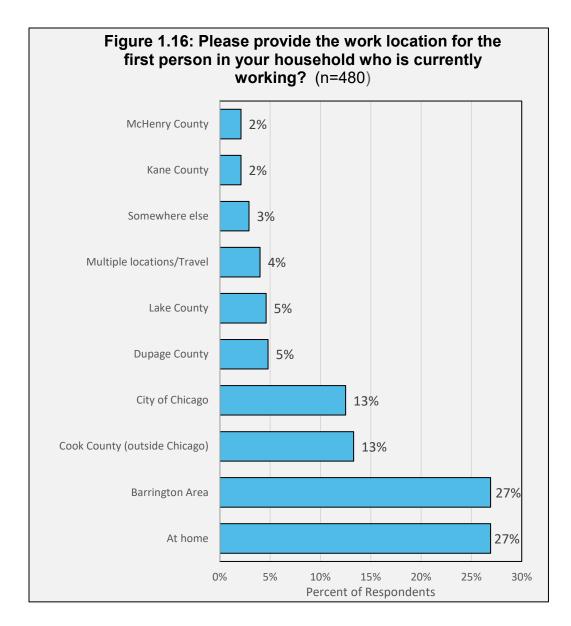


For the first person in the household who is currently working 61% (n=293) are male and 39% (n=187) are female and 25% (n=120) are between the ages of 34 and 44 years old, 22% (n=107) are between 45 and 54 years old, and 21% (n=100) are between 55 and 64 years old. For the second person in the household who is currently working 59% (n=164) are female and 40% (n=112) are male and 28% (n=77) were between the ages of 35 and 44 years old, 36% (n=72) are between 45 and 54 years old, and 18% (n=49) are between 25 and 34 years old.

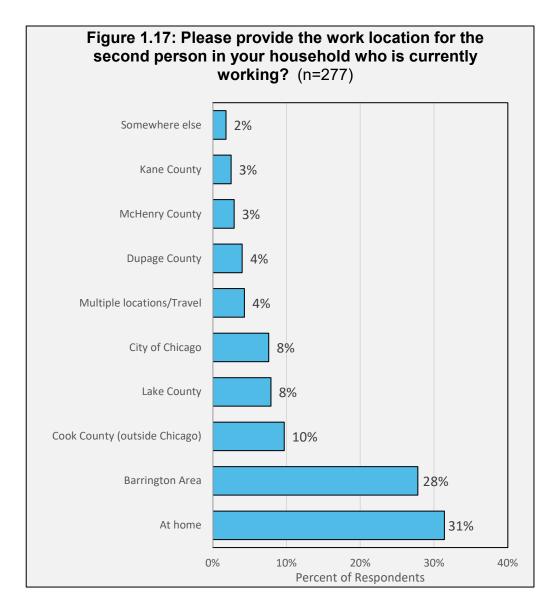
Respondents were asked where the working household members work. For the first person (n=480) working, 27% (n=129) are working 'at home', 27% (n=129) are working in the Barrington area, 13% (n=64) are working in Cook County (outside Chicago), and 13% (n=60) are working in Chicago (Figure 1.16).

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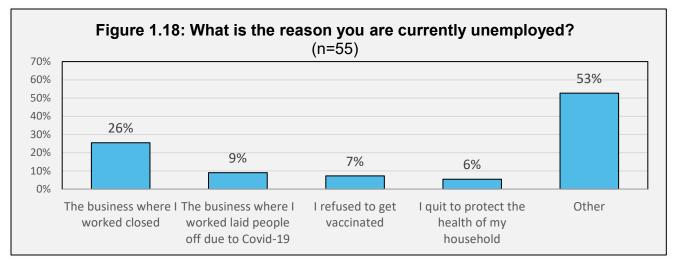


For the second person (n=277) working, 31% (n=87) are working 'at home', 28% (n=77) are working in the Barrington area and 10% (n=27) are working in Cook County (outside Chicago) (Figure 1.17).



Fifty-five respondents stated that they are currently unemployed. The survey tried to understand why people were unemployed. A quarter of respondents, 26% (n=14), stated that the business where they work closed and 9% (n=5) said the business where they worked laid people off due to COVID-19. COVID-19 decisions related to health were also reasons for current unemployment with 7% (n=4) of respondents refusing to get vaccinated and 6% (n=3) quitting to protect the health of their household.

Fifty-three percent, 53% (n=29), of respondents offered an 'other' reason for being unemployed. A majority of these respondents stated that they were currently unemployed to become a stay-at-home parent. Other reasons listed included a disability, being in school, being a caregiver to someone else, and choosing to leave the work force (Figure 1.18).



The survey asked all respondents if they received COVID-19 unemployment benefits at any time during the COVID-19 pandemic and 23% (n=150) of 647 respondents said 'yes', they had received benefits.

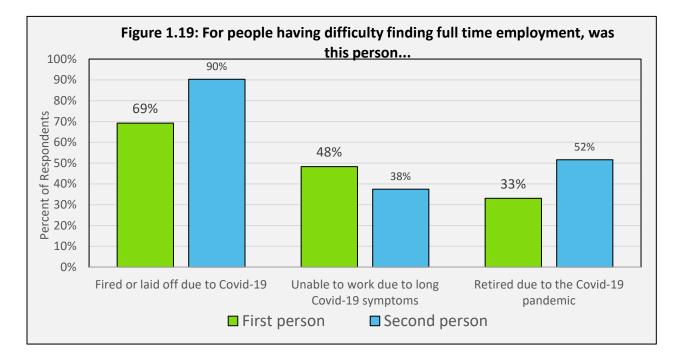
For those who are unemployed, 40% (n=23) are currently looking for work and 60% (n=34) are not looking for work. The survey asked those who are not currently looking for work (n=32) when they intend to begin looking for work and 69% (n=22) do not intend to look for work, 25% (n=8) will do so when the pandemic is over and 6% (n=2) will look for work when they are healthy.

The majority of those who were unemployed were female at 66% (n=38) which mirrors the national trend. The age characteristics of those who were unemployed fell primarily between 30 and 65 years old with 35% (n=20) being 45 to 64 years old and 29% (n=17) being 30 to 44 years old. A smaller percentage, 14% (n=8) were in the 18- to 29-year-old category.

The survey next asked questions to better understand if individuals in respondent households were having difficulty finding or keeping employment and if so why. Of 643 respondents, 19% (n=122) stated someone in their household was having difficulty finding full-time employment. Of the 120 who replied to the follow-up question, 69% (n=83) reported 1 person in the household is having difficulty finding full-time employment and 31% (n=67) stated 2 or more people are having difficulty.

For the first person in a household having trouble finding employment (n=120), 69% (n=83) of respondents said this person was laid off due to COVID-19, 48% (n=57) reported this person was unable to work due to long COVID-19, and 33% (n=39) reported that this person retired due to the pandemic. For the second person in a household having trouble finding employment (n=32), 90% (n=28) of respondents said this person was laid off due to COVID-19, 38% (n=12) reported this person was unable to work due long COVID-19, and 52% (n=16) reported that this person retired due to the pandemic.





Respondents were then asked if they believed for that the difficulty for individuals in their household finding work was due to the COVID-19 pandemic. For the first-person having difficulty, 68% (n=82) said it was due to the pandemic and 88% (n=28) attributed the difficulty to the pandemic.

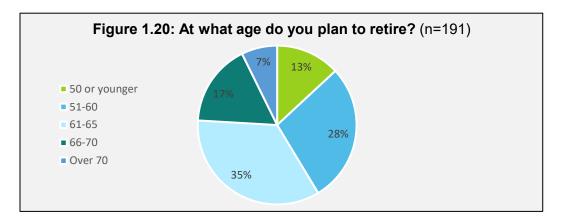
All respondents were asked if anyone in the household lost their job in the past 12 months. Of 642 respondents, 19% (n=119) said someone in their household lost their job. Of this group, 80% (n=94) said one person lost their job and 20% (n=24) said two or more people lost their job. For the first person who lost their job 48% (n=56) were male and 51% (n=60) were female and 46% (n=54) were between the ages of 25 and 34 years old. For the second person who lost their job 63% (n=15) were male and 38% (n=9) were female and 54% (n=13) were between the ages of 25 and 34 years old.

For the first person in a household who lost their job in the past 12 months (n=88), 80% (n=71) of respondents said this person was fired or laid off due to COVID-19, 60% (n=50) reported this person was unable to work due long COVID-19, and 37% (n=31) reported that this person retired due to the pandemic. For the second person in a household who lost their job in the past 12 months (n=24), 88% (n=21) of respondents said this person was laid off due to COVID-19, 70% (n=16) reported this person was unable to work due long COVID-19, and 40% (n=10) reported that this person retired due to the pandemic.

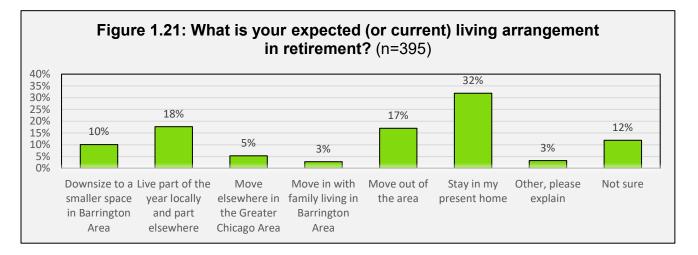
Respondents were asked about their retirement plans and of the 458 who responded 49% (n=225) plan to retire. Those who plant to retire were asked at what age they plan to retire. Of the 191 who replied, 35% (n=66) plan to retire between 61 and 65 years old, Page | 28



28% (n=54) plan to retire between 51 and 60 years old, and 17% (n=32) plan to retire between 66 and 70 years old (Figure 1.20).



Of the 395 who reported their expected (or current) retirement living arrangement, 32% (n=126) plan to stay in their present home, 18% (n=70) intend to live part of the year locally and part of the year elsewhere, and 17% (n=67) plan to move out of the area (Figure 1.21).



Of the 395 who reported what best describes what they intend to do in retirement, 73% (n=288) will do leisure activities, 72% (n=285) will travel, 67% (n=265) will volunteer, 29% (n=114) will take courses and 24% (n=96) will work part-time.

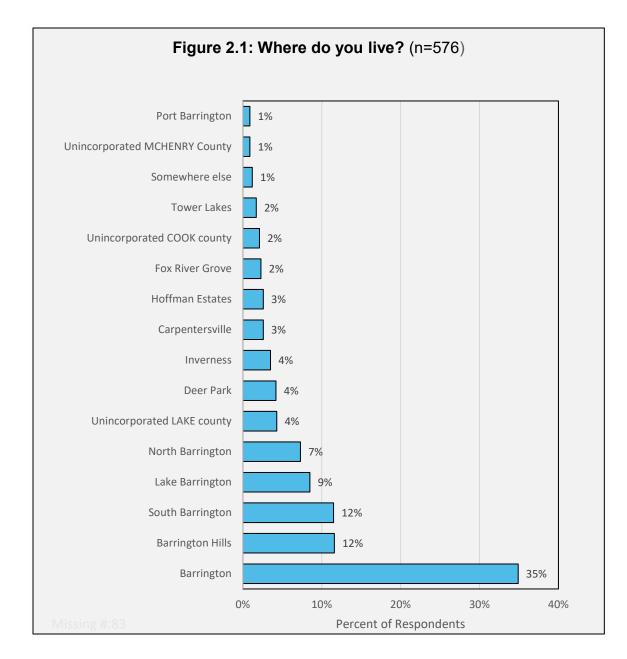


2. Community

This section of the report refers to the first part of *Section IX: Household Characteristics,* questions 9.1 and 9.2 in the survey. This section's survey questions focused where and how long respondents have lived in Barrington. This refers specifically to those questions respondents were asked questions regarding location of residence.

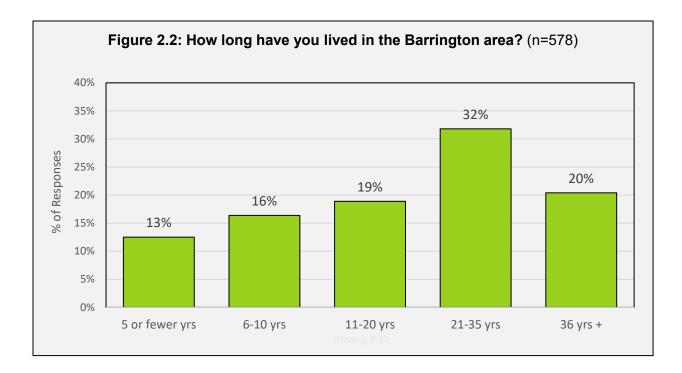
More survey respondents reported living in Barrington than in any other area. Over one-third (35%, n=201) reported living in Barrington. Barrington Hills (12%, n=67) and South Barrington (12%, n=66) were the next top places of residence. Roughly four in ten respondents live in other surveyed areas (Figure 2.1).





Survey respondents were more likely to be long-term Barrington area residents, with 52% (n=302) of respondents having lived in the Barrington area for 21 years or more (Figure 2.2).





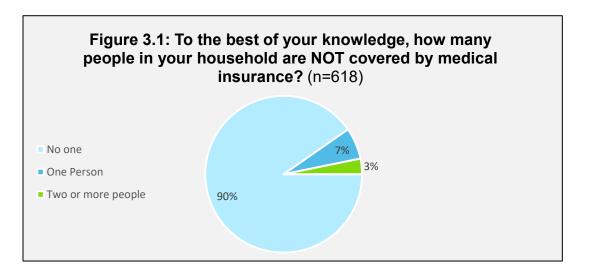
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3. Overall Health

A: General Health

This section of the report refers to *Section V: Health Care*, questions 5.1 to 5.5 in the survey. The survey questions in this section are focused on health insurance and health care for the household. Respondents were asked about the number of people in the household NOT covered by health insurance and the ages of those people not covered by medical insurance. Respondents were then asked for the reasons why some members in the household were currently uninsured.

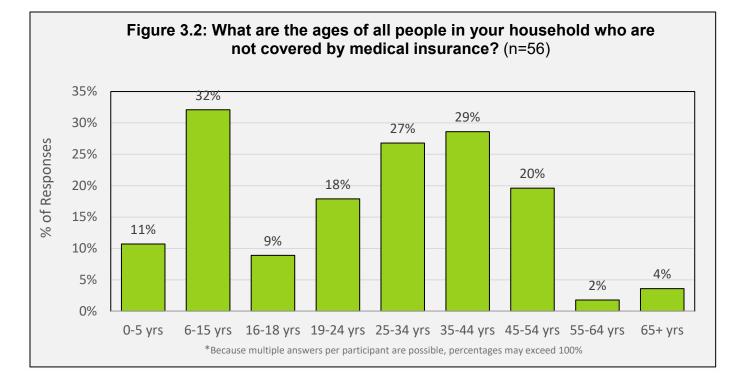
Ninety percent (90%, n=558) of respondents said everyone in their household had medical insurance. Seven percent (7%, n=40) of respondents said at least one household member was not covered by medical insurance and 3% (n=20) of households had two or more people not covered by medical insurance (Figure 3.1).



Of the 56 respondents who provided the age of individuals in the household who did not have medical insurance, 32% (n=18) listed 6-15 years as the age of individuals not covered by insurance in their household with an additional 29% (n=16) listing 35-44 years old as the age of those without insurance (Figure 3.2).

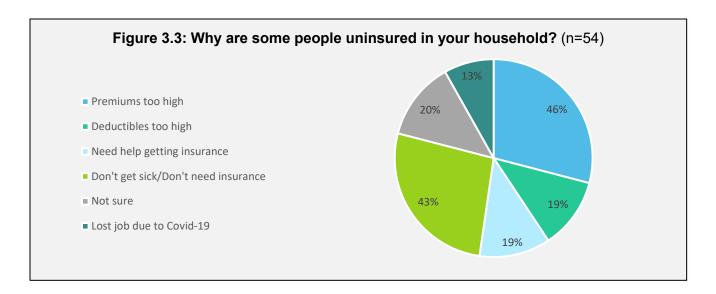
Approximately one fourth (27%, n=15) of respondents listed 25-34 years old as the age of individuals not covered by medical insurance.





For the 54 respondents who responded to the question about the reasons why someone in their household did not have medical insurance, the two most reported reasons were 'premiums too high' (46%, n=25) and 'don't get sick often/don't need insurance' (43%, n=23). One fifth of (20%, n=11) of respondents did not know why an individual in their household did not have medical insurance. For both responses of 'deductibles too high' and 'need help getting medical insurance', 19% of respondents chose these responses. Thirteen percent (13%, n=7) of respondents stated that individuals did not have medical insurance because of the loss of a job due to COVID-19 (Figure 3.3).

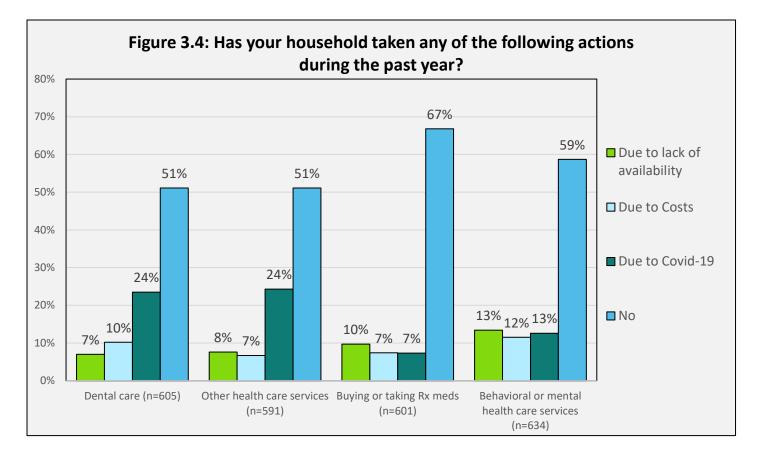




Respondents were asked about health services that were delayed in the household in the past year and whether this delay was due to cost, lack of availability, or COVID-19. The services that were potentially delayed included behavioral or mental health care, buying or taking prescription medications, dental care or other health services.

Respondents reported that lack of availability (13% n=88), COVID-19 (13%, n=83) and cost (12%, n=76) were factors in delaying care for behavioral and mental health. Similarly factors that influenced buying or delaying taking prescription medications included lack of availability (10%, n=64), cost (7%, n=49) and COVID-19 (7%, n=48). COVID-19 was reported as the reason for delaying both dental care (24%, n=155) and for delaying other health care services (24%, n=160). Cost delayed dental care by 10% (n=67) of respondents and other health care services by 7% (n=44) of respondents. Lack of availability delayed other health care services by 8% (n=50) of respondents while it delayed dental care by 7% (n=46) of respondents (Figure 3.4)





The Healthier Barrington Coalition was interested in learning where respondents looked for information regarding supportive services and programming. Nine choices plus a write-in option were given to respondents when asking where they are <u>most</u> likely to go for help if someone in their household needs supportive services or programming.

Following on the trend from 2014 and 2017, for the 607 respondents in 2022 who responded to this question, the 'internet' is listed by 29% (n=178) of respondents as the <u>most</u> likely place to look for help if someone in their household needs information regarding supportive services and programming. 'Friends and Family' was listed by 27% (n=163) of respondents and 'Physician' was listed by 15% (n=92) of respondents as the <u>most</u> likely place to look for help. Other places to go for help included local agencies, social worker, church, library, phone book all at less than 10% each.

The trends of where people are <u>most</u> likely to go to for information is holding steady across the last three iterations of the study with the internet being the top item. The internet was only reported by 29% of respondents this year but had been reported by 47% of respondents in 2014. In 2017, physicians were looked to by only 5% of respondents, but this year 15% (n=92) of respondents looked to physicians (Figure 3.5).

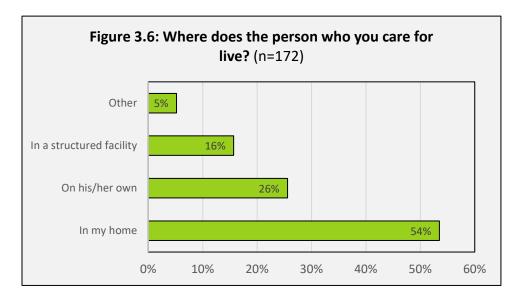




B: Support for Caregivers

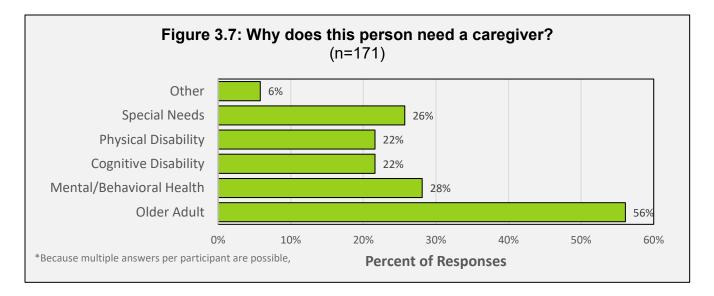
In this section, the report focuses on *Section VI: Support for Caregivers*, questions 6.1 - 6.6, of the survey. This section of the survey tried to understand the needs of those providing care to others in the Barrington area. Asked if they are a 'caregiver for a spouse, parent, other adult, or a child with special needs', 29% of 613 respondents said yes.

Of the172 respondents who answered this question, 54% (n=92) are caring for this person in their (respondents') home, 26% (n=44) were caring for an individual who is living on their own, 16% (n=27) were caring for individuals in a structured facility and 5% (n=9) were caring for someone who was living somewhere else (Figure 3.6).



When asked 'why does this person need a caregiver', respondents reported 56% (n=96) were an older adult, 28% (n=48) had a mental or behavioral health issue, 26% (n=44) had special needs, 22% (n=37) had a cognitive disability, 22% (n=37) had a physical disability and 6% (n=10) listed another reason for needing a caregiver. In the 'other' category, memory issues and age were the most common themes written in by respondents (Figure 3.7).

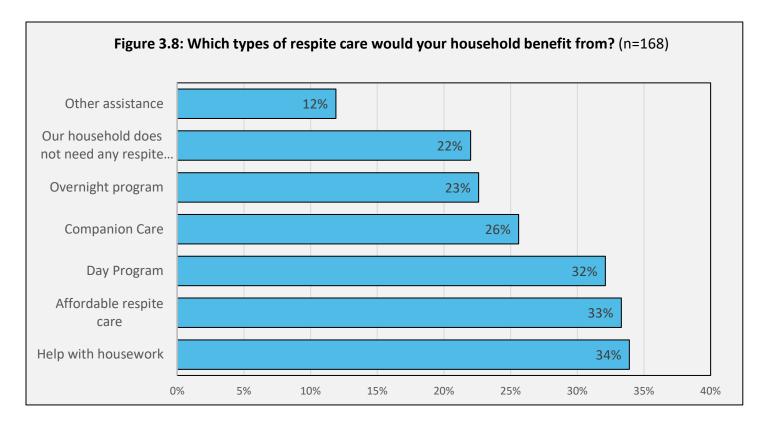




New to the survey this year, respondents were asked 'if you are unable to provide the assistance this person needs, is there someone else who would do the things you do?' Thirty-seven percent (37%) of 149 respondents said there was no one who could step in if they were unable to provide services.

Respondents who were providing caregiving to someone were asked 'which types of respite care would your household benefit from' and to check all options that applied to their household (Figure 3.8). A total of 168 respondents answered this question and 'help with housework' was chosen the most by 34% (n=57) of these respondents. It was followed closely by 'affordable respite care' by 33% (n=56) of respondents and 'day program for the person we care for' by 32% (n=54) of respondents. Nearly a quarter of respondents need 'companion care' (26%, n=43) or 'overnight program for the person we care for' (23%, n=38). Twenty-two percent (22%, n=37) of households providing caregiver help stated that their household does not need any respite care assistance.

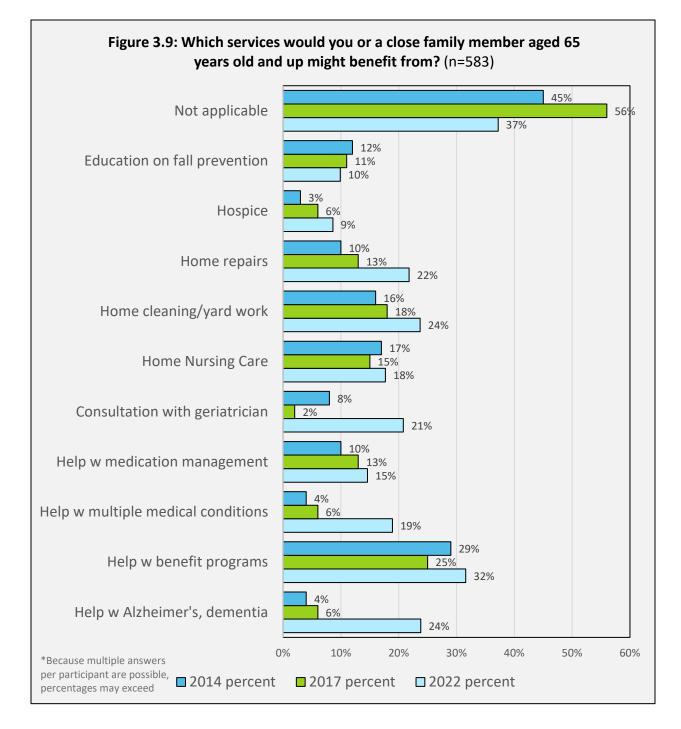




Twelve percent (12%, n=20) of households providing caregiver services stated that they needed some other type of respite assistance. The most common other reason needed for respite assistance was transportation.

All respondents were asked to report what services they or a close family member 65 years or older might benefit from (Figure 3.9). Of the 583 respondents who answered this question, 37% (n=217) said this question was 'not applicable' to them. Thirty-two percent (32%, n=184) selected the need for 'assistance with benefit programs (e.g., Medicare, Medicaid, etc.)'. Nearly a quarter (24%, n=139) of respondents selected the need for 'assistance coping with Alzheimer's, dementia and cognitive impairment' and 24% (n=138) said they would benefit from 'home cleaning/yard work'. Approximately one-fifth of respondents would benefit from 'help with home repairs' (22%, n=127) and 21% (n=121) would benefit from consultation with geriatrician'. Nineteen percent (19%, n=110) would benefit from 'assistance with management of multiple medical conditions' and 18% (n=103) need 'home nursing care'. Education on fall prevention at 10% (n=58) and 'hospice' at 9% (n=50) rounded out the list of services that families or a close family 65 years or older could benefit from.

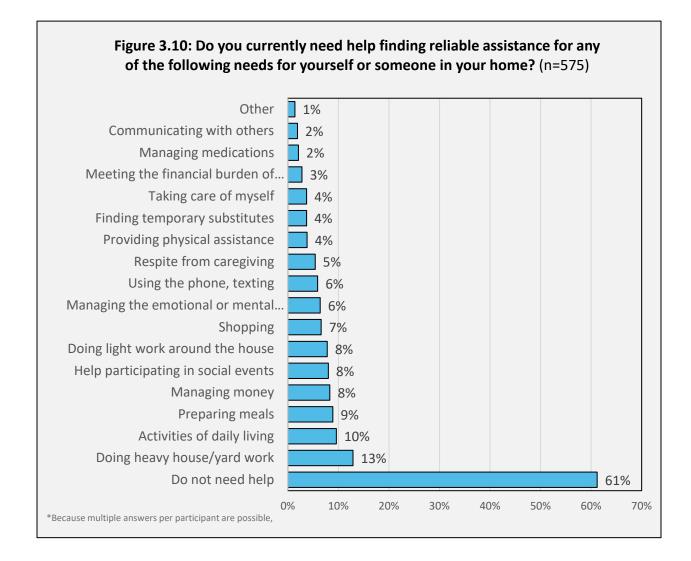




In the last question of this caregiver services section, respondents were asked if they needed help finding reliable assistance for themselves or someone in their home from a list of 16 responses that included 'do not need help' or an 'other' category (Figure 3.10). This question was completed by 575 respondents and 61% (n=352) selected that they 'do not need help'. 'Doing heavy work around the house like scrubbing floors, washing windows, and doing heavy yard work' was chosen by 13% (n=74) of respondents. Ten



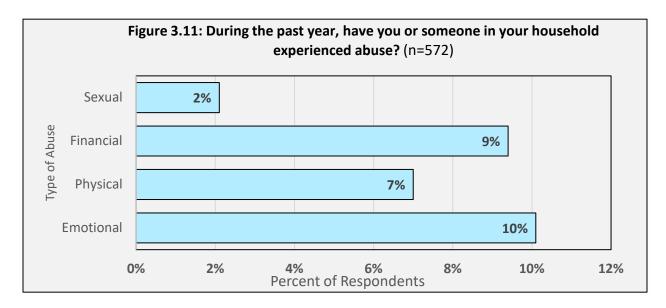
percent (n=55) of respondents said they need help finding reliable assistance for 'activities of daily living (bathing, showering, dressing, eating, getting in and out of bed or chairs, using the toilet)'. Assistance with 'preparing meals is needed by 9% (n=51) of respondents while 8% of respondents need help finding reliable assistance for each of these three categories 'managing money, such as keeping track of expenses or paying bills' (n=48), 'support so that person can participate in social events' (n=46), and 'doing light work around the house like doing dishes, straightening up, light cleaning, or taking out the trash' (n=45).



C: Behavioral & Mental Health

This section presents data from *Section VII: Behavioral and Mental* Health, questions 7.1 to 7.15 from the survey. In this section, the survey was looking to understand how Barrington area residents are coping with regards to behavioral and mental health issues.

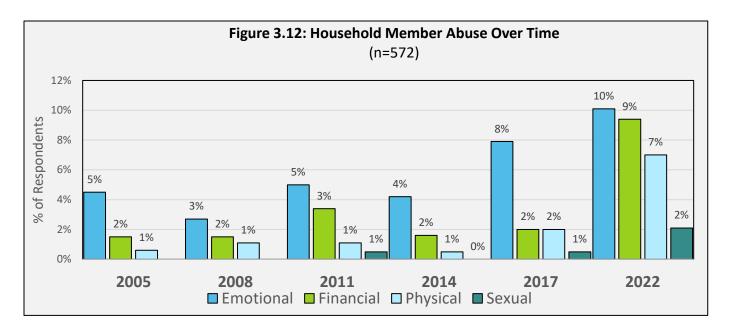
Since 2005, the survey asked respondents to report whether anyone in their household experienced any of four types of abusive behaviors - emotional, financial, physical, or sexual abuse. In 2022, 81% (n=46) percent of 572 respondents who completed this question stated that nobody in their household had experienced any emotional, financial, physical, or sexual abuse in the past year. For respondents who did state someone in their household had experienced abuse in the past year, 10% (n=58) stated emotional abuse, 9% (n=54) financial abuse, 7% (n=40) physical abuse and 2% (n=12) stated someone had experienced sexual abuse (Figure 3.11).



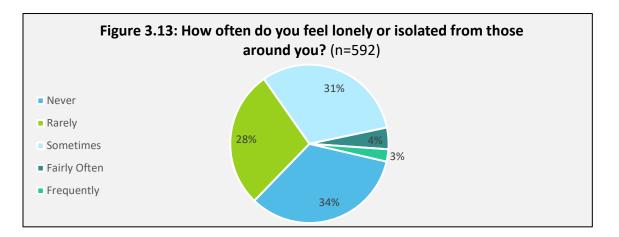
When compared over time, the trend shows an increase in the incidence of reported abuse in every category. Financial, physical, and sexual abuse all saw a steeper rise from 2017 to 2022 and between any previous iterations of the study (Figure 3.12).





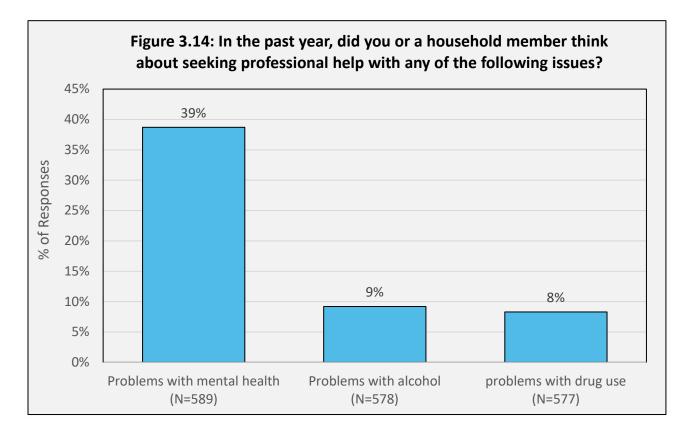


Respondents were asked to reply to a 5-point Likert scale ranging from 'never' to 'frequently' on how often they felt lonely or isolated from those around them. Of the 592 respondents who replied 34% n=199) 'never' felt lonely or isolated from those around them. An additional 28% (n=166) of respondents 'rarely' felt lonely or isolated. Thirty-one percent (31%, n=186) of respondents 'sometimes' felt lonely or isolated from those around them with 4% (n=26) experiencing this 'fairly often' and 3% (n=15) experiencing it 'frequently' (Figure 3.13).



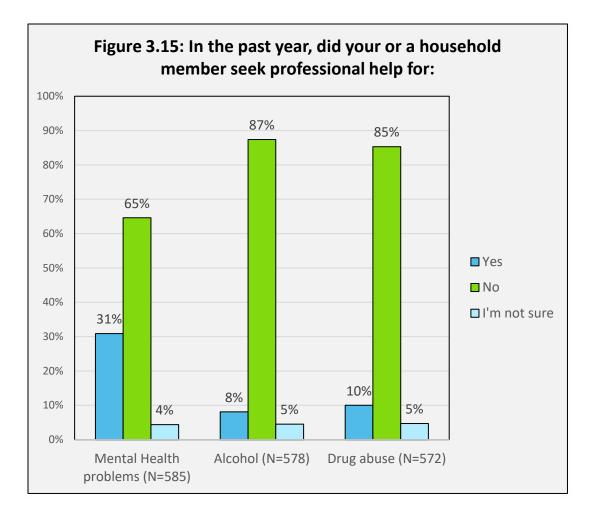
In 2022, 39% (n=228) of respondents reported that they or a household member thought about seeking professional help for behavioral or mental health problems and 6% of respondents weren't sure if someone in their household thought about seeking help. Nine percent (9%, n=53) of respondents reported that someone in their household thought about seeking professional help for alcohol issues with 4% (n=24) not sure if someone thought about this. Eight percent (8%, n=48) thought about seeking

professional help for drug use with 5% (n=28) not sure if someone thought about doing this (Figure 3.14)



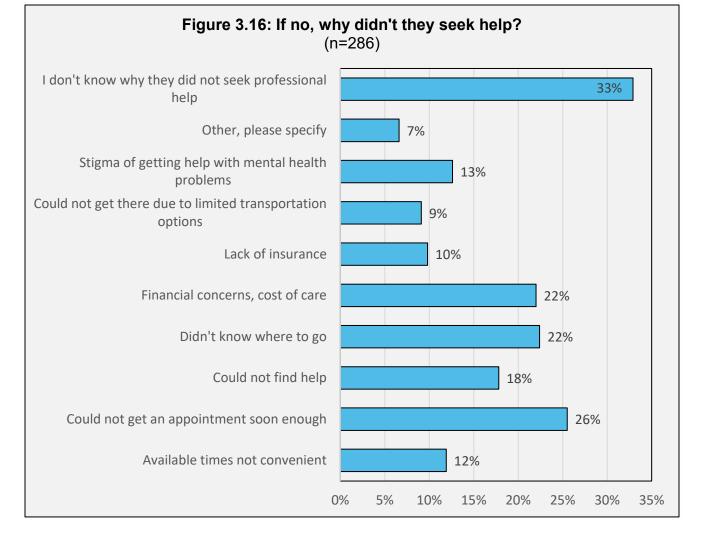
Respondents were then asked if they or a household member sought professional help for any of these issues. Thirty-one percent (31%, n=181) of respondents sought help for problems with mental health. Eight percent (8%, n=47) sought help for problems with alcohol and 10% (n=57) sought help for problems with drug use. For each of these issues, 4%-5% (n=26-27) of respondents were not sure if someone in the household had sought professional help (Figure 3.15).

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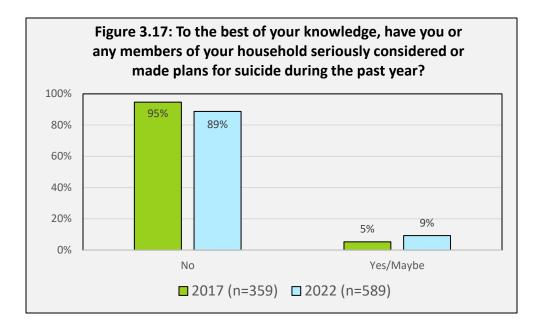
If the respondent replied that neither they nor anyone in their household had sought help, they were asked why they didn't seek help. Of 286 respondents to this question, 33% (n=94) of respondents did not know why the individual needing help did not seek it. The most common reasons for not seeking help included not being able to get an appointment soon enough (26%, n=73), cost (22%, n=64) and didn't know where to go (22%, n=64). Eighteen percent (18%, n=51) could not find help and 13% (n=36) were concerned with the 'stigma of getting help with mental health problems' (Figure 3.16).





Respondents were also asked whether they or any member of their household had seriously considered or made plans for suicide in the past year. Respondents were asked for the age of anyone who considered suicide. Of the 589 respondents who answered this question in 2022, 9% (n=55) said yes or maybe they or someone in their household considering suicide in the past year. This number is nearly double the 5% who responded yes or maybe to this same question in 2017 (Figure 3.17).

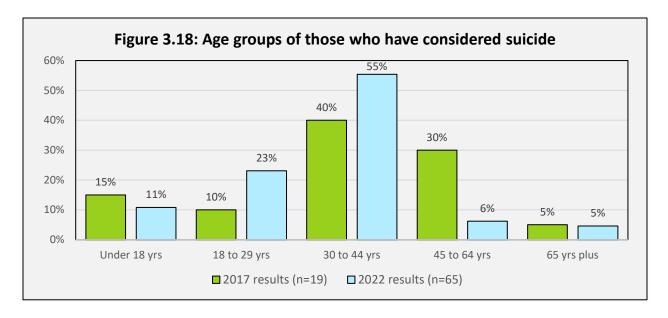




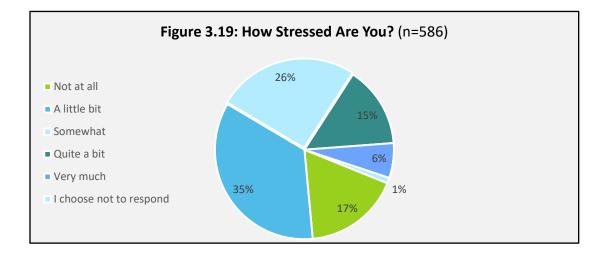
Fifty-five respondents stated someone in their household had considered suicide in 2022. In 2022 and in 2017, the most frequently reported age of individuals who had considered suicide was 30 to 44 years old, but this group has grown in 2022. In 2022, this age group represented 55% (n=36) of those who have considered suicide and was only 40% in 2017.

In 2017, the next most common ages reported for considering suicide were 45- to 64year-olds at 30%, but in 2022 this group only represented 6% (n=4). In In 2022, the next most common age mentioned as considering suicide was 18- to 29-year-olds at 23% (n=15), a group that was only 10% in 2017. In 2017, the under 18 group represented 15% of those who had considered suicide but are down to 10% (n=15) in 2022 (Figure 3.18).

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The following questions were new in this 2022 survey. Stress is a direct contributor to health outcomes. Respondents were read a statement regarding feelings that could be considered stress – tense, nervous, anxious, or can't sleep at night - and asked how often they experience these feelings from not at all to very much. They were also given the option to choose not to answer the question. Of the 586 who responded, 6% (n=37) of respondents replied 'very much' to how stressed they are. The majority of respondents, 35% (n=205), said they were stressed 'a little bit' and an additional 26% (n=150) said 'somewhat'. 'Not at all' stressed was reported by 17% (N=102) of respondents and 15% (n=86) reported 'quite a bit' (Figure 3.19).

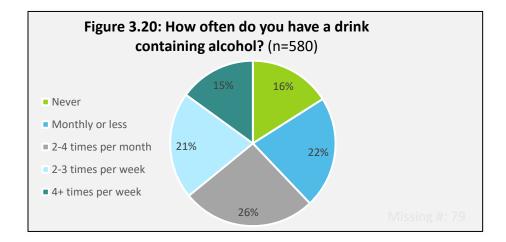


On a 5-point scale from never to 4 or more times per week, respondents were asked how often they have a drink containing alcohol. The survey also tried to assess if COVID-19 had affected drinking habits. Respondents were asked if they have increased

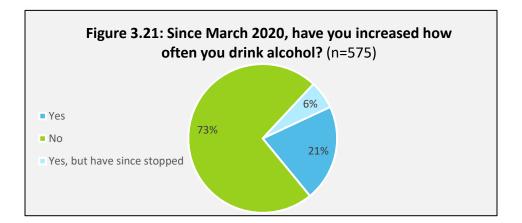


how often they drink or how much they drink since March of 2020. Responses included yes, no or "was drinking more often but have not stopped drinking more often" or "did increase the amount of alcohol I was drinking but have now stopped."

Of the 580 respondents who replied to this question, 16% (n=93) said they 'never' have a drink containing alcohol and 22% (n=127) stated they have a drink 'monthly or less'. The majority of respondents, 26% (n=152), stated they have a drink '2-4 times per month', and 21% (n=121) said they have a drink '2-3 times per week'. Fifteen percent (15%, n=87) of respondents have a drink '4+ times per week' (Figure 3.20).

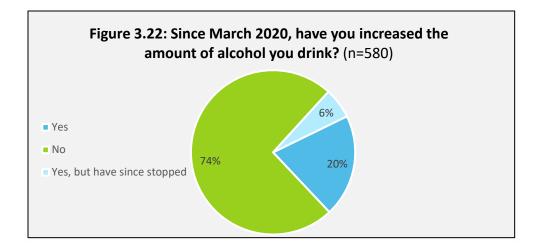


When asked if they increased how often they drank alcohol since the pandemic began, of 575 respondents, 21% (n=121) said 'yes' they did and 6% (n=35) they increased how often they drink but have since stopped (Figure 3.21).



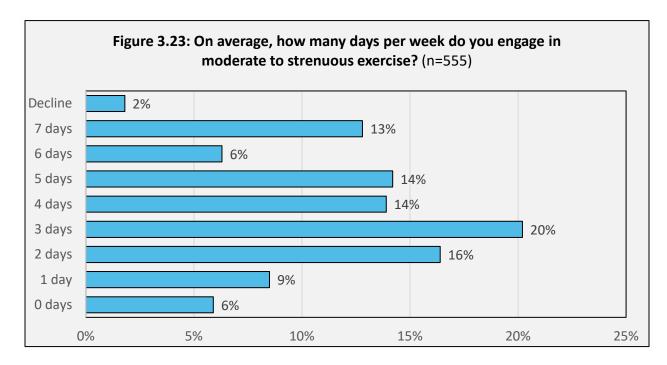
When asked if they increased how much alcohol they drink since the pandemic began, of 580 respondents, 20% (n=117) said 'yes' they did and 6% (n=35) they increased the amount of alcohol but have since stopped (Figure 3.22).



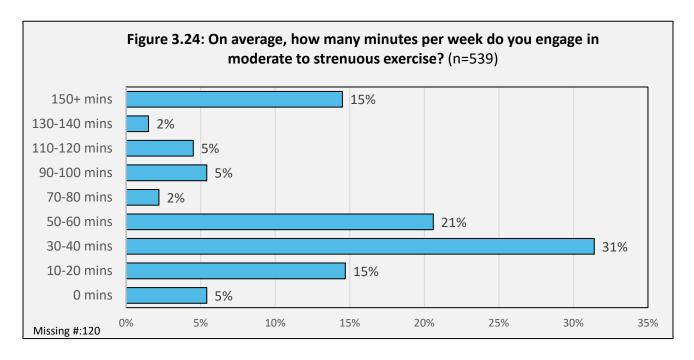


This section of the report refers to *Section X: Social Determinants of Health,* questions 10.1 to 10.5 in the survey. This section's survey questions focused on the social factors that have an influence on overall health.

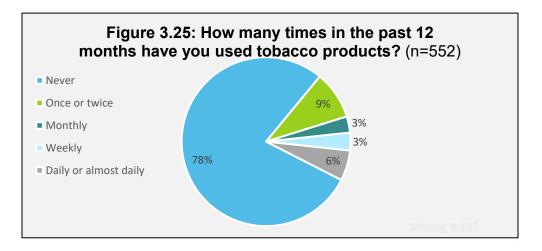
Respondents were first asked about their activity levels including how many days per week they engaged in moderate to strenuous physical activity and how many minutes per week they did this. Of the 555 respondents who responded to how many days they engaged in moderate to strenuous exercise, 20% (n=112) did so 3 days per week, 16% (n=91) did so 2 days per week and 14% each did so 4 days per week (n=77) and 5 days per week (n=79). Thirty-five (6%) stated that they do not engage in moderate to strenuous activity on any days and 2% (10) declined to answer (Figure 3.23).



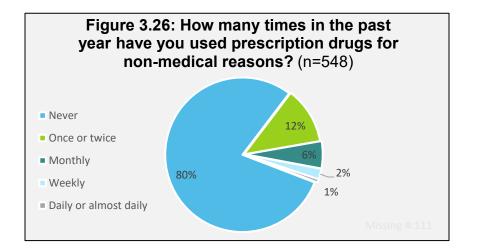
Respondents were also asked how many minutes per week do they engage in moderate to strenuous exercise per of week. Of the 539 respondents who replied to this question, 31% (n=169) reported they did so for 30-40 minutes per week. Twenty-one percent (n=111) engaged in this level of activity for 50-60 minutes per week and 15% each engaged in this level of activity for 10-20 minutes (n=79) and 150+ minutes (n=78) per week (Figure 3.24).



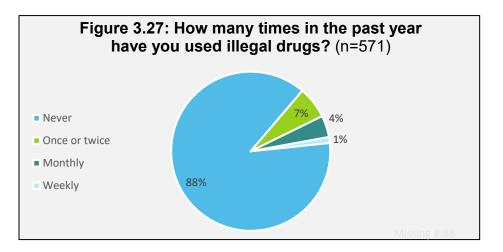
The survey asked respondents to report their use of tobacco products over the last 12 months. Of the 552 respondents who answered this question, 78% (n=433) have not used any tobacco products over the last 12 months. Daily or almost daily use was reported by 6% (n=32) of respondents with 3% each reporting weekly (n=19) or monthly (n=17) tobacco use (Figure 3.25).



The use of prescription drugs for non-medical reasons can be a precursor to heavier illicit drug use. Respondents n=548) were asked how many times in the past year have they used prescription drugs for non-medical reasons and 80% (n=436) reported 'never'. Twelve percent (n=65) of respondents stated that they had used prescription drugs for non-medical reasons 'once or twice' in the past year, 6% (n=31) do this monthly, and 2% (n=12) do so weekly (Figure 3.26).



Illegal drug use over the past year was the subject of the next question. Of 571 respondents to this question, 88% (n=502) stated they 'never' used illegal drugs in the past year, 7% (n=37) reported 'once or twice" use, and 4% (n=25) reported monthly use of illegal drugs in the past year.



4. Health Literacy

This section refers to survey *Section 12: Health Literacy & Technology,* questions 12.1 - 12.3 in the survey. This section of the survey gauged the ability of Barrington Area residents to access and understand health-related materials. Each question was asked on a 5-point Likert scale from 'never' to 'always'.

Respondents were asked how often they have someone help them read health-related materials. More than half of 551 respondents, 56%, say they never have someone help them, with an additional 12% 'rarely' having help, and 16% of respondents 'always' or 'very often' have someone help them process health materials. Four percent (4%) always have someone help them read health-related materials.

When asked how often they have a problem understanding what is told to them about their medical problems, the trends from the previous question continued. Seventy-three (73%) of 551 respondents 'rarely' or 'never' have trouble understanding what is told to them about their medical problems. Only a small portion (10%) of respondents 'always' or 'very often' have difficulty understanding what is told to them about their medical problems.

Finally, respondents were asked how often they struggled to understand educational materials about COVID-19. Responses to this question fell more neutral than the previous questions. While 47% of 564 respondent's answered 'never' and another 19% answered rarely, but 21% of respondents selected that they 'sometimes' struggled to understand COVID-19 educational material.



5. Youth

This section of the report refers to *Section IV: Our* Youth, questions 4.1 to 4.4 of the survey. All respondents were asked if anyone in their household was younger than 18 years old. Of the 618 respondents who answered this question, 42% (n=259) had a household member younger than 18 years old. It is possible that more than one household member may have completed the survey thus issues recognized by more than one adult in the household may be over-represented in the following results.

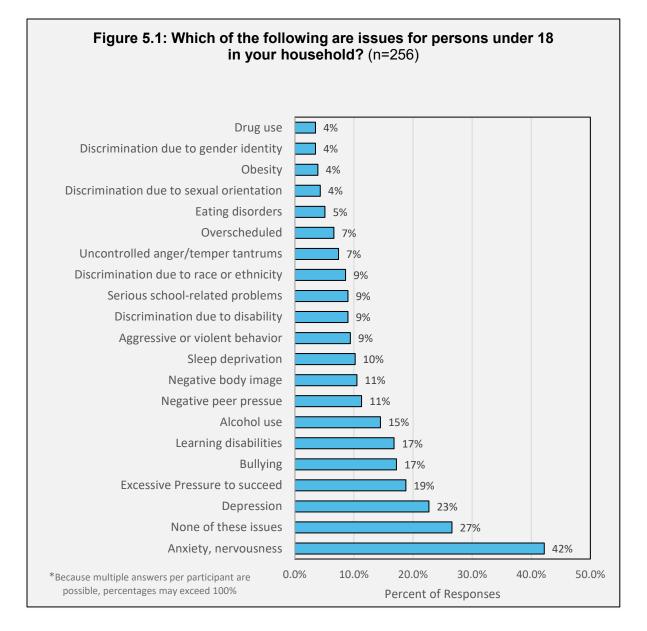
Respondents who indicated that they had anyone younger than 18 in their household were asked to select issues faced by youth that applied to their household. Of the 259 respondents who stated that someone under 18 lived in their household, 40% of respondents listed only one issue for anyone under 18 in their household. Two issues were listed by 15% of respondents and three issues were listed by 22% of respondents. The most issues chosen by any single respondent was ten and 1% of respondents chose this many issues.

Twenty-six percent (27%, n=68) of respondents stated that none of these issues affected anyone in their household. 'Anxiety, nervousness' was the leading issue reported by respondents with 42% (n=108) stating that a household member under 18 in the house was having issues with it. The next most frequently reported issue was depression with 23% (n=58) of respondents choosing this issue. An 'excessive pressure to succeed' was reported as an issue by 19% (n=48) of respondents while 'bullying' and 'learning disabilities' were reported by 17% (n=43) of respondents with a household member under 18. Alcohol use by youth under 18 was reported by 15% (n=37) of respondents.

Nearly 1 out of 10 respondents are reporting that someone in their household is experiencing the following issues: 'negative peer pressure' (11%), 'negative body image' (11%), 'sleep deprivation' (10%), 'serious school related problems' (9%), 'discrimination due to race or ethnicity' (9%), 'discrimination due to disability' (9%) and 'aggressive or violent behavior' (9%). Additional category responses are found in the Figure 5.1 below.

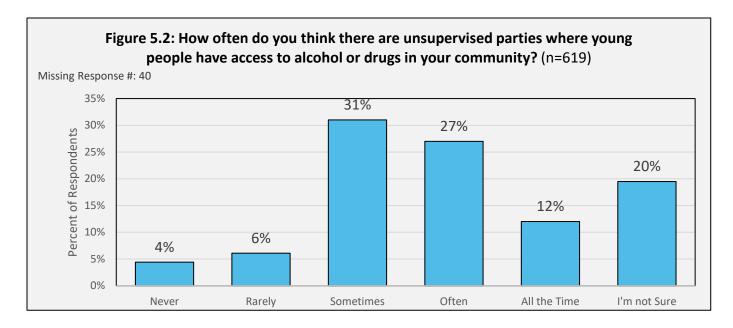




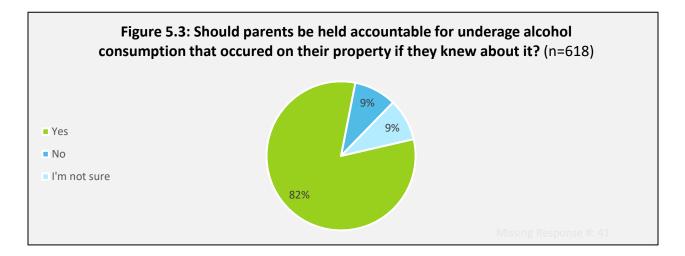


Respondents were also asked about under-age drinking in the Barrington area. Thirtyone percent (31%, n=192) of respondents believe 'unsupervised parties where young people have access to alcohol or drugs in their community' occur 'sometimes'. Twentyseven percent (n=167) of respondents believe these parties happen 'often' and 12% (n=74) believe they happen 'all the time'. Only 10% (n=65) of respondents believe that unsupervised parties occur 'never' or 'rarely' (Figure 5.2).





Eighty-two percent (82%, n=505) of respondents believe 'parents should be held accountable for any underage alcohol consumption that occurred on their property if they knew about it in advance or while it happened'.



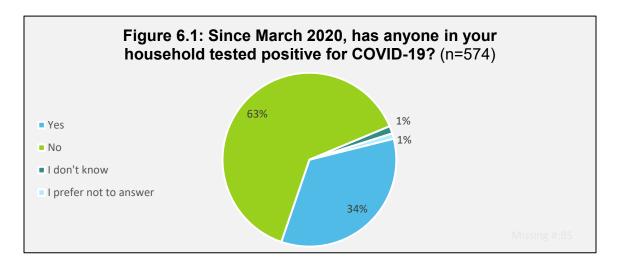
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6. Impact of COVID-19

This section refers to survey *Section 11: Impact of COVID*-19, questions 11.1 – 11.10 in the survey. This section of the survey examined the impact of the COVID-19 pandemic on residents of the Barrington area. March 2020 was selected as the reference point for the beginning of the pandemic in the United States. This date was chosen as the World Health Organization declared Sars-COVID-19 a pandemic on March 11, 2020¹. Response options for questions in this section included, 'Yes', 'No', 'I don't know', or 'I prefer not to answer'.

Respondents were asked to think back to March 2020 and respond if anyone in their household had tested positive for COVID-19. For those who answered 'yes', the follow-up question asked how many people in their household ever tested positive for COVID-19 since March 2020.

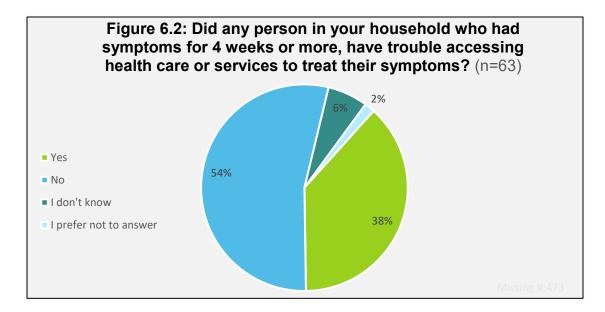
One third (34%, n=196) of respondents stated that someone in their household had tested positive for COVID-19 since March 2020. Sixty-three percent (63%, n=364) of respondents reported no one in their household had tested positive since March of 2020 (Figure 6.1).



If respondents reported that someone in the household tested positive for COVID-19, the follow-up question asked was if anyone had symptoms that lasted 4 weeks or more. Thirty-two percent (32%) of 193 respondents stated that someone in their household who tested positive for COVID-19 had symptoms that lasted 4 weeks or more.

The survey then asked if the individual who had COVID-19 symptoms that lasted 4 weeks or more had any trouble accessing medical care to which 38% of the 63 respondents replied 'yes', 6% didn't know and 2% chose 'prefer not to answer' (Figure 6.2).



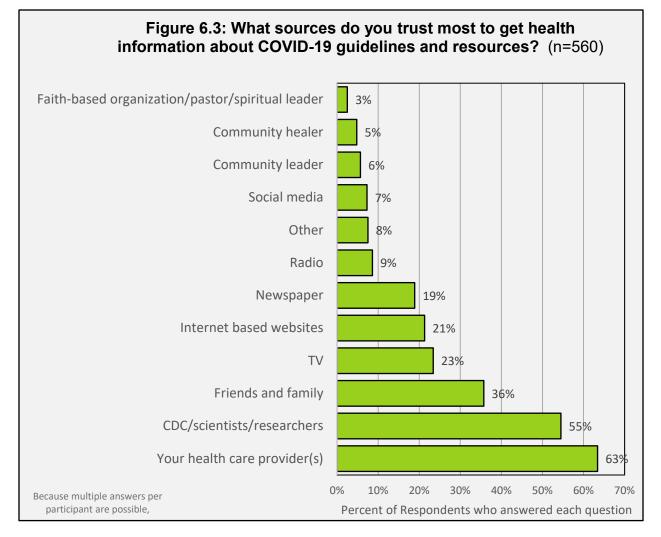


If they replied yes, respondents were asked to qualitatively describe what health care or services were needed. Respondents who selected 'other' wrote that the health care services that they had trouble accessing were seeing a physician, vaccines, and access to medications.

Sources of Information

Respondents were asked what sources they 'trusted most to get health information about COVID-19 guidelines and resources, such as where to get tested, where to get a vaccine, how to get a vaccine, where to go for treatment, etc.?' They were presented with a list to and asked to 'select ALL that apply' or to specify any not listed. More than half of the 560 respondents or 63% selected their 'health care provider' as someone they trust the most and 55% of respondents trust CDC/scientists/researchers the most. 'Friends and family' received the third most responses at 36% (Figure 6.3).





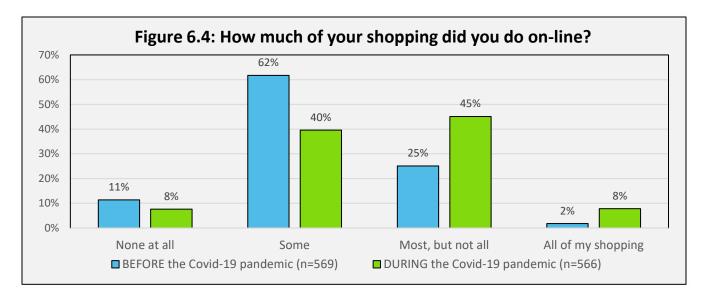
Shopping Practices

Respondents were also asked how COVID-19 affected respondents' ability to complete shopping needs. Respondents were asked, 'BEFORE the COVID-19 pandemic, how much of your shopping, excluding groceries, did you do online,' and then 'DURING the COVID-19 pandemic, how much of their shopping, excluding groceries, did you do online'. Response categories included 'none at all', 'some', 'most, but not all' and 'all of my shopping'.

Before the pandemic, 62% of 569 respondents stated that 'some' and 25% of respondents stated that 'most, but not all' of their shopping was done online. Only 2% of respondents stated that all their shopping was done online before the pandemic. During the pandemic, 45% of 566 respondents stated that 'most, but not all' of their shopping was done online and 40% stated 'some'. During the pandemic, 8% of respondents stated that they did 'all of my shopping' online (Figure 6.4).

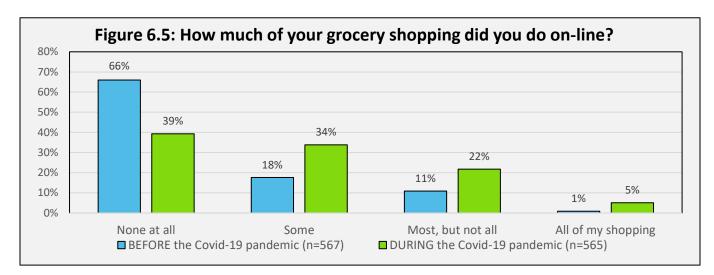






Respondents were then asked these same questions related specifically to their grocery shopping, BEFORE the COVID-19 pandemic, how much of their grocery shopping was done online and then DURING the COVID-19 pandemic, how much of their grocery shopping was done online. Before the pandemic, 66% of 567 respondents stated that 'none' of their grocery shopping was done online, 18% said 'some', 11% stated 'most, but not all' and 1% did 'all' of their grocery shopping online (Figure 6.5).

During the COVID-19 pandemic, these respondents shifted their habits. Respondents (n=565) who stated that 'none at all' of their grocery shopping was done online fell to 39% during the pandemic, the 'some' category rose to 34%. The 'most, but not all' category for online grocery shopping doubled and rose to 22% while the 'all of my shopping' category rose to 5%.



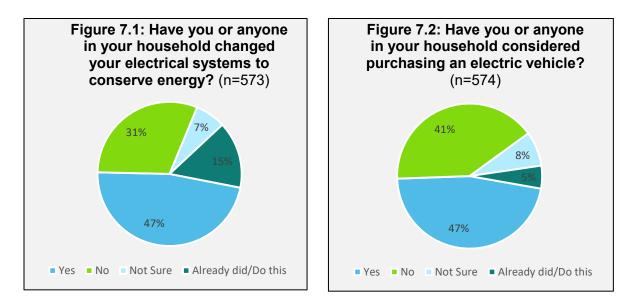


7. Environment

This section refers to survey *Section VIII: Environmental Topics,* questions 8.1 to 8.12 of the survey.

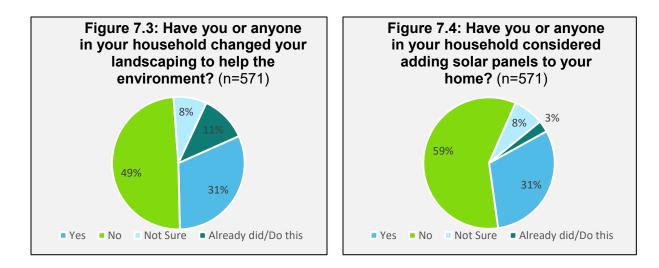
Eco-friendly Lifestyle Changes

Respondents were asked to report whether they had considered making eco-friendly lifestyle changes. The top eco-friendly changes considered by respondents were changes to electrical systems for energy conservation and the purchase of an electric vehicle (Figure 7.1 & 7.2). Nearly half (47%, n=271) of respondents reported having considered changes to electrical systems for the purpose of conserving energy. Nearly half (47%, n=268) of respondents reported considering the purchase of an electric vehicle.

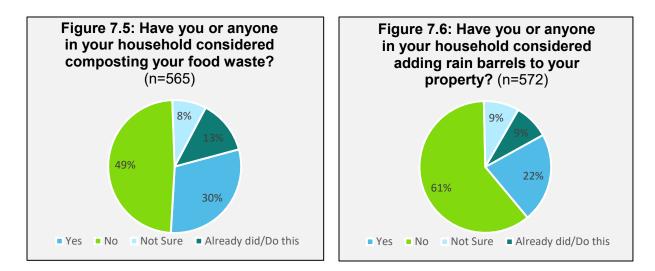


Less than one-third (31%, n=179) of respondents reported having considered making changes to their landscaping to help the environment or adding solar panels to their home (31%, n=176) (Figures 7.3 & 7.4).



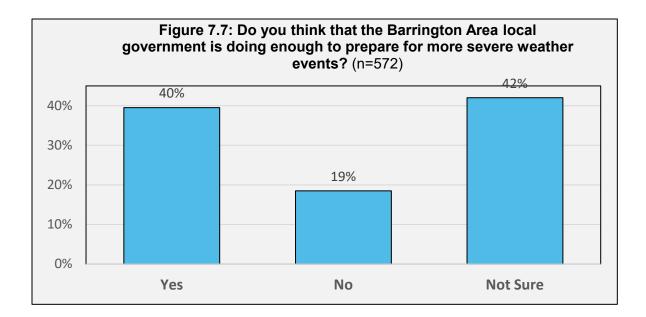


Three in ten respondents (30%, n=170) reported having considered composting food waste (Figure 7.5). The eco-friendly change least likely to be considered by respondents was adding rain barrels to property; less than one-quarter (22%, n=126) of respondents reported having considered this (Figure 7.6).



Severe Weather Event Preparation

In a question related to severe weather event preparation, four in ten (40%, n=226) respondents indicated that they think the Barrington area local government is doing enough to prepare for more severe weather events. A larger proportion (42%, n=240) indicated that they are not sure.



What can the local government do to prepare for severe weather events?

Survey respondents who responded with "No" or "Not sure" were asked to provide written responses on what they would like to see local government do regarding weather preparation.

Top three themes that emerged from the 82 written responses:

- 1) Improved communication/education (25.6%; n=21),
- 2) Improve plowing/snow removal (14.6%; n=12), and
- 3) Improve infrastructure (13.4%; n=11).

Less common themes included:

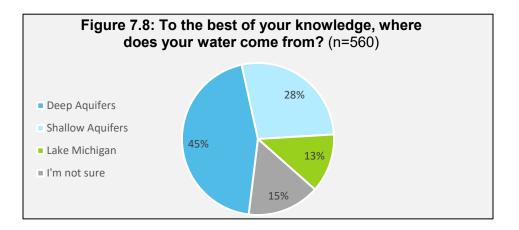
- Provide emergency plans 12.2% (n=10)
- Take climate conscious actions 12.2% (n=10)
- Improve drainage system 12.2% (n=10)
- Establish shelters/shelter locations 6.1% (n=5)
- Mass communication (email/text) 6.1% (n=5)
- Improve tornado siren volume 4.9% (n=4)
- Less salt on roads 2.4% (n=2)

Water Sources

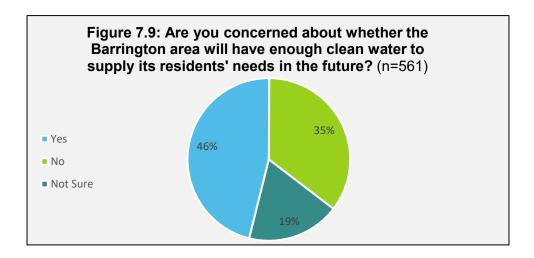
Survey respondents were asked to indicate the source of their water. Over four in ten (45%, n=250) respondents believe that their water comes from deep aquifers. A little more than one-quarter (28%, n=154) incorrectly believe that their water comes from



shallow aquifers and 13% (n=70) of respondents incorrectly believe that their water comes from Lake Michigan (Figure 7.8).



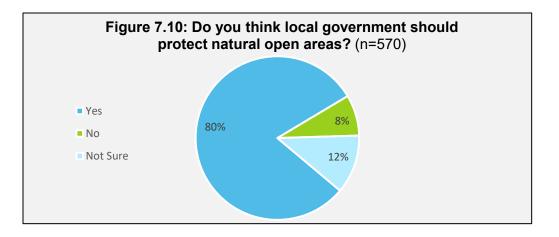
Forty-six percent (46%, n=259) of respondents are concerned about whether the Barrington area will have enough clean water to supply its residents' needs in the future. A little over one-third (35%, n=198) are not concerned and less than one in five (19%, n=104) are reportedly unsure (Figure 7.9).



The majority (80%, n=458) of respondents think that local government should protect natural open areas. Twelve percent (12%, n=66) of respondents are not sure if local government should protect open areas and less than one in ten (8%, n=46) do not think that open areas should be protected (Figure 7.10).









8. Community Recommendations

This section refers to *Section XIII: Healthy Community Recommendations*, q 13.1, of the survey. All respondents were given the opportunity to provide text responses on recommendations that would make the Barrington area a healthier place to live. A complete list of respondents' comments is included in the Appendix.

Presented here is a high-level overview of the comments.

A large proportion of responses focused on the environment and within this group a sub-set were particularly concerned with preserving and expanding the natural spaces within Barrington. Issues around conservation were also frequently mentioned.

"Please encourage open natural spaces. That's something very unique about our area and is an asset."

"Preservation/expansion of natural spaces and resources for us to enjoy them."

"Save the open spaces."

"Remove invasive buckthorn and honeysuckle from all government land and educate residents on the impact on private land. Remove plastics from all wooded areas and prairies. Promote cycling and walking by increasing paths along major roadways."

Tolerance and divisiveness in the community was an issue mentioned by many residents. The comments seem to represent multiple perspectives of not feeling accepted.

"Overall, give people the freedom to live according to their values – especially conservative ones."

"People working together from both sides of political aisle instead of against each other."

"People in Barrington need to learn how to be more accepting of others that are different than them. Barrington has become a place where you need to be a certain race, political party, income bracket, etc. It's a huge problem and pushing people out of the zip code."





COVID-19 precautions were mentioned by many people and responses were almost evenly split between those who wanted more precautions and those who did not support mitigations.

"At home medical care and vaccines and basic testing, such as blood work for those who can't either safely or easily make it to doctors and such."

"Wash hands. If sick stay at home. Be aware of large crowds. Just use common sense."

"The only time we've ever been discriminated against in the Barrington area is due to our kids' COVID-19 vaccination status. That needs to stop."

"Stop mask mandates, stop vaccination campaigns for healthy people, stay out of peoples' private lives and health decisions."

Traffic and train issues were the next most prevalent category which people commented on in this question. Traffic issues focused on congestion, noise, and safety, particularly as it relates to bicycles. Train issues focused on underpasses and the amount of train traffic that traverses the village.

"Put in more bike trails so you could get around town without a car."

"Put underpasses under the tracks on Route 59 and Route 14."

"Solve the traffic issue around the village. That's a big issue."

"Reduce speed limit to 35 on Route 59 and add a noise cancelling wall on I-90, Higgins and 59. Add more trees on Arboretum Blvd and Route 59 near Arboretum Drive. Put a no U-turn at Regency Boulevard and Arboretum Drive."

Finally, residents are looking for the Barrington area to provide more recreation services including bike trails and pickleball courts. A senior center was requested by more than one respondent and better shopping opportunities with the village were desired by residents.





Chapter II: FOCUS GROUPS

The purpose of the Barrington area Focus Groups was to obtain a more in-depth understanding of the experience of Barrington area residents and businesses during a public health pandemic. The COVID-19 pandemic has affected all areas of people's lives and had ripple effects through all aspects of daily living. Four focus groups were planned – one community resident group in English, one community resident group in Spanish, one young adult group and one business leader group.

Methods

University of Illinois College of Medicine Rockford (UICOMR), Division of Health Research and Evaluation (HRE) researchers met with coordinators for the Healthier Barrington Coalition to discuss themes for each focus group. UICOMR researchers then developed a 10-question focus group guide and consent forms for Business Leaders, Community Residents, and Young Adults.

The Community Resident Focus Group Guide and consent were translated into Spanish and then reviewed by a native Spanish speaker. All focus group guides, and consent forms were reviewed and approved by the UICOMR Human Subject Institutional Review Board. The Community Resident and Business Leader focus group guides are in Appendix V and consent forms are included in Appendix VI.

The Young Adult Focus Group was dropped from the study when recruitment issues around timing and availability of young adult residents became too difficult to coordinate within the time frame constraints of the study.

1. Community Resident Focus Groups

Focus Group Guide

As part of the 2021 Healthy Barrington Study, HRE researchers conducted focus groups with community residents to obtain a more in-depth understanding of their perspectives about issues surrounding health within their community. Focus group questions focused on:

- Residents' definitions of health,
- Their perceptions of significant health issues for themselves, for youth and for elderly in the Barrington area,
- The strengths of the Barrington area around health and health resources,
- The impact of COVID-19 on health,
- Sources of health information for residents and
- Gaps in health resources.



In addition, the Healthier Barrington Coalition wanted to understand how the COVID-19 pandemic affected residents health and learn more about resources needed in the community in general and specific to the pandemic.

In this report we try to summarize the themes and sub-themes identified and note contrasts across the two language groups. Where appropriate quotes from the focus groups are included to illustrate residents' voices for readers. Two Barrington Area Community Resident Focus Groups were conducted for this iteration of the Healthier Barrington study; one in English and the other in Spanish.

Focus Group Participants

A total of 8 community residents participated in the English focus group and 8 community residents participated in the Spanish focus group. All participants were provided a \$25 gift card from a Barrington area business as an incentive for participation.

Focus groups were recorded and sent to a transcription service for transcription. The Spanish focus group was transcribed and translated so researchers could identify themes.

Participants were recruited with assistance from the Healthier Barrington Coalition members. All focus group guides and consents were approved by the University of Illinois College of Medicine Rockford Internal Review Board.

Results

A. Community Residents' Definition of Health

In both focus groups, residents believed in an all-encompassing view of health. They believed that health was about physical, mental, and social health and all residents concurred that all of these needed to be in good order for a person to be healthy. Many residents also recognized that healthy finances played a role in health.²

"...health means wellness in all aspects. Physically, mentally, socially, and also financially in a way that you're able to sustain yourself and do everything all by yourself. So, that's the meaning of health to me." -- **EFG**

² Throughout the report, we include quotes from the focus groups. EFG indicates the quote is from the English-language Focus Group and SFG indicates the quote is from the Spanish-language Focus Group.



B. Significant Issues Related to Health for Community Residents

Barrington area community residents were asked about the significant health issues for adults in their community. Issues mentioned included Mental health, Infrastructure, Loss of routines around healthcare, Health Education - Poor access to good information for making good decisions, Equity - Equitable access to health resources, Nutrition and food insecurity, and Lack of connection.

i. Mental Health - In both focus groups, English and Spanish, mental health was mentioned by community residents as a significant issue. The issue was raised across multiple questions and in multiple ways. Residents were concerned for mental health for themselves, youth, and the elderly. It was also raised as a topic around anxiety, depression, fear, and uncertainty. Residents repeatedly discussed how the COVID-19 pandemic had impacted mental health issues including the ability to access mental health services.

"I have four children. The lockdown affected them to the point where they would cry. They would cry, and they couldn't express themselves, and I think that this affected us a lot psychologically and not knowing how to help as well, or how to act in this kind of pandemic. I think that for me, it affected me a lot psychologically and I felt very depressed because I wasn't able to go out or... couldn't spend time with family members and friends." -- **SFG**

"Difficulty accessing mental health just because the demand has been too high." - **EFG**

ii. Infrastructure - Participants in both groups discussed infrastructure, however, it was clear that infrastructure held multiple meanings. The first definition focused on built infrastructure and residents across both groups felt the built infrastructure was lacking but in different ways. Community residents across both focus groups felt that built infrastructure such as bike paths and sidewalks were lacking. Residents would like to see more paths with more connections within the Barrington area and to other community areas. Spanish focus group residents see green space, but they don't see anything to do in the green space and they would like to see more built infrastructure that motivates people to use the space. In both groups, the lack of recreational infrastructure and lack of access to what there is during the early days of COVID were seen as significant issues.



"I think we are in need of free public areas where you can go walk. Those places where when you feel a bit stressed or something, you can just go walk. Whether it's cold, or raining, or hot, there are public places where we don't have to pay and you can just go walk with your children, or by yourself. I think that would help a lot. We don't have to go to a gym and pay for a gym, but a place that is open to the public, because even in the township...[inaudible]...was closed for a while. I liked to go there to walk and they closed it for a while because of Covid and I haven't gone back." – **SFG**

"Specifically, here in the area where we live, in Carpentersville, there are very big green areas that aren't really used for anything...we don't have a park or an area to go ride bikes with the kids. There's just the play area of an elementary school, but it's very small. ...if I go with my son and I have two other nieces – it's something that I do often – it's almost always full during the summer. So, we really need a recreation area where the District 220 Elementary School is. Why? Because of everything that the woman just said, for physical activities that may motivate them from a young age to be involved in physical activities, so they'll grow up with that habit. They're going to grow up as youth who have a place to play and a place to have a good time. And not only for youth, but the whole family. And really, there's a lot of green space. There are a lot of green areas, so the resource would be just that the area in charge gives the necessary resources so that it is possible." -- SFG

iii. Loss of routines around regular healthcare - A significant issue that is a result of COVID for individuals of all ages was the loss of regular routines around healthcare and the loss of access to care as there were limited appointments available and non-urgent procedures were delayed due to COVID restrictions. Health issues resulting from delayed health care have impacted adults and the elderly particularly hard.

Both focus groups discussed the amount of misinformation and disinformation that exists. Additionally, they mentioned the inability to gain access to quality health care education materials for making good decisions. Some of the lack of access to health care education is attributed to COVID-19. However, a general lack of education was also mentioned, and more specifically a lack of education provided in a culturally accessible way was seen as an issue.

"...entrenched attitudes that people have, ...I do not mean from a political perspective...I mean that from the perspective of the person who crowds me when I'm riding a bicycle and does not give me the space to ride safely in the road." -- **EFG**

iv. Equity - Equitable access to health care resources was mentioned. Equity was seen as the ability to have access, but also the freedom for all to use the same resources in different ways. For example, cars and bikes use area roadways, but automobile drivers are not always respectful of allowing cyclists on the roadways or in giving them the space to use the roads for cycling.

The inability to accept the differences leads to additional mental health impacts and was mentioned in the English language group, but then became highlighted even more within the Spanish language group.

"...people don't have an attitude of acceptance. And that is also a significant mental health problem...those things that you do in your life that people don't accept of you. And that has a mental health impact." -- **EFG**

A lack of acceptance leads to a lack of motivation, and they choose less healthier options for activities.

"Sometimes they prefer to not enroll in any program after school and come home and be on their phone or videogames, or the television, or ordering things. I consider that it could also be a clash of cultures where for parents it's a bit difficult, maybe because of the language, to involve ourselves more in activities in the school and because of that, we don't involve our children. That could be a factor, a lack of motivation to get involved in physical activities – either at school or in the community." -- **SFG**

v. Nutrition - Nutrition was covered in multiple ways as a significant health issue. Residents felt that there was not enough information available on healthy eating habits. They also felt that the infrastructure around accessibility to healthy food whether it is in grocery stores or in schools was lacking.

"I think that one of the problems is how bad we eat nowadays. We eat a lot of food that we buy. Very few of us cook nowadays, and I think that is affecting us a lot." -- **SFG**

vi. Lack of Connection - In multiple ways, residents discussed a lack of connection as being a significant health issue for adults. Again, some of this was a result of COVID. Residents saw the inability to spend time with family and friends as a precursor to mental issues that affected them psychologically. Residents also saw a lack of connection due to infrastructure. A lack of walking and/or biking paths that allowed people to get around a community or to connect other communities prevented connections and just being outdoors to see people. A lack of recreational infrastructure and accessibility to it was seen as being detrimental to not just physical health, but also to social health and engagement.





C. Impact of COVID

i. **COVID and Mental Health** - The impacts of COVID were similar across both focus groups. Participants repeatedly mentioned the impact of COVID on mental health issues and the difficulties in accessing mental health care caused by COVID. Additionally, residents mentioned that they were concerned with how some businesses did not follow rules regarding restrictions earlier in the pandemic and how some businesses still speak negatively about those who choose to continue masking. Residents understood the need for businesses to make money but felt that some chose to disregard public health restrictions and did not accept those who chose to continue following restrictions such as masking.

"...I understand the fact that businesses were trying to survive and we're trying to support them, but we had specific rules for restaurants or places that were no supposed to be open, even. And our municipality decided not to necessarily enforce that consistently...a local of agreement on what that was all about and why we had those restrictions." -- **EFG**

ii. Pandemic Restrictions - Residents repeatedly mentioned how early pandemic restrictions took a toll on everyone. They also mentioned that a lack of consistent enforcement around restrictions was stressful. For example, the cancellation of extracurricular activities for youth led to a roadblock on keeping youth physically healthy. Anxiety and psychological issues seemed to be compounded for parents. The youth and parents would both have their own individual anxiety issues, but parents' issues would be compounded by taking on the additional stress of not knowing how to help their children cope.

iii. Increased Use of Technology - COVID meant much more time on technology for everyone. Several residents mentioned the detrimental effects of being on technology more and how this led to other issues. The other issues included people buying technology that they did not need and how the use of technology continues even as things are going back to normal and remote working or school is less of an issue. All the technology has also resulted in less physical activity and less social interaction even though society is going back to normal. Focus group participants also reported that the increased use of technology in combination with increased stress has also resulted in poor sleep habits.



D. Health Issues Affecting Youth

Uncertainty was stated as a primary health issue for youth by most respondents. Uncertainty around not knowing what was coming, what activities would be happening, not being able to plan or make decisions and a general lack of control over what was happening were elements of uncertainty mentioned by residents. Residents felt the repeated change and the difficulty of doing school over Zoom were health issues affecting community youth. No one wants to return to Zoom learning.

"...the uncertainty of how well things go -not knowing what's ahead." - EFG

"...for my kids, it was hard with all the uncertainty – not feeling in control of anything because we didn't know from one day to the next, for a while there, what the restrictions were gonna be – what's next, and "where can we go?" and "where can we not go?" and "when do we have to wear" -- **EFG**

i. **Obesity** - Obesity and technology were both seen as issues for youth. Infrastructure was mentioned as a significant issue towards health for adults, but it was mentioned multiple times for youth as well. A lack of infrastructure to motivate and engage youth were seen as factors contributing to obesity and technology use, particularly in the Spanish language focus group. Spanish language residents reiterated the need for more infrastructure that engaged the whole family to get out and participate in recreation together to help set a strong example for youth. English language residents wanted to see better education of parents on using the infrastructure that exists.

One resident felt strongly that adults did not set a good example for youth and offered the following examples: 1) technology use in general, 2) cell phone use and driving and/or walking, and 3) sharing space with others.

Residents saw biking and walking paths as possible infrastructure that would encourage youth to get out rather than always asking parents for rides.

Many residents in the Spanish language group also expressed concern around youth technology use. They stated that COVID made the technology use worse as kids were unable to go out and see their friends. Technology use led to less sleep and poorer sleep and youth do not understand the importance of sleep. Residents see youth free time getting filled with video games and that this takes away from getting physical

"I think that young people are using a lot of technology for many hours, and I think we adults are using too much as well. Using technology for many hours equates to less time to sleep, and also, ...our brains doesn't have time to enter into full rest and sleep well at night...you know that you should sleep and that sleeping is essential for your mental health. I think it's a bit more difficult for young people." -- **SFG**



activity and impacts their brains. Youth are also spending more time buying things online and buying things that they don't need.

E. Health Issues Affecting the Elderly

i. **Isolation** - Isolation and the inability to connect socially was mentioned in both focus groups as a primary health issue for seniors. COVID made it difficult to see grandkids, family, and friends. COVID also limited all the informal community supports given to elderly residents by neighbors. For example, neighbors who used to take seniors to appointments or shopping before COVID, could no longer do so during the pandemic. One resident highlighted how Barrington's infrastructure has a driving focus and just as youth are unable to drive, many seniors are limited in the ability to drive.

ii. Fear - COVID negatively impacted seniors in multiple, serious ways even if they did not catch COVID. It created a fear of going to the hospital or any health care facility. They put off procedures and appointments at times because health care facilities were full and at other times because they feared catching COVID themselves.

"I had no idea because we just weren't that close to it that there were times in January, I guess it was, or maybe it was December, where there were really no beds available in Good Shepherd. So, I was shocked by that...But it's just kinda hard to imagine that we didn't have anything – any resources. So, it just really shocked me. And that a lot of seniors were not getting care and having to put off procedures and things because of that." -- **EFG**

Additionally, due to their higher susceptibility to COVID hospitalization and death, many seniors feared doing any activity and did not leave their homes if possible.

iii. Congregate Care Facilities - COVID made families rethink whether a congregate care facility was the right place for their family members. More than one resident stated that the isolation and health issues that they had seen in nursing homes had made them rethink how they would work through issues with their own family members in the future.

"It's having more seniors not be comfortable with that being an end result for them or an end option. Families trying to create other options because, "Oh my gosh, if we're in that kinda situation – my parents isolated in a communal setting like that – I can't handle that. I can't deal with that." -- **EFG**

iv. Nutrition - In the Spanish language focus group, residents are concerned with nutrition and food security issues for the elderly. Residents are concerned with the amount of soda that the elderly are drinking, their desire for fast food, and their inability to get fresh, healthy food and buying food that they don't need.



Residents recognize that poor nutrition combined with a lack of physical activity and a sedentary existence fosters chronic illnesses such as diabetes and heart disease. Cultural issues contribute to all these topics as the elderly are not included in or invited

"...they didn't have access to fresh food. For example, vegetables. Food would run out. They didn't have access to food, and they had to eat more canned food. That affected people a lot. They also had a lot of access to canned items that they couldn't cook. They had to eat what they could find. There wasn't a lot of variety to choose from in the supermarkets. People went so crazy that they would buy whatever was there. I feel like they didn't need it and they would buy it." -- **SFG**

to participate in activities that might engage and motivate them to do more activity. Nutrition issues were exacerbated during COVID and led to more serious issues with other health problems.

v. COVID Side-effects - Spanish language group participants talked much more about seniors who contracted COVID. Spanish language residents stated that the elderly had more anxiety and depression after contracting COVID. Several residents also mentioned people that had stated they "felt different" after having the virus and felt "pain in their lungs", felt like they "can't get oxygen", and had a generalized fear about their lungs.

"In May of 2020, I got COVID. I was sick for a month and a half. I got pneumonia and up until today, I have to see a lung specialist because my lungs didn't turn out okay. My circulation was affected. All of my veins were affected. Even though I do exercise, my circulation wasn't the same. I get anxiety attacks....I experienced a lot of blackouts where my brain isn't thinking well, and I still have memory problems." -- *SFG*



F. Services and Resources Needed in the Community

The following resources were raised as services or resources that are needed in the Barrington area. Both groups mentioned the need for more educational resources. In the English language group residents want more educational resources that are easy to understand around maintaining health, preventing illness, and managing disease. The Spanish language groups wanted this as well, but also want the resources to be culturally accessible. They would like doctors to provide more information on what happens if you don't prevent disease or if you do catch COVID and have an illness that will make it worse. The Spanish language group feels that many in their community do not understand the impact of COVID on their bodies over time.

Spanish language residents also mentioned the following needs related to overall health.

- Low-cost recreation services
- More culturally accessible, free information on health care, health insurance, health resources and other payment options for care
- More support paying for specialty health care because they are hired in jobs that are part-time that have no insurance
- More indoor activities, especially in winter for kids
- More developed parks (Carpentersville), walking paths
- More motivation and education on need for physical activities, involve schools in effort and include families
- Bike trails for children, ability to rent bikes
- Better publicizing of culturally accessible ways to access recreation activities
- Bullying in schools and racism in general and effect on physical, emotional, and psychological health

There were some positives that came out of COVID according to all participants. In the English language group, telehealth was seen as a positive. Residents felt that COVID accelerated some health improvements that had already been in development but not implemented such as virtual visits. Residents also felt that COVID made insurers and government entities more open to alternative settings for treatments and that this has led to increased health care efficiencies.

Community residents would like to see the flexibility that led to these positives to continue. Flexibility in responding to people's needs is important to residents. Telehealth as an option allows previously stigmatized illnesses to be treated safely from home.



English	Spanish
Ligion	Spanish
 Response to COVID choppy and chaotic at first Pharmacies and national effort made things smoother once vaccine came out Shocked that the hospital was completely full at times, didn't know this when it was happening Feel fortunate to have access to testing, vaccines, care Appreciated telehealth Delayed appointments and health care Could not go to gym or get other activities done because childcare was closed Bikes were sold-out and prices too high People received vaccines who weren't yet eligible 	 Appreciated getting testing and vaccine for free Seemed a bit fast to develop vaccine so quickly Lack of credibility in vaccine stopped things from going well Misinformation from some doctors created panic and chaos made people question vaccine Lack of availability of masks Fear and anxiety of health problems, especially lungs, after having COVID Felt telehealth was not the same as in- person care Frustrated that they could not get appointments quickly or when needed

Differing Perspectives Related to COVID Between English and Spanish Focus Groups

Services that residents feel are still needed include expansion of outdoor areas and spaces, as well as expansion of availability to these spaces. Many outdoor areas do not have enough parking for all those who are traveling to use them. Residents would like to see bike paths that actually lead somewhere.

Residents offered avenues that they felt would help in getting information to residents. Newsletters and PTOs could offer information on a regular interval. Bike rodeos and Bike Safety Quiz could offer one-time educational opportunities.

G. Sources for Health Information

There is a stark contrast between where each language group looks for health information. English language residents stated that they turn to physicians, newsletters, and the hospital for health information. They also use the Barrington Center for Gifted Children for mental health resources. The Spanish language residents rely on the internet (Google), social media (Facebook), email and videos (YouTube) for their information. Ordering books online was another source mentioned and another resident specifically mentioned that the culture doesn't typically look to libraries or newspapers for information.



H. Strengths with the Barrington Area Community

Strengths of the Barrington Area Community mentioned within the English language group included:

- The Smart Farm cooperative with the hospital that leads to growing and eating healthy food. One criticism was that the number of garden plots are limited.
- Good hospitals
- Good fitness center
- Community pool
- Park district and overall number of parks
- Bike and Pedestrian Committee but one criticism is that it needs to be more engaged with the community
- Splash pad and martial arts for children
- Tennis and pickleball courts

"...I love the Smart Farm. I think that's a really great resource for the community – all the work they've been doing and just all of our healthcare. The fact that we've got such, I think, great healthcare." -- **EFG**

It is striking to note that many of the strengths listed in the English language focus group were areas identified as needed services within the Spanish language focus group. Examples of this include access to nutritious food and access to amenities to use in green spaces.

Strengths of the Barrington Area Community mentioned within the Spanish language group included:

- Families
- God and church
- District 220 mental health support groups, Al Martes Center
- Friends on the street in the Latino community
- Giving Day where low-income families are given shoes, jackets, boots, clothes, and food
- People who organize events where they speak our language

"..the support that we have as a Latino community where we find friends out in the street and we talk for a little bit and there's support and ideas and all of that. That's one of the strengths that I see. We put ourselves in the shoes of others and if we have support or something positive to share, we say it." -- **SFG**

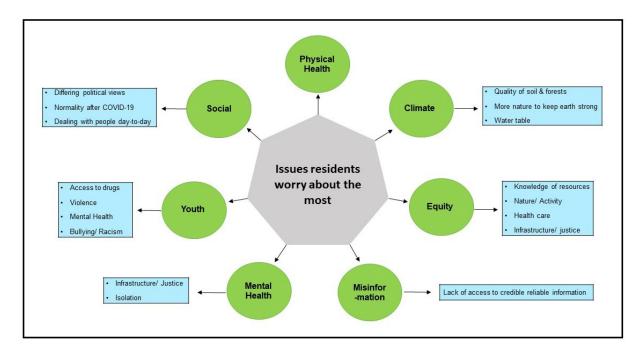
Within the Spanish language group, responses indicated that strength came from within the Latino community and culture within Barrington and less from the Barrington community.



I. Issues You Worry About Most

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All focus group participants were asked what issues they worry about most. Many issues across both groups were raised. The list below summarizes the broad issues mentioned as well as specific sub-issues within that category.



"What worries me the most is things not going back to normal after the whole COVID-19 pandemic. Things to do with especially the social life and interactions." -- EFG

"...access to healthcare and equitable healthcare. But also, the environment – just the water table here. Just make sure that we're being really informed on what's going on and kept informed by our municipalities in terms of the health of our environment here." -- **EFG**

"I guess I would advocate for making sure we have well-balanced opportunities for the full spectrum – health and wellness to illness. The whole spectrum. And for all ages too." – EFG

"I'm worried about bullying and sometimes the lack of self-esteem that our young people have that in front of – in my case, where we are Mexican, in front of Anglo Saxons. I have three children who went to schools in Barrington, and they would say that they felt disparaged by students and even teachers. Meaning, in other words, racism. So, that may be a factor so that children physically, emotionally, and psychologically don't end up seeing themselves with the 220 community, but they aren't from the area where we live, specifically in Carpentersville. So, for me, bullying is something that is very important, and it has a lot of repercussions on the emotional and academic aspects of our children." -- SFG

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Summary

Across both language groups residents agree on many of the services that people need, but disparities exist in the knowledge of resources and the accessibility of resources. One example is the need for more educational materials. Both groups want more educational information easily accessible, but the Spanish group hopes for more materials that are culturally relevant to Spanish speaking residents. Both the English and Spanish language groups agree that there is a lot of open space within Barrington, but that there is also opportunity to add more. More importantly to the Spanish speaking members, there is a need for these areas to be developed into recreational activities in the areas where they live. They see the green space but there is a lack of amenities to use it in a way that promotes health.

Equity in resources and how resources are used was desired by both language groups. Each language group had different perspectives on the same resources within the community and how resources were perceived and how they wanted to use the resources. Cultural traditions and norms within the communities represented in each language group highlighted how and why perceptions differed. The residents who spoke in the Spanish Focus Group highlighted that simply translating materials to their language was likely not enough to engage their community. Where each language group seeks out information also highlighted differences between the two groups.

Both groups understood the value of health and the need for trustworthy information and equitable and accessible resources for achieving health. The path to achieving that for each group may not always be the same. Focus group participants offered information on where conversations and decisions around health are made in both communities. This knowledge provides Barrington organizations new avenues for developing strategies to reach and engage more Barrington area residents around the issues that are important to them and how to assist them in building stronger communities.



2. Barrington Area Business Leaders Focus Group

The Healthier Barrington Coalition sought to understand how the pandemic is affecting the businesses of the community as businesses provide services, employment and health insurance to individuals residing in the Barrington area and the choices that each business makes has the potential to impact the health of the Barrington area community.

Barrington area business leaders were recruited through the Healthier Barrington Coalition coordinators and chosen to represent a diverse array of industries and experiences through the pandemic. Participants were asked to complete a short Qualtrics survey which provided a preliminary snapshot of the participating businesses that each individual represented.

Focus Group Guide

New to the 2021 Healthy Barrington Study, HRE researchers conducted focus groups with Barrington area business leaders to obtain a more in-depth understanding of their perspectives on the overall health of the business community and to assess their needs and challenges. The discussions aimed to learn more about the challenges faced in the business community, the impact of the COVID pandemic, and the services and resources available in the area as well as any unmet needs.

Focus group questions focused on:

- Business leaders' perspectives on the overall health of the Barrington area business community,
- Significant issues affecting the Barrington area business community,
- Resources and strategies that have helped businesses cope with and survive the COVID-19 pandemic,
- Resources that are still needed,
- The greatest challenges and barriers to success for Barrington area businesses today.

In this report we try to summarize the themes and sub-themes identified and note the challenges and resources that were helpful for businesses. Where appropriate quotes from the focus group are included to illustrate business leaders' voices for readers. One Barrington Area Business Leader Focus Group was conducted for this iteration of the Healthier Barrington study.

Focus Group Participants

Eight individuals were invited to the virtual focus group and completed the initial Qualtrics survey, six of whom then participated in the focus group. The approximately 75-minute focus group was conducted via Zoom and was recorded. The recording was



then transcribed. All business leader participants were either the owner, chief executive officer, chief inspiration officer or a manager of the business. Two University of Illinois researchers conducted the focus group. Four businesses were located in Barrington, one was in Barrington Hills, and one was in Deer Park.

Business leaders represented the following industries insurance, educational/childcare, retail – banking (essential), retail - brick & mortar, non-profit business and the personal care industry. The consent was provided to all individuals and reviewed at the beginning of the focus group. Consent was obtained via agreement to remain in the virtual space once recording began.

Results

A. Significant Issues Impacting Local Businesses in the Barrington Area

When asked about the significant issues impacting Barrington area businesses during the COVID-19 pandemic, the following themes emerged:

- the ability to pivot, be adaptable and flexible
- staffing
- costs
- supply chain issues
- safety
- and personal connections.

Each of these themes was a challenge, but also an opportunity for each business to become as resourceful as possible.

All respondents raised the theme of being able to pivot their business and most are still engaged in pivots today. Pivots included switching to full remote work or moving events to a virtual platform. Depending on the comfort level of staff or clients, remote work and virtual activities have fluctuated during the pandemic and some businesses are in a hybrid of both modes right now. Pivots also meant increasing safety measures for staff and clients. Safety measures might include acrylic barriers, creating social distancing, reimagining space usage, increasing already high levels of cleanliness and even creating new entrances for those most at-risk of serious consequences from COVID-19. Pivots also included how business was done and how income was made. For example, two businesses began curbside pick-up and home delivery and one moved to an online sale platform.

"...we've all had to adapt digitally some way, whether it's selling your services online, or providing a vessel for your clients to do business online, even like this, being able to meet via Zoom."





For all businesses who participated, a theme closely tied to being able to pivot was the ability to be adaptable and flexible in both how they ran their business, but also how they thought about everything related to business. Examples of being flexible included staggering hours when staff would be in the building to control the number of people present at any one time. Being flexible also meant reimagining how events might occur such that previous indoor events became outdoor events.

Flexibility and adaptability also applied to how businesses assisted employees and customers. An example of flexibility with employees included encouraging individual staff to remain home if anyone in their family became ill, but then ensuring that another staff member would step in and help with clients. This ensured that the employee was able to fulfill their needs at home and the business was able to fulfill needs to clients all while keeping all employees and customers as safe as possible.

"So we kind of monitored to make sure that they were only paying what they needed to pay."

For another business, adaptability meant working with changing circumstances for their clients. For customers with young children, early in the pandemic childcare needs plummeted as people worked from home but tutoring needs skyrocketed with children learning from home. When children returned to school buildings, tutoring hours then plummeted.

In every business's response to the question about pivots and flexibility, the safety and concern for staff and employees was evident. For example, once the pandemic hit, the insurance business knew that every business would have new needs and fluctuating income. Their first task was to review each client's needs and revenue and adjusted plans accordingly to ensure they could remain in business.

Another business immediately concerned itself with ensuring the safety of even their highest risk clients.

"We were really mindful of some of our existing clients that had maybe health challenges or high risk."

New experiences and willingness to learn was mentioned multiple times. Many of the businesses had to find new ways to communicate and new ways to make connections with staff and customers. One business developed a much stronger social media presence and dedicates several hours a day to maintaining that. Another business that had gone to full remote work realized that the 'office culture' was missing, particularly for new hires. They created a newsletter that delivered work related news, but also delivered information to allow employees to connect such as shared stories about family or photos of new pets.



The adjustments of new learning experiences ties into the next theme that was strongly raised by all businesses which is staffing. It is the single greatest ongoing challenge in all the industries who participated in the focus group. Consistently all businesses have more work than they have employees to do the work even with some customer bases still not back to pre-COVID levels. In addition, all businesses have had to adjust to how employees view work in the post-pandemic world.

"...it's retail, I mean, you got to show up, you got to open the door, and you got to be present and meet the customers face to face. So, we haven't had the prize luxury of being able to have a lot of people work from home."

As one business leader stated, the workforce has changed to have new a work ethic and new and different expectations of what they want from their employment. Some businesses cannot adjust to these new expectations.

"...a couple of women that were working for me were mothers who would come in and work during their kids' school hours, and now their life's been shifted, and so they needed to leave to be home to home school and Zoom educate their children."

"...I lost people too just because I think they didn't want to work in the public anymore. They were uncomfortable working with people. And for me, an industry that's not super high paying, it's kind of an easy decision for people to say, 'Oh, well, I'm just going to leave my job and find something else that can pay me comparable.',"

"I'm right in there with...everybody else about the hiring problem. It has been insane. We have more customers than we know what to do with but we can't find people to serve them."

Business leaders are frustrated and looking for any assistance in how to bring in staff. Some industries dealt with a high turnover rate before the pandemic. The turnover rate has only increased as people have chosen to shift priorities and remain home with children or decided that working with the public is not worth the effort in the face of a viral pandemic.





B. Sustainability Plans

Many leaders used the challenges of the pandemic to make their business stronger. The flexibility and adaptability that businesses had to find allowed them to create new ways of doing business that many intend to sustain after the pandemic. Examples already highlighted include a business's internet presence for sales or social media. One business leader summed up best how this pandemic allowed them to create new plans and efficiencies that they are taking into the future.

"So the benefit of what we had to experience through COVID game me plenty of time to dream big and think differently about our [business]."

Dreaming big is helping this business plan strategically for the future. The business is moving to a new space which will allow for two separate spaces that will allow flexibility in prioritizing customer. The dual spaces will also allow for flexibility should another surge or new pandemic require space for at-risk clients. At the same times it offers an environment that feels "really safe" for staff and clients.

For the essential retail business, planning for various situations and thinking through contingencies was already built into yearly meetings. However even this business was not fully prepared for what COVID-19 meant to how they would operate. All business leaders echoed the same thought that you plan as best you can, but you still must be ready to adapt. For the non-essential businesses, there was less of a prepared plan when the pandemic began. Each business has now thought through how to adapt. One business created a plan for testing staff and were prepared to implement it when mandates changed. The plan is ready if they do need it in the future. One business has mandated vaccines and now has all but 6 of 250 employees vaccinated and will not hire anyone who is not vaccinated. The business has worked with the 6 unvaccinated employees and their clients to make sure that the interactions are comfortable and safe for both parties.



C. Supply Chain

Supply chain issues were a significant impact for businesses. Supply chain issues might typically be thought of as an issue in a manufacturing or retail industry on terms of parts or merchandise. However, supply chain was a significant issue within other industries as well. For the non-profit organization, supply chain issues affected how they thought about events. Much more advanced planning was required to order supplies with enough lead time. Supply chain issues also affected choices for items which in turn could affect costs.

"...the supply chain thing just threw everyone for a big loop as well. I think we took for granted if you ordered something, you could get it the next day and or, Amazon Quick, buy yeah, we just took a lot of things for granted."

Operationally, supply chain issues affected the ability to get items needed to run the business.

Supply chain issues were at their worst in 2021 but remain an issue currently. International uncertainty on top of the pandemic keeps the supply chain issues as a concern for businesses.





D. Resources

i. Resources that helped throughout pandemic

Throughout the pandemic businesses used many different resources to help them navigate the pandemic. A primary resource mentioned by the majority of business leaders was the Payment Protection Program (PPP) which allowed them to keep employees paid during the early months of the pandemic when many businesses were completely shut down. The majority of businesses also relied on the Centers for Disease Control Guidelines to provide guidance on how to keep employees and clients safe and how to operate in the safest manner throughout the pandemic.

Businesses also relied on numerous outside organizations to sort through national guidelines and help in tailoring them to their specific industry. Professional organizations at the state and national level provided much of this guidance. Additionally, the local Barrington area Chamber of Commerce provided a workbook that included many flyers, posters and pamphlets that were helpful to businesses.

"I think that, for us, there was a huge push for supporting our local businesses and making sure that we stayed in business through the pandemic. And even afterwards, once we reopened..." "And so many of our clients reached out and said, 'what can we do to support you"

"And so many of our clients reached out and said, 'what can we do to support you through this? We want to make sure that you guys are still employed, we want to make sure that we can still go to our favorite [business].',"

Customers and clients became a resource for businesses too. They stepped up and reached out to see how they could help businesses in some cases.

While not stated directly, there was a sense of loyalty by businesses to their customers that was reciprocated back to them during the pandemic.

ii. Businesses became a resource to employees and community

While business leaders were gathering information and resources, they were also disseminating it and becoming resources themselves to their employees and sometimes the community. Many business leaders communicated daily with their staff as information was sometimes changing rapidly. Some businesses created a newsletter on guidance that was distributed to employees. One employer offered yoga and meditation gatherings for staff to help alleviate some stress.





"So, we did a couple of yoga and meditation days in both locations, because the majority of people that I employ are mothers, and oh, my goodness, the stress levels that they had to go through between the kids at school getting COVID and then they had a runny nose, they have to stay home. And so it made it very difficult for these moms to go to work, they couldn't find a babysitter."

Businesses also ensured that employees had the resources, such as income, that they needed to be able to quarantine or isolate and help control spread in the community. Several businesses stated that they paid employees to stay home when the employee or anyone in the household was ill.

"I paid many of them for days to stay home. If they felt like they had any kind of symptoms, we were just super, super cautious of making sure that we weren't going to be responsible for anybody else to get it."

Transitioning employees to work from home was not a simple on-off switch. Businesses had to make sure that the technology was adequate for the employee to be able to work. for the employee to be able to work.

"...basically I was making sure that their work was going to be okay meaning that we made sure everybody's internet connections were up to grade..."

At no point during the interview did any business mention or express concern about how being a resource to employees was a cost or a negative to their business. Throughout the focus group, these comments all came out as a sincere concern about how to help their employees navigate the pandemic with whatever assistance they could realistically provide.

iii. Staff loss

Two businesses in the focus group did not lose any staff during the pandemic. One business did lose staff, but not due to COVID-19. They believe they were lost to other job opportunities. A third business lost approximately 50% of their staff during the pandemic, with some portion of this due to employees' decisions that were made based on pandemic related factors.



E. Future Needs

Going forward, businesses are concerned with the following themes

- finding staff, unemployment
- inflation rising prices from wages to supplies
- making sure that everyone feels safe
- mental health and personal connections
- maintaining the same level of customer service

When asked what they need for the future, all business leaders stated resources to help recruit staff as a primary concern. Wages and costs were also a major concern for all business leaders. Inflation is affecting the costs across the board from supplies to benefits to insurance to wages. At the same time, customers still expect value and great customer service. Businesses talked about an increased use of technology to achieve efficiencies, but at the same time wanting to still provide the highest level of customer service.

"...if we're not treating our customers better than we did yesterday, we're going to fall behind. And so you got to do all that and at the same time, provide exceptional customer service."

One business mentioned unemployment rates related to staffing. The business leader wondered about the ability to find some sort of compensation for businesses whose unemployment rates rise because an employee claims unemployment for COVID-19 related reasons, but the business has plenty of work that still needs to be done. It is not that the business cannot provide work, but the employee does not feel safe working given their needs.

"You get a certain rate based on how many people that work for you claim unemployment and if they claimed unemployment, although we said we had plenty of work for them, and we absolutely wanted them to be working, some of them said, 'I'm too afraid to work.' And yet, my unemployment rates were still impacted."

A leader from the non-profit industry highlighted the need for more mental health related resources for businesses and even business leaders. Isolation, low morale, and a lack of human connection were issues witnessed throughout the pandemic.

"...we found that it was absolutely vital people felt so isolated to keep the opportunities to connect, continuing to be offered. And that's really what we focused on bringing people together still."

"We saw some very emotional moments on the screen, when we were bringing people together, people who were like, 'Wow, I feel like you're holding my hand through this, and I just can't tell you how isolated I feel.',"





One business leader summed up future needs best with this quote.

"...the big challenge is making sure in my role, making sure everybody feels safe, making sure everybody feels heard, making sure that we can continue to be flexible in the months and years going forward because I think that is our one advantage to retaining staff."

Summary

Key takeaways from the Business Leader Focus Groups were the need for businesses to be flexible and adaptable, and that resources such as PPP and information from the CDC, as well as state and national professional organizations were very important. However, they also reiterated the ongoing need for businesses to find assistance dealing with staffing and supply chain issues. Business leaders were very open in sharing the successes and struggles that they faced during the pandemic and ways in which these impacted their businesses and operations. The themes that resonated across all businesses was the ability to adapt and be flexible and be prepared to pivot at any given moment. Leaders discussed the multiple issues around staffing from keeping employees healthy and providing resources for them to the struggles associated with maintaining staff. Costs, supply chain issues, and safety were also mentioned frequently. For each business, the ability to maintain personal connections between staff, between the company and employees and just in general was very important.

Our focus group did not ask questions about changes in ventilation systems due to the pandemic. None of the business leaders discussed ventilation issues although they did talk about other structural changes such as office lay-out and adding acrylic barriers. This might be an issue that businesses will have to address if the pandemic challenges continue long-term.

There are many more business industries represented in the Barrington area. This focus group represents the perspectives of just six business leaders. Examples of other businesses that have significant impacts due to COVID-19 and whose perspectives are not represented here are the restaurant, grocery store and manufacturing industries. Additional discussions or surveys with these industry groups would add to the information about the impact of COVID-19 on the businesses of Barrington.

None of the businesses included in this focus group mentioned any significant COVID-19 related illness or death amongst employees. We did not ask how many employees might represent communities that experienced more severe illness or death.

If one were to distill this focus group into one sentence, it would be that Barrington area businesses pivoted and adapted to the challenges that the COVID-19 pandemic brought to them while looking out for their employees and customers to the best of their ability within their resource limitations. Business leaders consistently stated, "Adaptability has



been key to everything."

The business leaders who spoke in this focus group found the pandemic to be challenging across multiple areas, but they also used it as an opportunity to improve their business. Going forward, several business leaders are concerned that international issues may override the issues of the pandemic. All business leaders used the pandemic to develop some sort of sustainability plan for their business, but they all realize that you can only plan for what you know. The key to any plan is the ability to be adaptable and flexible as time and circumstances dictate.



APPENDIX Appendix I: Survey Data Tables

Demographic Characteristics 60010 Zip Code	Percent		
Age and Gender	rereent		
< 5 years	6.0%		
< 18 years	26.9%		
65 and 65 ⁺ years	20.1%		
Females	54.3%		
Race			
Black or African American, alone	1.6%		
Asian, alone	8.8%		
Hispanic or Latino	5.2%		
White, not Hispanic or Latino	82.1%		
Two or more races	1.7%		

TABLE A

DEMOCRAPHICS OF THE PARRINGTON AREA FROM THE 2020 CENCLES

[^]Link: <u>https://www.census.gov/quickfacts/fact/table/barringtonvillageillinois,US/PST045221</u>





TABLE 1.1SURVEY RESPONSE BY AGE AND YEAR

(9.4² – 2022 Survey)

Age Group	2022 (n = 659) Number Percent ¹		2017 (n=649)	2014 (n=685)
			Percent ¹	Percent ¹
18 - 29	35	6.1%	1.5%	1.9%
30 - 44	183	31.9%	13.9%	15.4%
45 - 64	192 33.5%		25.1%	52.1%
65-74	102 17.8%		*	*
75+	61 10.6%		*	*
65+	*	*	15.1%	30.6%
Mode	45-64 -		-	-
Total	573 100%		100.0%	100%
Missing	5	-	_	-

¹ Percent calculated without [Missing] due to the high proportion of non-response.

²Two questions in survey have same number. This refers to "Q9.4 How old are you?"

*Response category changed across survey iterations

Gender	202 (n =	22 659)	2017 (n=649)	2014 (n=685)	
	Number Percent ¹		Percent ¹	Percent ¹	
Female	393	68.6%	25.8%	64.5%	
Male	176 30.7%		74.2%	35.5%	
Transgender	0 0.0%		*	*	
Other	4 0.7%		*	*	
Total	573 100%		100%	100%	
Missing	86	_	-	-	

TABLE 1.2SURVEY RESPONSE BY GENDER AND YEAR

¹ Percent calculated without [Missing] due to the high proportion of non-response.

* Choice not available in this iteration



TABLE 1.3 WORK LOCATION OF TWO WORKING ADULTS IN HOUSEHOLD 2022

Location	Two working adults in household (2022 question does not necessarily include respondent) (n = 659)			
	Number	Percent ¹		
Barrington area	206	27.2%		
At Home	216	28.5%		
City of Chicago	81	10.7%		
Cook County outside Chicago	91	12.0%		
DuPage County	34	4.5%		
Kane County	17	2.2%		
Lake County	44	5.8%		
McHenry County	18	2.4%		
Multiple locations, travel	31	4.1%		
Other	19	2.5%		
Total	757	100.0%		

(02.42 and 02.43 - 2022 Su)

¹Percent calculated without [Missing] due to the high proportion of non-response.

UIC

Table 1.4 provides the closest comparative data from 2014 and 2017. Question was worded differently in 2022.

	Respondent plus one other working adult in household				
Location	2017 (n=649)	2014 (n=685)			
	Percent ¹	Percent			
Barrington area	33.0%	33.4%			
At Home	16.7%	+			
City of Chicago	10.5%	19.4%			
Cook County outside Chicago	16.7%	21.6%			
DuPage County	2.2%	4.4%			
Kane County	1.2%	0.7%			
Lake County	9.7%	7.8%			
McHenry County	2.0%	2.1%			
Multiple locations, travel	5.0%	8.8%			
Does not work	+	+			
Other	3.0%	1.6%			
Total	100.0%	100.0%			
Missing	403	-			

TABLE 1.4RESPONDENT PLUS ONE OTHER ADULT WORK LOCATION: 2014, 2017

¹Percent calculated without [Missing] due to the high proportion of non-response.

+ Choice not available in that year



Age	202 (n = 6		2017 (n=649)	2014 (n=685)
	Number	Percent ¹	Percent ¹	Percent ¹
<50 years	18	9.3%	0.3%	1.8%
50-54 years	7	3.6%	1.0%	0.0%
55-59 years	28 14.5%		5.2%	3.7%
60-64 years	40 20.7%		16.7%	10.7%
65-69 years	72 37.3%		27.4%	20.8%
70-74 years	18	9.3%	12.0%	22.2%
75+ years	10	10 5.2%		0.0%
Unsure	* *		4.4%	16.8%
Not applicable/already retired	* *		27.9%	24.0%
Total	193 100.0%		100.0%	100.0%
Missing	466	-	-	-

TABLE 1.5 AGE EXPECTED TO RETIRE FROM JOB: 2014-2022 (02.45 - 2022 Survey)

¹Percent calculated without [Missing] due to the high proportion of non-response.



TABLE 1.6WHERE RESPONDENTS EXPECT TO LIVE DURING RETIREMENT: 2014 -2022

Response	2022 (n = 659)		2017 (n=649)	2014 (n=685)
	Number	Percent ¹	Percent ¹	Percent ¹
Stay in my present home	126	31.9%	30.7%	31.7%
Downsize to smaller home/apartment in Barrington	40	10.1%	9.3%	4.5%
Move to a new single-family home in Greater Chicago area	*	*	*	*
Move in with family living in Barrington area	11	2.8%	0.5%	0.2%
Move to Barrington area retirement community	*	*	*	1.7%
Move elsewhere in Greater Chicago area	21	5.3%	1.8%	3.0%
Move in with family living in Greater Chicago area	*	*	*	*
Move to Chicago area retirement community	*	*	*	*
Move to downtown Chicago	*	*	*	*
Live part of the year locally and part of the year	70	17.7%	14.5%	20.1%
Move out of the area such as to Arizona, Florida or elsewhere	67	17.0%	18.3%	10.3%
Don't know, unsure	47	11.9%	23.0%	25.9%
Other	13	3.3%	1.8%	2.8%
Total	395	100.0%	100.0%	100.0%
Missing	264	-	-	-

¹Percent calculated without [Missing] due to the high proportion of non-response.

* Choice not available

UIC

TABLE 1.7
EXPECTED OR CURRENT RETIREMENT ACTIVITIES ^s : 2014-2022
(02.47 - 2022 Survey)

(Q2.47 - 2022 Survey)					
Retirement Activities	20 (n =	22 659)	2017 (n=649)	2014 (n=685)	
	Number	Percent	Percent	Percent	
Work part-time	96	24.4%	19.1%	31.7%	
Start a new business	32	8.1%	4.5%	5.8%	
Work as a consultant	45	11.4%	7.9%	15.5%	
Take courses	114	28.9%	14.8%	31.5%	
Volunteer	265	67.3%	39.9%	54.5%	
Travel	285	72.3%	39.0%	62.3%	
Spend time with grandchildren, children	*	*	*	52.4%	
Act as primary caregiver for grandchildren	37	9.4%	6.2%	*	
Act as primary caregiver for my spouse, parent, another adult, or a child with special needs	64	16.2%	6.3%	*	
Leisure	288	73.1%	37.6%	*	
Other	25	6.3%	5.9%	7.9%	
Total	394	S	S	S	
Missing	265	-	-	-	
L					

^s Responses will not add to 100% as this was a multiple response question

* Choice not available



(Q9.2 - 2022 Survey)							
Community		202 (n = 6		2017 (n=649)	2014 (n=685)		
	Nu	mber	Percent ¹	Percent ¹	Percent ¹		
Barrington		201	34.9%	40.1%	35.9%		
Lake Barrington		49	8.5%	14.8%	17.2%		
Barrington Hills		67	11.6%	10.2%	7.0%		
North Barrington		42	7.3%	6.5%	6.8%		
Deer Park		24	4.2%	5.4%	4.8%		
Unincorporated Lake County		25	4.3%	4.8%	7.9%		
South Barrington		66	11.5%	4.3%	5.9%		
Hoffman Estates		15	2.6%	3.4%	1.0%		
Fox River Grove		13	2.3%	2.6%	0.0%		
Tower Lakes		10	1.7%	2.6%	3.2%		
Unincorporated Cook County		12	2.1%	2.6%	3.0%		
Inverness		20	3.5%	1.4%	5.9%		
Port Barrington		5	0.9%	0.9%	1.3%		
Carpentersville		15	2.6%	0.3%	0.0%		
Unincorporated McHenry County		5	0.9%	0.3%	0.2%		
Unincorporated Kane County		0	0.0%	0.0%	0.0%		
Somewhere else		7	1.2%	*	*		
Total		576	100%	100%	100%		
Missing		83	-	-	-		

 TABLE 2.1

 SURVEY RESPONSE BY GEOGRAPHIC LOCATION AND YEAR: 2014-2022

 (OP 2 - 2022 Survey)

¹ Percent calculated without [Missing] due to the high proportion of non-response

*Response not offered in this survey iteration



TABLE 2.2LENGTH OF RESIDENCE IN THE BARRINGTON AREA: 2014-2022

YEARS	2022 (n = 6		2014 (n=685)	
	Number Percent ¹		Percent ¹	Percent ¹
5 years or fewer	72	12.5%	21.5%	12.2%
6-10 years	95	16.4%	9.8%	13.5%
11-20 years	109	18.9%	22.3%	28.3%
21-35 years	184	31.8%	28.8%	32.5%
36 years or longer	118	20.4%	17.6%	13.5%
Mode	21-35 years			
Total	578	100%	100.0%	100.0%
Missing	81	-	-	-

(Q9.1 - 2022 Survey)

Percent calculated without [Missing] due to the high proportion of non-response.





TABLE 3.1PERSONS NOT COVERED BY HEALTH INSURANCE BY AGE GROUP: 2014^y, 2017

2022 (n = 659)			2017 (n=649)		2014 (n=685)	
Age Group	Persons Not Covered	Percent	Persons Not Covered	Percent	Persons Not Covered	Percent
0-5	6	7.1%	*	*		
6-15	18	21.4%	*	*		45.1%
16-18	5	6.0%	1	5.3%	23	
19-24	10	11.9%	2	10.5%		
25-34	15	17.9%	5	26.3%		
35-44	16	19.0%	3	15.8%		43.1%
45-54	11	13.1%	2	10.5%	22	
55-64	1	1.2%	5	26.3%		
65+	2	2.4%	1	5.3%	6	11.8%
Total	84	100.0%	19	100.0%	51	100.0%

(Q5.1 & Q5.2 - 2022 Survey)

* Choice not available

^y In 2014 the lowest AGE category was 0-17



TABLE 3.2 <u>MOST</u> LIKELY PLACE TO GO FOR HELP IF HOUSEHOLD MEMBER NEEDS INFORMATION ON SUPPORTIVE SERVICES OR PROGRAMMING

Source of Help	2022 (n = 659)		2017 (n=493)	2014 (n=400)	
	Number	Number Percent		Percent ¹	
Internet	178	29%	47%	38%	
Friend or family	163	27%	31%	22%	
Physician	92	15%	14%	5%	
Local	65	11%	8%	3%	
Social worker/ counselor	37	6%	7%	3%	
Church, clergy	28	5%	5%	3%	
Other	15	3%	3%	1%	
Library	17	3%	1%	3%	
On-line 2-1-1	9	2%	1%	5%	
Phone book/ directory	3	1%	1%	4%	
Total	607	100.0%	100.0%	100.0%	
Missing	52	-	-	-	

(Q5.5 – 2022 Survey)

Percent calculated without [Missing] due to the high proportion of non-response. Total n for 2017 was 649 and for 2014 was 685.



TABLE 3.3LOCATION OF RESIDENCE FOR SPOUSE, PARENT, OTHER ADULT, OR CHILD WITH SPECIALNEEDS2 WHOM RESPONDENT CARES FOR 20221

Response	2022 (n = 659)			
	Number	Percent		
In my home	92	53.5%		
Living on his/her own	44	25.6%		
In a structured facility	27	15.7%		
Other	9	5.2%		
Total	172 ¹	100%		
Missing	487	-		

(Q6.1 & Q6.2 – 2022 Survey)

¹Individuals who answered yes to being a caregiver (n=176) and who answered where the person they are caring for lives (n=172)

² In 2022, the question language added 'child with special needs' Table 3.4 provides the closest comparative data from 2014 and 2107. Questions were worded differently in 2022.

TABLE 3.4LOCATION OF RESIDENCE FOR SPOUSE, PARENT OR OLDER ADULT RESPONDENT CARES FOR:2014, 20172

Response		2017 (n=649)	
	Number Percent ¹		Percent ¹
Νο	282	79.9%	77.3%
Yes, an older adult living in my home	40	11.3%	5.0%
Yes, an older adult living on his/her own	15	4.2%	10.9%
Yes, an older adult in a retirement community or nursing home	7	2.0%	6.0%
Yes, other	9	2.5%	0.8%
Total	353	100.0%	100.0%
Missing	296	-	-

¹ Percent calculated without [Missing] due to the high proportion of non-response

*Choice not asked in this year

²Question only asked about caring for adult with needs in 2014 and 2017

TABLE 3.5TYPE OF ABUSE EXPERIENCED BY RESPONDENTS⁵: 2014-2022

(Q7.1 – 2022 Survey)

Type of Abuse	202: (n = 6		2017 (n=649)	2014 (n=685)
	Number	Percent	Percent	Percent
Emotionally abused (intimidated, coerced, isolated, threatened or degraded)	58	35.4%	7.9%	4.2%
Physically abused (hit, slapped, kicked, or physically hurt)	40	24.4%	2.0%	0.5%
Sexually abused (forced to have sexual activity)	12	7.3%	0.6%	0.0%
Financially abused (used your money or assets without your permission)	54	32.9%	2.0%	1.6%
Total	164	100.0%	100.0%	100.0%

^s Responses will not add to 100% as this was a multiple response question

* Choice not available

Missing not reported as it varies by each response

TABLE 3.6 SUICIDE CONSIDERED BY RESPONDENT OR MEMBER OF HOUSEHOLD: 2014-2022 (07.10 - 2022 Surgery)

(Q7.10 - 202	22 Survey)
--------------	------------

Response		22 559)	2017 (n=649)	2014 (n=685)
	Number	Percent ^{1,2}	Percent ^{1,2}	Percent ^{1,2}
Yes	55	9.3%	2.5%	3.7%
Maybe	11	1.9%	2.8%%	*
No	523	88.8%	94.7%	88.5%
Total	589	100.0%	100%	100.0%
Missing	70	-	-	-

¹Percent calculated without [Missing] due to the high proportion of non-response.

² Since 2017 the question has asked about the **past year**. Previous surveys asked if respondent had **ever** made plans for suicide. Three years was the period used for 2014

* Choice not available



TABLE 3.7AGE GROUP OF PERSONS CONSIDERING SUICIDE IN THE PAST YEAR

Age Group	202 (n =		2017 (n=649)		
	Number	Percent ¹	Number	Percent	
<18	7	10.8%	3	15.0%	
18-29	15	23.1%	2	10.0%	
30-44	36	55.4%	8	40.0%	
45-64	4	6.2%	6	30.0%	
65+	3	4.6%	1	5.0%	
Total	65	100.0%	20	100.0%	
Missing	594	-	0	-	

(Q7.11 – 2022 Survey)

¹ Percent calculated without [Missing] due to the high proportion of non-response



TABLE 5.1 PROBLEMS OF CHILDREN / YOUTH IN THE HOUSEHOLD^s Multiple response question

(Q4.2 – 2022 Survey)							
	202	22	2017	2014			
Problem	(n = 6	659)	(n=649)	(n=685)			
	Number	Percent ¹	Percent ²	Percent			
None	68	26.6%	34.5%	*			
Anxiety, nervousness	108	42.2%	34.5%	15.4%			
Attention deficit disorder (ADD) or ADHD	*	*	18.9%	10.0%			
Overscheduled	17	6.6%	22.3%	10.0%			
Bullying	44	17.2%	16.9%	9.1%			
Excessive pressure to succeed	48	18.8%	29.1%	11.0%			
Depression	58	22.7%	8.8%	7.4%			
Learning disabilities	43	16.8%	8.1%	4.9%			
Sleep deprivation	26	10.2%	16.2%	8.1%			
Uncontrolled Anger/Temper Tantrums	19	7.4%	5.4%	2.2%			
Pressure to be thin	*	*	6.8%	*			
Serious school-related problems	23	9.0%	4.1%	1.2%			
Autism or on the autism spectrum	*	*	4.7%	*			
Aggressive or violent behavior	24	9.4%	6.8%	3.4%			
Obesity	10	3.9%	4.7%	2.2%			
Eating disorders	13	5.1%	0.7%	*			
Alcohol use	37	14.5%	6.8%	3.7%			
Drug abuse	*	*	2.0%	*			
Drug use	9	3.5%	*	*			
Peer Pressure	*	*	0.0%	8.1%			
Negative peer pressure	29	4.4%	*	*			
Negative body image	27	10.5%	*	*			
Discrimination due to disability	23	9.0%	*	*			
Discrimination due to gender identity	9	3.5%	*	*			
Discrimination due to race or ethnicity	22	8.3%	*	*			
Discrimination due to sexual orientation	11	4.3%	*	*			

(Q4.2 – 2022 Survey)

^s Responses will not add to 100% as this was a multiple response question

¹Based on 256 households with children under 18. ²Based on 375 households with children under 18. ³Written as "Peer Pressure" in 2014 and 2017. * Choice not available



TABLE 7.1PRIMARY SOURCE FOR BARRINGTON AREA WATER: 2022, 2017, 2014

Posnonso	20 (n =	22 659)	2017 (n=649)	2014 (n=685)
Response	Number	Percent ¹	Percent ¹	Percent ¹
Lake Michigan	70	12.5%	14.5%	7.1%
Shallow aquifers	154	27.5%	38.1%	45.5%
Deep aquifers	250	44.6%	47.4%	17.3%
Rivers/reservoirs	*	*	*	1.3%
Don't know	86	15.4%	0.0%	28.9%
Total	560	100.0%	100.0%	100.0%
Missing	99	-	-	-

(Q8.10 – 2022 Survey)

¹ Percent calculated without [Missing] due to the high proportion of non-response.

* Choice not available

TABLE 7.2 CONCERNED ABOUT CLEAN WATER SUPPLY IN THE BARRINGTON AREA: 2014-2022 (Q8.11 – 2022 Survey)

Response	2022 (n = 659)		20 (n=6	17 549)	2014 (n=685)		
	Number	Percent ¹	Number	Percent ¹	Number	Percent ¹	
Yes	259	46.2%	199	55.3%	344	50.2%	
Not Sure	104	18.5%	63	17.5%	240	35.0%	
No	198	35.3%	98	27.2%	60	8.8%	
Total	561	100.0%	649	100.0%	685	100%	
Missing	98	-	289	-	41	-	

 1 Percent calculated without [Missing] due to the high proportion of non-response

TABLE 7.3SHOULD LOCAL GOVERNMENT PROTECT REPLENISHING OPEN AREAS: 2014, 2017

Response	2022 ponse (n=659)			17 649)	2014 (n=685)		
	Number	Percent ¹	Number	Percent ¹	Number	Percent ¹	
Yes	458	80.4%	303	85.1%	542	79.1%	
Not Sure	66	11.6%	42	11.8%	97	14.2%	
No	46	8.1%	11	3.1%	11	1.6%	
Total	570	100%	356	100.0%	650	100%	
Missing	89	-	293	-	35	-	

(Q8.12 – 2022 Survey)

 1 Percent calculated without [Missing] due to the high proportion of non-response



Appendix II: Survey Comments

Question 2.8: What is the reason you are currently unemployed?

- Other, please explain (n=29):
 - between jobs
 - by choice -stay at home mom
 - Caregiving family member
 - Choice
 - Chronic Fatigue and other medical issues
 - Disability due to chronic pain
 - Disabled since 1997
 - Have not gone back to work yet
 - Housewife
 - I am a stay-at-home mom
 - I am a student
 - I am raising my children.
 - I'm currently a student
 - I'm immunocompromised, and a full-time caregiver
 - Raise children
 - SAHM
 - SAHM
 - School
 - Stay at home mom
 - Stay at home mom
 - Stay at home parent
 - Stay at home parent
 - Stay home to raise my family
 - Stay-at-home mom

Question 2.16: For the <u>first person</u> who is having difficulty finding full-time employment, Other, please explain (n=20):

- Comorbidity and anxiety
- Depression
- Disability
- Had to stay home to homeschool children
- Having hard time finding full time job as a fresh graduate for 2 years
- Recent college grad
- Resigned from other job to look for other employment opportunities
- Unable to work because of Covid-19 lockdowns
- Vaccine requirement
- Young person just graduated from college



Question 2.20: For the <u>second person</u> who is having difficulty finding full-time employment, Other, please explain (n=5):

• (No text responses entered)

Question 2.21: Do you believe this <u>first person</u> is having difficulty finding full-time employment because of the Covid-19 pandemic? Please explain:

- Comorbitity and anxiety
- Don't know
- Not sure
- Too many mandates and government \$

Question 2.22: Do you believe this <u>first person</u> is having difficulty finding full-time employment because of the Covid-19 pandemic? Please explain:

• (No text responses entered)

Question 2.32: For the first person who lost their job in the past 12 months,

Other, please explain (n=7):

- Company reorganization
- Had covid and was in a probationary period for full time position, but was out sick for almost a month and therefore was let go during probationary period
- Job elimination
- Vaccine requirement

Question 2.36: For the <u>second person</u> who lost their job in the past 12 months, Other, please explain (n=4):

- Forced to go part-time
- Vaccine requirement

Question 2.46: What is your expected (or current) living arrangement in retirement? Other, please explain (n=13):

- Downsize but not sure where
- Garlands
- Get OUT of Illinois!
- If I can afford the property taxes on my limited income, stay in my house
- Move out of cook county/Illinois
- Move to adult living if mobility a concern
- Move to Garlands
- Move to ranch house to age in place in Barrington
- Retirement Community
- Retirement home
- Split out time between Barrington and Downtown Chicago
- Stay in present home due to poor real estate value recovery
- We have downsized.



Question 2.47: Which of the following statements best describes your expected (or current) retirement activities? Select ALL that apply.

Other, please explain (n=25):

- An equal combination of most items above
- Attend Health Club
- Care for my mother along with my siblings who also live in Barrington
- Creative activities in fine art & music
- Don't know
- Foster parent(s)
- Free-lance writer
- Grandchildren not primary caregiver
- Help with grandchildren as needed
- Help with grandchildren
- Maintenance where I live
- Need more physical activity
- Not sure! Enjoy life hopefully
- Part time care giver for grandkids
- Part time caregiver for grandchildren
- Part time grandchildren care
- Small at home business, Genealogy
- Study independently
- Teach at Judson university
- Way too far in the future to have plans
- Write

Question 5.5: Where are you <u>most</u> likely to go for help if someone in your household needs information regarding supportive services and programming? Select only ONE. Other, please explain (n=15):

- B Strong Together newsletter & members
- BACOA
- BACOA
- Friends
- Hope Ministries
- Insurance company to find covered providers of care
- Local school district
- Myself only
- Not sure
- Psychiatrist, therapist
- Reach out to friends who are counselors for recommendations
- School
- School support personnel
- We're responsible for ourselves
- Wife works at hospital



Question 6.3: Why does this person need a caregiver? Select ALL that apply. Other, please explain (n=10):

- Advanced dementia
- Children
- Financial constraints
- He doesn't know but will need when he ages out
- Illness
- Memory Care
- Over 90 years old. But needs minimal assistance and lives on his own. His wife, my mother, just died in January
- Pregnant issues
- With significant memory loss

Question 6.6: Do you currently need help finding reliable assistance for any of the following needs for yourself or someone in your home? Select ALL that apply.

Other: Please specify (n=8):

- Emergency childcare
- Family occasionally helps with chores
- Housing
- Not at the present time but in the future?
- The struggle is; I am disabled and also trying to care for my father. Most of the time recently I've gotten worse and it seems like I need a caregiver just as much if not more at times. This is difficult.
- Transportation
- Transportation

Question 7.9: If no, why didn't they seek help? Select ALL that apply.

Other, please specify (n=19):

- Automated phone system s-difficulty responding (arthritic hands choosing correct keys) & too time consuming
- Can handle my issues on my own
- Counselor recommended by 220 wanted to charge double for in person due to their office being closed
- Covid Immune compromised
- Covid concerns
- Covid-19, remote schooling, no opportunity for substitute caregiver
- Denial
- Difficulty accessing resources available in community due to lack of availability
- Fear of discrimination against their Christian beliefs and being white
- Healthy
- I went to sleep specialist counselor, but she didn't help; and I don't know other choices.
- Lack of skilled professionals
- Managed with support of friends and family



- My husband 2/12/2021, I feel it's part of the grieving process
- Nobody in the area seems to accept Medicaid
- No doctor would see people because of the lockdowns
- Not comfortable
- Not sure how to access help during covid.
- Not willing to admit issue

Question 8.9: If you do not think our local government is doing enough to prepare for more severe weather events, what more would you like our local government to do? (n=106)

- Actually, get the plows out, and if they don't get them out just start cancelling school because the road conditions are dangerous and sometimes make me unable to go to school. I don't have a driver's license and both my parents work, and because of the weather nobody wants to drive me. I end up other walking in freezing weather all the way across town or end up having to be absent from school.
- Add more protective measures, improve the measures
- Adjust the economic structure, improve energy efficiency, develop, and utilize hydropower and other renewable energy sources, and strengthen ecology.
- Advance forecast
- Anything. I don't see any preparation at all.
- Assign the place where people can go.
- be prepared for storms, tree limb removal, flooding, snow in streets and on sidewalks
- Better communication
- Better communication
- Better plowing and shoveling so people with physical disabilities can drive around town, cross the street, park cars etc.
- Better snow clearing
- Better stormwater management
- buildup, not out; have electric school buses (double as generators when needed); bury power cables; use more sand not salt on roads; incentivize solar, wind power
- Bury electrical lines
- Communicate about what they are doing.
- Community education; heat & cold shelter availability
- Cuba Road, between 59 and Ela, gets icy and very dangerous during rain or snowstorms. There should be rails or guards where the roads curve and there are ponds/large bodies of water.
- Do more education on waste management and add in food waste composting
- Don't know what the current plans are so can't answer
- Don't have tornado sirens where we live in Barrington hills
- Emergency response planning, power security
- Establish regulations/ standards: e.g.: reduce turf grass and no watering of turf grass; save water through rain barrels, mulching, planting native species that don't require frequent watering
- Evaluate infrastructure capacity for increasing precipitation events, plan for and develop more gray and green infrastructure. Emergency preparedness is good



- Explain the seriousness of severe weather
- First off be prepared to clean the roads after snowfall to avoid accidents. Where is the taxpayer money going? Most roads are not cleaned leading to accidents. Make parks family friendly. No sporting activities at parks either for youth or parents.
- For one thing, where I live, still in Barrington, we can barely hear the tornado siren.
- Get some temporary shelters
- Global warming initiatives
- Have an emergency plan
- Gave citizen emergency action plans
- Have emergency plans for neighborhoods Shelters, etc
- I am not sure about what to do. We manage on our own. I do think it is ridiculous to pay to have snow removed from the piles. That seems like a waste of money. During bad weather events I wonder if food could be delivered to the elderly and to Greencastle.
- I cannot hear the tornado siren during calm weather
- I don't know
- I haven't taken the time to understand what sort of preparations are in the works
- I hope the collapse of the ground is repaired in time
- If houses destroyed by Mother Nature how will you house residents?
- Investigate ways to prevent future climate change weather event-related flooding by restructuring drainage systems
- It's not perfect
- Learn the new methods of achieving safer roads using less salt
- Long range plans associated with global warming and rise in water tables
- Make emergency plan known to all residents
- Manage water retention, have backup systems
- More emails or texts alerts
- More frequent notifications via sign up email
- More info via mail
- More options
- More pedestrian friendly. Clear all sidewalks
- Not sure
- Not sure what to do for hail. Not sure about wind or extreme cold or heat
- Our street is rarely blowed and cleared
- Pay more attention to some details, such as vegetable serving
- Plan for better drainage
- Plow local streets before people need to go to work
- Pre salting roads before storms
- Prepare people for power loss, flooding, severe storms
- Preparing for droughts/water management/ water runoff during heavy storms
- Protect what wetlands we have left...they seem to be protected until some retailer or developer comes up with the right price : -(
- Provide direct mail and/or electronic info about storm warnings. Warning sirens do not seem consistent at all with severe weather
- Provide more information



- Publish an assessment of how the govt is prepared and would respond
- Publish any plans for various severe weather events (tornado, ice storm, etc).
- Reveal plans to the public, if any exist
- Share the plans publicly.
- Should a tornado go through, where would the shelters be?
- Simply plow snow. Major Streets go a day without plowing
- Snowplow roads
- Snowstorm on the roads
- Something that would greatly help is delayed start when there is bad weather
- Start bringing in water from lake Michigan instead of relying on so many private well systems
- Take preventive measures
- Talk about shelters, evacuation planning, etc.
- The drainage system is not doing a good job
- The roads aren't even getting plowed in a timely manner when it snows
- There should be a universal system to notify of impending disasters
- Upgrade our sewage system that is on the verge of being overwhelmed.
- Upgrade Storm Water Sewer
- We will ensure that the people are satisfied
- Well done continue the lunar calendar

Question 9.7: Please select as many of the following options as needed to reflect the sexual orientations of people in your household. Select ALL that apply.

- A sexual orientation not listed here. Please specify (n=6):
 - Do not agree with these types of questions
 - My kids are too young for me to know their sexual orientation.
 - Normal
 - Really stupid questions
 - There is male and female only
 - This survey has gone on too long

Question 11.5: Please list health care or services that were needed (n=59):

- Able to see a doctor normally
- All of the trials for long haul covid are full. Medicine needed cannot be accessed without a trial. The approved treatments were unsuccessful.
- Appointments for vaccines and boosters were hard to get.
- Can accept normal examination
- Covid testing
- Doctor appointment
- Doctor's visit, hospitalization, prescription drugs
- Dr
- ER services
- Family care provider



- Follow up on her recovery, months later still lagging mentally
- General medical care
- I wish I could see a doctor easily
- In person mental health counselors
- It is better to be able to pick them up and solve traffic problems
- It would be nice if we could make house calls
- Life health care
- Massage
- Medical follow up with PCP
- Negative side effects from COVID vax and was ignored by medical industry
- None just home care
- None -fully vaccinated house prior to covid
- None. It was very mild for all but loss of smell for 1.
- None. Just had to stick it out. It was more of a prolonged loss of taste and smell. Lungs still aren't what they used to be, and general fatigue for months.
- Regular vaccination
- Testing
- Testing only
- That won't be necessary
- The body health
- The doctor was able to give treatment in time
- There is no
- They want better quality of service
- Timely treatment
- To be seen by a DR and treated for symptoms without going to the hospital
- Treatment for COVID
- Vaccines and insurance are provided
- We need vaccines and a full body check
- Zaps from my GP

Question 13.1 What would you recommend to make the Barrington area a healthier place to live?

- 1.) Get Lake Michigan water. The water in Barrington is atrocious. 2.) Build more pickleball courts and keep them open all year
- 100% vaccination
- A "yellow page" type site of EVERYTHING in the Barrington area (including non-Chamber participants). We lost doctors, attorneys, accountants and such a site would have been a great starting place.
- Access to psychiatrists. There are none that are taking new patients and no way for patients in need of medication to get prescriptions -particularly young people with anxiety
- Add some more info about Pickle Ball Course, we found out too late for the season there are some available. Think about trailing Cross Country skiing tracks in one of the Forest Preserves during snow season ...
- Alcohol and drug issues with school age kids and their parents.



- Allow the park district to change their out of district policy. Only village residents get affordable privileges.
- Arouse the awareness of residents and do a good job of protection
- At home medical care and vaccines and basic testing, such as blood work for those who can't either safely or easily make it to doctors n such. When on only Medicare, there are extremely limited coverage for this if at all. A volunteer program to help low-income patients in need would be amazing.
- Overall, give people the freedom to live according to their values -especially conservative ones. Personally, we need more programming for special needs people in our community.
- Encourage residents to clear sidewalks and be friendly to pedestrians -Walk is good exercise + Free -Also good for local shopping and restaurants
- Would like more stores in Barrington so I do not have to go to other suburbs and give them my money!!! And make them rich!!!
- Wash hands. If sick stay @ home. Be aware of large crowds. Just use common sense.
- Parking to allow stronger commerce
- Pay attention to environmental protection
- People caring enough about one another to wear masks in school and other public places while COVID rates and/or transmission is high.
- People in Barrington need to learn how to be more accepting of others that are different than them. Barrington has become a place where you need to be a certain race, political party, income bracket, etc. It's a huge problem and pushing people out of the zip code.
- People working together from both sides of political aisle instead of against each other
- Perfect catering service
- Perfect restaurant
- personal protection
- plant more trees; need overpass for trains
- Please encourage open natural spaces. That's something very unique about our area and is an asset.
- police should endorse and TICKET on Main Street at the crosswalk at North Ave and speeders down North Ave
- Preservation/expansion of natural spaces and resources for us to enjoy them
- Preserving outdoor spaces and adding more, remove HOA barriers to a rural lifestyle (chickens, livestock, etc.)
- Promote healthy eating, vitamins, lifestyle, and exercise as the everyday way to live
- Promote more tolerance.
- Promote volunteerism, especially in conservation programs
- Promotion of healthier lifestyles through all types of media. We need to see it constantly.
- Protect the division this pandemic has created and support all choices. Stop forcing mandates and respect choice.
- Protect the environment
- Protect wetlands and open space; encourage and support home vegetable gardening; more bicycle paths.



- Put in more bike trails so you could get around town without a car.
- Put underpasses under the tracks on Route 59 and Route 14.
- Really don't know.
- Reduce speed limit to 35 route 59 and add a noise cancelling wall on i90, Higgins and 59. Add more trees on Arboretum Blvd and route 59 near Arboretum Dr. Put a no U-turn at Regency Blvd and Arboretum Dr.
- reduce train crossing traffic; increase electric vehicles/busses; plant trees and & educate citizens about simple things they can do toward conservation
- Reduce, Reuse, Recycle
- Remove invasive buckthorn and honeysuckle from all government land and educate residents on the impact on private land. Remove plastics from all wooded areas and prairies. Promote cycling and walking by increasing paths along major roadways.
- Remove mandates
- Replace the trees! We lost so many to the emerald ash borer and were told they would be replaced. It looks so bare as you enter Barrington.
- Restrictions on herbicides and pesticides
- Save the open spaces
- See previous notes about Cuba Marsh Forest Preserve. I wish they integrated the community, since the community integrates the forest preserve. Since we basically live on the forest preserve there should be inclusiveness and collaboration.
- Self-reliance, unity, fraternity
- Senior Center
- Senior center needed, less traffic, less freight trains
- Sidewalks
- Social relationships need to improve
- Solve the traffic issue around the village. That's a big issue.
- Solve traffic jams
- Special attention should be paid to the environment
- Start and Finish the Train Underpass
- Stay out of political gender identity,
- Stop being so woke! Fewer rules and regs. Lower property taxes.
- Stop following Cook County politician's mandates
- Stop making Race and Intolerance an issue.
- Stop mask mandates, stop vaccination campaigns for healthy people, stay out of peoples' private lives and health decisions
- Strengthen prevention and control and reduce close contact
- Strive to be an open, welcoming, and tolerant country
- Support a more useful and vibrant downtown to provide better access to food, restaurants, clothing, and other life items
- Take good protection, wear masks, ventilate frequently, care for the environment,
- The climate is quite suitable
- The climate is suitable
- The only time we've ever been discriminated against in the Barrington Area is due to our kids' Covid 19 vaccination status. That needs to stop.



- The sanitation environment has been improved
- The traffic order is better
- There are hardly any programs available for young children. We should have schoolbased learning like preschool.
- to protect the environment
- Too much bullying and social aggression from the adults and the kids. Worst place I have ever lived.
- Unmask our children and vote in a new school board that supports our children. We would move if we could. The schools have been horrible since the pandemic. The teachers are not focused on teaching the kids. They are woke and trying to sneak in CRT and they are nasty to the kids about masking. I don't recommend Barrington or the state of IL to anyone now.
- Vaccinations, mask wearing social distancing
- We need a way to be less divisive. It is important that we all benefit from learning other narratives.
- With to eliminate racial and economic discrimination attitudes and barriers
- Would get more exercise and social activity with a dog park where dogs could run free
- You must wear a mask when you go out



Appendix III: Survey Instruments

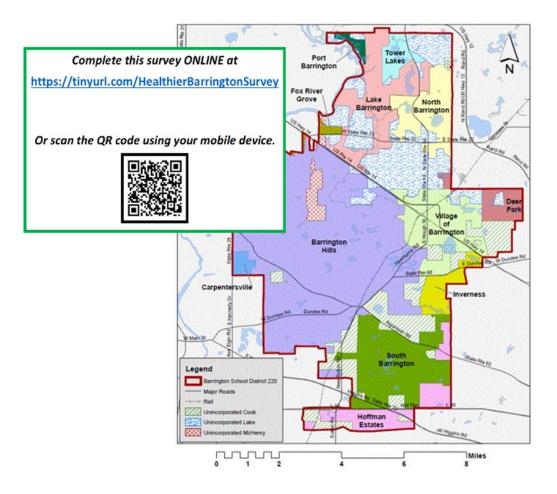
English



This survey helps organizations in the Barrington area understand how our community is living, what we value most, and where we can improve. It has been conducted every three years since 1996. Questions span a wide range of topics, including overall health, economic conditions, water conservation, social service needs, cultural shifts, and more.

Please answer the questions to the best of your ability. **There are no right or wrong answers.** Your participation is voluntary and all responses are completely anonymous.

On completing this survey you can enter a raffle to be included in a drawing for one of twenty \$25 gift cards to local Barrington businesses. Gift cards have been donated by The Barrington Chamber of Commerce.



Healthier Barrington Coalition Members

Advocate Good Shepherd Hospital Barrington Area Chamber of Commerce Barrington Area Community Foundation Barrington Area Council of Governments Barrington Area Council on Aging Barrington Area Development Council Barrington Area Library Barrington Area Safety Council

Barrington Career Center Barrington CUSD 220 Barrington Park District Barrington Township Barrington Youth and Family Services BStrong Together Character Counts in the Barrington Area Citizens for Conservation Cuba Township Family Service of the Barrington Area Journey Care Leave No Child Inside National Alliance on Mental Illness Neurobalance Center Samaritan Counseling Center Smart Farm of Barrington The Campus Life Center of Barrington Village of Barrington



Section I: Tell us what you like about the Barrington Area

Q1.1	Why do you choose to live in the Barrington area? Select ALL that apply.						
	Abundant natural resources & open space						
	Family	Proximity to Chicago					
	Good schools	Safe neighborhoods					
	Jobs	Other, please explain					
Q1.2	Where do you look for local information? Select ALL that apply.						
	Blogs	Newspapers					
	Direct mail/Newsletters	Social media					
	E-Newsletters	Television					
	Handouts or posted fliers	Websites					
	Local magazines	Other, please specify					
	🗖 Radio						
Q1.3	When you don't shop online, where do you shop? Select ALL that apply.						
	Arlington Heights	Randall Road/Algonquin Commons					
	Deer Park/Towne Center	South Barrington/Arboretum					
	Downtown Chicago	Spring Hill/Dundee					
	Fox River Grove	Village of Barrington					
	Lake Barrington	🗖 Wauconda					
	🗖 Lake Zurich	Woodfield/Schaumburg					
	Palatine	Other, Please specify					
Q1.4	When you don't shop online, where do you	shop the MOST? Select ONE.					
	Arlington Heights	Randall Road/Algonquin Commons					
	Deer Park/Towne Center	South Barrington/Arboretum					
	Downtown Chicago	Spring Hill/Dundee					
	Grove Fox River Grove	Village of Barrington					
	Lake Barrington	Wauconda					
	Lake Zurich	Woodfield/Schaumburg					
	Palatine	Other, Please specify					

	Strongly			Strongly	Don't
	<u>Agree</u>	<u>Agree</u>	Disagree	<u>Disagree</u>	<u>Know</u>
Cultural activities, arts	🗖	🗖	ם	ם	🗖
Libraries	ם	🗖	ם	ם	🗖
Local government services (police, fire, public					
works, etc.)	ם	🗖	ם	ם	🗖
Park Districts	ם	🗖	ם	ם	🗖
Public transportation					
Schools	ם	🗖	ם	ם	🗖
Affordable housing	ם	🗖	ם	ם	🗖
Affordable legal services	ם	🗖	ם	ם	🗖
Outdoor nature activities	ם	🗖	ם	ם	🗖
Rental housing	ם	🗖	ם	ם	🗖
Residences that are accessible for seniors and/or people					
with mobility challenges	ם	🗖	ם	ם	🗖
Supportive, affordable housing for disabilities					
(mental and/or physical)	ם	🗅	ם	ם	🗖

Q1.5 "The Barrington area has adequate and high quality..."



	Major	Minor	Not an	l'm Not
	Issue	<u>lssue</u>	Issue at All	<u>Sure</u>
Aging-related concerns	🗅	🗖	ם	
Child Abuse	🗖	🗖		
Crime	🗖	🗖		
Discrimination against people who identify as				
gay, lesbian, bisexual, or transgender	🗅	🗖	ם	
Developing more local employment	🗅	🗖	ם	
Domestic violence	🗅	🗖	ם	
Elder abuse	🗅	🗖	ם	
Gangs, delinquency, and youth violence	🗅	🗖		
Intolerance of differing viewpoints	🗅	🗖	ם	
Job retraining after job loss	🗅	🗖	ם	
Jobs and training for the disabled	🗅	🗖	ם	
Mental health (anxiety, depression)	🗅	🗖	ם	
Property tax equity	🗅	🗖	ם	
Racial and ethnic discrimination	🗅	🗖	ם	
Saving and restoring historic housing	🗅	🗖	ם	
Saving and restoring open space	🗅	🗖		
Substance abuse (adults, including alcohol)	🗅	🗖		
Substance abuse (youth, including alcohol)	🗅	🗖		
Suicide prevention	🗅	🗖		
Traffic control	🗅	🗖	ם	
Transportation Options	🗅	🖸	ם	

Q1.7 Are support services, activities, and educational programs adequate in the Barrington area?

	Need More	Need	Need More	
	Support	More	Educational	No
	<u>Services</u>	<u>Activities</u>	Programs	<u>Needs</u>
Adults with Special Needs	🗖	ם		
Children with Special Needs	🗖	ם		
Parents and Families	🗅	ם		
Senior Citizens (65 years old and up)	🗅	ם		
Teens (11 to 18 years old)	🗅	ם		
Young Children (10 years old and under)	🗅	ם		
College age/young adults	🗅	ם		
Adults	🗅	ם	ם	



Section II: Working and Retirement

This section focuses on employment and retirement for yourself and in your household.

Q2.1	 What is your current employment status? Employed, full-time [IF "Employed, full-time", GO TO Q2.2] Employed, part-time [IF "Employed, part-time", GO TO Q2.2] Unemployed [IF "Unemployed", GO TO Q2.7] Retired [IF "Retired", GO TO Q2.7]
Q2.2	 Are you currently engaged in work activities? Employed and currently engaged in work activities [GO TO Q2.3] Employed, in receipt of employment income, but not carrying out work duties [GO TO Q2.7]
Q2.3	If employed and currently engaged in work activities, are you currently working from home? Yes, full-time [IF YES, GO TO Q2.4] Yes, part-time [IF YES, GO TO Q2.4] No [IF NO, GO TO Q2.6]
Q2.4	Did you normally work from home before the introduction of Covid-19 restrictions? I No I Yes
Q2.5	 After Covid-19 restrictions are lifted, would you like to remain working from home or return to your place of work? Continue working from home Return to place of work Mixture of both
Q2.6	Can your job be done from home? Yes No
Q2.7	Did you receive Covid-19 unemployment benefits at any time during the Covid-19 pandemic? Yes No



Q2.8 What is the reason you are currently unemployed?

- The business where I worked closed
- The business where I worked laid people off due to Covid-19.
- □ I refused to get vaccinated
- I quit to protect the health of my household (ex. I or someone in my household is immunocompromised)
- Other, Please explain: _____
- Q2.9 Are you currently looking for work? Yes [IF "YES," GO TO Q2.11] No

Q2.10 When do you intend to begin looking for work?

- U When I am healthy
- U When the pandemic is over
- □ I do not intend to look for work.
- Q2.11 Is anyone in your household having difficulty finding full-time employment?
 - Yes
 - □ No [IF "NO," GO TO Q2.23]
- Q2.12 How many people in your household have been having difficulty finding full-time employment in the last 12 months?

- **1**
- 2 or more

For the <u>first person</u> who is having difficulty finding full-time employment,

- Q2.13 Was this person fired or laid off Yes No because of the Covid-19 pandemic?
- Q2.14 Was this person unable to work due to long Covid-19 symptoms?
- Q2.15 Did this person retire due to the Covid-19 pandemic?
- Q2.16 Other, Please explain:

	For the <u>second person</u> who is having a	difficu	ılty
	finding full-time employment,		
Q2.17	Was this person fired or laid off because	Yes	No
	of the Covid-19 pandemic?		
Q2.18	Was this person unable to work due to		
	long Covid-19 symptoms?		
Q2.19	Did this person retire due to the Covid-		
	19 pandemic?		
Q2.20	Other, Please explain:		



Q2.21	Do you believe this <u>first person</u> is having difficulty finding full-time employment because of the Covid-19 pandemic? Yes No Please explain:	Q2.22	Do you believe this <u>second person</u> is having difficulty finding full-time employment because of the Covid-19 pandemic? Yes No Please explain:
Q2.23	Did anyone in your household lose their jo Yes No [IF "NO", GO TO Q2.37]	ob in the	past 12 months?
Q2.24	How many people in your household lost	their job	in the past 12 months?
Q2.25	 Please provide the gender for the first person who lost their job in the past 12 months. Male Female Transgender Does not identify as male, female or transgender 	Q2.26	 Please provide the gender for the second person who lost their job in the past 12 months. Male Female Transgender Does not identify as male, female or transgender
Q2.27	 Please provide the age for the first person who lost their job in the past 12 months. 16 - 18 years 19 - 24 years 25 - 34 years 35 - 44 years 35 - 54 years 55 - 64 years 65 years and up 	Q2.28	 Please provide the age for the second person who lost their job in the past 12 months. 16 - 18 years 19 - 24 years 25 - 34 years 35 - 44 years 45 - 54 years 55 - 64 years 65 years and up

	For the <u>first person</u> who lost their job in			For the <u>second person</u> who lost their job in the past 12 months				
	the past 12 months,				the past 12 months,			
~~~~		Yes	No	~~~~		Yes	No	
Q2.29	Was this person fired or laid off			Q2.33	•			
Q2.30	because of the Covid-19 pandemic? Was this person unable to work			Q2.34	of the Covid-19 pandemic? Was this person unable to work due to			
Q2.50	due to long Covid-19 symptoms?			Q2.54	long Covid-19 symptoms?			
Q2.31	Did this person retire due to the			Q2.35	Did this person retire due to the Covid-			
Q2.31	Covid-19 pandemic?	-	-	Q2.55	19 pandemic?	-	-	
Q2.32	Other, Please explain:			Q2.36	•			
Q2.37	How many people in your house	hold	are c	urrently	/ working?			
	0 [IF "0", SKIP TO Q2.44]							
	<b>1</b>							
	2 or more							
Q2.38	Please provide the <u>gender</u> for the	<u>first</u>		Q2.39	Please provide the <u>gender</u> for the <u>seco</u>	nd		
	<u>person</u> in your household who is				<u>person</u> in your household who is currently			
	currently working.				working.			
	Male				🖵 Male			
	Female				Female			
	Transgender				Transgender			
	Does not identify as male, fem	ale or	r		Does not identify as male, female or			
	transgender				transgender			
Q2.40	Please provide the <u>age</u> of the <u>first</u> in your household who is current working.		<u>on</u>	Q2.41	Please provide the <u>age</u> of the <u>second p</u> in your household who is currently wo		_	
	16 - 18 years				16 - 18 years			
	□ 19 - 24 years				□ 19 - 24 years			
	<ul> <li>25 - 34 years</li> </ul>				25 - 34 years			
	<ul> <li>25 - 34 years</li> <li>35 - 44 years</li> </ul>				35 - 44 years			
	<ul> <li>44 years</li> <li>45 - 54 years</li> </ul>				□ 45 - 54 years			
	·				•			
					55 - 64 years			
	65 years and up				65 years and up			

Q2.42	Please provide the <u>work location</u> for the	Q2.43	Please pr	ovide the <u>work location</u> for the
	<u>first person</u> in your household who is		second p	<u>erson</u> in your household who is
	currently working.		currently	working.
	□ At home		🛛 At hom	ne
	Barrington Area		🖵 Barring	gton Area
	City of Chicago		City of	Chicago
	Cook County (Outside Chicago)		🖵 Cook C	ounty (Outside Chicago)
	Dupage County		🖵 Dupage	e County
	Kane County		🖵 Kane C	ounty
	Lake County		🖵 Lake Co	ounty
	McHenry County		McHer	nry County
	Multiple locations/Travel		🖵 Multip	le locations/Travel
	□ Somewhere else		Somew	vhere else
Q2.44	Do you plan to retire?			
	🖵 Yes			
	No [IF "NO", GO TO Q3.1]			
Q2.45	At what age do you plan to retire?			
Q2.46	6 What is your expected (or current) living	g arrange	ement in re	etirement?
	<ul> <li>Downsize to smaller home or apartm</li> <li>Barrington area</li> </ul>	ent in		Move out of the area
	Live part of the year locally and part of elsewhere	of the ye	ar 🗆	Stay in my present home
	Move elsewhere in the Greater Chica	go area		Other, Please explain:
	Move in with family living in the Barr	ington ar	rea 🗆	Not sure
Q2.47	Which of the following statements best of	lescribes	your expe	ected (or current)
	retirement activities? Select ALL that app	ly.		
	Act as primary caregiver for grandchil	dren		Travel
	Act as primary caregiver for my spous another adult, or a child with special	•	t, [	<b>V</b> olunteer
	Leisure			Work as a consultant
	Start a new business			Work part-time
	Take courses			Other, Please explain:

## **Section III: Household Finances**

This section focuses on how finances are affecting your household.

## Q3.1 In the past year, has your household had difficulty paying your housing expenses?

- Yes
- 🛛 No
- □ Maybe, not sure

# Q3.2 In the past year, has your household had difficulty paying bills other than for housing?

Maybe, not sure

Q3.3 In the past year, have you or any family members you live with been unable to get any of the following when it was really needed? Select ALL that apply.

□ Clothing	Medicine or any health care (medical)
Utilities assistance [IF CHECKED, GOTO Q3.4]	Dental, mental health, vision)
Child Care	None of the above

### Q3.4 In the past 12 months, were your utilities shut off or disconnected?

- 🛛 Yes
- 🛛 No

l'm not sure

## Q3.5 What is your housing situation today?

- □ I have housing
- I do not have housing (staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, or in a park)
- $\Box$  I choose not to answer this question

### Q3.6 Are you worried about losing your housing?

- 🛛 Yes
- 🗆 No
- □ I choose not to answer this question



Q3.7 How often in the past 12 months would you say you are worried or stressed about having enough money to buy nutritious meals?

Never

🖵 Rarely

Sometimes

Usually

□ Always

Q3.8 In the past 12 months, has lack of transportation kept you from meetings, work, or from getting things needed for daily living?

🛛 Yes

🗖 No

I choose not to answer

# Q3.9 Do you feel the lack of access to public transportation in the Barrington Area restricts your ability to do any of the following activities?

	Yes	No
Go to work		
Go grocery shopping		
Go to medical and health care appointments (doctor, physical		
therapy, dentist)		
Go to other activities needed for daily living		

# **Section IV: Our Youth**

The following questions pertain to youth in the Barrington area.

## Q4.1 Is anyone in your household younger than 18 years old?

Yes
No [IF "NO," GO TO Q4.3]



# Q4.2 Which of the following, if any, are <u>i</u>ssues for persons under 18 in your household? Select ALL that apply.

- □ Aggressive or violent behavior
- Alcohol use
- Anxiety, nervousness
- Bullying
- Depression
- Discrimination due to disability
- Discrimination due to gender identity
- Discrimination due to race or ethnicity
- Discrimination due to sexual orientation
- Drug use
- Eating disorders

- Excessive pressure to succeed
- Learning disabilities
- Negative peer pressure
- Negative body image
- Obesity
- Overscheduled
- Serious school-related problems
- Sleep deprivation
- □ Uncontrolled anger/ temper tantrums
- None of the youth in my household have any of these issues

Q4.3 How often do you think there are unsupervised parties where young people have access to alcohol or drugs in your community?

- NeverOften
- □ Rarely □ All the Time
- □ Sometimes □ I'm not Sure

Q4.4 Do you think that parents should be held accountable for underage alcohol consumption that occurred on their property if they knew about it in advance or while it happened?

- Yes
- 🛛 No
- I'm not sure

## **Section V: Health Care**

This section focuses on questions related to health insurance and health care for your household.

Q5.1 To the best of your knowledge, how many people in your household are NOT covered by medical insurance?

□ None. Everyone has health insurance in my household. [IF "None," GO TO Q5.4]

**1** 

2 or more

#### Q5.2 Please select the ages of all people in your household who are currently NOT covered by medical insurance. Select ALL that apply.

- 0 -5 years
- □ 6 15 years
- □ 16 18 years
- □ 19 24 years
- **25 34 years**
- **35** 44 years
- 45 54 years
- **55** 64 years
- □ 65 years and up

### Q5.3 Why are some people uninsured in your household? Select ALL that apply.

- Deductibles too high Need help getting insurance Premiums too high
- Don't get sick often/don't need insurance
- I'm not sure why they're not covered
- Lost job due to Covid-19

## Q5.4 Has your household taken any of the following actions during the past year? Select ALL that apply.

		Yes, due to		
	Yes, due to	LACK OF	Yes, due to	
	<u>COST</u>	<u>AVAILABILITY</u>	<u>Covid-19</u>	<u>No</u>
Delayed behavioral or mental health				
care services	ם	🗖	🗖	
Delayed buying or taking prescription				
medications	ם	🗖		
Delayed dental care	ם	🗖		
Delayed other health care services	ם	🗅		

Q5.5 Where are you most likely to go for help if someone in your household needs information regarding supportive services and programming? Select only ONE.

Church, clergy	On-line 2-1-1
Friend or family	Phone book, directory
Internet	Physician
Library	Social worker, counselor
Local agency	Other, Please specify

## **Section VI: Support for Caregivers**

In this section, we want to understand the needs of those providing care to others in the Barrington area.

- Q6.1 Are you a caregiver for a spouse, parent, other adult, or a child with special needs, regardless of whether or not they live with you?
  - 🛛 Yes
  - □ No [IF "NO," GO TO Q6.5]
- Q6.2 Where does the person who you care for live?
  - □ In my home
  - On his/her own
  - □ In a structured facility (for example, nursing home, group home, assisted living, etc.)
  - Somewhere else

## Q6.3 Why does this person need a caregiver? Select ALL that apply.

- Cognitive disability
- Mental/Behavioral health
- Older adult

- Special needsPhysical disability
- Other: Please explain _____

Q6.4 If you personally were unable to provide the assistance this person needs, is there someone else who would do the things you do?

- Yes
- 🛛 No
- Don't know

Q6.4 Which types of respite care would your household benefit from? Select ALL that apply.

- Companion care
- Day program for the person we care for
- Help with housework
- □ Affordable respite care

- Overnight program for the person we care for
- Other assistance
- Our household does not need any respite care assistance



# Q6.5 Please select any of the following services, if any, which you or a close family member 65 years and up, living in the Barrington area, might benefit from. Select ALL that apply.

- Assistance coping with Alzheimer's, Dementia, or cognitive impairment
- Assistance with benefit programs (e.g., Medicare, Medicaid, etc.)
- □ Assistance with management of multiple medical conditions
- $\hfill\square$  Assistance with medication management
- □ Consultation with physician specializing in geriatric care
- □ Home nursing care
- □ Home cleaning/yard work
- Home repairs
- **Hospice**
- Prevention education regarding the risk of falls
- □ Not applicable

# Q6.6 Do you currently need help finding reliable assistance for any of the following needs for yourself or someone in your home? Select ALL that apply.

- □ Activities of daily living (bathing, showering, dressing, eating, getting in and out of bed or chairs, using the toilet)
- Preparing meals
- □ Shopping
- □ Managing money, such as keeping track of expenses or paying bills
- Using the telephone, including texting
- □ Support so that person can participate in social events
- Doing heavy work around the house like scrubbing floors, washing windows, and doing heavy yard work
- Doing light work around the house like doing dishes, straightening up, light cleaning, or taking out the trash
- Managing medications
- Communicating with others
- Meeting the financial burden of caregiving
- Getting a short break from caregiving (respite)
- □ Managing the emotional or mental stress of caregiving
- □ Finding a temporary substitute to provide occasional care
- Taking care of myself
- □ Providing physical assistance, including lifting and carrying
- Other: Please specify _____
- Do not need help



## Section VII: Behavioral and Mental Health

In this section, we are looking to understand how Barrington area residents are coping.

# Q7.1 Select from the following list, situations which you or someone in your household has experienced during the past year, to the best of your knowledge. Select ALL that apply.

- Emotionally abused (intimidated, coerced, isolated, threatened, or degraded)
- □ Financially abused (your money or your assets used without your permission)
- Physically abused (hit, slapped, kicked, or physically hurt)
- Sexually abused (forced to have sexual activity)
- □ Nobody in my household has had any of these experiences in the past year

### Q7.2 How often do you feel lonely or isolated from those around you?

- Never
- Rarely
- □ Sometimes
- Fairly Often
- Frequently

# To the best of your knowledge, in the past year, did you or a household member <u>think about seeking</u> professional help with any of the following issues?

				<u>l'm not</u>
		Yes	<u>No</u>	<u>sure</u>
Q7.3	Behavioral or emotional (mental health) problems			
Q7.4	Problems with alcohol			
Q7.5	Problems with drug use			

# To the best of your knowledge, in the past year, did you or a household member <u>seek</u> professional help with any of the following issues?

				<u>l'm not</u>
		Yes	<u>No</u>	<u>sure</u>
Q7.6	Behavioral or emotional (mental health) problems			
Q7.7	Problems with alcohol			
Q7.8	Problems with drug use			
		IF "NO" TO	ANY OF TH	E ABOVE, GO
		TO Q7.9, 0	THERWISE	GO TO Q7.10]



Q7.9	.9 If no, why didn't they seek help? Select ALL that apply.		
	Available times not convenient	Lack of insurance	
	Could not get an appointment soon	Could not get there due to limited transportation	
	enough	options	
	Could not find help	Stigma of getting help with mental health	
		problems	
	Didn't know where to go	Other reason(s)	
	Financial concerns, cost of care	I don't know why they did not seek professional help	
Q7.10	To the best of your knowledge, have you o or made plans for suicide during the past y	r any members of your household seriously considered rear?	
	□ Yes		
	No [IF "NO," GO TO Q7.12]		
	□ Maybe		
Q7.11	If yes, how old is this person?		
	Under 18 years	□ 45 – 64 years	
	□ 18 – 29 years	G5 years and up	
	30 – 44 years		
Q7.12	Stress is when someone feels tense, nervo	us, anxious, or can't sleep at night because their	
	mind is troubled. How stressed are you?		
	Not at all	Quite a bit	
	A little bit	Very much	
	Somewhat	I choose not to answer this question	
Q7.13	How often do you have a drink containing	alcohol?	
	Never		
	Monthly or less		
	2 to 4 times per month		
	2 to 3 times per week		

□ 4 or more times per week

- Q7.14 Since March 2020, have you increased how often you drink alcohol? For example, you used to only have a drink with dinner, but now you have a drink at other times.
  - 🛛 Yes
  - 🛛 No
  - **I** was drinking more often but have stopped drinking more often.
- Q7.15 Since March 2020, have you increased the amount of alcohol you drink? For example, you used to have one drink a day, but now you have more than one drink a day. One drink is equivalent to 12 ounces of beer, 5 ounces of wine or 1.5 ounces of spirits or hard liquor.
  - 🛛 Yes
  - 🛛 No
  - □ I did increase the amount of alcohol I was drinking but have now stopped.



# Section VIII: Environmental Topics

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The following questions are about environmental topics. We are interested in which topics residents of the Barrington Area have thought about or are thinking about.

		Yes	<u>No</u>	<u>Not sure</u>	Already Did/
Q8.1	Have you or anyone in your household considered purchasing an electric vehicle?				Do This
Q8.2	Have you or anyone in your household considered adding solar panels to your home?				
Q8.3	Have you or anyone in your household considered adding rain barrels to your property?				
Q8.4	Have you or anyone in your household changed your electrical systems to conserve energy (programmable				
Q8.5	thermostats, LED bulbs, etc)? Have you or anyone in your household changed your landscaping to help the environment by removing invasive				
Q8.6	species, adding more native trees or plants, or adding a rain garden? Have you or anyone in your household considered composting your food waste?				

- Yes
   No
   Not sure

   Q8.8
   Do you think our local government is doing enough to prepare for more severe weather events? [IF "YES", GO TO Q8.10]
   Image: Comparison of the severe s
- Q8.9 If you do not think our local government is doing enough to prepare for more severe weather events, what more would you like our local government to do? ______

### Q8.10 To the best of your knowledge, where does your water come from?

- Lake Michigan
- UWater deposits deep underground (deep aquifers)
- UWater deposits underground closer to the surface (shallow aquifers)
- l'm not sure
- Q8.11 Are you concerned about whether the Barrington area will have enough clean water to supply its residents' needs in the future?
  - 🛛 Yes
  - 🛛 No
  - l'm not sure
- Q8.12 Natural open areas, in addition to their recreational value, serve the purpose of replenishing our groundwater. Local governments can do things to protect open areas (for example, limiting the number of structures on a lot or the amount of pavement allowed). Do you think our local government should do things like this?
  - 🖵 Yes
  - 🛛 No
  - l'm not sure

## Section IX: Please tell us a little about yourself and your household?

- Q9.1 How long have you lived in the Barrington area?
  - **5** or fewer years
  - **G** 10 years
  - 11 20 years
  - 21 35 years



### Q9.2 Where do you live?

Barrington	North Barrington		
Barrington Hills	Port Barrington		
Carpentersville	South Barrington		
Deer Park	Tower Lakes		
Inverness	Unincorporated COOK County		
Fox River Grove	Unincorporated LAKE County		
Hoffman Estates	Unincorporated MCHENRY County		
Lake Barrington	Somewhere else		
Which racial and/or ethnic categories best describe you? Select ALL that apply			

### Q9.3 Which racial and/or ethnic categories best describe you? Select ALL that apply.

- American Indian/Alaska Native
- Asian
- Black or African American
- Latino or Hispanic

- □ Native Hawaiian or Pacific Islander
- White
- Other
- Prefer not to answer

# Q9.4 Which racial and/or ethnic categories describe everyone in your household? Select ALL that apply.

- American Indian/Alaska Native
- Asian
- Black or African American
- □ Latino or Hispanic

- □ Native Hawaiian or Pacific Islander
- White or Caucasion
- Other
- Prefer not to answer

## Q9.4 How old are you?

- 18 29 years
- □ 30 44 years
- □ 45 64 years
- □ 65 74 years
- □ 75 or older

### Q9.5 What is your gender?

- Female
- 🛛 Male
- Transgender
- Do not identify as female, male or transgender



Q9.6	What sex were you assigned at birth on your original birth certificate?

Male

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Female

Q9.7 Please select as many of the following options as needed to reflect the sexual orientations of people in your household. Select ALL that apply.

Straight	🗖 Queer
----------	---------

🖵 Gay	Questioning/Unsure or I don't know
-------	------------------------------------

- □ Lesbian □ Asexual
- Bisexual
  A sexual orientation not listed here. Please specify:

Prefer not to answer

# Section X: SOCIAL DETERMINANTS OF HEALTH

The following questions are about activities that you can do to affect your health.

Q10.1 On average, how many days per week do you engage in moderate to strenuous exercise (like a brisk walk)?

🖵 0 days	🗖 5 days
🖵 1 day	🗖 6 days
🖵 2 days	🗖 7 days
🖵 3 days	Decline
🗖 4 days	

Q10.2 On average how many minutes per week do you engage in exercise at this level?

🗖 0 minutes	🖵 90 min
🖵 10 min	🖵 100 min
🖵 20 min	🖵 110 min
🖵 30 min	🖵 120 min
🖵 40 min	🖵 130 min
🖵 50 min	🖵 140 min
🖵 60 min	🖵 150+ min
🗖 70 min	Decline
🗖 80 min	



# Q10.3 How many times in the past 12 months have you used tobacco products (like cigarettes, cigars, snuff, chew, electronic cigarettes/vaping)?

- Never
- Once or twice
- Monthly
- U Weekly
- Daily or almost daily

# Q10.4 How many times in the past year have you used prescription drugs for non-medical reasons?

- Never
- Once or twice
- Monthly
- U Weekly
- Daily or almost daily

### Q10.5 How many times in the past year have you used illegal drugs?

- Never
- Once or twice
- Monthly
- U Weekly
- Daily or almost daily

## Section XI: IMPACT of COVID

We are looking to better understand how residents have been impacted by the Covid-19 pandemic. We care about the health of our community and want to know if there are resources which we need to be providing to keep residents healthy.

## Q11.1 Thinking back to March 2020, has anyone in your household tested positive for Covid-19?

- 🛛 Yes
- □ No [IF NO, GO TO Q11.6]
- 🛛 I don't know
- □ I prefer not to answer



- Q11.2 Thinking back to March 2020, how many people in your household have ever tested positive for Covid-19?
  - **□**1
  - **□** 2
  - □ 3
- Q11.3 Some people who test positive for Covid-19 can have symptoms that linger for weeks or months. Did any person in your household, who ever tested positive for Covid-19, have symptoms that lasted for 4 weeks or more?

🛛 Yes

□ No [IF "NO", GO TO Q11.6]

I don't know

- I prefer not to answer
- Q11.4 Did any person in your household, whose symptoms lasted for 4 weeks or more, have trouble accessing health care or services to treat their symptoms?

🛛 Yes

- □ No [IF NO, GO TO Q11.6]
- I don't know
- □ I prefer not to answer
- Q11.5 Please list health care or services that were needed: _____
- Q11.6 BEFORE the Covid-19 pandemic, how much of your shopping did you do on-line (excluding grocery shopping)?
  - None at all
  - Some
  - Most, but not all
  - □ All of my shopping

# Q11.7 DURING the Covid-19 pandemic, how much of your shopping do you do on-line (excluding grocery shopping)?

- None at all
- Some
- □ Most, but not all
- □ All of my shopping



Q11.8 BEFORE the Covid-19 pandemic, how much of your grocery shopping did you do on-line?

- None at all
- □ Some
- Most, but not all
- □ All of my shopping

Q11.9 DURING the Covid-19 pandemic, how much of your grocery shopping do you do on-line?

- None at all
- □ Some
- Most, but not all
- □ All of my shopping
- Q11.10 What sources do you trust most to get health information about COVID-19 guidelines and resources, such as where to get tested, where to get a vaccine, how to get a vaccine, where to go for treatment, etc.? Select ALL that apply.
  - □ Friends & family
  - □ Your health care provider(s)
  - □ CDC/scientists/researchers
  - 🗖 tv
  - 🛛 Radio
  - Newspaper
  - □ Internet based websites (such as Google)
    - Please specify: _____
  - Social media (such as Instagram, Facebook, Snapchat, Twitter)

Please specify: _____

- □ Faith-based organization/Spiritual Leader/Pastor
- Community healer, such as a traditional healer or alternative medicine practitioner
- Community leaders
- Other, Please specify: _____



# SECTION XII: Health Literacy & Technology

This section is trying to understand if Barrington Area residents can access the health materials that they need to stay healthy.

#### Q12.1 How often do you have someone help you read health-related materials?

- Always
- Very Often
- □ Sometimes
- Rarely
- Never

# Q12.2 How often do you have a problem understanding what is told to you about your medical problems?

- Always
- Very Often
- □ Sometimes
- Rarely
- Never

#### Q12.3 How often have you struggled understanding educational material about COVID-19?

- Always
- Very Often
- □ Sometimes
- Rarely
- Never



Section XIII: Healthy Community Recommendations

Q13.1 What would you recommend to make the Barrington area a healthier place to live?



Would you like to enter a raffle to win a \$25 gift card from the Barrington Chamber of Commerce? Your previous survey responses will remain anonymous.

Yes

No

If yes, please complete the following information.

First Name: _____

Last Name:______

Email Address:_____

Best phone number to reach you at: ______

We thank you for your time spent taking this survey.

Your name will be entered into a random drawing for a \$25 gift card from the Barrington Chamber of Commerce. For a copy of the final report, please contact the Community Health Department. Advocate Good Shepherd Hospital at (847) 842-4088. Thank you!





# Spanish

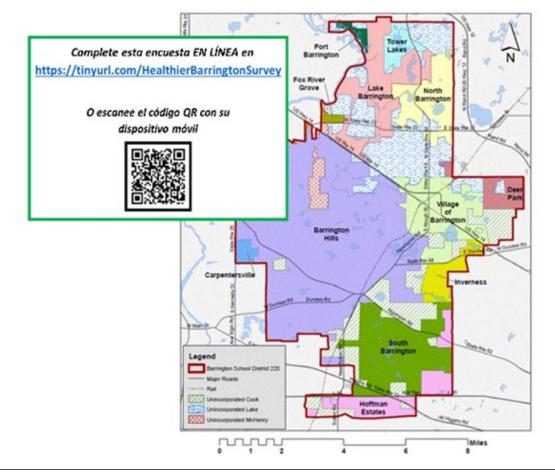




Esta encuesta ayuda a las organizaciones en el área de Barrington a comprender cómo vive nuestra comunidad, qué es lo que más valoramos y dónde podemos mejorar. Se ha realizado cada tres años desde 1996. Las preguntas abarcan una amplia gama de temas, incluida nuestra comunidad, la salud general, las necesidades de atención médica, las condiciones económicas, las necesidades de nuestra juventud, el medio ambiente, las necesidades de servicios sociales, Covid-19 y más.Please answer the questions to the best of your ability.

Responda las preguntas lo mejor que pueda. **No hay respuestas correctas o incorrectas**. Su participación es voluntaria y todas las respuestas son completamente anónimas.

Al completar esta encuesta, puede ingresar a una rifa para ser incluido en un sorteo de una de las veinte tarjetas de regalo de \$25 para empresas locales de Barrington. Las tarjetas de regalo han sido donadas por la Cámara de Comercio de Barrington (The Barrington Chamber of Commerce).



#### Miembros de la Coalición de Barrington más saludables (Healthier Barrington Coalition)

Advocate Good Shepherd Hospital Barrington Area Chamber of Commerce Barrington Area Community Foundation Barrington Area Council of Governments Barrington Area Council on Aging Barrington Area Development Council Barrington Area Library Barrington Area Safety Council Barrington Career Center Barrington CUSD 220 Barrington Park District Barrington Township Barrington Youth and Family Services BStrong Together Character Counts in the Barrington Area Citizens for Conservation Cuba Township Family Service of the Barrington Area Journey Care Leave No Child Inside National Alliance on Mental Illness Neurobalance Center Samaritan Counseling Center Smart Farm of Barrington The Campus Life Center of Barrington Village of Barrington

## Sección I: Cuéntenos qué le gusta del área de Barrington

#### Buenas escuelas Barrios seguros Otro, por favor explique Trabajos Q1.2 ¿Dónde busca información local? Seleccione TODAS las que correspondan. Blogs Periódicos □ Correo directo/Boletines Redes sociales Boletines electrónicos Televisión Folletos o volantes publicados □ Sitios web Revistas locales Otro, por favor especifique Radio Q1.3 Cuando no compras en línea, ¿dónde compras? Seleccione TODAS las que correspondan. Arlington Heights Deer Park/Towne Center □ South Barrington/Arboretum Centro de Chicago □ Spring Hill/Dundee □ Village of Barrington □ Fox River Grove U Wauconda Lake Barrington Lake Zúrich □ Woodfield/Schaumburg □ Palatine □ Otro, por favor especifique

Cuando no compra en línea, ¿dónde compra MÁS? Seleccione UNA. Q1.4

- □ Arlington Heights
- Deer Park/Towne Center
- Centro de Chicado
- □ Fox River Grove
- Lake Barrington
- Lake Zúrich
- □ Palatine

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- □ Randall Road/Algonguin Commons
- □ South Barrington/Arboretum
- □ Spring Hill/Dundee
- □ Village of Barrington
- U Wauconda
- □ Woodfield/Schaumburg
- □ Otro, por favor especifique

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- Q1.1 ¿Por qué elige vivir en el área de Barrington? Seleccione TODAS las que correspondan.
  - Abundantes recursos naturales y espacios abiertos
  - Familia

Nunca pensé en vivir en otro lugar

Proximidad a Chicago

- Randall Road/Algonquin Commons

# Q1.5 " El área de Barrington cuenta con lo siguiente, con adecuados y de alta calidad...."

			En		
	Muy de	De	desacuerd	Muy en	
	a <u>cuerdo</u>			d <u>esacuerdo</u>	
Actividades culturales, artes	🗖	🗖	🗖	🗖	🗖
Bibliotecas	🗖	🗖	🗖	🗖	🗖
Los servicios del gobierno local (policía, bomberos,					
obras públicas, etc.)	🗖	🗖	🗖	🗖	🗖
Distritos de parques	🗖	🗖	🗖	🗖	🗖
Transporte público					
Escuelas					
Vivienda asequible					
Servicios legales asequibles	🗖	🗖	🗖	🗖	🗖
Actividades al aire libre en la naturaleza					
La vivienda de alquiler	🗅	🗖	🗅	🗅	🗖
Residencias accesibles para personas mayores y/o					
personas con problemas de movilidad	🗅	🗖	🖬	🗅	🗖
Vivienda asequible y de apoyo para discapacidades					
(mentales y/o físicas)	ם	🖸	🗅	🗅	🗖

UIC

# Q1.6 ¿Qué tan problemático cree que cada uno de los artículos a continuación es en nuestra área hoy?

			No es un problema	No
	Problema mayor	Problema menor	<u>en</u> absoluto	estoy seguro
Preocupaciones relacionadas con el envejecimiento				
Abuso infantil				
Crimen				
Discriminación contra las personas que se identifica	n			
como homosexuales, lesbianas, bisexuales o trans	•		🗖	
		_		-
Desarrollar más empleo local				
Violencia doméstica Maltrato a personas mayores				
Pandillas, delincuencia y violencia juvenil				
Intolerancia a los diferentes puntos de vista				
Reciclaje laboral después de la pérdida del empleo.				
Empleos y formación para discapacitados				
Salud mental (ansiedad, depresión)				
Equidad del impuesto a la propiedad				
Discriminación racial y étnica	🗖	🗖	🗅	
Restauración de viviendas históricas				
Restauración de espacios abiertos				
Abuso de sustancias (adultos, incluido el alcohol)				
Abuso de sustancias (jóvenes, incluido el alcohol)				
Prevención del suicidio				
Control de trafico				
Opciones de transporte	🖬		🖬	Ц

# Q1.7 ¿Son adecuados los servicios de apoyo, las actividades y los programas educativos en el área de Barrington?

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	servicios de	Necesita más <u>actividade</u> <u>s</u>	programas	Sin <u>necesidades</u>
Adultos con necesidades especiales	🗖	🗅	🗖	
Niños con necesidades especiales	🗅	🗖	🗖	🗖
Padres y familias	🗅	🗅	🗅	
Tercera Edad (65 años en adelante)	🗅		🗅	
Adolescentes (11 a 18 años)				
Niños pequeños (menores de 10 años)				
Edad universitaria/adultos jóvenes				
Adultos			🗅	

# Sección II: Empleo y jubilación

Esta sección se enfoca en el empleo y la jubilación para usted y su hogar.

### Q2.1 ¿Cuál es su situación laboral actual?

- □ Empleado de tiempo completo [Si "Empleado de tiempo completo", VAYA A Q2.2]
- □ Empleado a medio tiempo [Si "Empleado a medio tiempo", VAYA A Q2.2]
- Desempleado [Si "Desempleado", VAYA A Q2.7]

Jubilado [Si "Jubilado", VAYA A Q2.7]

### Q2.2 ¿Actualmente se encuentra realizando actividades laborales?

Empleado y actualmente ocupado en actividades laborales [VAYA A Q2.3]
 Empleado, recibiendo ingresos del trabajo sin realizar tareas laborales [VAYA A Q2.7]

- Q2.3 Si está empleado y actualmente participa en tareas laborales, ¿está trabajando actualmente desde su casa?
  - □ Si, a tiempo completo [SI LA RESPUESTA ES "Si", VAYA A Q2.4]
  - □ Si, a tiempo parcial [SI LA RESPUESTA ES "Si", VAYA A Q2.4]
  - □ No [SI LA RESPUESTA ES "No", VAYA A Q2.6]
- Q2.4 ¿Trabajaba normalmente desde casa antes de la introducción de las restricciones de COVID-19?
  - 🛛 No
  - 🛛 Sí
- Q2.5 Después de que se levanten las restricciones de COVID-19, ¿le gustaría seguir trabajando desde casa o regresar a su lugar de trabajo?
  - Seguir trabajando desde la casa
  - Regreso al lugar de trabajo
  - Combinación de ambos
- Q2.6 ¿Se puede hacer su trabajo desde la casa?
  - 🛛 Sí
  - 🛛 No
- Q2.7 ¿Recibió beneficios de desempleo por COVID-19 en algún momento durante esta pandemia?
  - 🛛 Sí

🛛 No



#### Q2.8 ¿Cuál es la razón por la que actualmente está desempleado? El negocio donde trabajaba cerró El negocio donde trabajaba despidió gente por el COVID-19 □ Me negué a vacunarme Renuncié para proteger la salud de los que viven en mi hogar (p. ej., yo o alguien en mi hogar estamos inmunocomprometidos) Otro, por favor explique: Q2.9 ¿Estás buscando trabajo actualmente? Sí [SI LA RESPUESTA ES "Si", VAYA A Q2.11] Q2.10 ¿Cuándo piensa empezar a buscar trabajo? Cuando esté sano Cuando termine la pandemia No tengo intención de buscar trabajo Q2.11 ¿Alguien en su hogar tiene dificultades para encontrar un empleo de tiempo completo? Sí □ No [SI LA RESPUESTA ES "No", VAYA A Q2.23] Q2.12 ¿Cuántas personas en su hogar han tenido dificultades para encontrar un empleo de tiempo completo en los últimos 12 meses? **1** 2 o más Para la primera persona que tiene Para la segunda persona que tiene dificultades para encontrar un empleo a dificultades para encontrar un empleo a tiempo completo, tiempo completo, ¿fue despedida o descansada ¿fue despedida o descansada Q2.13 Si No Q2.17 Si No debido a la pandemia de COVIDdebido a la pandemia de COVID-19? 19? Q2.14 ¿no pudo trabajar debido a los Q2.18 ¿no pudo trabajar debido a los síntomas prolongados de COVID-síntomas prolongados de COVID-19? 19? Q2.15 ¿se jubiló debido a la pandemia Q2.19 ¿se jubiló debido a la pandemia de COVID-19? de COVID-19? Q2.16 Otro, por favor explique: Q2.20 Otro, por favor explique:

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- Q2.21
   ¿Cree que esta primera persona está teniendo dificultades para encontrar un empleo a tiempo completo debido a la pandemia de COVID-19?
   Q2.22
   ¿Cree que la segunda persona tiene dificultades para encontrar un empleo de tiempo completo debido a la pandemia de COVID-19?

   □
   Sí
   □
   No

   □
   No
   □
   No

   Otro, por favor explique:
   □
   Otro, por favor explique:
   □
- Q2.23 ¿Alguien en su hogar perdió su trabajo en los últimos 12 meses?□ Sí
  - □ No [SI LA RESPUESTA ES "No", VAYA A Q2.37]
- Q2.24 ¿Cuántas personas en su hogar perdieron su trabajo en los últimos 12 meses? □ 1
  - 🛛 2 o más
- Q2.25 Proporcione el <u>género</u> de la <u>primera persona</u> que perdió su trabajo en los últimos 12 meses.
  - Hombre
  - Mujer
  - Transgénero
  - No se identifica como hombre, mujer o transgénero
- Q2.27 Indique la <u>edad</u> de la <u>primera</u> <u>persona</u> que perdió su trabajo en los últimos 12 meses.
  - De 16 a 18 años
  - De 19 a 24 años
  - De 25 a 34 años
  - De 35 a 44 años
  - De 45 a 54 años
  - De 55 a 64 años
  - 65 años y más

- Q2.26 Proporcione el <u>género</u> de la <u>segunda</u> <u>persona</u> que perdió su trabajo en los últimos 12 meses.
  - Hombre
  - Mujer
  - Transgénero

□ No se identifica como hombre, mujer o transgénero

- Q2.28 Indique la <u>edad</u> de la <u>segunda persona</u> que perdió su trabajo en los últimos 12 meses.
  - De 16 a 18 años
  - De 19 a 24 años
  - De 25 a 34 años
  - De 35 a 44 años
  - De 45 a 54 años
  - De 55 a 64 años
  - 65 años y más



	Para la <u>primera persona</u> que perdió s trabajo en los últimos 12 meses,				perdić es,	su	
Q2.29	¿fue despedida o descansada debido a la pandemia de COVID- 19?	Si □	No □	Q2.33	¿fue despedida o descansada debido a la pandemia de COVID- 19?	Si □	No □
Q2.30	¿no pudo trabajar debido a los síntomas prolongados de COVID- 19?			Q2.34	-		
Q2.31	¿se jubiló debido a la pandemia de COVID-19?			Q2.35	¿se jubiló debido a la pandemia de COVID-19?		
Q2.32	Otro, por favor explique:			Q2.36	Otro, por favor explique:		
Q2.37	¿Cuántas personas en su hog □ 0 [Si LA RESPUESTA ES "0 □ 1 □ 2 o más			-			
Q2.38	Proporcione el <u>género</u> de la primera persona en su hogar está trabajando actualmente. D Hombre Mujer	que	Q2.:	<u>pe</u> tra □	o <b>porcione el <u>género</u> de la <u>segun</u> rsona en su hogar que está bajando actualmente. Hombre Mujer</b>	ida	
	Transgénero				Transgénero		
	No se identifica como hombr mujer o transgénero	e,			No se identifica como hombre, mu transgénero	jer o	
Q2.40	Indique la <u>edad</u> de la <u>primera</u> <u>persona</u> de su hogar que trat actualmente.		Q2		dique la <u>edad</u> de la <u>segunda per</u> e su hogar que trabaja actualme		
	De 16 a 18 años				De 16 a 18 años		
	De 19 a 24 años				De 19 a 24 años		
	De 25 a 34 años				De 25 a 34 años		
	De 35 a 44 años				De 35 a 44 años		
	De 45 a 54 años				De 45 a 54 años		
	De 55 a 64 años				De 55 a 64 años		
	65 años y más				65 años y más		

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Q2.42 Proporcione el <u>lugar de trabajo</u> de Q2 la <u>primera persona</u> en su hogar que está trabajando actualmente.

- En casa
- Área de Barrington
- □ Ciudad de Chicago
- Condado de Cook (fuera de Chicago)
- Condado de Dupage
- Condado de Kane
- Condado de Lake
- Condado de McHenry
- Múltiples ubicaciones / Viaja
- □ En otro lugar, por favor explique:

# Q2.43 Proporcione el <u>lugar de trabajo</u> de la <u>segunda persona</u> en su hogar que está trabajando actualmente.

- En casa
- ☐ Área de Barrington
- Ciudad de Chicago
- □ Condado de Cook (fuera de Chicago)
- Condado de Dupage
- Condado de Kane
- Condado de Lake
- Condado de McHenry
- Múltiples ubicaciones / Viaja
- □ En otro lugar, por favor explique:

Q2.44 ¿Planea jubilarse? □ Sí □ No [SI LA RESPUESTA ES "No", VAYA A Q3.1]

Q2.45 ¿A qué edad planea retirarse? Ingrese la edad

### Q2.46 ¿Cuál es su arreglo de vida esperado (o actual) en la jubilación?

- Mudarme a una casa o apartamento
   Moverme más pequeño en el área de Barrington
   Vivir parte del año localmente y parte
   Quedarme
  - del año en otro lugar
  - Mudarme a otro lugar en el área metropolitana de Chicago
  - Mudarme con familiares que viven en el área de Barrington

- Moverme fuera del área
- **Quedarme en mi casa actual**
- Otro, por favor explique: _____
- No estoy seguro



Q2.47 ¿Cuál de las siguientes declaraciones describe mejor sus actividades de jubilación esperadas (o actuales)? Seleccione TODAS las que correspondan. Actuar como cuidador principal de los U Viajar nietos Actuar como cuidador principal de mi □ Hacer servicio oluntario cónyuge, padre, otro adulto o un niño con necesidades especiales Relajarme Trabajar como consultor Iniciar un nuevo negocio Trabajar a medio tiempo Toma cursos □ Otro, por favor explique:

# Sección III: Finanzas del Hogar

Esta sección se enfoca en cómo las finanzas están afectando su hogar.

- Q3.1 En el último año, ¿su hogar ha tenido dificultades para pagar sus gastos de vivienda?
  - 🛛 Sí
  - 🛛 No
  - □ Tal vez, no es seguro
- Q3.2 En el último año, ¿su hogar ha tenido dificultades para pagar otras facturas que no sean de vivienda?
  - 🗆 Sí
  - 🗆 No
  - □ Tal vez, no es seguro
- Q3.3 En el último año, ¿usted o algún familiar con el que vive no ha podido obtener alguno de los siguientes cuando realmente lo necesitaba? Seleccione TODAS las que correspondan.
   □ Ropa
   □ Medicina o cualquier atención médica

 Medicina o cualquier atención médica (médica, dental, de salud mental, de la vista)

Asistencia de servicios públicos [SI ESTA MARCADO, VAYA A Q3.4]
 Cuidado de los niños

Ninguna de las anteriores

- Q3.4 En los últimos 12 meses, ¿fueron cortados o desconectados sus servicios públicos?
  - 🛛 Sí
  - 🛛 No

No estoy seguro



### Q3.5 ¿Cuál es su situación de vivienda hoy?

Tengo vivienda

No tengo vivienda (me alojo con otras personas, en un hotel, en un refugio, vivir afuera en la calle, en una playa, en un automóvil o en un parque)

Elijo no responder esta pregunta

### Q3.6 ¿Te preocupa perder tu vivienda?

Ū Sí

🗆 No

Elijo no responder esta pregunta

# Q3.7 ¿Con qué frecuencia en los últimos 12 meses diría que está preocupado o estresado por tener suficiente dinero para comprar comidas nutritivas?

- Algunas veces
- Por lo general
- □ Siempre

# Q3.8 En los últimos 12 meses, ¿la falta de transporte le ha impedido asistir a reuniones, trabajar o conseguir las cosas necesarias para la vida diaria?

- 🛛 Sí
- 🗆 No
- Elijo no contestar

# Q3.9 ¿Cree que la falta de acceso al transporte público en el área de Barrington restringe su capacidad para realizar alguna de las siguientes actividades?

	Sí	No
Ir al trabajo		
Ir al supermercado		
Acudir a citas médicas y de salud (médico, fisioterapeuta, dentista)		
Ir a otras actividades necesarias para la vida diaria		



# Sección IV: Nuestra Juventud

Las siguientes preguntas pertenecen a los jóvenes en el área de Barrington.

- Q4.1 ¿Hay alguien en su hogar menor de 18 años?
  - 🛛 Sí

### □ No [Si LA RESPUESTA ES "NO," VAYA A Q4.3]

# Q4.2 ¿Cuáles de los siguientes, si los hay, son problemas para las personas menores de 18 años en su hogar? Seleccione TODAS las que correspondan.

Comportamiento agresivo o violento Presión excesiva para tener éxito Consumo de alcohol Dificultades de aprendizaje Ansiedad, nerviosismo Presión negativa de los compañeros Intimidación Imagen corporal negativa Obesidad Depresión Discriminación por discapacidad Exceso de actividades programadas Discriminación por identidad de género Problemas graves relacionados con la escuela Desvelo Discriminación por raza o etnia Discriminación por orientación sexual □ Ira descontrolada / rabietas, berrinches Consumo de drogas Ninguno de los jóvenes de mi hogar tiene ninguno de estos problemas □ Trastornos de la alimentación

# Q4.3 ¿Con qué frecuencia cree que hay fiestas sin supervisión donde los jóvenes tienen acceso a alcohol o drogas en su comunidad?

Nunca

A menudo

- Casi nunca
- □ Algunas veces

- □ Todo el tiempo
- □ No estoy seguro

# Q4.4 ¿Cree que los padres deberían ser responsables por el consumo de alcohol por menores de edad que ocurrió en su propiedad si sabían de antemano o mientras sucedía?

- 🛛 Sí
- 🛛 No
- No estoy seguro



# Sección V: Atención de la Salud

Esta sección se enfoca en preguntas relacionadas con el seguro médico y la atención médica para su hogar.

# Q5.1 Según su leal saber y entender, ¿cuántas personas en su hogar NO están cubiertas por un seguro médico?

- □ Ninguna. Todos tienen seguro médico en mi hogar.
- [Si LA RESPUESTA ES "None" VAYA A Q5.4]
- **1**
- 🛛 2 o más

# Q5.2 Seleccione las edades de todas las personas en su hogar que actualmente NO están cubiertas por un seguro médico. Seleccione TODAS las que correspondan.

- De 0 a 5 años
- De 6 a 15 años
- De 16 a 18 años
- De 19 a 24 años
- De 25 a 34 años
- De 35 a 44 años
- De 45 a 54 años
- De 55 a 64 años
- □ 65 años y más

# Q5.3 ¿Por qué algunas personas en su hogar no tienen seguro? Seleccione TODAS las que correspondan.

- Deducibles demasiado altos
- Primas demasiado altas

- □ Necesito ayuda para obtener un seguro
- No estoy seguro de por qué no están cubiertos
- Se perdió un trabajo por el COVID-19
- No se enferman con frecuencia/no necesitan seguro



Q5.4 ¿Ha realizado su hogar alguna de las siguientes acciones durante el último año? Seleccione TODAS las que correspondan.

		Sí, debido al COSTO	Sí, por FALTA DE DISPONIBILID AD	Sí, debido al COVID- 19	No
	Servicios de atención de salud mental o				
	del comportamiento retrasados	🗅		🗖	
	Retraso en la compra o toma de				
	medicamentos recetados	🗅		🗖	
	Cuidado dental retrasado	🗅		🗖	
	Retraso en otros servicios de atención méd	lica 🛛		🗖	
Q5.5	¿Dónde es más probable que busque ay información sobre servicios y programa	s de apoy	o? Selecciona so		
	🖵 Iglesia, clero	En líne	a 2-1-1		
	🖵 Amigo o familiar	🖵 Guía te	elefónica, directorio	)	
	Internet	🖵 Médico	)		
	❑ Biblioteca	🛛 Trabaja	ador Social / Cons	ejero	
	🗅 Agencia local	🛛 Otro, p	or favor especifiqu	ie	
		-			

# Sección VI: Apoyo a los cuidadores

En esta sección, queremos comprender las necesidades de quienes brindan atención a otros en el área de Barrington.

- Q6.1 ¿Es usted el cuidador de un cónyuge, padre, otro adulto o un niño con necesidades especiales, independientemente de si viven o no con usted?
   Sí
  - □ No [SI "NO," VAYA Q6.5]
- Q6.2 ¿Dónde vive la persona que cuida?
  - 🗅 En mi casa
  - Solo
  - En una instalación estructurada (por ejemplo, hogar de ancianos, hogar grupal, vida asistida, etc.)
  - En algún otro lugar
- Q6.3 ¿Por qué esta persona necesita un cuidador? Seleccione TODAS las que correspondan.
  - Discapacidad cognitiva

- Necesidades especiales
- Salud mental/del comportamiento
- Adulto mayor

- Discapacidad física
- Otro: por favor explique _____

Q6.4 Si usted personalmente no pudiera proporcionar la asistencia que necesita esta



persona, ¿hay alguien más que haría las cosas que usted hace?

- 🛛 Sí
- 🛛 No
- No sé

# Q6.4 ¿De qué tipos de cuidado de relevo se beneficiaría su hogar? Seleccione TODAS las que correspondan.

- Cuidado de acompañante
- Programa nocturno para la persona que cuidamos
- Programa de día para la persona que Otra asistencia cuidamos
- □ Ayuda con las tareas del hogar
- Cuidado de relevo asequible
- Nuestro hogar no necesita asistencia de cuidado de relevo
- Q6.5 Seleccione cualquiera de los siguientes servicios, si corresponde, que usted o un familiar cercano de 65 años o más, que viva en el área de Barrington, podrían beneficiarse. Seleccione TODAS las que correspondan.
  - Asistencia para hacer frente a la enfermedad de Alzheimer, la demencia o el deterioro cognitivo
  - Asistencia con programas de beneficios (por ejemplo, Medicare, Medicaid, etc.)
  - Asistencia con el manejo de múltiples condiciones médicas
  - Asistencia en el manejo de
  - medicamentos
  - Consulta con médico especialista en geriatría
  - Atención domiciliaria de enfermería
  - Limpieza del hogar/trabajo en el jardín
  - Reparaciones en el hogar
  - Hospicio
  - Educación preventiva sobre el riesgo de caídas
  - No aplica



Q6.6 ¿Actualmente necesita ayuda para encontrar asistencia confiable para cualquiera de las siguientes necesidades para usted o alguien en su hogar? Seleccione TODAS las que correspondan.

Actividades de la vida diaria (bañarse, ducharse, vestirse, comer, acostarse y levantarse de la cama o de las sillas, usar el inodoro)

- Preparar comidas
- Hacer compras
- Administrar el dinero, como hacer un seguimiento de los gastos o pagar las facturas
- Usar el teléfono, incluidos los mensajes de texto
- □ Apoyo para que esa persona pueda participar en eventos sociales
- Hacer trabajos pesados en la casa como fregar pisos, lavar ventanas y hacer trabajos pesados en el jardín
- Hacer trabajos ligeros en la casa como lavar los platos, ordenar, hacer una limpieza ligera o sacar la basura
- □ Manejo de medicamentos
- □ Comunicarse con otros
- Cubrir la carga financiera del cuidado
- □ Obtener un breve descanso del cuidado (relevo)
- □ Manejar el estrés emocional o mental del cuidado
- Encontrar un sustituto temporal para brindar atención ocasional
- Cuidarme a mi mismo
- Brindar asistencia física, incluido levantar y cargar
- Otro, por favor especifique_
- □ No necesito ayuda

# Sección VII: Salud Conductual y Mental

En esta sección, buscamos comprender cómo se las arreglan los residentes del área de Barrington.

- Q7.1 Seleccione de la siguiente lista, situaciones que usted o alguien en su hogar haya experimentado durante el último año, según su leal saber y entender. Seleccione TODAS las que correspondan.
  - Abuso emocional (intimidado, coaccionado, aislado, amenazado o degradado)
  - Abuso financiero (dinero o activos utilizados sin permiso)
  - Abuso físico (golpes, bofetadas, patadas o daño físico)
  - Abusado sexual (obligado a tener actividad sexual)
  - Nadie en mi hogar ha tenido ninguna de estas experiencias en el último año



### Q7.2 ¿Con qué frecuencia se sientes solo o aislado de quienes te rodean?

Nunca

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- Casi nunca
- □ Algunas veces
- Con bastante frecuencia
- □ Frecuentemente

Según su leal saber y entender, en el último año, ¿usted o un miembro de su hogar <u>pensó en</u> <u>buscar</u> ayuda profesional con alguno de los siguientes problemas?

	_ ,	<u>Sí</u>	<u>No</u>	<u>No estoy</u> seguro
Q7.3	Problemas conductuales o emocionales (salud mental)			
Q7.4 Q7.5	Problemas con el alcohol Problemas con el consumo de drogas			

# Según su leal saber y entender, en el último año, ¿usted o un miembro de su hogar <u>buscó</u> ayuda profesional con alguno de los siguientes problemas?

		<u>Sí</u>	<u>No</u>	<u>No estoy</u> <u>seguro</u>
Q7.6	Problemas conductuales o emocionales (salud mental)			
Q7.7	problemas con el alcohol			
Q7.8	Problemas con el consumo de drogas			
	[SI LA RESPUESTA ES "NO" A CUALQUIERA DE LOS ANTERIORES, VAYA A Q7.9 DE LO CONTRARIO, VAYA A Q7.10]		AYA A Q7.9,	

#### Q7.9 Si no, ¿por qué no buscaron ayuda? Seleccione TODAS las que correspondan.

Horarios disponibles no convenie	ntes 🛛 🗖 Falta de seguro
No se pude obtener una cita lo suficientemente pronto	No pude llegar allí debido a las opciones de transporte limitadas
No se pudo encontrar ayuda	Estigma de obtener ayuda con problemas de salud mental
□ No sabia a donde ir	Otro, por favor especifique
Preocupaciones financieras, cost la atención	o de D No sé por qué no buscaron ayuda profesional

- Q7.10 Según su leal saber y entender, ¿usted o algún miembro de su hogar ha considerado seriamente o hecho planes para suicidarse durante el último año? Sí
  - No [SI LA RESPUESTA ES "No" VAYA A Q7.12]
  - Quizás

### Q7.11 En caso afirmativo, ¿qué edad tiene esta persona?

menor de 18 años

De 45 a 64 años

De 18 a 29 años

65 años y más

De 30 a 44 años

Q7.12 El estrés es cuando alguien se siente tenso, nervioso, ansioso o no puede dormir por la noche porque su mente está perturbada. ¿Qué tan estresado está usted? Bastante

- Para nada
- Un poco
- □ Más o menos

- Muy
- Elijo no responder esta pregunta
- Q7.13 ¿Con qué frecuencia toma una bebida que contiene alcohol?
  - □ Nunca
  - Mensual o menos
  - □ 2 a 4 veces por mes
  - 2 a 3 veces por semana
  - □ 4 o más veces por semana
- Q7.14 Desde marzo de 2020, ¿ha aumentado la frecuencia con la que bebe alcohol? Por ejemplo, antes solo tomaba una copa con la cena, pero ahora toma una copa en otros momentos.
  - 🗆 Sí
  - No
  - Estaba bebiendo con más frecuencia, pero he dejado de beber tanto.
- Q7.15 Desde marzo de 2020, ¿ha aumentado la cantidad de alcohol que bebe? Por ejemplo, solía tomar un trago al día, pero ahora toma más de un trago al día. Una bebida equivale a 12 onzas de cerveza, 5 onzas de vino o 1,5 onzas de licor o licor fuerte.
  - 🗆 Sí
  - No

Había aumentado la cantidad de alcohol que estaba bebiendo, pero ahora he dejado de hacerlo.



# Sección VIII: Temas Ambientales

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Las siguientes preguntas son sobre temas ambientales. Estamos interesados en saber qué temas han pensado o están pensando los residentes del área de Barrington.

ternas	nan pensado o estan pensando los reside	<u>Sí</u>	<u>No</u>	No estoy seguro	<u>Ya hice /</u> hago esto
Q8.1	¿Usted o alguien en su hogar ha considerado comprar un vehículo eléctrico?				
Q8.2	¿Usted o alguien en su hogar ha considerado agregar paneles solares a su hogar?				
Q8.3	¿Usted o alguien en su hogar ha considerado agregar barriles de lluvia a su propiedad?				
Q8.4	¿Usted o alguien en su hogar ha cambiado sus sistemas eléctricos para conservar energía (termostatos				
Q8.5	programables, bombillas LED, etc.)? ¿Usted o alguien en su hogar ha cambiado su paisaje para ayudar al medio ambiente eliminando especies invasoras, agregando más árboles o plantas nativas o agregando un jardín de lluvia?				
Q8.6	¿Usted o alguien en su hogar ha considerado compostar sus desechos de alimentos?				
		Sí	No	No estoy	
Q8.8	¿Cree que el gobierno local del área de Barrington está haciendo lo suficiente para prepararse para eventos climáticos más severos? [SI "Sí", VAYA A Q8.10]			<u>seguro</u>	

Q8.9 Si no cree que nuestro gobierno local esté haciendo lo suficiente para prepararse para eventos climáticos más severos, ¿qué más le gustaría que hiciera nuestro gobierno local?

### Q8.10 Según su leal saber y entender, ¿de dónde proviene el agua?

- Lago Michigan
- Depósitos de agua a gran profundidad (acuíferos profundos)

Depósitos de agua subterráneos más cerca de la superficie (acuíferos poco profundos)

□ No estoy seguro

- Q8.11 ¿Le preocupa si el área de Barrington tendrá suficiente agua limpia para satisfacer las necesidades de sus residentes en el futuro?
  - 🛛 Sí
  - 🛛 No

□ No estoy seguro

- Q8.12 Las áreas naturales abiertas, además de su valor recreativo, cumplen el propósito de reponer nuestras aguas subterráneas. Los gobiernos locales pueden hacer cosas para proteger las áreas abiertas (por ejemplo, limitar la cantidad de estructuras en un lote o la cantidad de pavimento permitido). ¿Crees que nuestro gobierno local debería hacer cosas como esta?
  - 🛛 Sí
  - 🛛 No
  - No estoy seguro

## Sección IX: Cuéntenos un poco sobre usted y su hogar.

#### Q9.1 ¿Cuánto tiempo ha vivido en el área de Barrington?

- 5 años o menos
- De 6 a 10 años
- □ De 11 a 20 años
- De 21 a 35 años
- 36 años o más

### Q9.2 ¿Donde vives?

- Barrington
- Barrington Hills
- Carpentersville
- Deer Park
- Inverness
- Fox River Grove
- Hoffman Estates
- Lake Barrington

- □ North Barrington
- Port Barrington
- □ South Barrington
- Tower Lakes
- □ Condado de COOK no incorporado
- Condado de LAKE no incorporado
- Condado de MCHENRY no incorporado
- En algún otro lugar



Q9.3 ¿Qué categorías raciales y/o étnicas lo describen mejor? Seleccione TODAS las que correspondan.

□ Indio americano / Nativo de Alaska

- Asiático
- □ Negro o afroamericano
- Latino o hispano

- Nativo de Hawái o de las islas del Pacífico
- Blanco o Caucasion
- Otro
- D Prefiero no responder

# Q9.4 ¿Qué categorías raciales y/o étnicas describen mejor a todos en su hogar? Seleccione TODAS las que correspondan.

- □ Indio americano / Nativo de Alaska
- Asiático
- Negro o afroamericano
- Latino o hispano

- Nativo de Hawái o de las islas del Pacífico
- Blanco o Caucasion
- Otro
- D Prefiero no responder

### Q9.4 ¿Cuántos años tiene?

- De 18 a 29 años
  - De 30 a 44 años
  - De 45 a 64 años
  - De 65 a 74 años
  - 75 o más

### Q9.5 ¿Cuál es su género?

- Hombre
- Mujer
- Transgénero
- □ No me identifico como hombre, mujer o transgénero

### Q9.6 ¿Qué sexo se le asignó al nacer en su acta de nacimiento original? Hombre

Mujer



#### Q9.7 Seleccione tantas de las siguientes opciones como sea necesario para reflejar las orientaciones sexuales de las personas en su hogar. Seleccione TODAS las que correspondan.

- □ Heterosexual □ Queer
- Homosexual
  Cuestionando / No estoy seguro o no sé
- □ Lesbiana □ Asexual
- Bisexual
  Una orientación sexual no incluida aquí. Por favor especifique:

5 días

□ 6 días

**7** días

Rehúso contestar

□ Prefiero no responder

# Sección X: Determinantes Sociales de la Salud

Las siguientes preguntas son acerca de las actividades que puede hacer para afectar su salud.

# Q10.1 En promedio, ¿cuántos días a la semana realiza ejercicio de moderado a extenuante (como una caminata rápida)?

- 🛛 0 día
- 🛛 1 día
- 2 días
- 3 días
- 4 días

Q10.2 En promedio, ¿cuántos minutos a la semana hace ejercicio a este nivel?

0 minutos □ 90 minutos □ 10 minutos □ 100 minutos □ 20 minutos □ 110 minutos □ 30 minutos □ 120 minutos □ 40 minutos □ 130 minutos □ 50 minutos □ 140 minutos □ 60 minutos  $\Box$  150+ minutos □ 70 minutos Rehúso contestar □ 80 minutos

Q10.3 ¿Cuántas veces en los últimos 12 meses ha consumido productos de tabaco (como cigarrillos, puros, rapé, masticables, cigarrillos electrónicos/ de vapor, *vaping*)?

- □ Nunca
- Una o dos veces
- Mensual
- □ Semanalmente
- Diario o casi diario

# Q10.4 ¿Cuántas veces en el último año ha usado medicamentos recetados por razones no médicas?



- Nunca
- Una o dos veces
- Mensual
- □ Semanalmente
- Diario o casi diario

### Q10.5 ¿Cuántas veces en el último año ha consumido drogas ilegales?

- Nunca
- Una o dos veces
- Mensual
- Semanalmente
- Diario o casi diario

# Sección XI: Impacto del COVID-19

Estamos buscando comprender mejor cómo los residentes se han visto afectados por la pandemia de COVID-19. Nos preocupamos por la salud de nuestra comunidad y queremos saber si hay recursos que debemos proporcionar para mantener a los residentes saludables.

# Q11.1 Pensando en marzo de 2020, ¿alguien en su hogar ha dado positivo por COVID-19?

🗆 Sí

- No [SI LA RESPUESTA ES "No," VAYA A Q11.6]
- 🛛 No sé
- Prefiero no contestar
- Q11.2 Pensando desde marzo de 2020, ¿cuántas personas en su hogar alguna vez dieron positivo por COVID-19?
  - **1**
  - **2**

  - 🛛 4 o más



- Q11.3 Algunas personas que dan positivo por COVID-19 pueden tener síntomas que persisten durante semanas o meses. ¿Alguna persona en su hogar que alguna vez dio positivo por COVID-19 tuvo síntomas que duraron 4 semanas o más?
  - 🛛 Sí
  - No [SI LA RESPUESTA ES "No," VAYA A Q11.6]
  - No sé
  - Prefiero no contestar
- Q11.4 ¿Alguna persona en su hogar, cuyos síntomas duraron 4 semanas o más, tuvo problemas para acceder a atención médica o servicios para tratar sus síntomas?
  - 🛛 Sí
  - □ No [SI LA RESPUESTA ES "No," VAYA A Q11.6]
  - □ No sé
  - Prefiero no contestar
- Q11.5 . Enumere la atención médica o los servicios que necesitaba.
- Q11.6 ANTES de la pandemia de COVID-19, ¿cuántas compras hacía en línea (excluyendo compras de comestibles)?
  - Ninguno en absoluto
  - Algunas
  - La mayoría, pero no todas
  - Todas mis compras
- Q11.7 DURANTE la pandemia de COVID-19, ¿cuántas compras realiza en línea (excluyendo compras de comestibles)?
  - Ninguno en absoluto
  - Algunas
  - La mayoría, pero no todos
  - Todas mis compras
- Q11.8 ANTES de la pandemia de COVID-19, ¿cuántas compras de comestibles hacía en línea?
  - Ninguno en absoluto
  - Algunas
  - La mayoría, pero no todos
  - Todas mis compras



# Q11.9 DURANTE la pandemia de COVID-19, ¿cuántas compras de alimentos realiza en línea?

- □ Ninguno en absoluto
- Algunas
- La mayoría, pero no todos
- Todas mis compras
- Q11.10 : ¿En qué fuentes confía más para obtener información de salud sobre las pautas y recursos de COVID-19, como dónde hacerse la prueba, dónde obtener una vacuna, cómo obtener una vacuna, dónde ir para recibir tratamiento, etc.? Seleccione TODAS las que correspondan.
  - Amigos de la familia
  - □ Su(s) proveedor(es) de atención médica
  - CDC/científicos/investigadores
  - Televisión
  - Radio
  - Periódico
  - Sitios web basados en Internet (como Google) Por favor especifique:
  - Redes sociales (como Instagram, Facebook, Snapchat, Twitter) Por favor especifique:
  - Organización basada en la fe/Líder espiritual/Pastor
  - □ Curandero comunitario, como un curandero tradicional o un practicante de medicina alternativa
  - Líderes comunitarios
  - □ Otro, por favor especifique: _____

# SECCIÓN XII: Alfabetización y tecnología en salud

Esta sección trata de entender si los residentes del área de Barrington pueden acceder a los materiales de salud que necesitan para mantenerse saludables.

### Q12.1 ¿Con qué frecuencia alguien le ayuda a leer materiales relacionados con la salud?

- □ Siempre
- □ Muy a menudo
- Algunas veces
- Casi nunca
- Nunca



Q12.2 ¿Con qué frecuencia tiene problemas para entender lo que le dicen sobre sus problemas médicos?

- Siempre
- Muy a menudo
- □ Algunas veces
- Casi nunca
- Nunca

# Q12.3 ¿Con qué frecuencia ha tenido problemas para comprender el material educativo sobre COVID-19?

- □ Siempre
- Muy a menudo
- □ Algunas veces
- Casi nunca
- Nunca

### Sección XIII: Recomendaciones Para Una Comunidad Saludable

Q13.1 ¿Qué recomendaría para hacer del área de Barrington un lugar más saludable para vivir?

¿Le gustaría participar en una rifa para ganar una tarjeta de regalo de \$25 de la Cámara de Comercio de Barrington? Sus respuestas anteriores a la encuesta permanecerán anónimas.

- 🛛 Si
- 🛛 No

En caso afirmativo, por favor complete la siguiente informatión.

Primer nombre	

Apellido _____

Dirección de correo electrónico	

El major número de teléfono para contactarlo en_____

Le agradecemo el tiempo que dedicó a realizar esta encuesta.

Su respuesta ha sido registrada.

Su nombre entrará en un sorteo al azar de una tarjeta de regalo de \$25 del Cámara de Comercio de Barrington.

Gracias!









# **Appendix IV: Focus Group Guides**

### **Community Resident**

### Healthier Barrington Study – Focus Group Guide – Adults

**Introduction:** As part of the Healthier Barrington Study we are conducting discussions with community residents to understand the health needs in this area. We would like to know more about the major health issues faced by various demographic groups in the community and how the COVID pandemic has impacted you. We are conducting 4 focus groups, 2 with adults and 1 with youth/young adults and 1 with representatives of the business community. We would like to learn more about the services/resources available in the area and the unmet needs around healthcare.

- 1. What do you see as the most significant issues affecting the health of adults in your community?
  - Probe for factors beyond medical and health care services
  - What has been the impact of COVID?
- 2. What do you see as major issues affecting the health of youth in your community?
  - Probe for factors beyond medical and health care services
  - What has been the impact of COVID?
- 3. What do you see as major issues affecting the health of seniors in your community?
  - Probe for factors beyond medical and health care services
    - What has been the impact of COVID?
- 4. What services/resources are needed to address health issues in the community?
- 5. What has been the impact of COVID on health services in the community?
- 6. What has been the access to testing and vaccination for COVID in your community?
- 7. What are specific ways to improve health and wellness in your community?
  - These can include opportunities to improve programs, policies, public awareness, the environment whatever you feel is likely to impact health and wellness.
  - They can include activities already underway, as well as potential opportunities that could materialize
- 8. What do you see as strengths in your community that helps people be healthy or stay healthy?
  - Probe for services, organizations, resources and facilities
- 9. What are the usual sources of health and wellness information in the community?
- 10. What are the issues that worry you the most?
  - Social issues
  - Justice issues
  - Climate issues



# Estudio de Healthier Barrington – Guía de grupos de enfoque – Adultos

**Introducción:** Como parte del Estudio de Healthier Barrington, estamos llevando a cabo conversaciones con los residentes de la comunidad para comprender las necesidades de salud en esta área. Nos gustaría saber más sobre los problemas principales de salud que enfrentan varios grupos demográficos en la comunidad y cómo le ha afectado la pandemia de COVID. Estamos realizando 4 grupos focales, 2 con adultos y 1 con jóvenes/jóvenes adultos y 1 con representantes de la comunidad empresarial. Nos gustaría obtener más información sobre los servicios/recursos disponibles en el área y las necesidades no satisfechas en torno a la atención médica.

- 1. ¿Cuáles cree que son los problemas más importantes que afectan la salud de los adultos en su comunidad?
  - Investigar factores más allá de los servicios médicos y de atención de la salud
  - ¿Cuál ha sido el impacto del COVID?
- 2. ¿Cuáles cree que son los principales problemas que afectan la salud de los jóvenes en su comunidad?
  - Investigar factores más allá de los servicios médicos y de atención de la salud
    ¿Cuál ha sido el impacto del COVID?
- 3. ¿Cuáles cree que son los problemas principales que afectan la salud de las personas mayores en su comunidad?
  - Investigar factores más allá de los servicios médicos y de atención de la salud
  - ¿Cuál ha sido el impacto del COVID?
- 4. ¿Qué servicios/recursos se necesitan para abordar los problemas de salud en la comunidad?
- 5. ¿Cuál ha sido el impacto del COVID en los servicios de salud en la comunidad?
- 6. ¿Cuál ha sido el acceso a pruebas y vacunación para COVID en su comunidad?
- 7. ¿Cuáles son las formas específicas de mejorar la salud y el bienestar en su comunidad?
  - Estos pueden incluir oportunidades para mejorar los programas, las políticas, la conciencia pública, el medio ambiente, todo lo que crea que puede afectar la salud y el bienestar.
  - Pueden incluir actividades que ya están en marcha, así como oportunidades potenciales que podrían materializarse
- 8. ¿Qué ve como fortalezas en su comunidad que ayudan a las personas a estar saludables o mantenerse saludables?
  - Investigue sobre servicios, organizaciones, recursos e instalaciones
- 9. ¿Cuáles son las fuentes habituales de información sobre salud y bienestar en la comunidad?
- 10 ¿Cuáles son los temas que más te preocupan?
  - Problemas sociales
  - Problemas de justicia
  - Problemas climáticos



### **Business Leader**

### Healthier Barrington Study – Focus Group Guide – For Business Leaders

**Introduction:** As part of the Healthier Barrington Study we are conducting discussions with business leaders in the community to assess their needs and challenges. We would like to know more about the challenges faced by businesses in the community, the impact of the COVID pandemic, services/resources available in the area and any unmet needs.

- Introductions. Please tell us the name of your business, what type of business it is and how long your business has been operating in the Barrington area and how many employees you have. Please also tell us where in Barrington your business is located.
- 2. How would you characterize the overall health of the Barrington area business community today?
- 3. What do you see as the most significant issues affecting the Barrington area business community?
  - a. Viability
  - b. Sustainability
  - c. Ability to whether current economic and social conditions

#### **IMPACT OF COVID-19**

- 4. What has been the impact of COVID-19 on your business?
  - a. Staffing issues
  - b. Supply chain issues
  - c. Overall health of employees
- 5. What changes has your business made since the COVID-19 pandemic began in March 2020?
  - a. Employees/staffing
  - b. Finances
  - c. Health insurance coverage
  - d. Infrastructure to meet health and wellness needs of employees
  - e. How you served the community
- 6. Are there changes that you implemented as a result of COVID-19 that you will continue after the pandemic ends?
  - a. Improved efficiency (ex. QR codes for menus)
  - b. Improved effectiveness
  - c. Reduced costs
- 7. What resources/strategies helped your business (survive/cope with) the pandemic?
  - a. PPP money
  - b. The community
  - c. Staff
- 8. What resources does the Barrington area business community need to help businesses continue to succeed into the future?
  - a. Child care
  - b. Resources for mental health services
  - c. Employee resource commission



- 9. Did your business build a sustainability plan for the business that you did not have before the pandemic began?
- 10. What are the greatest challenges and barriers to success for a business in the Barrington area today?

## **Appendix V: Focus Group Consent Forms**

### **Community Resident**

#### University of Illinois College of Medicine Rockford 2022 Healthier Barrington Community Needs Assessment Focus Groups Focus Group Consent Script for adult community residents *Text to be read aloud to potential participants*

You are being asked to participate in a focus group discussion aimed at obtaining the thoughts and perspectives of Barrington area residents on health issues and needs in their community, the impact of COVID-19, access to health, gaps in services and ways to address these issues.

Your participation is voluntary. All information you provide will be private and anything you say will be reported without identifying you. You will be asked to use only first names and others in the group will be advised to keep your participation confidential. Information about you will not be used or distributed for future research studies. If you decide to participate, you may choose not to answer any question or leave the discussion at any time.

All the information will be reported as a group. The information cannot be linked to any individual person. When the results of the study are published or discussed, no information will be included that would reveal you participated in the study.

Only research staff from the University of Illinois College of Medicine Rockford will have access to the information you provide during the focus group. All files will be stored in a password protected computer in a locked office and will be erased when the project is over.

If you agree to take part, you will participate in an audio-recorded group discussion that will last approximately 75 minutes.

For your participation in this focus group study, you will receive a \$25 gift card to local Barrington businesses and will be provided by the Healthier Barrington Coalition.

#### If you have any questions, please feel free to ask them. [Time given for question/answers.]

If you have any questions about this research, you may contact the researcher in charge of this research: Dr. Manorama Khare at the UIC College of Medicine Rockford. Dr. Khare can be reached at <u>815-395-5762</u>. If you have any questions about your rights as a research subject, including questions, concerns, or complaints, you may call the University of Illinois Institutional Review Board at (309) 680-8630. This information has been provided in the chat so you can take it down.

If you agree to participate in this research, please remain in the Zoom meeting. Focus group discussions will begin shortly. If you do not agree to participate in this research, please leave the meeting at this time.



### University of Illinois College of Medicine Rockford

### 2022 Healthier Barrington Community Needs Assessment Focus Groups

### Focus Group Consentimiento Script para adultos residentes de la comunidad

#### Texto para leer en voz alta a los posibles participantes

Se le pide que participe en una discusión de grupo focal dirigida a obtener los pensamientos y las perspectivas de los residentes del área de Barrington sobre los problemas y necesidades de salud en su comunidad, el impacto de COVID-19, el acceso a la salud, las brechas en los servicios y las formas de abordar estos asuntos.

Su participación es voluntaria. Toda la información que proporciones será privada y cualquier cosa que digas será reportada sin identificarte. Se le pedirá que use solo su nombre de pila y se recomendará a los demás miembros del grupo que mantengan la confidencialidad de su participación. Su información no se utilizará ni será distribuida en futuros estudios de investigación. Si decide participar, puede elegir no responder a cualquier pregunta o abandonar la discusión en cualquier momento.

Toda la información se reportará en grupo. La información no puede vincularse a ninguna persona individual. Cuando se publiquen o discutan los resultados del estudio, no se incluirá información que revele que usted participó en el estudio.

Solo el personal de investigación de la Facultad de Medicina Rockford de la Universidad de Illinois tendrá acceso a la información que proporcione durante el grupo de enfoque. Todos los archivos se guardarán en una computadora protegida con contraseña en una oficina cerrada y se borrarán cuando finalice el proyecto.

Si acepta participar, participará en una discusión grupal grabada en audio que durará aproximadamente 75 minutos.

Por su participación en este estudio de grupo de enfoque, recibirá una tarjeta de regalo de \$25 para empresas locales de Barrington y será proporcionada por la Coalición de Healthier Barrington.

#### Si tiene alguna pregunta, no dude en hacerla. [Tiempo dado para preguntas/respuestas.]

Si tiene alguna pregunta sobre esta investigación, puede comunicarse con el investigador a cargo de esta investigación: el Dr. Manorama Khare en la Facultad de Medicina de la UIC en Rockford. Puede comunicarse con el Dr. Khare al 815-395-5762. Si tiene alguna pregunta sobre sus derechos como sujeto de investigación, incluidas preguntas, inquietudes o quejas, puede llamar a la Junta de Revisión Institucional de la Universidad de Illinois al (309) 680-8630.

Esta información se ha proporcionado en el chat para que pueda eliminarla.

# Si acepta participar en esta investigación, permanezca en la reunión de Zoom. Las discusiones de los grupos focales comenzarán en breve.

Si no acepta participar en esta investigación, abandone la reunión en este momento.



#### Business Leader

#### University of Illinois College of Medicine Rockford 2022 Healthier Barrington Community Needs Assessment Business Leader Focus Group Consent Script *Text to be read aloud to potential participants*

You are being asked to participate in a focus group discussion aimed at identifying your needs and challenges. Additionally, we would like to learn more about the impact of COVID-19 on local businesses, gaps in resources and ways to address challenges and barriers.

Your participation is voluntary. All information you provide will be private and anything you say will be reported without identifying you. You will be asked to use only first names and others in the group will be advised to keep your participation confidential. Information about you will not be used or distributed for future research studies. If you decide to participate, you may choose not to answer any question or leave the discussion at any time.

All the information will be reported as a group. The information cannot be linked to any individual person. When the results of the study are published or discussed, no information will be included that would reveal you participated in the study.

Only research staff from the University of Illinois College of Medicine Rockford will have access to the information you provide during the focus group. All files will be stored in a password protected computer in a locked office and will be erased when the project is over.

If you agree to take part, you will participate in an audio-recorded group discussion that will last approximately 75 minutes.

#### If you have any questions, please feel free to ask them. [Time given for question/answers.]

If you have any questions about this research, you may contact the researcher in charge of this research: Dr. Manorama Khare at the UIC College of Medicine Rockford. Dr. Khare can be reached at <u>815-395-5762</u>. If you have any questions about your rights as a research subject, including questions, concerns, or complaints, you may call the University of Illinois Institutional Review Board at (309) 680-8630. This information has been provided in the chat so you can take it down.

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